



HAND to HEART

**A Seniors Social Connection Program
for your Local Government Area**



ConnectGroups
helping support groups & individuals

Beyond Bank
AUSTRALIA

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Introduction

Background

Established in 1983, ConnectGroups is the Peak Body for peer support in Western Australia and is the voice for over 690 peer Support Groups across the state. Support Groups allow people dealing with stressful life situations to share their experiences and to offer emotional and practical support to one another.

ConnectGroups developed the Hand to Heart program in 2018 within the City of Melville (CoM) following an identified gap in service provision to seniors in the Local Government Area (LGA). Aiming to empower isolated older people to re-connect with their local community, Hand to Heart was built around existing services,

community groups, and activities, and ConnectGroups worked collaboratively with the CoM and local service providers to reach at-risk older people and to identify suitable connections for them within the community.

Following a one-year funded pilot, the program demonstrated effectiveness in reducing senior isolation, particularly in reaching individuals falling through the gaps, and ConnectGroups continued to maintain the program through annual fundraising activities.

While ConnectGroups has continued to operate Hand to Heart within the CoM, it is a program that is best placed to be led and run by LGAs as part of an age-friendly plan. Hand to Heart is a cost-effective program that can be added to new or existing LGA volunteer programs, with a good return on investment for local constituents.

It is ConnectGroups' vision to see the Hand to Heart program replicated in LGAs nation-wide, improving the mental health and wellbeing of older people, and keeping Australian seniors socially and purposefully connected within their local communities.

ConnectGroups would like to acknowledge Beyond Bank, who believed in this vision and kindly funded the development of this resource to support the delivery of the Hand to Heart program across Australia.





Utilising this Resource

This resource is a step-by-step guide to setting up the Hand to Heart program in any LGA in Australia. The aim of the resource is to equip LGAs with the knowledge and skills to effectively set up and deliver a sustainable social connections program for older people in their local community.

Hand to Heart is a program targeted at older people who have become isolated and/or disconnected from community due to adverse factors including:

- Loss of a loved one
- Living alone
- Injury or ill-health
- Cultural diversity
- Retirement
- Recent relocation

Hand to Heart empowers older people to create meaningful long-term relationships with other members of the community and to re-discover a sense of purpose

and belonging.

The program consists of a series of home visits by trained volunteers who engage with an older person to identify their interests and barriers to connection, and then provides links to local services, community groups, and activities which match their areas of interest.

Hand to Heart differs from other home visiting programs in that it is not a befriending program, but rather it encourages older people to build relationships and connections outside of the home. It considers the prevalence, causes and consequences of social isolation and identifies strategies for promoting social connection and inclusion.

The program has been designed as a place-based initiative that draws from local resources available within the community. It is an effective and low-cost program operated predominantly by a

strong team of volunteers, and it requires minimal support or resourcing.

Australia has an ageing population, with over 15% of Australians aged 65 years and over. It is estimated that one in five older Australians are socially isolated, and social isolation is associated with increased mortality and poorer health behaviours.

It is essential that we keep our older community members socially connected



for the long-term benefit of both their physical and mental health.

This resource supports the implementation of Hand to Heart in LGAs across Australia, to decrease senior social isolation, increase community connection, and improve the overall quality of life for older people Australia-wide.

It is recommended that this resource be used by LGA Volunteer Coordinators, Program Coordinators, and/or Community Development Officers who will lead the local development and delivery of the program.

If your LGA is interested in implementing the Hand to Heart program, please contact ConnectGroups who would be pleased to engage with you and share the program's branding and templates.





Is Hand to Heart Right for your LGA?

Hand to Heart is a program replicable by any LGA in Australia, however the program will work most effectively for LGAs that have certain procedures and resources already in place. It is important to assess whether Hand to Heart is right for your LGA before you begin to implement the program.

See to the right some essential and desired pre-requisites. While it is possible to implement Hand to Heart without these pre-requisites, LGAs who can meet these requirements will be more likely to operate a sustainable program with better outcomes for community.

Essentials:

- The desire to operate a long-term, sustainable program, and not just tick an age-friendly box
- A central space to meet and debrief with volunteers
- A Volunteer Coordinator with responsibility for the program and to manage volunteers (this can be a voluntary position)
- A budget for operating and marketing costs

Desired:

- An existing volunteer database
- An existing directory of local clubs and community groups
- A strong relationship with local community groups and service providers





Part 1: Setting Up the Program

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Creating a Database

In order to make effective referrals for Hand to Heart clients, you will first need to create a comprehensive database of local community groups, services, activities, and special interest groups that you can easily search, filter, and extract data from.

The database can be created using CRM software, an online directory platform, or through an excel spreadsheet with suitable headings and filters.

ConnectGroups utilises [Survey Monkey](#), a popular online survey platform, to collate data for each group or activity, and then exports the information to an excel spreadsheet which the Project Coordinator can easily navigate to make suitable referrals.

It is also suggested that you assign a category to each entry, allowing for better search capability when making a referral.

On the next page you'll find some examples of suggested data to capture and suggested categories you can use to sort your listings.

A survey template is available from ConnectGroups.





Identifying Services, Groups, and Activities

Suggested Data to Capture:

- Name of group/service/activity
- Main contact person
- Contact Details: email, telephone
- Group/Service description
- Age Eligibility
- Target gender (if applicable)
- Meeting times
- Meeting location
- Cost to join (if any)
- Disability access
- Any other eligibility requirements

Suggested Categories:

- Social
- Exercise
- Health
- Mental Health
- Financial Services
- Accommodation
- Food
- Legal Advice
- Transport
- In-Home Care Services
- Disability
- Dementia
- Other

As an LGA, you are well positioned to identify local services, groups, activities, and special interest groups. Many LGAs already have a directory of local clubs and community groups in their catchment area which is a great starting point for your database. If you are using a pre-existing directory, it is imperative to ensure that the contacts listed are still active and that their details are correct.

Listings in your database should be groups and services that you know to be friendly and welcoming environments for older people. This means having a main contact person who will ensure that new group participants are properly introduced to the group, that the group is safe and accessible, and that it is inclusive for older people from all backgrounds.

It is recommended that you contact the group to let them know about the Hand to Heart program and that you are interested in including them in your database, to ensure that they are accepting new

participants, and that their services are suitable for older people.

Please see below for suggestions of how to identify services, groups, activities, and special interest groups.

My Aged Care

My Aged Care is a great starting point to learn about the wide range of aged care services and packages available to Australian seniors. It is essential to have a basic understanding of what government-funded services are available to older people, the assessment and application process, and how you can support your Hand to Heart clients through this process. Navigate the information sheets and resources available via the [My Aged Care website](#), speak with a representative, or enquire about any upcoming workshops that will improve your knowledge of My Aged Care.





Aged Care Service Providers

Conduct an environmental scan of local aged care providers that you can suggest for Hand to Heart clients once they have been approved for a Home Care Package (HCP) or for the Commonwealth Home Support Programme (CHSP). Each provider offers services differently and at different costs so it is important that clients make a choice that aligns with their priorities, budget and location.

Senior Citizen Centres

Local senior citizen centres are great spaces for Hand to Heart clients to meet new people and join in activities, luncheons, and outings.

Community Centres

Most LGAs will have one or more local community centres, which provide meeting spaces for local clubs, groups, activities, or special interest groups. Speak directly with the centre coordinator about accessing a contact list of groups who utilise the centre so you can then contact each of them directly to find out their suitability for Hand to Heart clients.

Leisure Centres

Leisure and fitness centres often offer social exercise programs for older people such as aquatic fitness and/or light aerobics programs suitable for people with health issues or mobility problems.

Local Churches

Many churches offer not only prayer and worship sessions, but also social activities open to all community members, regardless of faith. Contact churches in your area to see what services and activities they offer, and check if there is any eligibility requirements.

Peak Body Organisations

Peak Body organisations (ie. [Cancer Council](#), [Heart Foundation](#), [Lung Foundation](#)) offer a range of services, programs, and groups for people with specific conditions or needs. Search for your local or state Peak organisations and scope what is available in your LGA for Hand to Heart clients who might need specific support.

Libraries, Galleries, and Museums

Local libraries, art galleries, and museums may offer free or discounted tours for older people, social and educational activities, and events.

Volunteer Opportunities

Volunteering is a great way for people to find a sense of purpose and fulfillment while contributing to a cause. Get in touch with local volunteer centres to see what volunteer opportunities are available in your local area that might be suitable for Hand to Heart clients.

Be thorough in your search and think outside the box. Not all older people are going to be interested in bingo and knitting! Hand to Heart has seen clients with a diverse range of interests including French conversation classes, creative writing, sailing, painting, archery, cycling, and more. It is likely that even with a comprehensive database, you will still receive requests for activities that are not on your list, so be prepared to conduct additional research to find something specific for your clients.





Finding Champions and Identifiers

Running an effective Hand to Heart program requires building and maintaining strong relationships with organisations and service providers who are well placed to refer vulnerable people on to the program. They are what we call *Identifiers*.

Identifiers are those who communicate with older people on a regular basis, whether it be in their home or in a community space such as a library or pharmacy. They are your champions in identifying older people who may be at risk of social isolation and referring them on to the Hand to Heart program.

Examples of potential Identifiers:

- Local librarians
- Local pharmacists
- Aged care service providers
- Meals on wheels staff members
- Regional Assessors

Identifiers may also be contacts listed in your database of services, groups, activities, and special interest groups. Determine which contacts will be effective champions for your Hand to Heart program and let them know that while you will be referring clients on to them for support, they are also able to direct people looking for additional support through to the Hand to Heart program.

Meet with potential identifiers individually or host a group information session to present the Hand to Heart program, who is suitable for the program, how the program works, and how they can refer people on to the program.

Provide identifiers with a link to an online referral form, flyers to promote the program, and referral cards to provide to those interested in connecting with the program. More information on these promotional materials can be found in [Part 4](#).

Creating your Volunteer Team

Volunteers are the backbone of Hand to Heart. They are the face of the program, and Hand to Heart's point of difference – the human connection. It is essential to build a team of friendly and reliable volunteers who will represent your LGA and Hand to Heart in the right way.

