

Strengthening Palliative Care

Volunteering
Victoria
Palliative
Care
Volunteer
Engagement
Standards



Volunteering Victoria
Connecting the Community

Strengthening Palliative Care
Volunteering Victoria Palliative Care Volunteer Engagement Standards

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Enquiries: Ms Dianne Embry
Chief Executive Officer

Address: Volunteering Victoria
Level 7
388 Bourke Street
Melbourne Vic 3000

Telephone: (03) 9642 5266

Fax: (03) 9642 5277

Website: www.volunteeringvictoria.com.au

Email: info@volunteeringvictoria.com.au

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Compiled and edited by

Jason Twomey Project Officer, Volunteering Victoria
Dianne Embry Chief Executive Officer, Volunteering Victoria
Catherina Toh Project Consultant, Volunteering Victoria

Palliative care volunteer engagement standards steering committee

Joy Dwyer Prospect Hill Village (formerly Peninsula Hospice Services)
Pam Harris Melbourne Citymission Palliative Care
Wendy Maher MND Association of Victoria
Barbara Mundy Formerly Hume Regional Palliative Care
Wendy Wells Ballarat Hospice
Barbara Young Hume Regional Palliative Care Consultancy Team

Additional input

Irene Jones Hume Regional Palliative Care Consultancy Team
Andrea Murphy Very Special Kids
Phyl Witherden Volunteering Victoria
Catherine McGrath Volunteering Victoria
Michael Bramwell Department of Human Services, Victoria

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Foreword

Volunteering Victoria is the state peak body representing the volunteer sector. Volunteering Victoria supports the building of stronger communities through the promotion of volunteering for the common good of all. Volunteering Victoria aims to set the standard for volunteer engagement in the community through excellence in service to volunteers and provision of advocacy, leadership and resources for managers of volunteers and organisations engaging volunteers.

Volunteering Victoria supports the interests of the sector by:

- appropriate information and referral services to people seeking volunteer work
- provision of leadership through lobbying for appropriate roles, conditions, and recognition for volunteers
- service to members and other bodies through consultation, education, training programs and the provision of volunteer resource material on volunteer management
- participation in state, national and international networks for volunteering
- representation of Victoria in national and international forums
- development of innovative projects; and
- vehicle for the raising of issues relevant to volunteering.

The need for Victorian standards for volunteer engagement in palliative care was identified in the Victorian government's 'Strengthening Palliative Care: a Policy for Health and Community Care Providers 2004-2009' ('SPCP'). The policy aims to strengthen palliative care service delivery across Victoria through unification of work practices and processes of health and community care providers.

Guiding principle six of the SPCP determined that 'people with a life threatening illness and their carers and families have access to quality services and skilled staff to meet their needs'. A key objective of principle six was 'to make available appropriately trained and supported volunteers to support people with a life threatening illness and their carers and families'. The report determined that volunteers are an essential component of the palliative approach in Victoria and provide a unique avenue for clients, carers and families to be supported by their local community:

'Volunteers make a significant contribution to people with life threatening illness and their carers and families. It is important that volunteers have appropriate training and ongoing supervision and support. Developing best practice principles in volunteer training and support and consistency of volunteer training across the state would enable the sharing of resources and the opportunity to access training in a different region if necessary. Volunteer coordinators play a vital role

in planning and supporting the role of volunteers and are a necessary component of the volunteer program' (Department of Human Services, 2005).

Specific action areas for health and community care providers included the development and implementation of appropriate volunteer engagement strategy to (1) employ Manager of Volunteer services on a regional or sub-regional basis and (2) provide consistent regional and local training and support to volunteers.

Volunteering Victoria Palliative Care Volunteer Engagement Standards provides program standards and volunteer service standards for the Victorian palliative care sector. The program standards and volunteer service standards are designed to:

- foster greater awareness of the role of volunteers in palliative care
- support and promote volunteer engagement in palliative care; and
- limit organisation legal liability with regard to volunteer engagement in palliative care services.

