Hospice Volunteer Programs: The 5% Solution

Presented by
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Beth Carpenter and Associates

Desired Outcome:
A volunteer program that meets the needs of
YOUR hospice
YOUR patients and families
YOUR community

Today’s Objectives:
1. Identify the external environment for hospice volunteer programs.
2. Apply a problem solving process to identify your urgent targets for change.
3. Develop a recruitment/retention implementation plan.
I. The External Environment

A. CoPs related to Volunteers
B. Medicare Survey Interpretive Guidelines
C. Volunteering in the U.S—National Research Findings

CoPs - Volunteers

418.70 Conditions of Participation- Volunteers.
418.70 (a) Training
418.70 (b) Role
418.70 (c) Recruiting and Retaining
418.70 (d) Cost Saving
418.70 (e) Level of Activity

Selected U.S. Volunteer Stats
Sept. 2006

<table>
<thead>
<tr>
<th>Age</th>
<th># of Vols</th>
<th>% of Vols in age group</th>
<th>Med hrs/yr</th>
<th>% giving 100-499 hrs/yr</th>
<th>% who volunteer for 1 org</th>
<th>% who volunteer for 2 orgs</th>
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<td>8044</td>
<td>21.7</td>
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<td>22.7</td>
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<td>22.2</td>
<td>74.6</td>
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<td>48</td>
<td>27.0</td>
<td>67.0</td>
<td>20.9</td>
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<td>8519</td>
<td>23.8</td>
<td>104</td>
<td>38.8</td>
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Conclusions from Demographic Review

• Hospice Volunteers
  * are most likely to be 55+ years old
  * are most likely to give between 4 and 10 hrs service per month
  * are likely to do direct patient care (incl. bereavement)
  * are most likely to provide 17 contacts to 7 different patients/families annually

Conclusions from Demographic Review

• Potential NEW source of volunteers with above average time to give:
  * those with a religious organization affiliation
  * those with strong social or community service values
  * those not in the labor force
  * those over the age of 65

Conclusions from Demographic Review

• Tasks that these potential volunteers do for other organizations that might be transferable to hospice:
  * collect, prepare, distribute or serve food
  * provide professional or management assistance; serve on a board or committee
  * tutor or teach family members of patients
  * greet guests, usher or minister to the sick
What's Keeping Your Volunteer Program from Being Successful?

2. Problem Solving/Process Improvement Model

Familiar model to many organizations:
• Plan, Do, Check, Act = PDCA

We’ll focus on:
A. Plan
B. Do
With a few modifications and clarifications

Plan: Determine which areas are causing the problem

1) Gather relevant data
2) Assess your program’s current strengths and weaknesses
3) Define the problem
4) Develop effective and workable solutions
Gather Relevant Data

a. Complete a demographic analysis of your current program
b. Review recent survey results related to your volunteer program
c. Review recent monthly statistics re: the 5% requirement
d. Identify the characteristics of a successful volunteer program

Demographic Analysis

• Are there gaps between your current volunteer pool and where existing research says volunteers are most available?
• Where do opportunities exist for capturing more volunteers to provide more hours?

Survey Results

• What feedback are you getting from your surveyors on the success of your volunteer effort?
• What specific areas do they recommend upgrading (training, role, recruiting and retention)?
Estimate Your 5% Requirement For the Next 12 Months

Step 1-Determine Recent Paid Care Hrs Per Patient Day

Step 2-Determine Required Volunteer Hrs Per Patient Day

Step 3-Estimate Required Volunteer Hrs Going Forward

Step 1-Determine Recent Paid Care Hrs Per Patient Day

- In July-September, 91 calendar days:
  - ADC = 115, Total DOC = 10465
  - Total Paid Care Hrs/Month = - 3000–July, 2800–Aug., 3200–Sept.