As an LGA, you may already have a large team of volunteers that you can draw from. Select those who are interested and suitable for Hand to Heart and bring them across to the program.

If you do not have an existing team of volunteers you will need to recruit new volunteers specifically for Hand to Heart.

Hand to Heart volunteers do not need any specific qualifications for the role, but they do need to be friendly and approachable and have an empathetic nature. Volunteers need to speak fluent English, have strong communication skills, and be confident interacting with people from all walks of life.





As is the case with most group environments, a *diverse* team of volunteers is a *strong* team of volunteers. It is encouraged that you recruit volunteers from a wide range of ages, genders, and cultural backgrounds.



Some Hand to Heart clients will request a visit from a volunteer with a similar background to them, others will be interested in meeting someone from a different background. Having a diverse team of volunteers will make the matching process much easier.

It is recommended that you select volunteers who live locally, or who know your local area well, as they will have more familiarity with local groups and activities and may be able to provide additional information to the older person they are visiting.

Hand to Heart is an appealing program to volunteers because they can experience a sense of fulfillment with minimal time

commitment. While most volunteer programs require a fixed weekly commitment, Hand to Heart works around client and volunteer availability, allowing more flexibility for the volunteer and the opportunity for the volunteer to take time off from their role when needed.

Some Hand to Heart volunteers provide one or two visits per week, others only once a fortnight or once a month. This is a great option for volunteers who have the desire to contribute but need to work around a busy or unpredictable schedule.

Writing a Volunteer Description

The Volunteer Description is used to advertise the volunteer role; it provides a summary of the volunteer position and what skills volunteers require to be suitable for the role.

Your Volunteer Description should include:

- Position Purpose
- Position Responsibilities
- Competencies Required
- Desirable Skills
- Qualifications/Licenses





Where to Advertise for Volunteers

There are multiple platforms available for you to promote your Hand to Heart volunteer position. You will likely need to tweak each advertisement depending on the promotional platform. For example, promoting on social media is more effective with eye-catching graphics rather than lengthy wording.

See below some suggested advertising platforms.

- Your website
- Social media platforms
- Newsletters
- Flyers in your LGA office
- Volunteering Australia
- Local volunteer centres
- Flyers at local community centres and Community Resource Centres
- Seek Volunteer
- Local newspapers

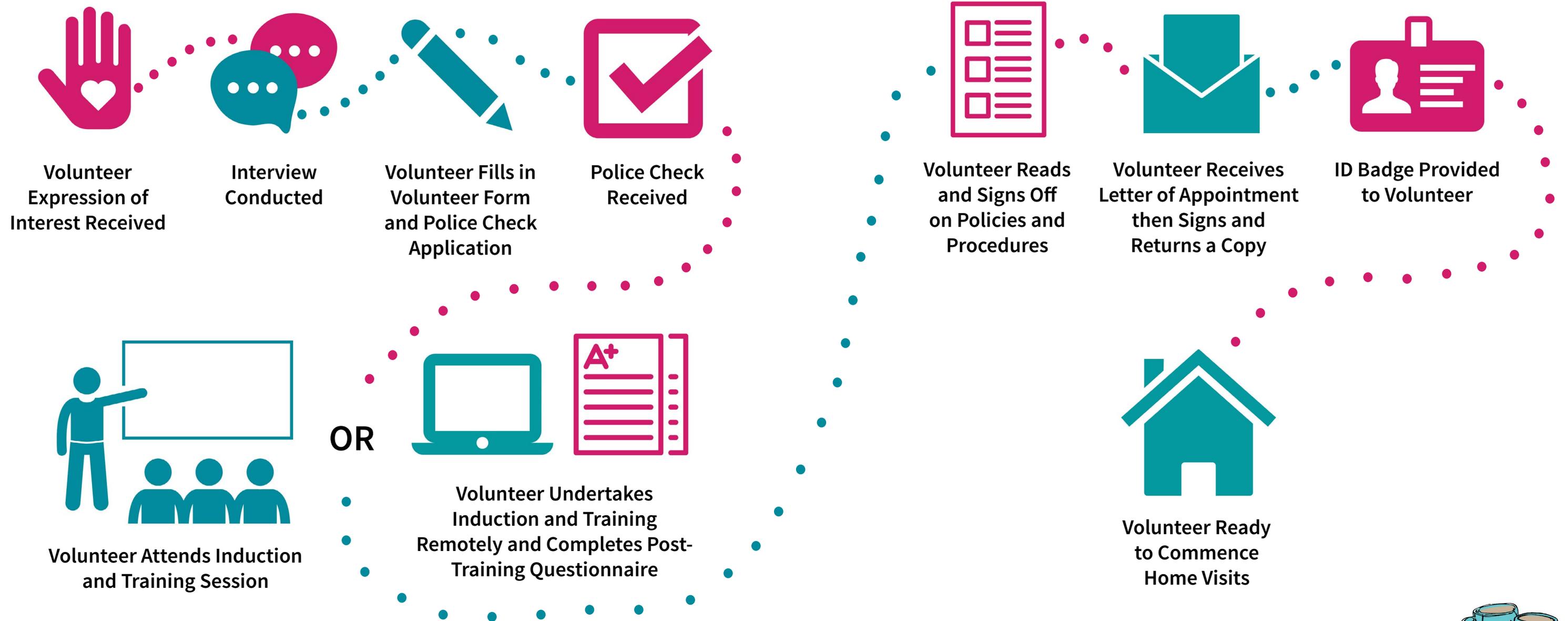
Adverts should have a positive emotional appeal, engaging volunteers by showing them the positive outcomes that can be achieved from their contribution.

Graphic adverts, short videos, volunteer features, and good outcomes stories from Hand to Heart clients are examples of how to promote the volunteer positions.

See adjacent page for some examples of graphic adverts previously used to promote Hand to Heart volunteer positions.



The Recruitment Process





Interviewing Candidates

It is important to interview volunteer applicants to get a sense of their character and suitability for the role, but also for the applicant to get a sense of the organisation, and to gain a better understanding of the Hand to Heart program and their role as a volunteer.

Interviews can be conducted in person, over the phone, or via video conferencing platforms.

Interview questions should be designed to provide you with an introduction to the applicant, their personality, skills, and experience.

The questions need to help you understand what the applicant hopes to gain from their volunteer experience, as this is information you can use to help keep your volunteers engaged and fulfilled during their time with your LGA, and ensure long-term volunteer retention.



Suggested Interview Questions:

- Why do you want to volunteer for the Hand to Heart program?
- Do you have any previous volunteer experience? If so, what were the best and worst aspects of the position?
- Do you have previous experience that relates to engaging with older people and gathering specific information?
- Do you have any special skills you would like to utilise as a volunteer?
- Are there any tasks that you do not want to do as a volunteer?
- How much time would you like to volunteer?
- What do you hope to gain from your volunteering experience?





Screening Procedures

All volunteers require appropriate screening checks to ensure a safe environment for your LGA, staff, volunteers, and Hand to Heart clients.

It is recommended that your LGA conduct a reference check and apply for a Police Clearance Certificate for all volunteer applicants. These processes are designed to help ensure that the right people are chosen to volunteer with older people.

Police Certificate Validity

A Police Certificate is considered a 'point in time' check only, which means the results only reflect police records on the date and time the result is released. Charges or convictions that occur after the Police Certificate result has been issued are not captured.

Although there is no standard timeframe that a Police Certificate result is valid for, because the Hand to Heart program involves in-home visits to seniors it

is recommended that you align your Police Certificate Policy with [The Commonwealth Age Care Act 1997](#). The Act states that a Police Certificate no more than three years old must be held by people who have unsupervised access to care recipients in Commonwealth funded aged care facilities or when providing in-home visits.

Addressing Convictions

Screening requirements should be explained to volunteer applicants during the recruitment process and you should advise applicants that if a conviction is identified as a potential risk, your LGA has the right to reject their application.

In some cases, a past conviction will be of sufficient gravity to exclude the individual from volunteer positions, however there will be situations where a past conviction does not present a risk to your LGA.

LGAs will need to assess whether the criminal history of an individual precludes

them from a volunteer position, and this is dependent on your LGA's policy, the nature of the position, and the specific criminal history of the person.

Individuals can apply for a Police Certificate online or via Australia Post at a discounted price. If an LGA wants to fund and order Police Certificates for their volunteers at a discounted price they will need to refer to their State or Territory specific agreements.

Record Keeping

Your LGA must have policies and procedures in place to demonstrate suitable management and monitoring of the Police Certificate requirements for all volunteers. This includes, for example:

- three-year Police Certificate renewal procedures; and
- appropriate storage, security and access for information recorded on a police certificate

Police Certificates remain the property of the volunteer. Should you wish to retain a copy of the certificate, you must seek permission from the volunteer to do so.

Rather than keeping copies of the Police Certificates on file it is recommended that you keep a register (i.e. Excel spreadsheet) of the volunteers' Police Certificate information (volunteer application number, personal details, etc.) as well as the consent form signed by the volunteer.





Volunteer Induction

Volunteers are required to undertake a thorough Hand to Heart induction and training session which provides essential information on roles and responsibilities, processes and procedures, and health and safety. The induction and training can be conducted in person, or remotely via an interactive PowerPoint Presentation.

In-person training is delivered by the Volunteer Coordinator in small group sessions via a PowerPoint presentation. In-person is the preferred option because volunteers will have a chance to meet with one another and develop a relationship prior to conducting home visits together.

If volunteers undertake the induction and training remotely, they must complete a post-training questionnaire to demonstrate that they have completed and understood the content.

An induction pack is available from ConnectGroups.

Policies and Procedures

It is essential that you provide volunteers with Policies and Procedures which they must abide by when volunteering for your LGA. Policies communicate the standards expected of volunteers, and provide guidance, consistency, accountability, and clarity on how your LGA and the Hand to Heart program operates.

Procedures ensure the safety of both your volunteers and Hand to Heart clients and provide a roadmap for volunteers as to their role and responsibilities, and what actions they should take if incidents occur.

