PROGRAM PROFILE: OVERVIEW

Updated October 2018

<table>
<thead>
<tr>
<th>Type of Program</th>
<th>Health and Wellness</th>
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<tbody>
<tr>
<td>Organization</td>
<td>Seniors Serving Seniors</td>
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<td>Community Served</td>
<td>Victoria</td>
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<td>Program Goal</td>
<td>Provides in-home visits on a weekly basis during convalescence by a specially trained volunteer who provides social support, encouragement and connections to community resources</td>
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<td>Services Provided</td>
<td>Initial assessment and assistance by Community Services Coordinator; Provides tangible support combined with social, emotional and practical support by volunteers, such as assistance with shopping for groceries and transportation to medical appointments</td>
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<td>Target Population</td>
<td>Frail and/or isolated seniors discharged from the hospital who lack social support and support from family members</td>
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<td>Staffing</td>
<td>1 Community Services Coordinator, 1 Volunteer Education Coordinator, 25 volunteers</td>
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<td>Program Strengths</td>
<td>Program can provide multiple types of support, Support tailored to the needs of the individual, Strong partnership with health authority</td>
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Program Description

Seniors Serving Seniors is a Victoria-based organization that runs a program called Return to Health, which provides support to seniors transitioning from (or in some cases, to) the hospital and who are isolated or lack social support. Volunteers provides practical support to seniors to ensure a smooth transition, social support, encouragement, and connection to community resources.

Most participants are referred to the program by the local health authority. How long Return to Health provides supports for, depends on the seniors’ needs, but it usually ranges from between one week and three months. The program does not provide home health care, home support, personal care and other similar services, as these are typically provided by the health authority. When participants first come in contact with the program they are given an initial assessment by the Community Services Coordinator, and participants are monitored on an ongoing basis to ensure their needs do not exceed the capacities of the program (when this does happen, they are referred to the health authority).

Return to Health started out in 1998 as a small volunteer program, and when Vancouver Island Health Authority learned about the program they approached Seniors Serving Seniors to form a partnership. As a result of this partnership, Vancouver Island Health Authority hired a nurse to coordinate the program, while Seniors Serving Seniors remained responsible for training the volunteers. After working for the program for many years, this nurse retired, which prompted Vancouver Island Health Authority to fund Seniors Serving Seniors directly, so they could hire their own Community Services Coordinator and manage all aspects of the program.
The role of the Community Services Coordinator is to provide the initial assessment and the necessary assistance for the participant to be supported by a volunteer. The Coordinator supports the volunteers, monitors participants and assists with tasks beyond the scope of a volunteer (such as assisting with banking and applying for benefits).

The other staff person in the program is the Return to Health Education Coordinator, who is responsible for training volunteers. Volunteers support participants with a number of different tasks depending on their needs. These can include providing transportation (to appointments etc.), helping with grocery shopping, getting the mail, connecting them with community resources, providing companionship and returning loaned medical equipment. Return to Health currently has 25 volunteers, many of whom are seniors themselves. Volunteers undergo a 15-hour training course (over five weeks) to learn about working with seniors, having good communication, navigating the healthcare system, and available community services. The training program is revamped every year to ensure it is up-to-date. Monthly meetings provide ongoing support for the program’s volunteers.

Funding comes from Vancouver Island Health Authority (for the Community Services Coordinator and for SSS to oversee the program), the United Way (for the Education Coordinator), and through Community Gaming Grants received by Seniors Serving Seniors

Impact

Return to Health provides support to isolated seniors and connects them with community resources to ensure their safety, well-being, and quality of life. Seniors transitioning out of the hospital receive practical support as well as social and emotional support.

The program helps to address a range of issues facing vulnerable seniors such as:

- social isolation – by providing companionship and encouraging participation in community programs;
- nutritional risk – by arranging grocery services and encouraging healthy meal options;
- financial security – by assisting seniors to apply for GIS, Pharmacare etc.;
- a safe living environment – by providing information on housekeeping services and suggestions for changes for a safer environment;
- transportation – by providing transportation to medical appointments and assisting with signing up for HandyDart services.

Return to Health has the potential to prevent or delay hospitalizations or residential care placements. The program currently serves approximately 150 seniors a year. According to the B.C. Ombudsperson, the cost of an acute care bed ranges from approximately $800-$2000 a day and a residential care bed is approximately $200 per day,¹ suggesting there is the potential for significant cost savings when seniors avoid being hospitalized.

Volunteers benefit from their contributions, as they are able to learn more about the healthcare system and community resources. Volunteers share that they feel empowered and positive about their ability to help, and connect with, other seniors.

**Strengths and Challenges**

Return to Health provides a wide range of supports to isolated seniors who have been discharged from the hospital. These supports are provided in the home and are tailored to meet the specific needs and situation of the participant. Vancouver Island Health Authority is a key partner in operating this program, and this is an unique example of a strong partnership between a community-based seniors service provider and a health authority.

Downloading of responsibilities (from government to community-based seniors’ services) can be a concern when it comes to local agencies providing in-home supports to frail seniors. Return to Health’s Community Services Coordinator is diligent in ensuring the program stays within its mandated scope as a volunteer service, and that the program does not provide health authority services or take on seniors whose needs exceed the program’s capacities.

Volunteers are essential for the success of the program. Return to Health sometimes faces challenges in recruiting and retaining sufficient volunteers. In addition, the role of the volunteer can be fairly intensive at times, so the program is structured to ensure volunteers have appropriate training and support. The Community Services Coordinator supports the volunteers and ensures the tasks being undertaken by them are appropriate, while having a dedicated Volunteer Education Coordinator ensures that volunteers receive the ongoing training and support they need.

“The story I picked to share today is Bob, an 84 year old and his volunteer Jennifer. He has been on his own for many years. He is suspicious of others and when we were first in contact with him he didn’t socialize or go out of his small flat. He had low income, wasn’t eating properly and was malnourished.

Bob required a slow approach to gain his trust. Jennifer helped him in a number of ways. She helped him to get better lighting in his dimly lit flat. She has brought him classical music CDs from the library that he likes – especially Mozart. She helped him get a new toaster-oven to make it easier to prepare food and they talked a lot about books: he loves reading and they have a mini ‘book club’ where she brings books, he reads, and they discuss them. She visits twice a week for 3 hours, less if he is not feeling well. So, after 1 ½ months, he agreed to go out for walks and drives to local attractions like Beacon Hill Park and they listen to piano music (have you seen the pianos around?). He is softening socially and is starting to trust. Now, after 3 months, his diet has improved and his mood is better.

Our Coordinator found that he qualified for rent subsidies and housekeeping service, and they helped him apply for both.

Jennifer, who is retired, tells me she loves helping Bob (even though he is bit aloof). As she gets to know him, she finds that she really looks forward to their visits. And she can see how he has improved!”

*Story of Return to Health Participant told by Program’s Volunteer Education Coordinator*