A selection of templates are included to assist organisations compile volunteer engagement policies and procedures. Volunteering Victoria recognises the resource implications involved and is available for consultation with those constrained by resources.

Introduction

1. The palliative approach in Victoria

The palliative approach in Victoria utilises primary care services and community resources to respond to the physical, social, emotional, cultural and spiritual needs of clients, carers and families. The SPCP found that -

'Palliative care services are provided to individuals, their families and carers, each of whom come with their unique life experiences. Service providers offer care that takes into consideration the individuals specific needs, based on their age, life stage, ability, social relationships, culture, other life experiences and influences, as well as the nature and impact of the life threatening illness' (Department of Human Services, 2005).

Volunteer program establishment and design of volunteer engagement policy occurs in this context.

2. Social relationships and culture

Multiculturalism is 'a term which recognises and celebrates the cultural diversity of Australia's population'. In a discussion of the term and concept, Making Multicultural Australia (2006) noted that -

'Cultural and linguistic diversity has always been a feature of Aboriginal and Torres Strait Islander societies. In the past 200 years this diversity has been augmented with the settlement of over 6 million migrants'. The concept of multiculturalism 'respects and values the right of all Australians to express and share their individual cultural heritage within a cohesive and harmonious society and within an overriding commitment to the basic structures and values of Australian democracy' (www.multiculturalaustralia.edu.au 2006).

The SPCP found that culture is comprised of '*elements of attitudes, behaviour, customs, language, types of dwelling and clothing and art and social institutions*'. The SPCP determined that '*the focus of palliative care on enhancing quality of life demands an understanding of a persons values and the meaning attached to those values*' (Lickiss, 2003 reprinted from Department of Human Services, 2005).

Volunteer program establishment and design of volunteer engagement policy occurs in this context.

3. Volunteer engagement

To meet the physical, social, cultural, spiritual and emotional dimensions of the palliative approach in Victoria, the SPCP determined that an interdisciplinary team based approach for client care was required. An interdisciplinary team is -

'composed of a range of medical, nursing, allied health staff, chaplains and volunteers, all of whom contribute to the physical, functional, emotional, psychological, social and spiritual aspects of care and well being' (Crawford and Rice, 2003 reprinted from Department of Human Services, 2005)'.

Volunteer program establishment and design of volunteer engagement policy occurs in this context.

4. The presence of volunteers in palliative care

During research for the development of a model for standards, best practices and quality for volunteer engagement in hospice palliative care, the Canadian Hospice Palliative Care Association examined the role of volunteers and the nature of their presence in the palliative care interdisciplinary team. Their research identified ten foundations of volunteer practice in hospice palliative care that demonstrate (1) the need for special acknowledgement of the unique qualities that volunteers bring to the palliative care interdisciplinary team and (2) the need for ongoing exploration and evaluation of the volunteer component in palliative care. Their foundations of volunteer practice are applicable across all palliative care contexts.

Foundations of volunteer practice in palliative care

1. Making a difference

Given the uniqueness of persons and situations, the complexity of care, the mystery we are often involved with, you never can tell what will make a difference for someone in this moment. This can be a liberating concept for volunteers and all team members.

2. Working from commitment

Volunteers are deeply committed to their work. We need to identify and explore on an on-going basis the nature of that commitment with them.

3. Volunteers are essential members of the interdisciplinary team

Volunteers work in partnership, and offer support to each other and the team.

4. Accountability and quality

As part of the interdisciplinary team, palliative care volunteers are formal

caregivers, accountable to their program's vision, mission, values, standards, principles and norms, where evaluation is a continuous part of the program.

5. Self-reflection, self-exploration and deepening self-awareness

The person who chooses to enter the world of dying persons and their families and offer his or her presence needs to be self-aware. They need to be able to differentiate among the needs of client, family, team members and themselves. They need to understand the importance of sharing as a process of both giving and receiving. They recognise the uniqueness of each situation and the special qualities of each person in the moment.

