

significant, forms of care in the hospice context. In appreciating such practices as forms of care, we are also able to acknowledge the non-clinical staff that provide care in the hospice context. The paper will also draw on consultation work completed during 2023, to bring the voices of hospice staff to the forefront. The consultation work has demonstrated the need to acknowledge and support non-clinical staff in their engagements and emotional interactions with patients and families.

Overall, this research and consultation work with hospice staff shows a continued need for emotional support and the acknowledgement of the significance of emotional work – in the roles of all hospice staff.

#### 0-04 DEVELOPMENT OF 'USE-CASES' FOR A DIGITAL PALLIATIVE CARE BEREAVEMENT SERVICE

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**Background** Grief is a natural process, in which many people will cope with help from their friends and family. However, many people will need professional help (Aoun, Breen, Howting, et al. *PloS one*. 2015;10(3):e0121101). Good bereavement care is important to ensure that people get the support they need when they are grieving (Pattison, White, Lone. *J Intensive Care Soc*. 2020; 1751143720928898). Digital tools can potentially provide support for bereaved people, however, this has not been extensively studied. In computer systems design, 'use-cases' describe individual event steps a user needs to navigate to complete an action or goal on a digital system (Clausen, Apel, Dorchain, et al. *Energy Inform*. 2018; 1(1):273–283). Well-designed use-cases can improve the efficacy and effectiveness of the developed system (Cockburn. *Writing effective use cases*. 2001). Use-cases for digital bereavement support have not been established, therefore, there is potential that their use could facilitate development of digital bereavement services.

**Aims** We aim to develop 'use-cases' to describe the 'event steps' needed to design a digital service to provide three tiers of bereavement support, based on recommendations of the UK National Institute for Health and Care Excellence (NICE).

**Methods** We will review national UK relevant policy on palliative care bereavement services, and we will conduct semi-structured interviews with key stakeholders, to inform the development of infographic 'use-cases', which will support future development of digital bereavement services.

**Results** In the short term, this work will inform how palliative care services can best use existing digital systems to support bereavement care. In the medium to long term, this work will support the development, and evaluation, of new digital models of care, which will provide support for bereaved people.

**Conclusion** This study will lead to the development of digital bereavement services. Future studies can utilise the 'use case' method to improve the evidence base for digital health studies in palliative care.

## Parallel session 2.1 – Listening and leading; lenses on strategy and leadership (Monday 6 November 2023, 15:30 – 16:45)

#### 0-05 LANCASHIRE SOUTH CUMBRIA HOSPICES JOIN FORCES FOR A BOLD NEW VISION – YOU WON'T BELIEVE WHAT HAPPENS NEXT!

Howerd Booth. *Lancashire South Cumbria Hospices Together, UK*

10.1136/spcare-2023-HUNC.5

Lancashire South Cumbria is one of the most deprived areas of the country with some of the worst health outcomes. We also receive some of the lowest grant funding from the NHS. However, our communities deserve much better and they are demanding improvement. We know there is no silver bullet, white knight, magic formula or money tree. So our hospices decided to take matters into their own hands and work together. It has not been the easiest thing to do because previously we've competed and sometimes not got on.

However, now all nine of the adult and children hospices in Lancashire and South Cumbria (LSC) have come together to form a new hospice provider collaborative that we call Lancashire South Cumbria Hospices Together (LSCHT). LSCHT are the new regional focus for end of life care and, in response to the NHS regional changes, we've jointly invested to make working with our hospices easier.

We realise hospices are well represented at local and national levels, but that an ocean of opportunities exist from learning and working more closely with each other at a regional level. Of course, we also want excellent patient care, better finance settlements, more sustainable working practices and improved staff outcomes. Our story is about how we created a shared vision and jointly developed, funded and delivered our regional partnership, our successes and failures and future plans. How we infiltrated our ICB and made 'Dying Well' one of our five regional priorities.

#### 0-06 CREATING A POLYPHONIC STRATEGY FOR PAEDIATRIC PALLIATIVE CARE. A NEW ORGANISATIONAL DIRECTION CREATED THROUGH STORYTELLING AND ARTWORK

Will McLean. *Children's Hospices Across Scotland, Kinross, UK*

10.1136/spcare-2023-HUNC.6

**Background** New models of care, developed using child-centred research methods, are required for dying children (Together for Short Lives. *A guide to children's palliative care*. 2018, 4<sup>th</sup> ed). We are creating a new strategic plan to deliver paediatric palliative care, informed by numerous voices through a storytelling approach to engage children.

**Aims** To create a 'polyphonic narrative strategy' (Weidinger. *Polyvocal narrative strategy: Turning many voices into durable change*. 2020) – an organisational strategic plan, told through storytelling and visual art (Boje. *Storytelling organizations*. 2008), embodied by the many voices of the children and families who access our hospice services, and the staff and volunteers who deliver them.

