To provide a virtual inpatient support group to COVID-19 inpatients feelings of loneliness and increase patient-reported levels of social at a community hospital that would reduce patient-reported positioned to experience profound disconnection from others and conjunction with feeling they were dealing with an illness that anxiety, and anger, as well as longer hospitalizations. Healthcare sadness. Studies from other disease states have indicated that inpatient isolation burdened them with significant distress and prior transitions-of-care project, patient survey responses indicated workers also spend less time in isolated patients' rooms. In both the pre- and post-survey, items were rated on a 5-point Likert complete it by the next morning when surveys were collected. For • A post-survey was given to each patient and they were asked to • 5 pre-determined questions were asked in each group to stimulate discussion and maintain consistency. Open discussion was • Group sessions were conducted once weekly and were run by a • Due to these issues causing low participation, groups were discontinued and individual patient “support chats” were conducted instead – data are derived from 1:1 sessions 1:1 sessions involved same BH and chaplaincy staff, pre- and post-surveys, and used group discussion questions.