6. Openness to ongoing learning

Volunteers receive much from clients, family members and team members with whom they work. This deep learning (formal and experiential) needs to be recognized and enhanced through the program's efforts to help the volunteer move from novice to advancing practice over time.

7. Respect

The volunteer affirms the personhood and inherent dignity of each person, honoring diversity and culture, in a non-judgmental way.

8. Presence and time

The central challenge for the volunteer is how to be actively present for the person he or she is accompanying. This presence and openness to the person in the moment conveys a unique message of acceptance and enhances the quality of tasks done. Attentiveness, accompanying and being actively present requires an open-ended approach and simply cannot be rushed.

9. Self care

Volunteers recognise that they will at times experience complex feelings in palliative care work and in response to the expected and unexpected changes of advancing illness. They are committed to self-care and receiving support from the team and the program.

10. Acceptance of death and loss

Volunteers recognise that death is the outcome for our clients, often unexpected, often not according to plan and that volunteers may experience complicated feelings of grief and loss themselves. They know that the program provides ongoing personal support as needed.

(Foundations of Volunteer Practice in Palliative Care reprinted and adapted from 'Task Group Inukshuk: Model for Development of Standards, Best Practices and Quality in the Canadian Hospice Palliative Care Volunteer Component', 2005, Health Canada Secretariat on Palliative and End of Life Care.)

Volunteer program establishment

1. Manager of volunteers

A manager of volunteers is responsible for management of all aspects of volunteer engagement. The manager of volunteers needs well developed management skills and understanding of the palliative care sector to implement and manage an organisation volunteer engagement package. The manager of volunteers requires diverse communication and negotiation skills to liaise with clients, carers, families, volunteers and members of palliative care interdisciplinary teams.

When designing the manager of volunteers role, consideration should be given to:

- the scope of the role based on the organisation's envisaged level of volunteer engagement, determined by demand on services; and
- the budget and physical resources the manager of volunteers will be responsible for in this context.

2. Rationale for volunteer engagement

Volunteering is an activity that traditionally takes place in a not for profit organisation and is:

- of benefit to the community and the volunteer
- undertaken of the volunteer's own free will and without coercion
- for no financial payment; and
- in designated volunteer positions only. In this way, volunteers do not replace paid staff or constitute a threat to their job security.

Volunteer positions have intrinsic worth that is valuable for the support they provide to clients, carers, families and interaction with team members. Volunteers represent the diverse cultural and life experiences of local communities and their presence enhances the program of care offered. As an integral part of the palliative care interdisciplinary team, volunteers are:

- valued for their input, and called upon for their opinions
- consulted on all matters that substantially affect the performance of their duties
- given the opportunity to effect change in an organisation through their suggestions and involvement in design and implementation of volunteer policies and work procedures; and

-
- expected to provide feedback and input regarding their work with clients, carers, families and paid staff.

The interpersonal dynamic between the client and palliative care volunteer during the palliative stage of illness is emotionally intense. To ensure that volunteers are properly supported, as a guide, a palliative care volunteer role:

- does not exceed more than 6 hours per week – a single role requirement beyond this may need to be divided amongst several volunteers
- is smaller in size and scope to that of a paid staff member; and
- is clearly defined and adds value to the palliative care interdisciplinary team in its support of client, carer and family.

3. Volunteer rights and risk management

In Victoria, volunteers are entitled to the same legal and professional considerations as paid staff. In the event of alleged misconduct or negligence, a court of law may determine an organisation's duty of care to the volunteer and client, carer, family, paid staff and other affected individuals. To facilitate a safe working environment for volunteers, clients, carers, families, paid staff and the general public, the manager of volunteers can take a number of steps including:

- ensuring that police records checks of volunteers are carried out prior to commencement
- ensuring that volunteers are adequately covered by insurance
- giving volunteers accurate and truthful information about the organisation and the position they are applying for
- interviewing and selecting volunteers in line with equal opportunity and anti-discrimination principles
- ensuring volunteers are provided with thorough orientation on commencement
- giving volunteers a position description and the opportunity to negotiate their working hours
- ensuring volunteers are provided with comprehensive training opportunities to fulfill the requirements of their position
- ensuring that volunteers are provided with the same level of support and supervision as paid staff
- informing volunteers of the organisation's volunteer policy and providing hard copies or access to these on request
- ensuring volunteers are not given the work of paid staff during industrial disputes
- ensuring volunteers have access to a grievance procedure
- ensuring personal information of volunteers is appropriately stored and protected; and

- ensuring that appropriate feedback mechanisms are established.