ID Badges

All Hand to Heart volunteers need to be provided with identification badges which they are required to wear when they conduct a home visit.

Badges are a safety measure in that older people receiving a visit can confirm by the Hand to Heart branded badge that the person visiting them is an official volunteer and that they are not allowing a stranger to enter their home.

Prior to each visit, the Hand to Heart Volunteer Coordinator notifies the older person of the names of the people who will be visiting them and that they will be wearing ID badges for recognition.

It is recommended that you take head shot photos of your volunteers on the day of their induction for their ID badges.





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Receiving a Referral

Hand to Heart referrals come in from three different sources:

Self-Referrals

Older people who have identified that they are feeling socially isolated can self-refer to Hand to Heart. When receiving self-referrals, speak with the person directly to capture their required contact details, conduct a home and health assessment, and arrange a home visit.

Identifiers

As mentioned in [Part 1](#), identifiers are those who communicate with older people on a regular basis, such as service providers, community organisations, and aged care workers. When you receive a referral from an identifier, you need to request the older person's contact details and a summary of their support requirements. Then, contact the older person directly to conduct a home and health assessment and to arrange a home visit.

Family and Friends

An older person's family members and/or friends may contact you, concerned that the person is feeling socially isolated. Depending on how close the family member/friend is with the person, and if they would like to arrange the visit on the older person's behalf, you can either:

- Request the older person's contact details from the family member/friend and then speak directly with the older person to conduct a home and health assessment and to arrange a home visit; or
- Conduct the older person's home and health assessment with the family member/friend and arrange a home visit, at which the family member/friend will be present.





Capturing Client Contact Details

When you receive a Hand to Heart referral, you must capture the client's contact details and required information. You can utilise ConnectGroups' Hand to Heart Client Information Form to capture this information, or utilise suitable database software if available.

This information is kept confidential and only the client's name and home visit address are shared with the volunteers providing home visits.

Information to capture for each client:

- Name
- Date of Birth
- Home visit address
- Telephone number
- Email address (if applicable)
- Next of kin contact details
- Availability for home visits



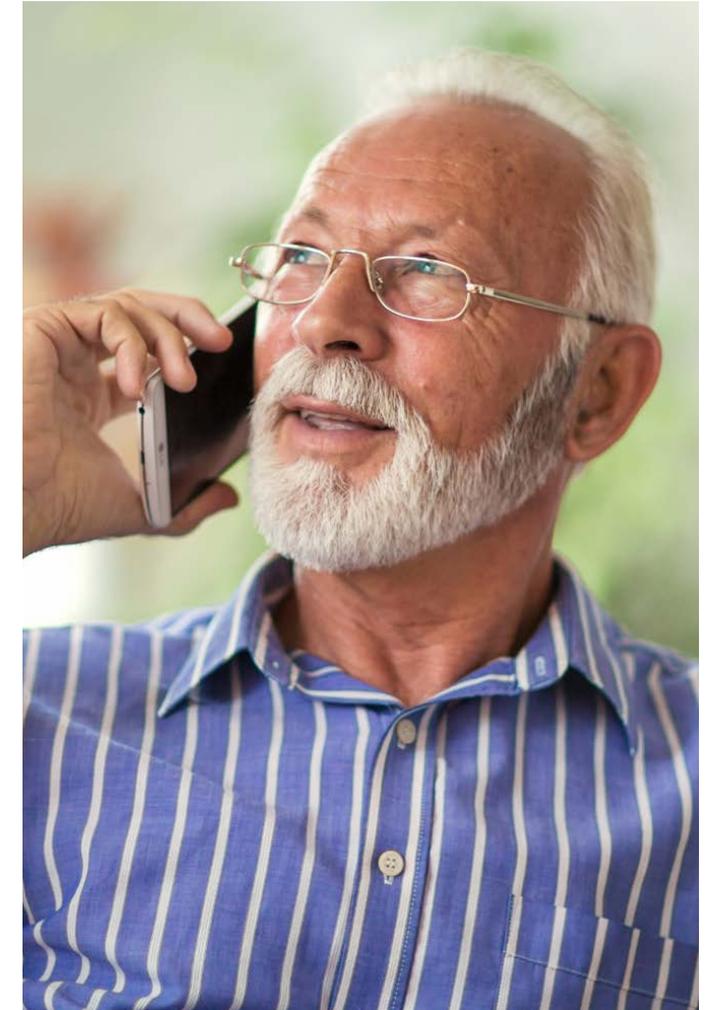
The Home and Health Assessment

Home and health assessments are conducted over the phone with the client, or with a family member or representative. This is actioned immediately after capturing the client's contact details.

The purpose of the assessments is to:

- Determine whether Hand to Heart is suitable for the person
- Ensure the house is safe to enter
- Identify any hazards within or surrounding the home
- Capture essential information volunteers need to be aware of before entering the home

Advise the client that you need to take them through a home and health assessment, and that the process will take approximately ten minutes to complete.





Home Assessment Questions:

- Do you live on your own? If not, who do you share your home with?
- Do you have any pets at home? If so, can they be put outside or in another room during the volunteer visit?
- Will there be parking available for volunteers, and is it easy to find?
- Are there any stairs or slip hazards near the entrance of your home?
- Are there any gates or fences surrounding the property?
- Will you be able to open the door/gate for the volunteers when they visit?
- Will anyone else be present during the home visit?
- Is there any other information our volunteers should be aware of before they visit?

Health Assessment Questions

- Do you have any health or mental health conditions? If yes, please let us know any essential information.
- Are you taking any medication or drugs? If yes, are there any side effects we should be aware of?

Following both assessments, you need to determine whether the client can receive Hand to Heart home visits.

What makes a client unsuitable for Hand to Heart?

Does not reside in your LGA

While you can still offer the program to surrounding regions, if your volunteers are local to your LGA, they may not wish to travel to outer regions to provide home visits.

Is under the age of 50

As a program specifically designed for older adults, your directory of groups and services may not be suitable for people under the age of 50

Has complex mental health needs

Clients with complex mental health conditions will likely need more than the social support that Hand to Heart can provide, such as counselling and/or links to mental health Support Groups. Additionally, volunteers are not trained to provide mental health first aid to clients.

Is in the advanced stages of dementia

Unless the client has a carer or family member who can support them during home visits, Hand to Heart does not cater for people in advanced stages of dementia. People with dementia may experience confusion and anxiety with new people entering their home, and volunteers are not trained to recognise and respond to dementia symptoms.

If a client is unsuitable for Hand to Heart home visits, you can still provide them with links to information and services over the phone. Please refer to [Useful Links](#) section of this resource for additional services available to older people.





Visit Procedures

1. Booking the Visit

Based on the client's availability and any preferences they have for volunteers, identify two suitable volunteers to conduct the home visit and contact them to confirm their availability. It is recommended that you give volunteers at least one week's notice where possible so they do not have to cancel prior commitments.

Once two volunteers have been identified, call the client to confirm the date and time, and the names of the volunteers providing the visit. Let the client know that the volunteers will be wearing Hand to Heart ID badges with their names displayed.

Send an email confirmation to the two volunteers, advising the visit date and time, the client's name, and the address. This allows for volunteers to prepare directions and familiarise themselves with the area ahead of time. Include in the confirmation any essential information

captured during the home assessment ie. Narrow steps at the entrance; and remind the volunteers to wear their ID badges during the visit.



2. Preparing the Paperwork

Volunteers are required to complete a Feedback Report during their visit, capturing essential information about the client's needs, interests, and any potential barriers to social connection.

The Feedback Report can be provided to volunteers in one of two ways:

- One of the volunteers to collect it prior to the visit. **Note:** *This will require a central space for you to meet ie. council office or a local community centre*
- Send through an electronic copy for one of the volunteers to print from home. **Note:** *This option is only suitable for volunteers who have a printer available.*

Alternatively, during induction, provide your volunteers with multiple copies of forms and replenish as needed.

3. Visit Reminder

Provide a reminder call to the client 24 hours prior to their scheduled visit. The reminder ensures the client is prepared for the visit and that nothing has changed since the time of booking. It is an opportunity to re-confirm the client's address, remind them of their volunteers' names, and to confirm they are feeling well for the visit.





4. The Home Visit

Upon arrival at the premises, volunteers must wait until their partnered volunteer arrives before entering the home together. They must introduce themselves as Hand to Heart volunteers representing your LGA and have their ID badges clearly displayed.

During the one-hour home visit, volunteers address a series of questions and complete the Feedback Report based on the client's responses.

One volunteer may wish to scribe while the other volunteer leads the conversation, or volunteers may prefer to both focus on the conversation and complete the Feedback Report following the visit.

Provided all of the questions are addressed, volunteers are welcome to proceed in whichever style feels most comfortable to them.



On conclusion of the home visit, volunteers should inform the client that your LGA will be in touch with them to schedule a follow up visit. Volunteers must leave the home together and remind the client to lock their front door as they leave.

One volunteer must contact your LGA to advise the visit has been completed and that they are leaving the premises.

5. Debrief

A debrief with one or both volunteers is conducted following the home visit. The debrief can be completed in one of two ways:

- One or both volunteers meet with you following the visit to return the Feedback Report and debrief with you. **Note:** *This will require a central space for you to meet ie. council office or a local community centre*
- One volunteer scans or emails you the completed Feedback Report and you then contact each volunteer individually to debrief over the phone.

The debrief is an essential step, as it allows you to clarify any information provided in the Feedback Report and to ensure all went well during the visit. It also helps you to maintain a more personable relationship with your volunteers and ensures they feel supported.

Questions to address during the debrief:

- Were there any issues faced by volunteers during the visit?
- Did the volunteers work well together?
- Did the volunteers connect with the client?
- Were there any hazards at the entrance or within the home that were not identified during the home assessment?
- What dates and times would suit the volunteers for a follow up visit?





Questions for Volunteers to Address During the Home Visit

What services/support is the person already receiving?

This includes Home Care Packages (HCP) and Commonwealth Home Support Programme (CHSP), carers and support persons, and any social activities and services the client is currently engaged with.

