Hospices are being challenged by changing demographics. Originating from a response to cancer, hospices have struggled to significantly shift their narrative. This abstract relates to doctoral research exploring hospices' response to dementia from an organisational theoretical lens. The research highlighted a model of institutional change (Greenwood, Suddaby & Hinings, 2002) which can be applied beyond dementia, to the challenges hospices currently face.

The model identifies stages of institutional change that potentially take an institutionalised organisational field (e.g. hospices) from their existing narrative through ‘de-institutionalisation’ to being ‘re-institutionalised’ with a new, compelling narrative. The stages in-between are critical in creating the confidence for organisations to introduce significant change. The research highlights that in response to dementia (and other non-malignant diseases) key stages of institutional change have not taken place – in particular ‘technical viability’ (Greenwood, Suddaby & Hinings, 2002; Hodges & Read, 2018).

Technical viability is what moves thinking from an idea to a fully formed argument that gains moral and practical legitimacy. A case study on institutional change by Greenwood, Suddaby & Hinings (2002) highlighted a key ingredient being organisational failure. Hospices have not, up until now, failed.