**Therefore, Paid Care Hrs PPD = 9000/(115X91) = .86

Step 2-Determine Required Volunteer Hrs Per Patient Day

- Vol hrs required PPD = .86 X 5%
  = .043

- Vol hrs required in previous 3 months
  = .043hrs X 9000 patient days
  = 387 total hrs (approx. 130 hrs/month)
Step 3—Estimate Required Volunteer Hours Going Forward

Budgeted DOC X Recent Required Volunteer Hrs PPD (Step 2)  
= Estimated Required Vol Hrs for the Mo  
October Budgeted ADC = 125  
October Budgeted DOC = 3875  
October Estimated Vol Hr Req: 167  
(.043 X 3875 = 167)

Remember:  
This is ONLY an Estimate!  
Factors influencing actual requirement:  
• Variations in total DOC from budget  
• Variations in DOC by Level of Care  
• Actual hrs of direct care by paid staff compared to prior months  
• Variations in Staffing Levels (vacancies, PTO, changes in ratios of staff to patients)

Identify the Characteristics of a Successful Volunteer Program

• Describe the performance/behaviors in broad categories:  
  1. The volunteers  
  2. The volunteer management effort  
  3. The internal response to the volunteer effort  
  4. The hospice in the community at large
How to Identify the Characteristics of a Successful Volunteer Program

• Brainstorm
• Gather data from internal and external sources
• Describe in positive terms—the way things “should be” or “usually are.”
  – Examples:
    “Volunteers meet or exceed avg hrs per month service against a standard”
    “Program is meeting patient/family requests for volunteers X% of time”

2) Assess Your Program’s Current Strengths and Weaknesses

Strong--Improvement Needed--Weak

Your Strengths Are Clues to Eliminating Your Weaknesses!

• List your strengths
• Identify the factors that contribute to each of those strengths
• Look for commonalities among your strengths
Examples of Commonalities:
--Good relationships between volunteers and volunteer manager/dept.
--Community has a good impression of the organization
--Resources are always well designed whether internal or external

Focus on Potential Targets for Change

• Your “Improveable” Areas May Be Easier Targets for Resolution than Weaknesses (more “tweaking,” than “overhaul” needed).

• Your Weaknesses Are Where Your Biggest Gaps Are!

List Your Problem Areas: Improveable and Weaknesses
Prioritize Your Findings by Urgency to Change

- The things that must change IMMEDIATELY (< 90 days) so that the hospice meets minimum requirements
- The things that must change within 3-9 months so that the hospice meets other priority goals
- The things we can STAY DOING for the foreseeable future

Prioritize Your Findings: Urgency to Change

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<th>Problem Areas</th>
<th>Level of Urgency</th>
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Categorize Your Findings by Ease of Implementing Change

- The things that are EASIEST TO CHANGE
- The things that CAN CHANGE with Senior Management influence/intervention
- The things that COULD CHANGE but are likely to meet some resistance
- The things that WON'T CHANGE no matter how much of an obstacle they appear to be
Prioritize Your Findings:
Ease of Change

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Select Your Targeted Areas for Change

- Which areas are most urgent to change?
- Which areas are most urgent AND easiest to change?

Identify “Solution Team” for Each Target Area

<table>
<thead>
<tr>
<th>Problem Areas</th>
<th>Level of Urgency</th>
<th>Ease of Change</th>
<th>Target Area</th>
<th>Solution Team</th>
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Define the Problem

• For each target you’ve chosen to tackle:
  1. Assemble the Solution Team.
  2. Clearly describe “the way it is now.”
  3. Create a clear statement of the outcome you seek—the desired state.

Target: ________________________

• The Desired State:

• The Way It Is Now:

Target: Average Volunteer is Active for <= 6 months

• The Desired State:

  Average volunteer is active for 2+ yrs

• The Way It Is Now:

  Volunteer turnover is very high
Identify the Obstacles, Causes, Factors that Create the Gap
• The Desired State:
  • _________________________________
  • _________________________________
  • _________________________________
  • _________________________________
  • _________________________________
  • _________________________________
• The Way It Is Now:
  • _________________________________
  • _________________________________
  • _________________________________
  • _________________________________
  • _________________________________
  • _________________________________

Identify the Obstacles, Causes, Factors that Create the Gap
• The Desired State: Active for 2+ yrs
• Don’t feel welcomed in the office
• Wait too long for first assignment
• Team doesn’t tell them what’s happening with pt
• Aren’t informed when patients die
• Aren’t included in staff activities/support
• The Way It Is Now: Turnover very high in first 6 months

Keep asking, “Why Does it Happen? What Causes the Cause?”
• The Desired State:
  • Don’t feel welcome:
  • Wait too long for 1st assignment:
  • Volunteer office isolated
  • Few people say hello
  • Volunteers not routinely introduced to staff
  • Teams hesitate to assign volunteers
  • Teams don’t like time involved in 1st visit introductions
• The Way It Is Now:
Keep asking, Why Does it Happen? What Is the Root Cause?