Does the person have their own vehicle?

If they do have a vehicle, how far are they capable and comfortable to drive? This information will help you to determine if you need to identify transport services for the client.

If the person does not have their own vehicle, do they have access to public transport?

How far is the public transport from the person's home? Do they feel comfortable in accessing public transport?

Is the person capable of walking unassisted?

Do they use a walking frame? Will they need disability access when attending social activities?

Does the person have any chronic health conditions?

You can link clients with chronic health conditions to suitable services and Support Groups which can provide self-management information and resources.

Does the person have any specific interests and/or hobbies?

List as many interests as the client can think of. If the client has trouble expressing interests and hobbies, volunteers should ask the client about what activities they enjoyed in the past. Through Hand to Heart, they may be able to re-connect to activities they enjoyed when they were younger.

Is the person financially able to access paid services if required?

Hand to Heart aims to connect older people to free activities wherever possible, however some special interest groups require an annual membership fee or regular payments. Where appropriate, volunteers should enquire if the client is able and comfortable to access paid services and activities if no free options are available.

Would the person be willing to pay a gold coin donation to attend a community group?

Many local community groups charge a gold coin donation to cover expenses for tea, coffee, and biscuits. Volunteers should ask the client if they are comfortable to pay a gold coin donation to attend a group.

What days and times is the person available to access activities?

Older people may have frequent appointments and/or in-home services that you will need to work around when identifying potential social activities. Create a picture of what the client's average week looks like so you can determine what days and times they are most isolated and identify activities that run during those times.

Is the person culturally and/or linguistically diverse (CaLD)?

Identify any cultural or language barriers that could impact the client's ability to make social connections. You can then source suitable services and activities for CaLD clients, such as multicultural and intercultural groups, language classes, and interpreters.



Safety Considerations During a Home Visit

It is imperative that volunteers are well-versed on Hand to Heart safety procedures when conducting a home visit.

Occupational Health and Safety procedures are included in the volunteer induction, and it is also recommended that you provide a one-page breakdown for volunteers to have on-hand during visits.

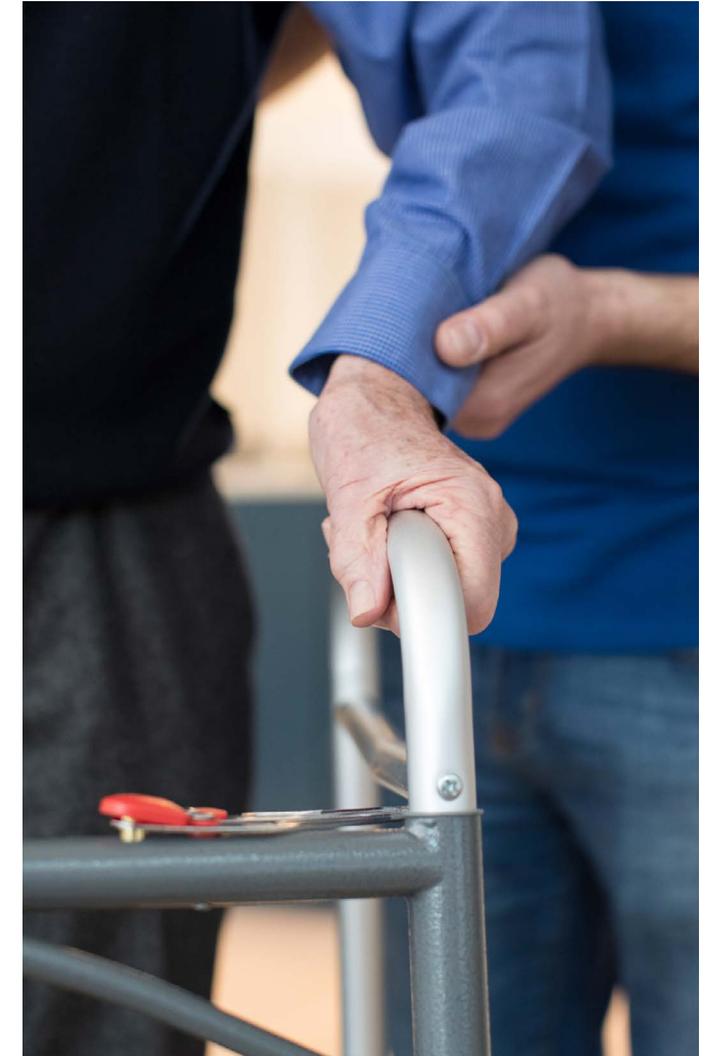
A one-page breakdown of safety procedures is available from ConnectGroups.

Key safety considerations:

- Volunteers are required to enter the home and leave the home together. If one volunteer arrives at the premises prior to the other, they must wait until their partnered volunteer arrives before proceeding with the visit. Likewise, if one volunteer needs to leave the visit early, their partnered volunteer must leave with them.
- Volunteers must only perform duties articulated within their role description. Volunteers should not perform any cleaning, maintenance, heavy lifting, or other duties that are not within their role.
- Volunteers must not provide medical advice or counselling to the client. If the client requests medical advice, volunteers must recommend that the client speak with their GP.



- If volunteers feel it is not safe to enter the home, or if they feel unsafe while within the home, they are to immediately leave the premises together and inform your LGA.
- If during a visit the client requires urgent medical attention, volunteers are to immediately call 000, wait with the client for an ambulance to arrive, and inform your LGA so that you can contact the client's next of kin.
- It is not within the volunteer's role to provide first aid. If volunteers are not comfortable calling an ambulance, or waiting for the ambulance to arrive, a representative from your LGA must report to the premises and wait in their place.





Visits External to the Home



Considerations for external visits:

- Is there free parking available for the client and the volunteers?
- Is the venue accessible and easy to find?
- Does the venue require purchases ie. If meeting at a café, you may be required to purchase a coffee.
- Is the venue suitable for all weather conditions? ie. Is there an undercover area in case of rain?
- Is the venue likely to be crowded or noisy?

It is recommended that you do not arrange a visit at a café or restaurant which requires purchases, as this may put your volunteers in the difficult situation of having to purchase something for themselves and potentially offering to purchase something for the client.

Hand to Heart visits can be conducted outside of the home upon request. Some clients may be uncomfortable sharing their home address or having volunteers entering their home, in which case you can suggest to the client that they meet the volunteers in a central space.

When seeking a central space, consider free community spaces like local libraries, parks, and community centres where adequate seating is available, and which will allow enough privacy for a confidential conversation.

Secondary Visit Procedures

1. Booking the Visit

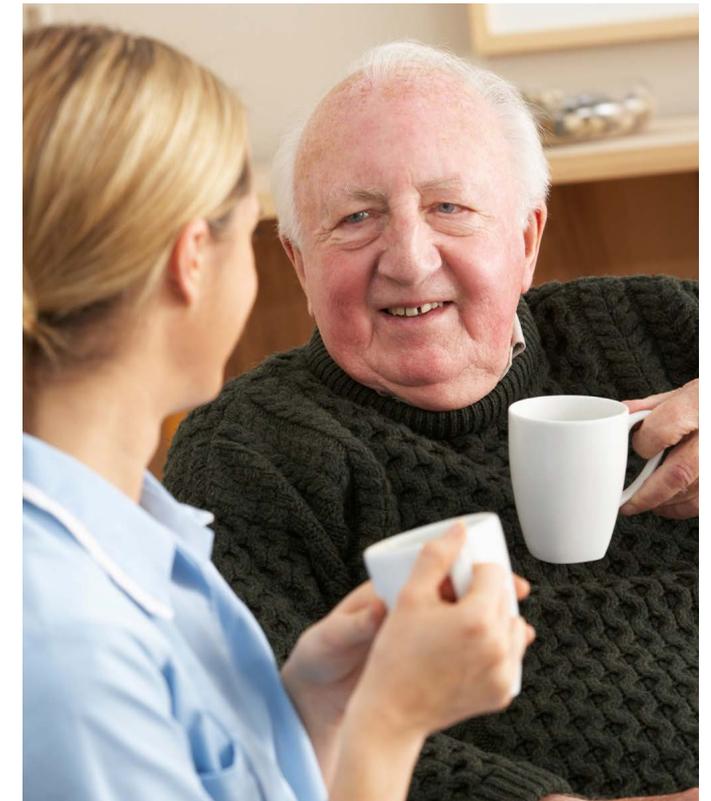
A secondary home visit is booked in one week after the first visit. It is recommended that you keep the day and time the same as the first home visit to avoid confusion.

The same two volunteers who conducted the first visit will conduct the secondary visits, unless:

- One or both volunteers are unavailable
- One or both volunteers do not wish to re-visit the client
- One or both volunteers had an issue with their partnered volunteer
- The client requests different volunteers

Once you have confirmed volunteer availability, contact the client to confirm the visit details and the names of the volunteers providing the visit.

Send an email confirmation to the two volunteers, advising the second visit date and time.





2. Preparing the Paperwork

The purpose of the secondary visit is to provide the client with a list of local services, activities, and community groups that are identified based on the interests they communicated during the first visit.

Volunteers are provided with a Secondary Visit Form which includes a tailored list of activities for the client and the contact details for each activity. This list is created by the person leading the program ie. Program Coordinator, Volunteer Coordinator.

Two copies of the form are provided; one for the client to keep, and the other for the volunteers to record the client's feedback.

The Secondary Visit Forms can be provided to volunteers in one of two ways:

- One of the volunteers collects them prior to the visit. **Note:** *This will require a central space for you to meet ie. Council office or a local community centre.*
- Send through an electronic copy for one of the volunteers to print from home. **Note:** *This option is only suitable for volunteers who have a printer available.*

3. Visit Reminder

Again, a reminder call is provided to the client 24 hours prior to their scheduled visit.





4. The Secondary Home Visit

Upon arrival to the premises, volunteers must wait until their partnered volunteer arrives before entering the home together.

During the secondary home visit, volunteers are required to go through each of the suggested activities with the client and make note of their feedback. Volunteers should take their time with this process so as not to overwhelm the client. It is important that they listen attentively and ask questions to help assess what activities the client is interested in, not interested in, and the reasons why. This information will assist you to make alternative suggestions for follow up visits, or to address barriers preventing the client from attending activities.