4. Development of program standards and participation standards

A comprehensive volunteer engagement package identifies standards for management of the program and standards for volunteer participation. These standards can be developed from:

- the physical, social, emotional, cultural and spiritual needs of clients, carers and families during the palliative stage of illness
- consideration of the role, function and responsibilities of volunteers with regard to their interaction with clients, carers and families
- consideration for client, carer, family, paid staff and volunteer expectations with regard to professional work practices including accountability for decision making and authority
- consideration for client, carer, family, paid staff and volunteer expectations with regard to workplace health and safety; and
- consideration of the boundaries of volunteer roles requiring identification of the duties volunteers may do and may not do.

5. Organisation philosophy and mission statement

An organisation's volunteer philosophy and mission statement details the rationale for engaging volunteers in the support of palliative care clients, carers and families. The statement can be used as a guide for paid staff of the organisation and a marketing tool to attract volunteers. The policy consists of:

- an overview of organisation commitment to specific standards of palliative care; and
- an overview of organisation philosophy on volunteer engagement and reasons why volunteers are integral in the support of palliative care clients, carers and families.

6. Volunteer program and policy review

The effectiveness of the volunteer engagement package can be assessed by weighting quantitative and qualitative performance indicators against service delivery benchmarks. To facilitate this, various quantitative and qualitative data are collected and analysed including (where appropriate):

- volunteer, paid staff, client, carer and family feedback from surveys, staff / case review meetings, and general discussion
- organisation capacity to attract and retain the services of a diverse volunteer group within its geographic location

- volunteer contact hours when placed with client, carers and families
- submission of contact reports and attendance at volunteer group meetings
- participation of volunteers in training programs in a given period; and
- number of grievances lodged by volunteers in a given period.

In the event that change is required to increase the effectiveness of the volunteer engagement package, a change management strategy needs to be developed to roll out and promote the changes to volunteers, paid staff, clients, carers and families. Development of an appropriate change management strategy can involve:

- determining the impact of envisaged change on the organisation's culture and work practices and developing appropriate communication strategies to address this
- ensuring communication strategies detail reasons for change and the envisaged benefits to the organisation, clients, carers, families and volunteers; and
- clear communication of changed practices including appropriate and timely training programs for all impacted by the changes.

7. Delegation of responsibilities

The manager of volunteers may delegate some aspects of volunteer engagement and management responsibility to designated staff within the organisation depending on given circumstances. These circumstances include:

- the level of volunteer engagement within the organisation and time implications for the manager of volunteers; and
- the breadth of services offered by the organisation that are supported by volunteers.

When delegating volunteer management responsibilities within an organisation, the manager of volunteers needs to:

- ensure that staff granted responsibility for volunteer management are fully aware of volunteer engagement and management policies
- ensure that staff granted responsibility for volunteer management have diverse communication and negotiation skills
- ensure that staff granted responsibility for volunteer management are aware of the support and recognition needs of volunteers
- ensure that staff granted responsibility for volunteer management are aware of the diverse needs of clients, carers and families during the palliative stage of illness

- ensure that volunteers, clients, carers and families are aware of delegation arrangements
- ensure that firm and regular reporting lines with staff granted responsibility for volunteer management are established; and
- ensure that volunteers continue to have access to the manager of volunteers when needed.

