identify over-commitment; strict application of rest and recovery policies; co-mentoring support within HR managers' networks in the hospice sector.

P-271 SUSTAINING OUR WORKFORCE – PLACING STAFF SUPPORT AT THE HEART OF GOOD PRACTICE

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Background With the UK demographic profile changing, people are living longer and more complex lives with progressive illness (Help the Hospices, 2012). This increases demand on palliative care professionals who have to respond to the needs of the population they serve. If recent mortality trends continue, Healthcare systems will need to adapt to the age-related growth in deaths of palliative care across health and social care disciplines (Etkind, Bone, Gomes *et al.*, 2017). But how will hospices care for their staff knowing that burnout and compassion fatigue are the cost of caring in a healthcare setting (Brotheridge & Grandey, 2002)?

Providing formal mechanisms for support will be essential to retain and sustain healthcare professionals and cultivate a climate of resilience. Clinical supervision is a working alliance between supervisor and supervisee with the aim of providing a safe and confidential environment for staff to reflect on and discuss their work and their personal and professional responses to their work. Seeking ways to embed an affordable, sustainable model of clinical supervision would benefit both hospices and their staff.

Aim 1) Explore different models of clinical supervision provided in hospices in the UK to understand current practice; 2) Develop a UK-wide debate about the application and impact of clinical supervision and its role in sustaining and retaining the palliative care workforce.

Method 1) UK-wide consultation with representation of hospices in different regions using video conferencing to understand the different models of clinical supervision; 2) Collate and disseminate findings; 3) Development of an adaptive model of supervision to use in any hospice setting.

Results We anticipate that this initiative will give an understanding of barriers and enablers to clinical supervision in hospices and develop a model of supervision that is easy to use, applicable in different settings, affordable and sustainable. In doing so, support palliative care professionals in a changing and increasingly challenging landscape.

P-272 WHEN VOLUNTEERS MET AI: TRANSFORMING VOLUNTEER COMMUNICATIONS THROUGH CHATBOTS AND WORKPLACE

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With a diverse volunteer base, it's difficult to find a method of communication to suit everyone. A recent review of volunteer communications allowed volunteers the opportunity to voice their views about the way in which CHAS communicates with them. Volunteers stated that communications were ad hoc, inconsistent and one-way. They wanted timely,

relevant communications and a chance to share their views and network with others. They also favoured online communications.

A working group, chaired by a volunteer, was established in order to improve communications and identify an online communications platform, as requested by volunteers. The group researched options and decided that Workplace by Facebook was the most suitable platform. Free for charitable organisations, the platform has the same functionality/navigation as Facebook, making it very accessible.

A successful pilot led to the scaling up of the platform for all volunteers. With 500 sign-ups in less than the first six weeks, Workplace has transformed our volunteer communications and engagement, creating an opportunity for dialogue with volunteers, flattening hierarchy and enabling volunteers to access and receive real-time communications.

Workplace has strengthened the volunteer voice and improved the two-way communication with the organisation significantly. Volunteers have told us that they now feel more informed and connected to CHAS. Facebook analytics have allowed us to measure the success of the platform. We have harnessed digital technology (Workplace and the use of bots) to transform our volunteer communications and drive engagement. We are keen to showcase this project to other hospices as we feel it could enhance volunteer and employee communications in hospices across the country.

P-273 'I ALWAYS DREAMED I WOULD BE A NURSE' – THE EMERGENCE OF ADULT CARE VOLUNTEERS

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Background Staff working in a care setting should have a minimum training based on their Care Certificate (Cavendish, 2013). Sixth form students have been achieving a Care Certificate through a supported learning programme within the hospice (Wilcocks & Marshall, 2017). Adult volunteers were inspired by what these students have achieved and asked if a similar opportunity could be provided to adults, enabling their volunteering time to support the clinical staff in a more practical way.

Aims Facilitating volunteers to develop care skills, in order to provide the hospice with a brand new team of 'Care Volunteers'.

Methods Volunteers who approached the education team were interviewed; four were accepted for a pilot project. A range of training and work plans were organised including:

- Induction in statutory and mandatory topics
- An overview of palliative care
- The outline of the Care Certificate standards and workbook
- Buddies allocated to monitor, support, advise, shadow and provide feedback
- Mobile messaging application used for communication and support
- Weekly tutorials and observations of competencies
- Practical competencies include moving and handling, personal care, nutrition and hydration.

Results Four adult volunteers completed their Care Certificate within eight weeks, working half a day a week. Two now work as care volunteers on inpatient ward, two have taken