If a client is feeling apprehensive about contacting a service or community group, volunteers can assist the client to make

contact by offering to stay with them as they make the call, or to make the call on their behalf. However, volunteers should encourage the client to do as much as they can on their own before stepping in to assist.

Remember: Hand to Heart is all about empowering older people. Your volunteers are there to help guide the way to social connection, but the older person needs to walk the path to get there.

On conclusion of the home visit, volunteers inform the client that your LGA will be in touch to provide a follow up call and to book in any required follow up visits. One volunteer must contact your LGA to advise the visit has been completed and that they are leaving the premises.

5. Debrief

Again, a debrief with one or both volunteers is conducted following the home visit. The debrief can be performed in one of two ways:

- One or both volunteers meet with you following the visit to return the Secondary Visit form and debrief with you. **Note:** *This will require a central space for you to meet ie. Council office or a local community centre*
- One volunteer scans or emails you the completed Secondary Visit form and you then contact each volunteer individually to debrief over the phone.

The secondary visit debrief is a longer process, as you need to assess the client's feedback for each of the suggested activities.

Questions to address during the debrief:

- What activities did the client express an interest in?
- What activities was the client not interested in?
- What reasons did the client give for not being interested in activities?
- Did the client request any additional information, services, or activities?
- Did the client request a follow up visit?

Following the debrief with volunteers, you can then determine what follow up is required for the client.



Recommending Suitable Activities

Depending on the platform you have used to create your database, the method you use to navigate and search for suitable activities will vary.

Use the information that your volunteers collated during the first home visit to filter your database around the client's needs, interests, and demographics.

What to consider:

- Is the activity close to the client's home?
- Will they need transport to get to the activity?
- If the client requires wheelchair access, is the activity accessible?
- Does the activity run at a time when the client is available?
- If it is a paid activity, is the client financially able to attend?

It is recommended that you contact the activity and confirm suitability for your client. This is also a good opportunity to confirm that the activity running times have not changed since you last contacted them.



It is essential to provide current and accurate details to your clients. Should they proceed with contacting the activity, only to find that the details you provided were incorrect, they may be dissuaded to engage with future recommended activities and may also disengage with the Hand to Heart service.

In some cases, you will be unable to find suitable activities on your Hand to Heart database and will need to search externally for something that aligns with your client's interests. This could mean recommending activities that are not within your LGA.

In these cases, it is recommended that you provide the details of the activity external to your LGA but also include a few alternative options closer to the client's home. This gives the client choice to either travel further to attend a group better aligned with their interests, or to attend a local group that, while not exactly matched to their interests, is an

opportunity to make social connections within their local community.

For example:

During her first home visit, Fatima expresses an interest in bushwalking. When searching your database for suitable activities for Fatima, you find a few general walking groups in the local area, but no bushwalking groups. You conduct an external search and come across a bushwalking group located twenty minutes from Fatima's home.

When preparing the paperwork, you list the bushwalking group and a general walking group that is only five minutes from Fatima's home. Fatima can see that you have gone to the effort to locate a group aligned with her interests, but that you have also taken into consideration the fact that she may not wish to travel that far. She can then choose which option suits her best.





Conducting Follow Ups

Hand to Heart aims to create long-term social connections for older people, which means providing ongoing follow ups to ensure clients stay socially connected after their engagement with the program.

Immediate Follow Up Visits

Immediate follow up home visits are conducted if:

- The client was not happy with the suggested activities provided during the secondary visit
- The client would like to be provided with additional information, services, or activities
- The client requests an immediate follow up home visit

At the follow up home visit, the same secondary visit process indicated in [Part 2](#) is conducted. If the client was not happy with suggested activities, you will need to conduct a new search and provide

alternative services, community groups, and activities based on the client's feedback.

Long Term Follow Ups

Long term follow up visits are conducted at one-week, one-month, three-month, and six-month intervals from the client's last home visit.

If at any stage during the follow up process the client requires a new referral of services, groups, and activities, the process restarts from the one-week interval.

If at any stage during the follow up process the client expresses that they no longer wish to receive follow ups, you must respect their wishes and not contact them further. In these cases, confirm your contact details with the client and advise they contact you if they wish to receive any further support.

One-week and one-month Follow Ups

The purpose of the one-week follow up visit is to check in with the client and to identify if they have contacted any of the recommended activities. At the one-week interval, it is likely that the client would not yet have attended the activities, however the follow up visit acts as a reminder to the client and makes them accountable as they know you will be checking in regularly.

By the one-month interval, clients should have engaged with and attended at least one of the recommended activities and ideally would have made one or more social connections. It is important at the one-month follow up for volunteers to identify whether the recommended activities will result in long-term social connections for the client.





Questions to address at the one-week and one-month follow ups:

- Have you engaged with any of the recommended activities?
- If yes, did you make any social connections at the activity?
- If no, what has prevented you from making contact?
- Would you like any further assistance or information?
- Are you happy to receive a follow up visit in one month/three months?



If the client has not contacted the recommended activities, volunteers need to identify what prevented them from making contact and any potential barriers that the client may be facing. You will then need to either resolve these barriers or identify new activities where barriers will not be an issue.

For example:

If the client has not been able to engage with the recommended activity because they only travel by public transport and the activity venue is not close to public transport; you can either identify a transport service that enables them to access the activity, or you can recommend a different activity that is located near public transport.

If the client has contacted the recommended activities, and found the engagement unsatisfactory, volunteers must identify the reasons why the client was not satisfied. You will then need to identify new activities that better align with the client's needs and interests.

Volunteers should encourage the client to attend an activity at least three times before deciding not to return, as they may not make a meaningful connection during their first visit to a community group or activity.

If the client has not engaged with recommended activities after the one-month follow up visit, you can suggest that their next visit be conducted at one of the activities. Attending a new group can be a daunting experience, as the client does not know anyone at the group, and may feel anxious about not fitting in. Hand to Heart volunteers who have already built a relationship with the client can help reduce some of this anxiety by meeting the client at the venue and assisting them to meet other members of the group.

Three-month and six-month Follow Ups

The purpose of the three-month and six-month follow ups is to ensure that Hand to Heart clients are still engaged with the recommended activities, that they have made meaningful connections with local community members, and that they remain socially connected.

By the three-month interval, clients should feel a sense of belonging at one or more activities and should have made multiple social connections with members of their local community.





Questions to address at the three-month and six-month follow ups:

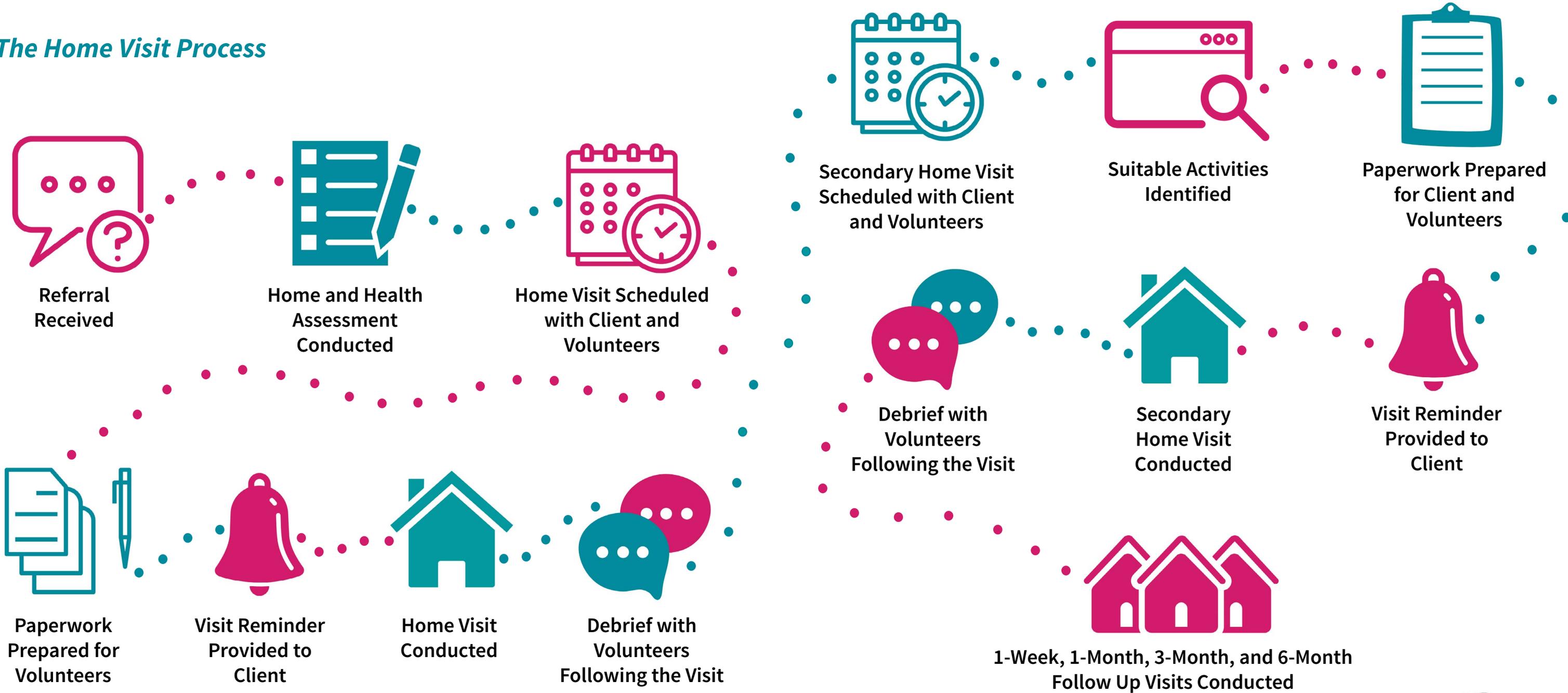
- Are you still attending the recommended activities?
- If no, what caused you to disengage?
- If yes, because of your engagement with Hand to Heart, do you feel less isolated?
- Would you like any further assistance or information?