Volunteer recruitment and orientation

1. Volunteer recruitment planning

The manager of volunteers can make a number of quantitative and qualitative assessments to determine the volunteer requirements of an organisation. The assessment can include:

- determining an acceptable ratio of volunteers to manager of volunteers
- consideration of the geographic location of the organisation and its ability to attract volunteers in this context
- consideration of the volunteer diversity needed to facilitate appropriate match with clients, carers and families and varied volunteer activities; and
- identifying appropriate methods to promote palliative care volunteering and the agency to potential volunteers.

2. Recruitment documentation

The manager of volunteers provides a position description to each potential volunteer at the time of their expression of interest in palliative care volunteering. The position description typically includes details of:

- duties and responsibilities of the position
- selection criteria for the position
- qualifications, certificates or equivalent experience required to undertake the position
- supervisory and reporting lines
- nomination of a probationary period; and
- an identified review timetable.

Documentation to facilitate the selection process can be assembled in an information pack. This typically will consist of:

- an overview of the organisation and its function in the community
- an overview of palliative care
- an overview of the organisation's commitment to specific standards of palliative care
- an overview of the philosophy and rationale for inclusion of volunteers in providing care and support to palliative care clients, carers and families
- the types of volunteer roles and activities available within the organisation;
- an application or registration form; and

- an overview of the steps involved in the recruitment process (interview, reference checking, police check, orientation and training requirements etc);

3. Recruitment and selection procedures

On receipt of expressions of interest / applications, the manager of volunteers conducts the selection process with fair and equitable administrative procedures. Consideration can be given to:

- provision for special access, interpreters or any other form of reasonable adjustment for interviewees. Requirements need to be determined prior to the interview taking place and onus is on the interviewee to raise any requirements they have prior to attending
- the number of persons and their position within the organisation that will be responsible for conducting interviews and assessing the applicants
- procedures for checking credentials such as qualifications, training and experience
- procedures for conducting criminal record and reference checks; and
- procedures and timeframes for advising successful and unsuccessful applicants. This may allow for feedback discussions with unsuccessful applicants and may extend to recommending other avenues of volunteer engagement.

4. Volunteer orientation – organisation workplace

Upon selecting an applicant for appointment, the organisation will require a workplace orientation policy and procedures to induct new volunteers. An information pack can be assembled to assist the volunteer with the socialisation process. The information pack contains some of the following documentation:

- the rights and responsibilities of volunteers
- the contact details of the Manager of Volunteers
- details on the arrangements for insurance covering volunteers in the workplace; and
- copies of (or information on the location of) volunteer engagement policies.

Upon issue of the information pack, the manager of volunteers conducts a tour of the workplace with the volunteer. This tour typically includes:

- welcoming the volunteer and introducing the volunteer to their new work mates

- taking the volunteer through any security or safety procedures that are particularly relevant to the role including emergency contact lists and the procedures to be followed in the event of an emergency; and
- identifying potential workplace areas for reasonable adjustment. This may include identifying wheelchair access or other mobility issues for people with a physical disability, altering or improving signage for people from non-English speaking background, or identifying special equipment options for the vision impaired or deaf.

5. Volunteer orientation – client’s home

Prior to a volunteer’s initial visit to a client’s home, the manager of volunteers will provide them with information gained from assessment of the client home and support needs. Typically, this information includes:

- the location of medication and contact details for the client’s medical practitioner
- the location of telephone numbers for emergency services, interdisciplinary team members, carer, family and friends
- consideration for any physical characteristics in the home environment that may impede the volunteer’s work performance (faulty amenities, faulty electrical appliances etc)
- any unique characteristics of the client’s home environment (availability of parking, relationship of client / family with neighbours, location of emergency entry / exits as applicable); and
- the location of any sign in / out documentation the volunteer must complete upon arrival / leaving.

At the completion of the first home visit, the manager of volunteers contacts the volunteer to confirm that:

- the volunteer is comfortable visiting the client and is willing to commit to an agreed schedule of visits
- the volunteer is clear about particular home visiting arrangements; and
- the volunteer is comfortable with the physical characteristics of the client’s home.

