Organising a Volunteer Programme in the Paediatric Haematology Oncology Unit at the Johannesburg Hospital, South Africa.

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Introduction:
We have found that volunteers can play a vital part, and make a tremendous contribution, as members of the multi-disciplinary team within a paediatric cancer unit. However it is not just a matter of taking in anyone who comes along, full of good intentions, and letting them loose on the families.

One needs to have a formal and rigorous process to make sure that the people who are accepted are suitable and appropriate, and that they are equipped with the knowledge and skill to make a positive contribution to individual children and families, and to the overall running of the units.

This paper gives some background to volunteers, and goes on to describe the process that we have found works very well at the Children’s Haematology Oncology Clinic in the Johannesburg Hospital in South Africa.

About Volunteers:
One definition of a volunteer is: “Any person, male or female, from a wide range – from young to older, from all ethnic, religious and racial groups, from a variety of lifestyles, economic, educational and social backgrounds, - working without monetary compensation for their service, in a cause or job they have voluntarily chosen”.

So the concept of volunteerism is therefore a part-time paternalism / part time active job, whereby work is executed with devotion, willingness and in support of the organisation. People give of their time and pool their resources, therefore enhancing lives of individuals or others, and in doing so enhancing and enriching the community.

When one looks at why people volunteer there are many reasons. They may just want to give to others, or maybe have time on their hands, feel unfilled, or possibly have a skill they feel could make a difference to the child in hospital. The volunteer may also want to add a new dimension to their lives, or it may be the case of just wanting to meet others.

Volunteers are important and are always needed by parent support groups. People who give of their time can help out in many different ways – from just running errands to maybe babysitting, or just taking a needy parent to the shops. At the end of the day, the parents and children in our care benefit, and at this level, there just needs to be some sensible screening of the people who come along to help.

However there is also tremendous value to be obtained from volunteers who make a major commitment to work with the parents and children in the hospital environment. Professional staff, both medical and non-medical, also welcome volunteers, who help them overcome shortage of staff and trained personnel.

BUT training of that level of volunteer is absolutely essential, and we have found that a formal process for the recruitment, selection, training and ongoing management of the volunteer group is a necessity.

Need for a Formal Process:
So why have a formal process of selection and training? If for no other reason, it would be for the protection of the children and their families from undesirable people, or from people who just want to offload some of their own problems onto our already stressed parents. It is also important to protect our own organisation from any unfortunate consequences, and “unsociable” people.

But there are many more reasons apart from this, and it is important that the individual and the team have a set of common and agreed expectations from the partnership.

At the end of the day the volunteer must fit into the multidisciplinary team, and they must be of a
net positive value to the programme, as it is expensive to train and support the volunteers. It is of little value to invest time and effort in training someone who only stays with you for a few months, and then loses interest or realises that it isn’t really what they want to be doing. Over the years we have found, when looking for new volunteers, that we really must have clearly defined stages in the process of recruitment and selection, as well as a solid training programme with on-going supervision. There also has to be a continuous development plan in place, and a code of discipline to be adhered to.

Recruitment and Selection:
Recruitment can be done by way of media, when one would place an advertisement in the local newspaper or magazine, or by word of mouth, either by the existing staff or volunteers group. It is important to identify what skills and qualities are required when recruiting new volunteer force and, very importantly, where those skills are best needed – let that be in the hospital or clinic or at the Parent house.

Then having found people who are willing to give of their time, one must consider how soon should they start their role, and how much time must they give to the duty, on a daily, weekly or monthly basis.

During the selection process, it is critical to take note of the well-being of the volunteer, checking out their availability and commitment to the project, and making quite sure that remuneration is not expected. All volunteers must be prepared to attend the training programme, as well as the ongoing supervision.

Having identified potential candidates, it is important to put each and every volunteer through a formal interview before a panel. We have found that having 3 people on the panel creates the right balance. In our case these are: our social worker, the co-ordinator of volunteers, and our bereavement counsellor, who have all had many years of experience.

It is also important to check out any references that might be available.

Training and ongoing management:
Our training programme, which has been found to work well, runs over 5 mornings, and has the following modules:

- Informational – about the organisation, who we are, what we do;
- Orientation – finding their way around the hospital and wards; or Parent house
- Medical Educational – about the illnesses that the children have;
- Skills and Counselling – development of listening and coping skills;
- Teamwork
- Conflict management
- Psychosocial - loss, death and dying.

Ongoing supervision of the volunteers is very important, and is done every 3 to 4 weeks. The volunteer must be encouraged to give feedback to their mentor and to be empowered to offload worries.

It is essential to organise “caregivers days” when outings are arranged which are team building; these are very popular and help to avoid burnout.

A continuous development schedule of lectures is also run, giving to the valuable volunteers: updates on medical information; life skills; bereavement counselling; coping skills; and updates on the organisation.

Amid all this there needs to be a strict code of practice – what the volunteer can do, and what they must not do! Confidentiality is paramount.

This is why at the end of volunteer training programme we have a pledge signing ceremony and ask for the commitment of a minimum of a one-year service period, and a minimum of a 4-hour shift per week.
Qualities and factors for success:
Some of the qualities that a volunteer must show are:
- patience and tolerance;
- being non-judgemental;
- being a good listener;
- to be able to befriend and make a difference to children and parents;
- and to build confidence and respect.

There are several Critical Success Factors in running a volunteer programme:
- The volunteer must feel that they are integrated into the multi-disciplinary team, and are able to give long-term continuity.
- Having enthusiastic leadership is important, as is having professional involvement and support.
- It goes without saying that the acknowledgement of the value of the volunteer in the multidisciplinary team is critical, if you are to have a committed and caring group.

Summing up:
Having a dedicated group of volunteers can make a tremendous difference to the running of a children’s cancer unit. They can help to lighten the load on the medical and nursing staff, and they can really make the visits to hospital for the children and their families seem far less onerous. But it is important to make sure that the volunteers that are taken into this role have the right personal characteristics, and are able to cope with all of the emotional stresses that they will have to face on an ongoing basis. This means that they must have the appropriate initial training, and then ongoing supervision and support to ensure that they stay committed.

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