If clients have disengaged with activities, it is important for volunteers to ask what caused them to disengage. You will then need to identify how you can assist the client to re-engage with the activity or identify new activities if needed.

Let clients know in the six-month follow up that your LGA is still available if they need support in the future. Confirm your contact details with them and advise them to call if they need further follow up or assistance.



The Home Visit Process





Part 3: Building Social Connections

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62 Engaging with People from Diverse Groups

CaLD People

Aboriginal and Torres Strait Islander People

LGBTI People

People with a Disability

68 The Person-Perspective Approach

Nurturing Friendships

It is important to acknowledge that friendships are not formed in a day, and that Hand to Heart clients are not going to form friendships with everyone they meet.

The role of volunteers is to link clients to spaces where they have an opportunity to cultivate new friendships, to encourage them to continue attending, and to remind them that they have something to offer.

What encourages friendship?

- Common interests
- Regular contact
- Mutual respect

What social barriers might prevent clients from making friendships?

- No longer passionate about interests
- No longer able to participate in interests
- Fear of social rejection
- Low self-worth/not feeling as if they have anything to offer

How can volunteers help clients overcome these barriers?

- Identify the client's past interests and what they loved most about them.
- Find new ways that clients can participate in these interests (ie. If they are no longer able to play tennis, can they mentor a young tennis player?)
- Attend activities with the client on their first visit so the experience is less daunting. Help them to meet people at the activity so they will know someone on their next visit.
- Encourage clients to attend an activity more than once to build friendships.
- Identify the client's strengths and skills and link them to activities where they can apply this knowledge. This will build the client's self-worth and give them a sense of purpose.





Engaging with People from Diverse Groups

The [2017 Aged Care Diversity Framework](#) identifies 12 diverse groups of people in the aged care sector that may have experienced exclusion, discrimination, and stigma during their lives:

- Aboriginal and Torres Strait Islander People
- People from Culturally and Linguistically Diverse (CaLD) backgrounds
- Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBTI) people
- People who live in rural, remote, or very remote areas
- People with mental health problems and mental illness
- People living with cognitive impairment, including dementia
- People with a disability

- Parents separated from their children by forced adoption or removal
- Care-leavers
- People who are homeless or at risk of becoming homeless
- Veterans
- People with socio or economic disadvantage



When engaging with Hand to Heart clients who identify with these groups, you and your Hand to Heart volunteers may need to consider different approaches to providing suitable social connections.

It is recommended that your LGA provides all Hand to Heart staff and volunteers with sufficient training around engaging with diverse groups, which will give them an understanding of:

- Challenges and/or barriers faced by people in diverse groups
- Inclusive language and communication
- Cultural norms and social expectations
- How to respectfully engage with people in diverse groups
- How to appropriately provide support to people from diverse groups

As mentioned in [Part 2](#) of this resource, the Hand to Heart program is not suitable for people with severe mental illness or who are in the advanced stages of dementia, however you can provide links to external support services for clients who require this type of support.

For further information on engaging with diverse groups in aged care, please refer to the [2017 Aged Care Diversity Framework](#) and further resources available via the [Department of Health website](#).





Culturally and Linguistically Diverse (CaLD) People

CaLD older people may experience additional barriers to finding support and connection, including:

- Newly arrived in Australia with no established social networks
- Unfamiliarity with services and systems
- Lack of cultural understanding by service providers and community members
- Racism in the community
- Language, religion, and cultural barriers limiting access to services and support
- Separation from family and friends
- Experiencing post-traumatic stress disorder (PTSD)

Recommendations for engaging with CaLD older people:

- Arrange CaLD competency training for all Hand to Heart staff and volunteers
- Include CaLD-specific services, community groups, and activities on your database.
- Recruit volunteers from all cultural backgrounds.
- Encourage volunteers to enquire about clients' culture, background, and religion to engage the client respectfully and so that you can better advise suitable activities.

For further information on engaging with CaLD older people, visit the [Centre for Cultural Diversity in Ageing website](#).

Aboriginal and Torres Strait Islander (ATSI) People

ATSI older people may experience additional barriers to finding support and connection, including:

- Unfamiliarity with services and systems
- Lack of cultural understanding by service providers and community members
- Racism in the community
- Language and cultural barriers limiting access to services and support
- Experiencing trauma and/or intergenerational trauma
- Feeling disconnected from culture and country

Recommendations for engaging with ATSI people:

- Arrange ATSI cultural competency training for all Hand to Heart staff and volunteers

- Include ATSI-specific services, community groups, and activities on your database (ie. yarning circles, Elders groups, women's and men's groups, Stolen Generation programs, Aboriginal Community Controlled Organisations, Aboriginal Medical Services)
- Consult with local ATSI groups and elders to identify suitable activities within the community
- Recruit volunteers from all cultural backgrounds.
- Familiarise your staff and volunteers with aged care services targeted at ATSI people

For further information about engaging with ATSI people, visit the [National Aboriginal Community Controlled Health Organisation \(NACCHO\) website](#).





Lesbian, Gay, Bisexual, Transgender, and Intersex People

LGBTI older people may experience additional barriers to finding support and connection, including:

- Limited supportive social networks
- Not being 'out' to family and friends
- Lack of understanding by service providers and community members
- Fear of being ostracised from social networks
- Homophobia and transphobia in the community
- Trauma associated with medical examinations

Recommendations for engaging with LGBTI people:

- Arrange LGBTI-inclusive training for Hand to Heart staff and volunteers
- Include LGBTI-specific services, community groups, and activities on your database.
- Recruit volunteers of all genders and sexualities.

For further information about engaging with LGBTI older people, visit the [GLBTI Rights in Ageing Inc. \(GRAI\) website](#).

People with a Disability

Older people with a disability may experience additional barriers to finding support and connection, including:

- Lack of accessible facilities, services, and activities
- Lack of accessible or convenient transport
- Communication barriers
- Discrimination within the community



Recommendations for engaging with people with a disability:

- If it doesn't already, ensure your LGA has a Disability and Inclusion Policy
- Arrange disability-inclusive training for Hand to Heart staff and volunteers
- Include disability-specific services, community groups, and activities on your database.
- During the home and health assessments, identify any disability requirements and prepare volunteers prior to the visit.
- Ensure all written documents provided to clients use accessible fonts
- Identify accessible transport services for clients with a disability

For further information about engaging with people with a disability, visit the [People with Disability Australia website](#).





The Person-Perspective Approach

It is essential that a person-perspective approach is used when supporting all Hand to Heart clients; this means actively listening to the client's perspective, priorities, and interests, rather than determining what you believe would be most suitable for them.

To achieve long-term positive outcomes, the client needs to lead the decision-making process and play an active role in determining what activities they would like to engage with.

The Hand to Heart program aims to leave no one behind; this means accepting that it may take time for the client to make meaningful social connections. It is about committing your time to conduct multiple visits and to continue to make ongoing suggestions of activities until you find the right fit for the person.





Part 4: Marketing the Program

- 71 Branding
- 72 Promotional Materials
- 73 Program Launch
- 74 Advertising
 - Print Media*
 - Social Media*
- 77 Expos and Events

Branding

To deliver the Hand to Heart program within your LGA, you must follow brand guidelines and apply the official Hand to Heart branding across all documents and communications. Brand consistency is essential to continue to build trust and loyalty for the Hand to Heart program and to maintain program recognition.

A Hand to Heart marketing pack is available following consultation with ConnectGroups.

The marketing pack includes:

- Logo variations and guidelines
- Brand colour palette
- Typography and font guidelines
- Imagery and image guidelines





Promotional Materials

Printed materials are essential when catering for an older demographic.

Despite the growing rate of seniors moving online, there are still many older people who are not computer literate. This means you will need to produce hard copy marketing materials to promote the program to potential clients.

Hand to Heart DL Flyer templates are available from ConnectGroups, with a space for you to add your council's logo and contact details. These can be printed in-house or professionally.

Hand to Heart Referral Card templates are also available, and these are for your identifiers to provide to older people whom they refer to the program. The Referral Cards act as a reminder to older people that their contact details have been passed on to your LGA and that someone will be in touch with them soon to arrange a Hand to Heart home visit.

For other printed material templates, a Marketing Pack is available from ConnectGroups.



Program Launch

Once you've finalised your database of services, activities, and community groups and your volunteer team is ready for action, it is a great idea to host an official program launch to let the community know the program has commenced.

Host the event at a suitable space at your council premises or a public venue, and invite local aged care organisations, service providers, community members, and volunteers to attend.

The launch should include a welcome address from your LGA's CEO, an overview of the program and how people can get involved, and a Q&A session. Conclude the launch with a networking session; this is a great opportunity to meet with potential identifiers.

Ensure you have plenty of printed materials on display at the launch for guests to take with them, and if possible, provide catering for the networking

session at the end.

Guests should leave the event with a solid understanding of the benefits of the Hand to Heart program and who to contact should they wish to refer or be referred on to the program.





Advertising

When advertising the Hand to Heart program, you will need to target the three referral sources mentioned in [Part 2](#):

- Older people experiencing isolation (self-referrals)
- Family and friends of an older person experiencing isolation
- Service providers and organisations delivering services to older people (identifiers)

You will need to develop marketing strategies for each target audience to achieve better reach and engagement. While social media may be a good platform for reaching family members and friends of an older person, it will likely not be an effective platform to reach older people directly.

Suggested Advertising Platforms

Isolated Older People:

Newspapers

Many older people enjoy reading the newspaper with a cuppa each morning. Place an ad in your local community newspaper with information about the Hand to Heart program and include a phone number and contact name so the person knows who they will be speaking to when they call to enquire.

Letterbox Flyer Drops

Schedule a letterbox drop of Hand to Heart flyers to go out to residents in your local community. If you can print magnetic flyers, that is even better, as they can stick it on their fridge!

Flyers on Display

Place flyers on display at local community centres, your LGA reception area, and other spaces. Consider public places that older people are likely to visit, including local shopping centres, libraries, chemists, and GP surgeries.

