OP7 HOME BASED VOLUNTEERS – BRIDGING THE GAP BETWEEN RESPITE VISITS
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Introduction The project was conceived as a result of two observations. The hospice receives many applications from people keen to volunteer directly with children and young adults. Secondly the Care Team and Family Support Team observe that often simple practical matters can overwhelm families with a life limited child.

Aims Practical and emotional support provided by volunteers could be a cost efficient means to offer ongoing support between hospice respite stays. The project both fulfills our vision that, “No child or young person with a life-shortening condition should journey alone or unsupported,” and considers the DH’s end of life strategy championing the “Preferred Place of Care.”

Methods Patient and family demand for home based volunteering was ascertained using a survey and semi-structured interviews.

Results 31% of service users responded, of which 97% (60 families) welcomed volunteer support at home. Numerous needs were identified that could be met by volunteers.

- Practical services – gardening, laundry or cleaning – especially during difficult times such as hospital admissions or another illness in the family
- Befriending – supporting the family on outings, spending quality time with siblings or the patient
- Specialist services – legal advice, for example, arranging power of attorney or writing a will, hairdressing, massage.

Recommendations for service development Findings indicate that a home volunteer co-ordinator is essential to match volunteers with families appropriately, liaise with other hospice teams and support volunteers. To ensure the safety of the scheme risk assessments, managing families expectations and an extensive volunteer training and support programme will be necessary.

Project evaluation will involve eliciting feedback from volunteers, patients and families on the impact of home based volunteering. It is hoped that home volunteers will relieve the burden on families with a life limited young person reducing isolation, depression and anxiety and encouraging normalisation.