- Volunteer office isolated
- Few people say hello
- Volunteers not routinely introduced to staff
- Easy in/out for volunteers
- Staff doesn’t know volunteers
- Staff doesn’t see volunteers
- Volunteers haven’t been introduced to staff
- Volunteers usually come in after staff have started work
- Teams in meetings do not disturb

If Helpful: Sort the “Causes” into Major Categories

- People
- Policies
- Procedures
- Plant
- Environment
- Measurement

Know When to Stop!

- When the process becomes frustrating
- When you begin to see causes that point to a solution—a way to bridge the gap
- When the cause is controlled by more than 1 level of management removed from the solution team
Develop Effective and Workable Solutions

a. Brainstorm solutions that will eliminate the causes

b. Prioritize solutions—in combination, most likely to succeed in achieving desired state workability, achievability, measurability, cultural acceptability

c. Define/describe the top solutions

Problem: Volunteer Turnover Very High

Solutions selected for development:
--Increase recruitment efforts of volunteers who have a “vested interest” in serving a hospice program
--Improve training process to include more information on the specific duties of various volunteer jobs
--Create a volunteer mentor program

Problem: Volunteer Turnover Very High

Expand volunteer job bank to include “event” projects and “chore” services
Create a more welcoming environment for volunteers when in the office
Develop a consistent process for patient care volunteers to incorporate them quickly into the team and team functions
Solution Description

Create a volunteer mentor program:
Any individual new to an organization, including a volunteer, can benefit from someone looking supportively over his or her shoulder, providing information, and reinforcing the values and value of the hospice.

Solution Description (cont’d)

• The presence of a volunteer mentor will ease the assimilation of the new volunteer, provide the mentor with a sense of accomplishment and worth, and enhance the credibility of the organization.
• The volunteer mentor program will include careful selection, training, recognition and support. The outcome should be extended service to the hospice by new volunteers and mentors alike.

Create An Implementation Plan

Communicate your intentions:
• Identify the problem
• Identify the desired state
• Identify the specific solution
• State the measurable outcome
• Include the name of the person responsible for managing the process
Create An Implementation Plan

Commit to the specific steps and timeline you will follow:
• Implementation Action Step
• Start Date
• Finish Date
• Action Step Leader
• Additional Support Needed

Create An Implementation Plan

Indicate the need for any new and/or unbudgeted resources; estimate expense, if possible:
• Personnel
• Equipment
• Supplies
• Other

Thank you for your attendance today!

For further questions, comments or suggestions:
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lserra@bethcarpenterandassociates.com

Visit our website and sign up for our newsletter:
www.bethcarpenterandassociates.com
Research Findings on Volunteers and Hospice Volunteers

1. Volunteering in the United States, 06/07
   www.nationalservices.gov
3. RWJF Final Gifts Hospice Volunteerism Study, 2000
   www.rjwf.org/reports/grr/030116s.htm

4. “National Hospice Volunteer Training Survey Results, 2007,” Hospice Volunteer Training Institute
   www.healproject.org

Where People Volunteer

8%--Healthcare
36%--Religious Entities
13%--Social Services
27%--Education
16%--Sports, Arts, Civic, All other
Main Activities for Volunteers

- 28%--Fundraising
- 25%--Collect/distribute food
- 21%--Perform general labor, chores
- 21%--Tutor/Teach

NHPCO Hospice Volunteer Demographics, 2005

- Estimated Volunteers: ~400,000
- % of Clinical Staff Hours: ~7%
- % Volunteers Providing Pt. Care: ~58.4%
- Avg Hrs Contributed Annually/Volunteer: ~40.1
- Avg # of Pt Care Contacts/Yr: ~17.3

Cromer Wood Johnson Foundation Hospice Volunteerism Study, 2000

- Hospice Volunteer Median Age: ~55 Yrs Old
- % of Hospice Volunteers >=65: ~30%
- % of Volunteers Providing Direct Patient Care: ~70+
- Mean # of Pts Served by Direct Care Vols/Yr: ~7
- Hrs of Care Provided Monthly by Pt Care Vols: ~10
Services that Hospice Volunteers Provide

• Direct Patient Care
  Transportation    Letter Writing
  Companion Services  Vigiling
  Respite Services   Chore Services
  Shopping           Telephone Support
  Pet Therapy        Patient Meal Assist
  Student Internships