Family and Friends

Council e-Newsletter

Advertise the Hand to Heart program in your regular e-newsletter that goes out to local residents.

Social Media

Promote the Hand to Heart program via your council's social media accounts and/or use Facebook advertising to target specific demographics.

Identifiers

Presentations

Look for opportunities to present at local aged care network meetings, steering committee meetings, and events where aged care organisations and service providers will be present. Let them know the value of collaboration and partnerships in helping local seniors find support. If you cannot deliver a presentation, still attend for the networking opportunities.

One-on-One Meetings

Meet with the main contact people at your local libraries, museums, community centres, and aged care organisations. Explain to them how the program works and provide them with flyers and referral cards.





When advertising the Hand to Heart program, it is recommended that you use a positive emotional appeal.

For example, rather than:

Are you feeling socially isolated?

Consider:

Would you like to make more social connections?

Track the outcomes of your advertising campaigns to determine what is and is not working and tweak as needed to achieve better results.

See to the right some examples of Hand to Heart digital advertisements.



Hand to Heart - Are you seeking to get more out of life? Looking for new ways to enrich your health and happiness in retirement? ConnectGroups are here to assist!
More information: <https://www.melvilletalks.com.au/agefriendly-top.../hand-heart>



If you are concerned about an older family member, friend or neighbour in your community contact the Hand to Heart team today and change a life simply by making a connection. To find out more call ConnectGroups on 9364 6909 or visit: <https://www.melvilletalks.com.au/hand-heart>



Expos and Events

Local expos and events are a great way to get the word out about the Hand to Heart program. Consider events where your three main referral sources will be present.

This can include:

- Aged care expos
- Healthy lifestyle expos for older people
- Aged care conferences
- Mental health conferences

Encourage your Hand to Heart volunteers to attend events and to help host stalls at expos. Seeing the faces of the program and meeting the people who provide visits can help attract new clients.

Furthermore, volunteers speaking on behalf of your LGA promotes what you do in a more natural way – these are *unpaid* representatives speaking positively about the program.





Part 5: Evaluating the Program

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- 80 Identifying Trends and Gaps

Collecting Statistics

To track program outcomes and for reporting purposes, it is recommended that you collect and maintain the following statistics:

- Number of clients
- Number of home visits
 - Total visits
 - Per client
 - Per volunteer
- Number of activities referred
 - Total activities
 - Per client
- Number of clients successfully re-connected to community

The above data is valuable in demonstrating the program's outcomes and can also be used when reporting to funding bodies or when seeking funding for program continuation.

Tracking volunteer hours is important because it captures the amount of unpaid work contributed to the program. It is also a great way to acknowledge your volunteers; you may wish to reward and recognise volunteers each time they reach a milestone *ie. 20 home visits, or 1-year anniversary.*

When volunteers leave the program, it is recommended that you provide them with a Certificate of Appreciation stating the number of hours that they contributed to Hand to Heart.

You can use an Excel spreadsheet with appropriate formulas to track data, or utilise suitable database software for more convenient data management.

It is recommended that you also save testimonials from clients, volunteers, and identifiers as examples of positive outcomes from the program.





Identifying Trends and Gaps

In the long term, the Hand to Heart program provides an opportunity for your LGA to identify gaps in aged care services, and trending needs of the older community.

While it is great to celebrate the positive outcomes of the program, it is even more important to acknowledge the clients who were unable to re-connect through Hand to Heart, determine the reasons why they were unable to connect, and identify opportunities for new services.

Identifying trends and gaps via the Hand to Heart program provides your LGA with the opportunity to inform State Government on the needs and challenges of older people. It supports your LGA to make informed decisions on the development of new services and programs within your local community.



Example of Responding to Trends:

Through its delivery of the Hand to Heart program, ConnectGroups identified that a common barrier to social connection for clients was access to transport. Several clients were ineligible for subsidised transport services or were waiting to be approved for a My Aged Care package. This meant they were unable to get to and from social activities recommended to them through the Hand to Heart program.

To help break this barrier, ConnectGroups hosted a fundraising event, with proceeds going towards the cost of Uber rides for these specific Hand to Heart clients. The Uber rides acted as a provisional support, intending to finance a few trips for the client, at which point they would ideally have made friends at the activity who they could carpool with in the longer term.





Part 6: Financial Considerations

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Volunteer Recruitment

Program Coordination

Volunteer Travel Expenses

Volunteer Insurance

Marketing

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Budget for Program Delivery

Program Coordination

You will need one or more Program Coordinators to:

- Compile the directory of services, activities, and community groups
- Induct, recruit, and manage volunteers
- Conduct client home and health assessments
- Schedule and monitor home visits
- Provide suitable referrals for clients

Your LGA is best positioned to determine how these roles are assigned, and whether you will engage coordinators in a voluntary or paid capacity. It is recommended that you have at least one paid staff member in a supervisory role to oversee the overall delivery of the program.

Hand to Heart typically requires a part-time worker or volunteer to dedicate two days per week for program set up and implementation. Following the program launch, a coordinator is required on an as-needed basis to take visit request calls and to coordinate home visits.

The time commitment required for ongoing program coordination will be dependent on level of demand and number of referrals.





Volunteer Recruitment

It is recommended that you budget for a minimum of eight volunteers. Depending on the level of demand for home visits in your LGA, you may need to increase this number down the track.

Costs involved with volunteer recruitment:

- Volunteer advertising
- Venue hire for training and induction
- Catering for training and induction
- ID badges
- Any external volunteer training *ie. Cultural Competency Training*

To save on volunteer recruitment costs, utilise as many free or in-house advertising platforms as possible, provide one large group induction rather than multiple small group inductions, or offer online induction and training where possible.

While it is not mandatory for Hand to Heart volunteers to wear a uniform, if your LGA requires volunteers to wear uniforms (ie. Council-branded t-shirts), then you will also need to allocate funding to cover these costs. Ensure volunteers return their shirts when they leave the program so you can allocate them to new volunteers.

Volunteer Travel Expenses

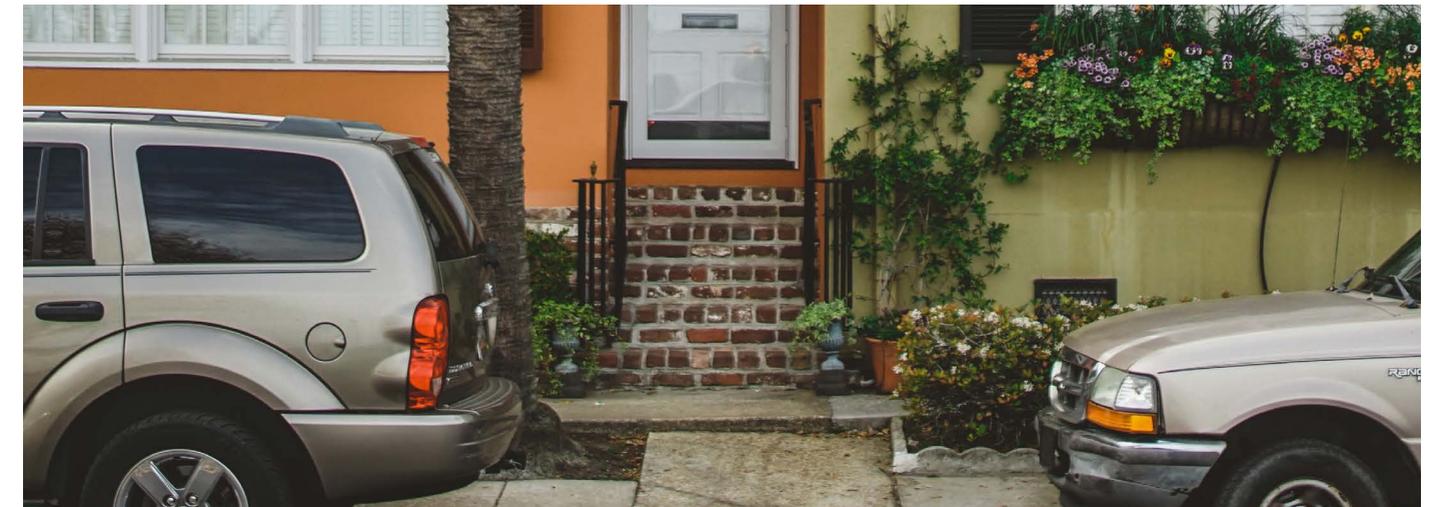
Your LGA will need to determine whether you will cover the travel expenses of volunteers.

This would include:

- Travel to and from volunteer induction
- Travel to and from home visits
- Travel to and from visit debriefs

The reimbursement method for your Hand to Heart volunteers will need to align with your LGA's reimbursement policy.

If you choose not to cover volunteer travel expenses, you will need to articulate this to volunteers in the interview stage so they understand they will not receive travel reimbursement.





Volunteer Insurance

All organisations are exposed to risks that could have financial consequences for directors, staff and volunteers, should the unexpected happen.

It is important that LGAs relying on the assistance of volunteers are aware of the risks involved and the type of insurance relevant to them. Contracting volunteer insurance will provide volunteers with financial benefits if they sustain a personal injury while volunteering.

Your LGA owes its volunteers duty of care in relation to the work they undertake for the organisation according to the [Work Health and Safety legislation](#).

Voluntary Workers Personal Accident Insurance is designed to cover an organisation and provide income protection to volunteers who are injured while undertaking their voluntary work. However, the accident must have

occurred while the volunteer was performing authorised voluntary work on your LGA's behalf, or while they were travelling to or from that work.

It is recommended that you have a personal accident insurance policy for volunteers.



Some of the factors considered in calculating insurance premiums are:

- the type of voluntary activity;
- the range of cover options that the group and the organisation select;
- the capital sum insured;
- number of volunteers insured;
- the number of days the voluntary activity is undertaken during the period of insurance;
- prior claims experience

It is important to understand the level of cover, exclusions, and special provisions (including age limits) when obtaining insurance for your LGA.

To find out what is the right level of cover and type of insurance for your LGA, it is recommended you contact an insurance broker.





