young volunteers a range of opportunities in clinical departments.

**Objectives of the project**
- To create a meaningful volunteering experience in healthcare for those aged 17–25;
- To offer experience of various clinical departments;
- To engage and build lasting, sustainable partnerships with local further education establishments, schools and organisations;
- To develop positive working relationships with clinical teams to support this project.

**Method**
- Engagement with clinical teams to create a programme of short term volunteering opportunities;
- Advertising via social media, local community links, local further education establishments, existing volunteer database;
- Interview and appointment of four young volunteers;
- Volunteers attended Hospice Corporate Induction and shadow trained for each role alongside volunteers and staff;
- Volunteers completed a programme of 50 hours volunteering over 18 weeks;
- Volunteers supported teams in the Wards, Day Therapies, Supportive Care, Reception and Fundraising;
- Regular feedback was given to young volunteers face-to-face and via email and telephone contact.

**Results**
- Four young people completed the programme: two university students and two from senior school;
- Young volunteers were placed in teams that had not had young volunteers before;
- Positive and long-lasting relationships were built with colleagues across the hospice;
- Increased staff confidence in working with young volunteers;
- Young people gained invaluable palliative care experience and emotional resilience;
- Staff are looking forward to the next cohort.

**Conclusions**
- Availability of young volunteers often changed, so allow time to be flexible;
- Work with schools and colleges on the best way to attract young volunteers;
- Hugely rewarding to young people but allow enough time and resources to set up and facilitate.

**Aims** We aimed to set up a volunteer teaching programme with three objectives: 1) to provide education and training, 2) to provide a forum for discussion and 3) to demonstrate the extent to which volunteers are valued by the hospice.

**Methods** We designed and distributed questionnaires to DTU volunteers (n=23) to establish: 1) whether they were interested receiving teaching from clinical staff, 2) where and when these sessions should take place and 3) potential teaching topics. Data from 13 completed questionnaires (response rate 57%) were used to develop our programme; hour-long sessions are held in DTU every other Tuesday evening.

**Results** All completed questionnaires indicated interest in receiving teaching. The six most requested topics were (volunteers could specify multiple options): 1) common medical conditions (n=9), 2) common symptoms and their management (n=8), 3) roles of staff members (n=7), 4) ethics (n=7), 5) Parkinson’s disease (n=5) and 6) layperson management of panic and breathlessness (n=5). The teaching programme has now been running for three months. Six sessions have been delivered so far by a range of speakers from the hospice multidisciplinary team with a mean attendance of 9 volunteers (range 8–10).

**Conclusion** Feedback to date has been universally positive. Volunteers described sessions as ‘very interesting and informative’ and felt ‘at ease to join in discussions’. One volunteer commented that a session ‘changed my understanding of what I can do for a patient as a volunteer’. Ongoing evaluation will allow assessment of whether the programme improves volunteers’ confidence and increases volunteer retention in the longer term.

**P-93** 'I'M NOT HERE JUST TO MAKE THE TEA'-MAKING BETTER USE OF VOLUNTEERS' SKILLS AND EXPERIENCE

Rebecca Turner, Mandy Piper-Killick. St Christopher's Hospice, London, UK

10.1136/bmjspcare-2019-HUKNC.116

**Background** One in six volunteers said they had skills that they would like to use in their volunteering role which they currently are not (McGarvey, Jochum, Davies, Dobbs, et al., 2019). We recognise the need to understand the wealth of skills and experiences within our volunteer team and to offer opportunities for these skills to benefit our aims.

**Aims**
- To understand the previously unknown skills and experience of current volunteers and develop roles to match;
- To set in motion a cultural change in staff at all levels with regards to the possibilities and opportunities of how volunteers might get involved;
- To improve volunteer retention and satisfaction.

**Method**
- Engaged 921 volunteers to complete a volunteer experience survey;
- Delivered a Volunteer Management training course to 39 staff members;
- Introduced a volunteer management system with a facility to log and report on volunteers’ skills and qualifications;
- Adapted interview questions to establish existing skills and experience;

**P-92** ESTABLISHING A TEACHING PROGRAMME FOR VOLUNTEERS IN A HOSPICE DAY THERAPY UNIT

Sarah Rhiannon Hanson, Kym Wakefield, Ged Walker, Anne-Marie Bourke. Marie Curie Hospice, Newcastle upon Tyne, UK

10.1136/bmjspcare-2019-HUKNC.115

**Background** The Hospice Day Therapy Unit (DTU) provides specialist outpatient palliative care to patients living with life-limiting illnesses. Volunteers play an integral role in delivering this service (by socialising with patients, providing emotional support and facilitating group activities) but receive little formal teaching (Burbeck, Low, Sampson, Bravery et al., 2014; Help the Hospices Commission into the Future of Hospice Care, 2012).

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