Caring Communities Program - Project Overview/Main Messages

Organisation: **Hume Regional Palliative Care**
Name of Project: **'Building Rural Community Capacity through Volunteering'**
Length of Project: **Two Years**

Project Summary:

Building community capacity at the local level by:

- **Strengthening supports to palliative care volunteers across the Hume region in NE Victoria**
- **Enhancing community awareness & capacity in regard to the palliative care philosophy & the role local communities can play as active members of the palliative care team**
- **Strengthening partnerships between rural palliative care volunteer services, regional palliative care services, local communities and health service providers.**

Project Objectives:

- **Develop supported, local, rural palliative care volunteer self- sustaining models**
- **Develop strong partnerships between rural palliative care volunteers services, regional palliative care services, other health service providers and local communities**
- **Using a health promotion model encourage local community action to provide social supports for their terminally ill clients/ families/carers and their volunteers services**

Project Activities:

- **Appoint a part-time community development worker to work alongside the local volunteer services**
- **Develop 5 sub regional working groups to develop locally supported palliative care volunteer models. Link these into the regional network.**
- **Facilitate onsite regional education in**

- **volunteer management and leadership**
- **successful submission writing – develop a regional proforma to support volunteer services when seeking grant money**

- **Identify, gather and monitor key data to demonstrate work**
- **Develop and implement guidelines for a pool of flexible dollars to support health promotion**
- **Trial the 10 initial volunteer training modules using & mentoring local providers**
- **Facilitate health promoting palliative care workshops**
- **Assist local services to design, implement & evaluate a health promotion plan that targets key social players**

Main Messages

What we did

- **Identified and implemented strategies to strengthen the capacity of local communities to support rural palliative care volunteers in partnership with the sub regional and regional specialist palliative care services**
- **Provided health promoting palliative care education and training to specialist palliative care service providers, palliative care volunteers and general community health workers and professionals; and**
- **Established a regional health promotion resource team to provide community groups' with access to resources, mentorship and seed funding to deliver health promoting palliative care activities.**

What has been learned?

- **Funded coordination of palliative care volunteers at the local, sub regional and regional level is paramount to volunteer retention as it takes time, effort and skill to effectively lead, manage and coordinate a palliative care volunteer service**
- **To sustain locally based rural volunteer services they need access to regional guidance and protocols, linkages with the specialist palliative care services and up to date education, recruitment and training resources for volunteers and coordinators of volunteers; and**
- **Partnerships and networks between community groups and local specialist palliative care service providers can be developed through a mentorship/seed funding model to enable general community members respond to issues that surround death, dying and loss and to share the responsibility of care for palliative clients and their families in rural communities.**

What is useful to other projects/communities?

- **The project findings are a resource for other rural regions across the state and/or nationally seeking to develop coordinated region wide volunteer services and public health approaches to palliative care; and**
- **The inclusion of volunteer service and community development roles in specialist palliative care teams provides guidance and leadership for this approach.**

What have been the benefits of disseminating information about this project?

- **The volunteer service data collection has provided the region with evidence to advocate for funded coordination/management of palliative care volunteers to regional/state/national funding bodies; and**
- **Sharing the innovative health promotion strategy has increased the awareness of specialist palliative care providers and community members of the benefits of this approach to service delivery.**

What needs to happen in order to sustain the key achievements of this project?

- **State and National funding bodies need to adequately resource the specialist palliative care teams so that these palliative care community capacity building strategies can be implemented.**

What resources did you develop and are they available to others?

- **We developed volunteer service protocols and guidelines for community groups to access designated health promotion resources. They are located in the appendices of the report or can be requested via e-mail from palliative@hrpc.hume.org.au** .