6. Volunteer personal information

A copy of any communication and documents exchanged during volunteer recruitment and selection and subsequent engagement is placed on a hard copy file in date order from most recent and locked in a secure storage cabinet. However, in the absence of the manager of volunteers, a designated staff member of the organisation can be provided with access to emergency contact

names and telephone numbers in the event of workplace accident or mishap. The organisation can endeavour to create a policy and procedures for ongoing storage and disposal of volunteer personal information in line with procedures for paid staff.

Volunteer performance, health and safety, grievances, discipline and dismissal

1. Volunteer occupational health and safety

An occupational health and safety policy demonstrates compliance with contemporary approaches to occupational health and safety concepts and typically includes:

- an overview of the objectives and rationale for protecting the health, safety and well-being of volunteers
- an overview of the responsibilities of volunteers for their safety and that of others
- details of the steps involved in identifying and reporting potential workplace hazards
- a reminder that volunteers involved in client transportation activities are required to observe all Victorian road laws
- details of the steps involved in reporting volunteer, client, visitor or paid staff accidents and injuries; and
- details of the specific steps involved in the safe operation of any equipment and steps involved in reporting faulty equipment or amenities.

2. Volunteer performance review

Whilst numerous performance review models exist, the most appropriate for volunteer staff is a qualitative approach to assess volunteer motivation and adherence to organisational palliative care service delivery standards.

This takes the form of a planned one on one discussion between the volunteer and the manager of volunteers. A supportive interaction that encourages the volunteer to be reflective about their work and its effectiveness, and be self evaluative, is empowering to the volunteer and assists identification of strengths and opportunities for personal and professional development. In turn the manager of volunteers provides feedback to the volunteer on their achievements and any concerns that have come to light. Topics covered in the discussion need to be documented – particularly in the event that volunteer performance is below service delivery standards – with a copy given to the volunteer and one retained by the manager of volunteers for ongoing monitoring.

The frequency of performance review will depend on the envisaged tenure of the volunteer but where possible, needs to be in line with frequency of review for paid staff. However, performance review may be conducted regularly in the event of below standard performance and maintained until performance shortfalls are overcome.

3. Volunteer grievance resolution

A grievance resolution process for volunteer staff needs to be open and transparent to gain acceptance and trust. Informal grievance resolution takes the form of private discussion between the volunteer and manager of volunteers without the requirement of raising the grievance formally in writing. A policy on informal grievance resolution typically includes details of the steps that the manager of volunteers may take to resolve the grievance at the informal level and should include provision for a third party within the organisation to investigate the grievance in the event that the matter(s) in dispute directly involve the manager of volunteers.

However, in the event that raising the grievance informally does not produce mutually beneficial results, a process for lodging a formal written grievance needs to be developed. A policy on formal grievance resolution typically includes details of the steps the manager of volunteers may take to resolve the grievance and should include provision for a third party within the organisation to investigate the grievance in the event that the matter(s) in dispute directly involve the manager of volunteers.

4. Volunteer discipline

Disciplinary action may be required in the event that a volunteer has seriously breached organisation policy and/or palliative care service delivery standards in their interaction with paid staff, clients, carers and families. Disciplinary action is not appropriate when organisation policy or palliative care service delivery standards have been inadvertently breached due to inexperience or mishap.

Disciplinary action occurs only after thorough investigation of claims and circumstances has been made. Disciplinary action is recommended by the manager of volunteers and supported by the Chief Executive Officer (or equivalent position) of the organisation. Disciplinary action can involve:

- moving the volunteer to a different work area and/or
- restricting the volunteer's contact with staff, clients, carers and families or client information (as applicable).

Disciplinary action is accompanied by written notification specifying the reasons and accompanying timeframe. Written notification should include suggestions that the volunteer can use to improve their future performance.

