Developing a volunteer response to support homecare provision

Highland Hospice: Highlands

How a third sector provider created increased capacity in local homecare provision through the development of a formal volunteer led service "a key aim is to achieve greater integration of community and volunteer resources to support the health and social care system"



Kenny Steele, Chief Executive, Highland Hospice

What was the community need?

The impact of COVID-19 highlighted the need for home care that goes beyond time and task to provide additional support to local people.

Although there was a significant volunteer response across communities, there was a need for support that was directly aligned to a registered service. This would provide additional wellbeing support to augment personal care and reduce the impact of potential staff shortages in home care services.

Highland Hospice worked in partnership with Highland Home Carers, the main provider of homecare in the Highlands, to develop a service that utilised the vast volunteer capacity to supplement the practical and personal care they provide to help people to continue to live in their own home.



Background to the community organisation

Highland Hospice supports people, their families and carers, living with an advancing, life shortening illness in the Highlands to live the best possible life and to prepare for and experience the best possible death.

Services and support are provided in an inpatient unit and day therapy centres, in local hospitals and care homes and at home.

Every year Highland Hospice impacts on the lives of over 1,000 patients and carers through direct services and as a result of the support provided to others who deliver palliative care in their community.

Highland Hospice have been looking to develop care and support services in the community which mirror the values of supporting people within the hospice. This would go beyond visits focused on practical support (mainly personal care) only and respond to what matters most to individuals.



How was this different?

Highland Hospice initiated a targeted recruitment drive for volunteers with appropriate skills and experience. Sixty volunteers were recruited across the Highlands.

Highland Hospice and Highland Home Carers worked in partnership to design the volunteer service with a focus on ensuring quality and consistency of the care provided. This included development of the volunteer role description, referral process to the service and training.

The importance of providing a visible commitment to quality of care, as would be required within a regulated services, was recognised. To do this volunteers completed training on the Scottish Government's Health and Social Care Standards and have signed up to a pledge to uphold these standards.

Volunteers provide a range of services including food and medicines drop-off and wellbeing phone calls.

Initially referrals were made to the service by Highland Home Carers; however, the service is now taking referrals from a range of other third and independent sector providers.

Experience of change

"The Care Inspectorate welcomes this insight report which shows the potential of organisations signing up to a voluntary pledge to meet the Health and Social Care Standards. For people experiencing care and support from unregulated services, a voluntary pledge could provide a common language to talk about quality."

Peter Macleod, Chief Executive, Care Inspectorate

Key insights: Kenny Steele, Chief Executive, Highland Hospice

"One of the key aims of the hospice is to achieve greater integration of community and volunteer resources to support the wider health and social care system. This partnership with highland Home Carers has been an important step towards this aim.

In addition to the partnership with Highland Home Carers several other factors have enabled the development of this service to be a success. This includes the willingness, capacity and skill base of community volunteers and the targeted recruitment and training to ensure workforce needs were met.

An initial challenge was how to demonstrate the assurance that an appropriate quality of care would be provided by the volunteers. This was essential to enable the regulated providers to refer patients to the service. We are really keen to learn from how the Health and Social Care standards have been used and if it has been a successful tool to build confidence in a more community led model of care.

We are keen to maintain our volunteer network and for this service to be utilised to respond to future challenges such as winter pressures."



If you are interested in exploring something similar in your area or to find out more, please get in touch.

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