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0-9 REFLECTIONS ON AN EVOLVING @WEEOLC TWITTER COMMUNITY INFLUENCING CLINICAL PRACTICE, LEADERSHIP, QUALITY AND SELF

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Background Three clinical academic nurses with palliative care backgrounds established @WeEOLC as part of the @WeNurses Twitter community in October 2015. The social media platform Twitter has the potential to influence care through the sharing of knowledge and practice as well as provoking discussion and debate (Russell et al., 2015). The focus of this abstract is to consider whether Twitter can assist in the achievement of improving evidence-based practice in palliative and end-of-life care through the learning outcomes framework of clinical practice; leadership, quality improvement and developing self (Taylor 2016).

Aim To share reflections on the value of engagements of @WeEOLC.

Method Established the twitter handle @WeEOLC to start and join in conversations. Scheduled regular chats with diverse guest hosts. Provided regular signposting of links to articles, blogs and resources. Analysis of chats and conversations.

Results

Analysis of chats, contributor profiles and timelines provide rich insights into online activity. Simply counting the number of contributors and tweets does not reveal the full influence of @WeEOLC. Chat and conversation contributors come from a wide background (e.g. clinicians, non-clinical, academics in social sciences, patients, families and interested parties). There is evidence of new connections and partnerships as well as a broad scope of interactive discussions, shared resources, evidence and reflections.

Conclusion Participation in platforms such as Twitter can support clinical and academic roles. By providing a non-hierarchical forum for learning and sharing, it contributes to improving clinical care, leadership and quality. Future work needs to develop methods of analysing and disseminating qualitative content as well as the quantitative reach of Twitter engagement.

0-10 EFFECTIVENESS OF SOCIAL MEDIA VERSUS CLASSROOM-BASED EDUCATION IN PALLIATIVE AND END-OF-LIFE CARE TOPICS: MIXED METHODS STUDY

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Background Online social networks act as a mode of communication that helps to share information and resources and collaborate with peers through engaging in social media based digital dialogues.

Aim To measure the effectiveness of social media and classroom-based end-of-life care education among nursing students.

Method A mixed methods approach was adopted. A total of 196 first-year undergraduate nursing students of one UK university were invited. 157 students joined Facebook based teaching and 34 students attended classroom based end-of-life care teaching that delivered similar learning objectives. The Frommelt Attitude Toward Care of the Dying (FATCOD) Scale was completed by a group of nursing students before and after their participation in teaching sessions. Four post-teaching focus groups also conducted with students. Within the group, difference between pre-and post-test were assessed by using paired samples T-tests with use of SPSS V20. Using Nivio10®, a thematic qualitative analysis was undertaken.

Results Although there was no statistical significant difference in the level of attitude between the groups during pre-test, in post-test, there was a significant change in level of attitude for social media intervention group (94% before vs 99% after; p = 0.041) comparing to classroom-based education (84% before vs 81% after; p = 0.107). The mean difference score of Individual FATCOD items before and after education between two groups showed that the social media intervention group showed statistically significant change in student attitudes towards care of dying patients in 10 items. A comparative qualitative analysis revealed five themes: speaking out, lecture at living room, technology less interest, emotional teaching, and re-live lesson.

Conclusions Our study explored that using social media in death dying education enhances students’ learning experiences both in emotional as well as knowledge acquisition similar to classroom teaching. However, Facebook teaching provided more flexibility and increased interest yet attained similar learning outcomes.

0-11 MY LIFE: REPORTING ON A NOVEL USE OF DIGITAL LEGACY SOFTWARE IN HOSPICE DAY THERAPY

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Background Starting conversations about the end-of-life is known to be challenging for patients, families and professionals. The MyLife software contains a range of interactive therapeutic tools, including reminiscence abilities, social inclusion activities, and person centred, individualised “All About Me” passports. In addition, we are using the software to develop electronic life story memory books, that can be left as a legacy to loved ones. We are working with My Dementia Improvement Network to develop cloud-based storage to enable people’s families from around the world to be able to contribute to the memory book. We are linking in with the local hospital dementia lead nurse to use the cloud to enable patients to continue to develop their books whilst in the hospice, hospital or at home.

Aim We saw an opportunity for this software to be useful in facilitating preparation for the end-of-life for patients and families using our hospice services.

Method Equipment was funded using a Yorkshire Young Achievers bid in 2014. We have trained four staff members as “super users”, by getting them to complete their own Life Story books.