**Methods** A project team, including people with lived experience, used Most Significant Change (MSC) (Davies & Dart.

The 'Most Significant Change' (MSC) technique: a guide to its use. 2005), a participatory story-based approach, and Sentiment Analysis (SA) (Venkateswarlu, Kumaresh & Janardhan. *Asian J Computer Sci Tech.* 2019; 8(S2); 1–6), a process of identifying the polarity of words, to collect and analyse important meaningful care events, told in stories and art.

**Results** Through artwork and stories, 40 children (aged 4–11, 45% referred, 13% bereaved) described a hospice service offering love and happiness – a place where they could live. 56 families (48% bereaved) told stories that revealed tragedy and sadness compounded by significant trauma. Family life is hard when caring for a child expected to die young. When your child dies, life gets even harder. 84 staff and volunteers told stories that directly correlated with those told by families. Families told stories of a constant fight, and staff told stories of the constancy of our care.

MSC identified stories that best encapsulated our work which defined the core purpose of the strategy. The analysis identified 'critical junctures' where our care is most needed, giving structure and direction to the strategy. SA identified the attitudes of children and families towards our care and word frequencies helped create new organisational values to underpin the strategy and everything we do.

**Conclusion** Multiple interpretations of our service coalesced forming the initial stage of our new strategic plan. Next steps will coproduce priorities and objectives based on the 'critical junctures' with children and families.

0-07

### 'REAL AND LASTING CHANGE': BECOMING AN ANTI-RACIST HOSPICE

Patricia Mbasani, Emily Carter. *Royal Trinity Hospice, London, UK*

10.1136/spcare-2023-HUNC.7

**Background** Race inequality is a problem in both society and healthcare, affecting patients and staff in our hospice. In 2020 we committed to actively tackling racism. In 2022, multiple focused staff 1:1s and group conversations found racism was still too prevalent, and dissatisfaction with how incidences of racism were managed.

**Aim** To achieve positive change to become an authentically anti-racist organisation by:

1. Understanding and addressing racial bias.
2. Listening, learning and taking action in response to racism.
3. Strengthening accountability.

**Process** The 'Real and Lasting Change' project was led and owned by the CEO, Board and Executive. They co-designed an action plan with the hospice's Anti-Racism Action and ED&I groups that was shared internally and externally and updated biannually.

**Results** Objectives after six months (April 2023):

Complete/ongoing:

- Promptly investigate allegations of racism by/against patients and staff.
- Robust messaging/signage outlining unacceptable behaviour.
- Updated 'Managing Unacceptable Behaviour' policy, and staff trained to effectively implement it.
- Multiple new support and reporting mechanisms for those who experience/have experienced/witness racism.
- The Board has completed anti-racism training.

- All policy and decision-making papers include an Equality Impact Assessment.
- New Board committee focusing on people, culture and anti-racism.
- Board's information dashboard now includes data on incidences of racism.

Progressing:

- All staff to complete anti-racism training.
- Training on inclusive recruitment practices for managers.
- Personal objective relating to ED&I for all staff.
- Regular proactive questions about experiences of racism/bullying/discrimination (surveys, focused conversations).
- Committing to external scrutiny and certification.

To commence:

- Reverse mentoring.
- Third-party providers must demonstrate inclusive practices.

**Conclusion** We are proud to be transparent about this work. We have seen an increase in the proportion of staff from BAME backgrounds in senior positions (<£50k) from 5%-16%. The work will continue in collaboration with staff and be reported on/measured through staff surveys and conversations.

0-08

### LEADING WITH PURPOSE – SUSTAINABLY TRANSFORMING CHARITY LEADERSHIP

<sup>1,2</sup>Maria Timon Samra. <sup>1</sup>Ty Hafan, Sully, UK; <sup>2</sup>Atlantic Technological University, Ballinacorney, Ireland

10.1136/spcare-2023-HUNC.8

The traditional charity sector is under threat due to a number of socioeconomic factors (Cordery, Smith & Berger. *Public Money Manage.* 2017; 37(3):189–196) further complicated by the pandemic (NCVO, 2021). It must assert itself in a sustainable manner to survive and thrive (MacMillan & McLaren. 2012). Harrison, Murray and Comforth (2013) posit that leadership and organisational innovation are key to supporting such transformation.

Hodges and Howieson (*Eur Manage J.* 2017; 35: 69–77) note a sector-specific leadership model is required to address the changing context of the third sector. Seeking to contribute to such framework, this research innovates by linking four core themes, i.e., Purpose, Innovation and learning, Authentic Leadership and Governance in an inter-generational study in the sector. The overarching aim is to understand whether amplifying Purpose can provide the key to unlocking an innovative, well governed sector that attracts and retains the talent necessary to continue to meet the needs of its stakeholders in a sustainable manner. With Millennials transitioning into leadership roles (Deloitte, 2018), this study also seeks to explore their unique generational perspectives to inform such a model, addressing a significant gap in the literature on the sector that has hitherto focused on the role of Millennials as volunteers and charitable donors.

Informed by the insights of 20 Millennial and Generation X leaders in the sector, the findings highlight interlinkages between all four themes and a further theme of Values is revealed. Together, these underpin Purpose-led leadership, considered vital to the sustainability of the sector. Authentic,