INTRODUCTION
Research has shown the value and effectiveness of Community Chaplaincy Listing (CCL) (Bunniss, Mowat and Snowden, 2013; Mowet, Bunniss and Kelly 2013; Snowden, Gibbon and Grant 2018; Gibbon and Baldie 2019).

Recent research has shown the significant impact on freeing GP’s time and, in some instances, reducing prescribing (Snowden, Gibbon and Grant 2018). It has also had a positive impact on mental wellbeing (Gibbon and Baldie 2019).

To increase capacity we have worked in partnership with volunteers (In 2018, 20 in practice providing 60 hours per week; 8 waiting to be placed) with the aim of being able to provide this service in every GP surgery in Tayside. All volunteers have completed the Community Chaplaincy Listening Formational Training (NES). The aim of this project was to evaluate the patient experience of the service as provided by volunteers and to evaluate it was comparative to previous studies.

AIMS
Listening effectively to patients is at the heart of realistic medicine, this project supports this and the 2020 vision by providing an early intervention which supports prevention and self-management.

It is provided in a community setting and the aim of this was to produce an evaluation to evidence that the service provides a high standard of quality, with the person at the centre of all decisions.

METHODS
The Spiritual Care Patient Reported Outcome Measure (PROM) (Snowden, Telfor 2017) was offered to 80 patients from October 2018 to March 2019 who agreed to take part in this service evaluation.

These that opted to take part returned the PROM anonymously by post, if they chose to.

The questions asked about the experience when the patient met with the listener. For each statement they were asked to indicate what best described their experience.

RESULTS
Over the survey there were 27 respondents: Male 7 (26%) Female 19 (70%) Other 1 (4%) Age 24 – 77 (53 avg. age). They described themselves as: Religious 2 (7%); Spiritual 7 (26%); Neither 17 (63%); No answer 1 (4%)

As seen above, feedback on the listening was comparative to previous studies completed by Chaplain’s (Snowden et al, 2012; Gibbon and Baldie 2019)

Similarly the feedback in the free text was also hugely positive, the wordle above identifies the key themes, while below are examples of the feedback offered.

“My listener spoke a calming common sense, the first thing that vanishes during the times of extreme stress and trauma. Wary when I went, with positivity when I came out. Something I thought I had lost forever.”

“The listener helped me immensely and helped me think things through, particularly about bad past experiences. This has been a great help to me as I am assured of confidentiality. I am continuing to see the listener because I feel so much better.”

“I feel that the listener was able to help me put things in perspective, deal with the situation better and to open up more than I normally would. The listening service has helped me greatly over the past year and is invaluable.”

CONCLUSIONS
✓ Volunteers are delivering a meaningful, positively evaluated service
✓ This is increasing capacity and providing an equity of service
✓ People with life skills are able to give something back to their communities

RECOMMENDATIONS
• A further study to be undertaken that provides a before and after comparison focusing on the second section in the PROM
• To offer the training to health and social care staff, to be evaluated, to consider if this training can better equip staff to have person centred conversations