

Wellbeing Goes Virtual!

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The Prince and Princess of Wales Hospice

Abbreviated abstract: On the 23rd March 2020 we were told to stay home, hospice day and out-patient services needed to change to support our patients and their loved ones. Connection with staff and peers was identified as priority by our patients. In engagement with our patients a closed Facebook group was created with a test and develop model. On the 30th March 2020, the Virtual Living Well Hub went live.



Background: In early 2020 we created a drop-in service with a well being focus which were discussed and agreed with our patients. This ran for 4 weeks and was gaining in popularity when our service stopped due to covid-19. Face to face care quickly transferred to phone but patients quickly reported increased loneliness and reduced activity.



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Wellbeing Service

Our Solution: We engaged and participate our members throughout to create a service that meets their needs. From this engagement 3 wishes were identified.

Timely Support

Social media allowed our participants to engage with several of the services at a time that suited.

We used Zoom to support a number of our groups, but our use of technology changed as our service progressed.

Activity & engagement

Agree to use aims which were developed to support the wellbeing drop-in service.



Connect

Social media platforms considered, and a closed Facebook group agreed as this was noted to be the most used amongst the group. Facebook also allows group rules, moderators and security to be in place.



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What did we offer?

Daily Music Challenge
Bi-weekly zoom chat
Movie night
Photo discussion



Health Advice

Symptom advice
Access to hospice staff.
Advice around changing
Covid -19 rules.



Highlight local support.
Offer hospice updates.
Link with national
initiatives

reLAXation

Zoom/ Facebook live
meditation
Relaxation tips
Taking notice of nature/garden

Creating a service

- Multi-disciplinary team led service ensuring holistic service.
- Throughout, we have encouraged members to actively participate and engage in the development of the group.
- The team was upfront at the start that we had ideas not solutions.
- Support was timely and supplied at a time that members felt isolated.



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Results and Conclusions

Results:

We have 21 members with over half participating at least once in the past week. With over half engaging with content



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We feel the success of our virtual wellbeing group is due to:

- The Hospice commitment to supporting a rapid virtual multi-disciplinary service.
- The team's honesty that we didn't have the answers but encouraged co-participation in the creation, development and maintenance of the service.
- Our participants engagement and willingness to give something new a try throughout a period of uncertainty.
- Challenging our thoughts around what service user engagement looked like.
- The Hospice's continued commitment to develop our Wellbeing Service.

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