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.

### 0-08 LEADING WITH PURPOSE – SUSTAINABLY TRANSFORMING CHARITY LEADERSHIP

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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,
Parallel session 3.1 – Workforce spotlight; upskilling and resourcing
(Tuesday 7 November 2023, 10:45 – 12:00)

0-09 WHEN LESS IS MORE – THE POSITIVE IMPACT OF LOW-FIDELITY SIMULATION IN A HOSPICE SETTING

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Background Simulation is considered a mainstay methodology for healthcare education (Jeffries. Simulation in nursing education: From conceptualization to evaluation. 2020), however, it has been under-utilised in end of life care (Bassah, Seymour, Cox. BMC Palliat Care. 2014; 13(1):1–0). Challenges exist surrounding the design of end of life simulations in non-traditional environments who lack ultramodern equipment and space to run high fidelity simulations. High fidelity simulation is often pursued by the simulation community in the belief that it leads to greater learning (Carey & Rossler. The how when why of high-fidelity simulation.) Simulation, however, is a technique not a technology (Gaba. BMJ Qual Saf. 2004; 13 (S1): i2–10), and there is significant evidence to suggest that low fidelity simulation may be superior (Massoth, Röder, Ohlenburg, et al. BMC Medical Educ. 2019; 19:1–8) as it is less anxiety-provoking and leads to a less burdensome cognitive load for participants (Lapiere, Arbour, Maheu-Cadotte, et al. Simulation & Gaming; 2022; 53(5):338–63).

Aims To design and deliver a low-fidelity simulation programme for roll out across the hospice, with relevant subject matter that engages both our clinical and non-clinical teams across the organisation, leading to clear learning.

Methods A rolling simulation programme with sessions at least twice a month was run from March 2022 to Dec. 2022. Our sample was 160 participants who took part in 29 simulations. Prior to the beginning of the simulation programme, baseline data was collected via questionnaire. After 10 months of simulation implementation, the questionnaire was repeated to analyse the impact of low-fidelity simulation on the organisation.

Results Baseline questionnaires showed 35% of the organisation had never heard the term ‘simulation’, and over 40% felt anxious around simulation. Following participation in simulations, the repeat questionnaire showed awareness of simulation within the organisation had increased to over 90%. Anxiety around simulation participation dropped by 10%, and we saw a 30% increase in the confidence of staff to undertake challenging conversations. Based on our significant findings, we also developed Cards against Calamity – an end of life simulation game – and began to share this with other hospices.

Conclusion Low-fidelity end of life simulation can be used with positive effect for clinical and non-clinical staff in the hospice setting.