5. Volunteer dismissal

Dismissal may be appropriate in the event that the volunteer's performance does not improve after disciplinary action has occurred. Alternatively, dismissal may be appropriate in the event that service standards have been wilfully breached and client, carer, family or staff welfare has been endangered. Reasons for dismissal include:

- failure to address poor performance after repeated verbal and written warnings
- criminal activity including theft, intoxication at work, use of illegal drugs, assault etc
- conduct endangering clients, carers, families and paid staff
- gross misconduct or insubordination (verbal abuse of staff or patients, wilful misuse of equipment endangering safety of staff and clients etc); and
- breach of client privacy.

Dismissal is accompanied by written notification specifying reasons.

Volunteer training and recognition

1. Palliative care volunteer training - core competencies

Palliative care volunteer training introduces the volunteer to the concept of palliative care and types of illnesses common to the palliative stage of illness serviced by the organisation. In addition, comprehensive palliative care volunteer training addresses the professional competencies and personal attributes required of palliative care volunteers.

During research for the development of a model for standards, best practices and quality for volunteer engagement in hospice palliative care, the Canadian Hospice Palliative Care Association examined the role of volunteers and identified the core competencies required for successful palliative care volunteer best practice. Their findings identified the knowledge, skills, awareness, attitude, judgment and discernment components that hospice palliative care volunteer training needs to identify and develop. These components are applicable across all palliative care contexts.

Knowledge elements

- Understand philosophy and values of palliative care, and principles of practice.
- Know the common palliative care values, principles, norms and language.
- Understand structure, culture, services and resources of the care system, the organisation and the program of care and how to access them.
- Understand elements and levels of communication, e.g. verbal and non-verbal, patterns, uses of silence.
- Realise that communication and information sharing is a dialogic activity.
- Understand philosophy of interdisciplinary cooperation and teamwork.
- Recognise ethical and legal dimensions: clients' rights.
- Understand models of decision making.

Skill elements – communication skills

- General facilitation of communication.
- Gathering and sharing information attentively:
- Organising and clarifying information:
- Confirm understanding.
- Identify and work with barriers to communication:
- Cultural sensitivity and competence.
- Care is person-centered: Know how to establish effective supportive relationships with client, family and team.

Awareness and attitude elements

Relationship with client, family and team

- Establish rapport, create relationship with client/family.
- Being prepared to be present to client/family the reality of the moment.
- Value and respect the individuality of the client/family.
- Honor and respect the person's unique situation.

Self-awareness

- Aware of personal bias. Aware of assumptions, values, limitations.
- Aware of boundaries and boundary issues.
- Reflect on and discuss the impact on self from working with dying and bereaved persons.
- Reflect on one's own mortality.

Values

- Value communication and the thoughts and feelings of others.
- Respect and appreciate persons and their uniqueness.
- Empathy: respect for the other person and for oneself. Insight into what the other may be experiencing, what their reality is like. Person-centered approach.

Practice

- Caring: Convey support as one's core stance.
- Convey non-judgmental care and concern.
- Trusting attitude toward client.
- Provide care with calm, steady, communicative style.

Judgment and discernment elements

- Discern and prioritise goals with team and client and family.
- Aware of need to be present, and awareness/discernment of when to withdraw.
- Discern the information wanted by client and family and provide it.

(Knowledge Elements, Skills Elements, Awareness and Attitude Elements and Judgement and Discernment Elements reprinted and adapted from 'Task Group Inukshuk: Model for Development of Standards, Best Practices and Quality in the Canadian Hospice Palliative Care Volunteer Component', 2005, Health Canada Secretariat on Palliative and End of Life Care.)

2. Palliative care volunteer training

Palliative care volunteer training is a continuous process of formal structured training and experiential on the job learning. Formal training is required to ensure

that Victorian minimum standards for volunteer participation in palliative care services are recognised and met. Experiential on the job learning allows volunteers to acquire new skills and knowledge as they respond to developments in palliative care treatments and service delivery. The sample training module offered in 'Volunteering Victoria Palliative Care Volunteer Engagement Standards – Sample Templates' will assist organisations to:

- ensure that volunteer resources can be shared across organisations
- simplify the selection process for managers of volunteers
- allow volunteers to move freely between organisations; and
- produce a reduction in organisation expenditure for volunteer training across metropolitan and regional Victoria.