Services that Hospice Volunteers Provide

• Bereavement Care
  Telephone Assurance
  Support Group Facilitation
  Letter Writing
  Bereavement Services Support
  Children’s Bereavement Support
  Pastoral Care Services

Services that Hospice Volunteers Provide

• Administrative Support
  Filing, Mailing, Copying
  Preparing packets for IDG Meetings
  Answering Phones
  Office/Medical Supply Inventory Service
  General Office Maintenance
Services that Hospice Volunteers Provide

- Community and Other Services
  Bereavement Bears, Knitting, other Crafts
  Speakers' Bureau
  Community Outreach, Health Fairs
  Fundraising
  Board and Committee Participation
  Management Services

Complete a Demographic Analysis of Your Volunteers

- Total # of Active Volunteers:
- # Providing >= 12 hrs in 12 mos:
- Median Age:
- # in Professional Internships:
- # Age 55-64:
- % >= 65:
- Total avg hrs/mo/volunteer—last 3 mos:

Complete a Demographic Analysis of Your Volunteers

- # of Volunteers by Length of Service:
  0-6 months:
  6-12 months:
  1-3 years:
  3-5 years:
  >= 5 years:
- # of volunteers who became inactive in the last year by length of service:
Complete a Demographic Analysis of Your Volunteers

- Top 10 Broad Categories of Service provided in last three mos by total hrs:
- Avg hrs/mo/volunteer in each category:
- # of New Volunteer Training/Orientations in last 12 mos:
- # of vol. hrs needed/mo—last 3 mos:
- # of hrs provided/mo—last 3 mos:

Characteristics of a Successful Volunteer Program

The Volunteers:
1. Understand the mission, values, goals of the hospice
2. Have a reason for serving/personal commitment to this kind of organization
3. Know what is expected of them
4. Perform their duties satisfactorily
5. Are dependable, affable, “a fit”

Characteristics of a Successful Volunteer Program

The Volunteer Management Effort:
1. Has a passion for the volunteer possibilities in the organization
2. Relates well to other staff and management
3. Promotes the use and usefulness of the existing volunteer force
4. Treats each volunteer as a precious gem
Characteristics of a Successful Volunteer Program

5. Creates opportunities for volunteer participation

6. Seeks continual input from mgmt and staff on additional ways volunteers could be utilized

7. Seeks and listens objectively to feedback from mgmt and staff about challenges in incorporating the volunteers into the day to day operations

8. Looks for potential volunteers everywhere

9. Speaks effectively and persuasively about the hospice and its volunteers to all audiences

10. Interacts with and participates in external organizations that use, promote and support volunteers and volunteerism

11. Is organized, professional and competent at volunteer management skills
   a.-recruitment
   b.-training
   c.-placement
   d.-record keeping/documentation
   e.-planning, scheduling, goal setting
   f.-recognition
Characteristics of a Successful Volunteer Program

Internal Response to Volunteers:
1. Integrates volunteers into the core of the organization
2. Appreciates the value of volunteers to meet conventional and non-conventional needs of the organization
3. Welcomes volunteer participation in any roles the volunteers are able to perform satisfactorily

4. Supervises volunteers as close as possible to the task being performed
5. Acknowledges the volunteers and their contributions at every opportunity
6. Fully understands the importance of maintaining the 5% level of volunteer participation

Characteristics of a Successful Volunteer Program

The Hospice in the Community:
1. Has a good reputation in the overall community
2. Has a good reputation among other health care providers and institutions
3. Publicizes its contributions to the community
Characteristics of a Successful Volunteer Program

4. Is considered a good employer
5. Develops and maintains relationships with other service providers

Examples of Obstacles, Causes, Factors

- Paid staff act impatient with volunteers
- Inconsistency in matching volunteers to task they are prepared to do
- Volunteer training too infrequent
- Workflow processes are ill-defined

Examples of Obstacles, Causes, Factors

- Can’t get paid staff to do volunteer training
- Our service area is too big
- Pool of potential volunteers very small
- “Bottom up” internal support for the volunteer program is lacking
More Examples of Obstacles, Causes, Factors

- Community reputation for services is not as good as competing hospice programs
- There's not enough room in office for volunteers
- Internal culture/norms around facing change
- Matrix management ineffective in the organization
- Volunteer manager has so many internal functions she doesn't have time to recruit