

Volunteering at Hospice Georgina Overview and Application

Hospice Georgina Mission

Hospice Georgina is a caring community of trained volunteers dedicated to providing non-medical emotional, and spiritual support to all people in Georgina with a life-limiting illness, and to their families and caregivers.

Putting Yourself in the Picture

You believe that dying is natural and should be neither hastened nor prolonged. You value individual and social differences and do not pass judgment on others' lifestyle choices and beliefs. You treat clients, families, and other team members with respect, dignity, and compassion. If this describes you, you have strong potential as a Hospice volunteer. Training sessions are intensive and self-reflective. Team-building among participants, who share their wisdom and experience, is valued. Skills learned and practiced enhance your effectiveness and comfort levels. The work is both rewarding and demanding, time-wise and emotionally, so we also stress that self-care is crucial.

What Volunteers Can Expect from Hospice

Hospice Georgina offers volunteers moral support and debriefing at monthly meetings and individually as required. Hospice Georgina is committed to building a strong, mutually- caring team. We will keep you informed of Hospice activities through volunteer meetings, seasonal newsletter, and phone calls/emails. We provide opportunities to network and enhance/refresh skills at special workshops and lunch and learns. Please take the time to ponder the following questions and answer them for yourself. We may refer to some of these issues during the screening interview. Volunteering is a great opportunity to give back to your community. Thank you for your interest and compassion for others, and your willingness to share the person that you are with Hospice Georgina — for the benefit of those living through this emotional phase of life.

Questions To Ponder Before You Commit

- What skills, interests and experience do I bring to this work?
- Are my personal issues under control, so I don't project them onto others?
- Do I have a personal support system in place?
- Am I reliable and motivated?

• Am I able to support my client's belief system? Can I let go of personal agendas, values or needs so that I can be present for the client?

Volunteer Application Overview

Hospice Palliative Care

Historically, the term "hospice" originated in the Middle Ages during the Crusades. A Hospice was a place of refuge for the sick, the weary or the traveler seeking comfort and sustenance. Dr. Dame Cecily Saunders developed the modern concept of Hospice in 1967 in London, England. Today, Hospice Palliative Care refers to the active, compassionate care of those with a palliative diagnosis, where illness has progressed beyond medical treatment aimed at prolonging life.

Services Provided By Hospice Volunteers

Volunteers are the heart of the Hospice organization and contribute in a variety of ways including: visiting with clients in the community, keeping vigil with a client in the final stages of their life's journey, co-facilitation of bereavement support groups, office duties, special events, community awareness, governance, and many other important tasks. Volunteers are an integral part of the Hospice Care Team and work closely with staff.

All members of the Hospice Care Team are bound by strict confidentiality.

Volunteer duties fall into two categories that focus on supporting clients or focus on supporting the organization. Individuals can volunteer for more than one position.

Volunteer applicants fill out an application form detailing their skills, experience and areas of interest. Training programs vary depending on the desired role(s).

Supporting Clients

Visiting volunteers are required to complete a Hospice Palliative Care of Ontario 30-hour training program.

This training program is held in the spring and fall in Newmarket and virtually all throughout the year. After successfully completing the 30-hour client training program, volunteers in this category may offer the following:

- Emotional/social support to an assigned client in the community and his/her loved ones
- Companionship and a listening ear but not advice
- Running of small errands with or for the client, reading, cards or puzzles
- Sitting vigil with a client during the final stages of their life's journey
- Relief of caregivers for short time spans

Individuals interested in co-facilitating a bereavement support group are required to complete a separate training program. This training runs periodically throughout the year.

Supporting the organization

After an orientation, volunteers in this category generally enjoy performing tasks not intensively involved with clients. They may assist with the following:

- Board of Directors
- Special Events and Fundraising
- Office functions: library, reception, mail-outs, data-entry
- Community Education
- Tribute Committee/Memorial Ceremony

Application, Screening, Recruitment, and Training

Our clients are at a vulnerable stage in their lives and Hospice Georgina has an obligation to be sensitive and discerning when choosing volunteers for its training programs. Prospective volunteers are asked to fill out an application form, undergo a criminal record check, and provide two references. Suitable applicants will be invited to attend a personal interview with a staff member and references are followed-up. All Hospice Georgina volunteers receive an orientation to the organization. Suitable applicants are invited to attend training for specific volunteer positions.