3. Validity of training

To ensure that palliative care volunteers have appropriate skills to fulfil their role, the manager of volunteers needs to ensure that training certificates presented during recruitment and selection are verified and consistent with current standards in palliative care service delivery. If, in the opinion of the manager of volunteers training certificates are no longer valid or cannot be adequately verified, the manager of volunteers may reasonably request that the volunteer undertake new training to address this.

4. Volunteer recognition and value

Recognition of the contribution volunteers make to the organisation will strengthen their motivation and enthusiasm and provide a means of creating and sustaining a positive workplace culture. There are a number of ways to recognise the work of volunteers including:

- daily recognition of volunteer efforts and time allocation
- recognition at the completion of each special or arduous task
- recognition at team meetings, staff meetings etc
- recognition through newsletters, memorandums, group emails etc
- individual recognition with a letter from the manager of volunteers on behalf of the organisation (this is particularly effective, as volunteers can show this to friends, family and prospective employers as evidence of their contribution)
- awarding certificates of service, citations for commitment or special achievement
- encouraging paid staff, clients, carers and families to acknowledge National Volunteer Week and International Volunteer Day
- increased access to training opportunities; and
- providing additional responsibility.

Recognition is best received when it is regular and sincere and highlights the volunteer's needs and motivations.

Volunteer supervision and volunteer responsibilities

1. Volunteer supervision

The manager of volunteers sets firm parameters for the supervision of volunteer performance that specify:

- regularity of contact with the volunteer, particularly in the event that the volunteer is working in the home of a client or performing duties out of ordinary business hours
- reporting criteria in relation to the frequency and success of volunteer contact, performance and satisfaction with their role; and
- the name and position of organisation staff and members of the palliative care interdisciplinary team that volunteers may take direction from.

Reporting criteria and regularity of reporting are specified at the outset of the volunteer placement.

2. Volunteer interaction with organisation staff

Volunteers report directly to the manager of volunteers. On commencement in their role volunteers need to be aware that:

- they may only accept verbal or written direction from the manager of volunteers or organisation staff and members of the palliative care interdisciplinary team specified by the manager of volunteers
- their volunteer relationship with the organisation is a confidential matter that should only be discussed with the manager of volunteers; and
- they are required to comply with organisation policies and procedures, particularly with regard to emergency reporting, as issued by the manager of volunteers.

In the absence of the manager of volunteers due to leave or other circumstance, an organisation delegates responsibility for the management of the organisation volunteer program and volunteers to a nominated staff member.

3. Volunteer adherence to organisation policy and operational procedures

Volunteers are required to adhere to organisation policy and operational procedures issued by the manager of volunteers. Volunteers need to note that:

- policies and procedures are designed to manage their work and performance and are not to be ignored or adjusted without the permission of the manager of volunteers; and
- failure to comply with organisation policy and operational procedures could result in disciplinary action or dismissal.

4. Interaction with clients, carers and families

In all instances, the onus of responsibility to communicate to clients and paid staff the boundaries of the volunteer role resides with the manager of volunteers. Volunteers are only required to carry out the duties of their role specified in a written position description authorised by the manager of volunteers. Volunteers need to be aware that:

- they may only undertake or assume responsibility for any duties specified in writing by the manager of volunteers or agreed to in consultation with the manager of volunteers
- any requests from clients, carers and families to perform activities outside the volunteer position description, needs to be referred to the manager of volunteers for consideration and approval; and
- any perceived opportunities to improve service delivery can be discussed with the manager of volunteers and/or the interdisciplinary team, and only enacted with organisation approval.

In the event that a volunteer is given a direction or duty that the volunteer feels is inappropriate or does not feel equipped to comply with, the volunteer can:

- decline to perform the direction or duty and provide reasons why this is appropriate; and
- request that alternative arrangements be made to fulfil a particular direction or duty.

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