A three-month probationary period will follow all of the volunteer training sessions.

The time commitment varies with the type of volunteer position.

For visiting volunteers, Hospice Georgina asks for a minimum of 3 to 4 hours per week commitment after training and for a one year minimum.

We anticipate a long and mutually rewarding association.

Benefits of Volunteering with Hospice Georgina

- Make a difference in people's lives
- Network with other volunteers with commitment to hospice palliative care
- Develop a range of skills and experience that can be used in everyday life
- Receive monthly updates and participate in additional training and development
- Attend Hospice Georgina's annual volunteer appreciation event
- Do your part in bringing about social change

Thank you for your interest in Hospice Georgina!

Please complete the attached application.



VOLUNTEED ADDUCATION

| Hospice Ceorgina Sharing The Caring | VOLONTEER AFFLICATION | | | | | | |
|---|--|--|--|--|--|--|--|
| The purpose of this questionnaire/application is to assist Hospice Georgina to match volunteers to appropriate assignments. Please note: You are <u>NOT</u> required to answer any questions below that you are not comfortable answering or may feel are inappropriate. All applications are kept strictly confidential and safeguarded against unauthorized access. | | | | | | | |
| Name: | | | | | | | |
| Address: | Apt. /Suite: | | | | | | |
| City: | Postal Code: | | | | | | |
| Home Phone: | Cell Phone: | | | | | | |
| Bus. Phone: | Ext E-mail: | | | | | | |
| Preferred way of being conta | acted: 🛛 phone 🖾 e-mail 🛛 mail | | | | | | |
| How did you learn about Ho | spice Georgina? □ Friend/relative, □ Newspaper, □ Internet | | | | | | |
| What has triggered your inte | erest in becoming an HG volunteer? | | | | | | |
| Please list 2 of your interest | s and/or hobbies: | | | | | | |
| Have you had any personal | experience dealing with end of life illness and/or loss? | | | | | | |
| What are your goals as an H | lospice Georgina Volunteer? | | | | | | |
| Please indicate which HG V | olunteer roles you might be interested in: | | | | | | |
| □ In home client visiting/res | pite for caregivers | | | | | | |

- $\hfill\square$ Working with the bereaved
- □ Driver (mileage reimbursed)
- □ Office support reception, filing, typing, mailings
- □ Event planning & fundraising
- Complementary Therapies (please note your modality)
- □ Board Member
- □ Arts and lifestyle services (please note your special talents, skills)_____

Are there any limitations that would prevent you from accepting an HG volunteer placement?

| Do you have any allergies? |
|---|
| Do you have any concerns visiting in a home where there may be: |
| pets? Yes No smoking? Yes No |
| Please list any special skills, certificates, education or qualifications, you think may help in a volunteer placement. |
| HG requires a minimum commitment of 3 to 4 hours per week, and expects the Volunteers to remain with the organization for a minimum of 1 year after training. Do you foresee any difficulty to this kind of a commitment? |
| When are you available? |
| Do you have a vehicle? I Yes I No |
| Volunteer's Emergency Contact: |
| Name: |
| Home Phone: Business/Cell Phone |

References:

Hospice Georgina requires 2 reference checks for all volunteers. Please list two people who have known you for a minimum of two years, other than friends or family members. We suggest current or former employers or volunteer supervisors.

Please complete all 4 sections of your reference contact information.

| Name | Relationship | Telephone | Email or Fax # |
|------|--------------|-----------|----------------|
| | | | |
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I confirm that the information on this application is true and accurate.

I authorize Hospice Georgina to contact my 2 listed references. A police check is also required.

| Signature: | | |
|------------|--------|------|
| Date: | day of | , 20 |

Staff Signature: _____

| | Date: | day of | , 20 | |
|--|-------|--------|------|--|
|--|-------|--------|------|--|