Marketing

Marketing your Hand to Heart program will primarily be via word of mouth, however, you will need to budget for marketing materials and any paid advertising.

This includes:

- Printing DL Flyers
- Printing Referral Cards
- Facebook advertising
- Newspaper advertising
- Flyer letterbox distribution
- Expo and event attendance

To save on costs, utilise as much free and in-house marketing platforms as possible and prioritise press releases and newspaper articles rather than advertising.

When printing materials, it is recommended that you print in-house and order on an as-needed basis rather than bulk-order to prevent wastage.

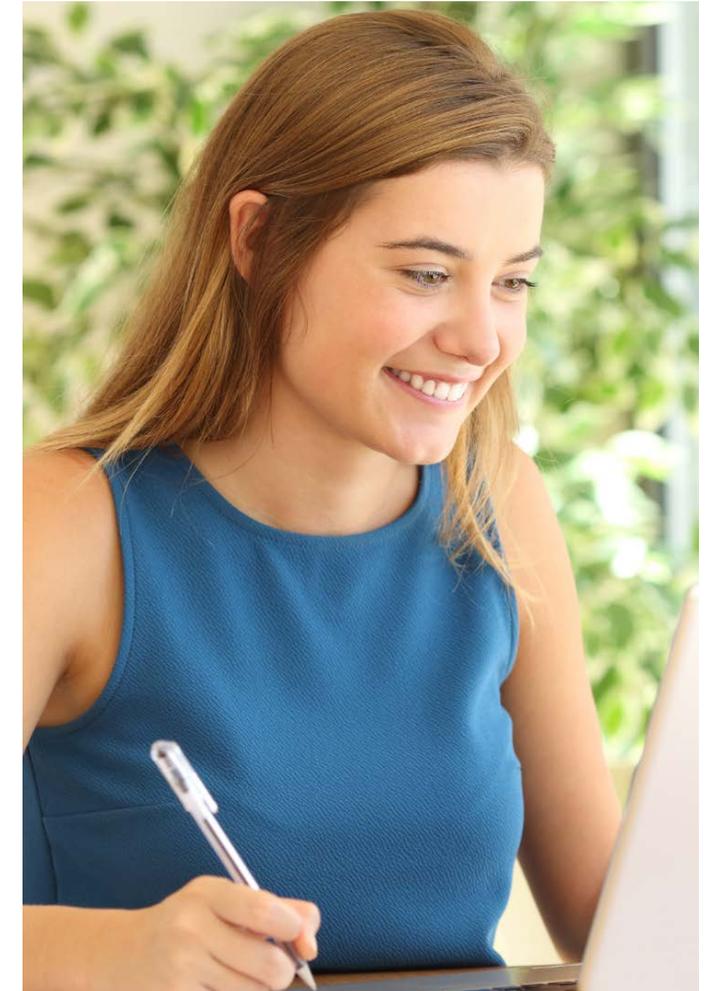


Ensuring a Sustainable Program

Hand to Heart is a cost-effective program that is well-placed to sit within an LGA's core service delivery. If your LGA already has a volunteer program in place, it can extend the capacity of the program to deliver Hand to Heart.

Recommendations for a Sustainable Hand to Heart Program:

- Ensure the program sits within your LGA's age-friendly plan and strategic direction
- Set KPIs for your Program Coordinator
- Keep your volunteers engaged and recognise them for their achievements
- Have a succession plan in place for your volunteers
- Ensure the program's marketing costs are embedded in your annual budget





Part 7: Adjusting the Program for Pandemic

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Program Impacts from Pandemic

The outbreak of COVID-19 resulted in closing or postponement of many volunteer activities across the nation due to risk of infection and social distancing enforcement by Government. To ensure the continued operation of the Hand to Heart program during exceptional circumstances, ConnectGroups has developed Hand to Heart pandemic procedures.

It is important for LGAs delivering the Hand to Heart program to familiarise themselves and their volunteers with these procedures so that in the instance of an epidemic or pandemic there is a smooth transition to the new program delivery.

People aged 70 years and over, people aged 65 years and over with chronic medical conditions, and Aboriginal and Torres Strait Islander people over the age of 50 are at greater risk of serious illness and health complications during a pandemic.

This means that Hand to Heart clients, who are already experiencing social isolation, will be among the first to self-isolate if there is an outbreak of disease, potentially further impacting their mental wellbeing.





While younger demographics are able to maintain social connection via online platforms, many older people lack digital literacy and may not feel confident or comfortable using virtual platforms to stay socially connected. This leaves older people with limited options to maintain contact with their friends and family, and adds barriers to connecting with support services.

Furthermore, local community groups and social activities may be required to close their doors during a pandemic lockdown and may not re-open for several months.

This renders Hand to Heart's purpose of connecting older people to local community groups and activities temporarily redundant, with a need to shift its focus from a long-term community connection program to a short-term weekly telephone welfare check and befriending program that will hold clients during the pandemic period.



Program Delivery During Lockdown

In a lockdown scenario, all Hand to Heart home visits will need to cease immediately. Your LGA may temporarily close its premises and, where possible, staff and volunteers may be required to work from home.

The Hand to Heart program will need to transition to a phone support program, in which volunteers provide older people with a weekly phone call to:

- Check in and enquire about the older person's wellbeing
- Provide links to support services
- Engage in friendly conversation

Contact all Hand to Heart clients (including past clients as they will now no longer be able to attend any social groups you had connected them to) to advise that Hand to Heart visits are postponed until further notice and offer them phone support until the visits can recommence.

Should clients be interested in receiving phone support, you must capture the following information:

- Name
- Telephone number
- Availability for weekly phone calls

For clients who are not interested in receiving phone support, ensure they have your LGA's contact details so they can reach you if they change their mind.





Volunteer Recruitment

Determine which of your Hand to Heart volunteers would be happy to transition to a phone support role. For those not interested in providing phone support, advise them that they will be notified once the home visits recommence.

Given that the phone support is provided on a more regular basis than the home visits, and level of demand will likely increase during a pandemic, you will likely need to recruit more volunteers.

During COVID-19 lockdown, with an overwhelming amount of people working from home, unemployed, or on annual leave, volunteer expressions of interests increased tremendously. Members of the community wanted to help those more vulnerable and had the availability to do so from their own home.

Volunteer recruitment procedures follow the same processes articulated in [Part 1](#) of the resource, except that all steps need to be completed remotely via telephone and online.

Interviewing Candidates

Volunteer interviews can be conducted via phone or videoconferencing platforms ie. Zoom, using the [same questions](#) used for home visiting volunteers.

It is essential that volunteers speak fluent English, as phone support to clients may be problematic with language barriers.

Ensure that volunteers can commit to at least one phone call per week and that their phone plan allows for unlimited calls, unless your LGA is able to reimburse volunteer phone expenses.

Screening Procedures

Phone support volunteers require the same screening checks as home visiting volunteers. Send forms to volunteers via email where they can complete them electronically and email back to you. Advise volunteers to scan or take photos of their ID and email them to you to process their Police Certificates.

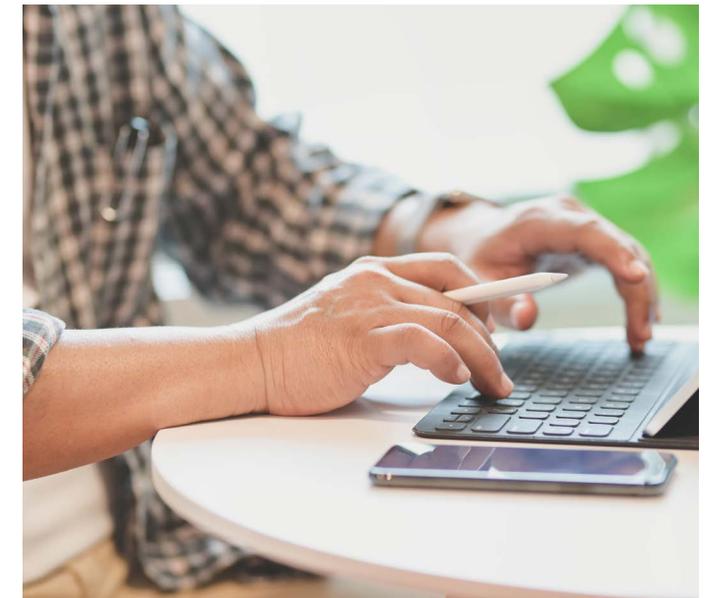
Induction and Training

New and existing Hand to Heart volunteers will need to undertake a new induction and training session on providing phone support. This can be conducted remotely via an interactive PowerPoint presentation which volunteers can download and watch from home in their own time.

The training includes:

- An introduction to the Hand to Heart Phone Support Program
- Processes and procedures
- Conversation starters and prompts
- Managing difficult discussions
- Health and safety
- Privacy and confidentiality

On completion of the PowerPoint presentation, volunteers must complete a post-training questionnaire to demonstrate that they have completed and understood the content.





Pairing Volunteers with Clients

When volunteers complete the training and induction process, you can pair them with a client based on client and volunteer availability.

Inform the client of the date and time of their first scheduled call and the name of the volunteer who will contact them.

Inform the volunteer of their paired client's name and contact number, and the date and time of their first scheduled call.

On completion of the first call, the volunteer should enquire with the client if they are available to be contacted on the same day and time the following week, or if they would prefer a different time. Based on volunteer and client availability, the volunteer will determine a suitable time to provide a follow up call the next week.

Not all volunteer-client pairings will be a suitable match, and you may receive requests from volunteers or clients to be paired with a different contact. Additionally, some volunteer-client pairings may be suitable but require a change-up after several calls. In both instances, respectfully notify the volunteer and client, and assign a new contact for each party.

Call Log

Volunteers need to complete a call log after each call they make to a client. You can use a central electronic spreadsheet for a call log, or utilise suitable database software that volunteers can access following their phone calls.

The call log enables you to monitor calls, captures key statistics, and brings to your attention any support requests from clients and/or volunteers.

The call log includes:

- Volunteer name
- Client name
- Call date
- Call duration
- Information provided to client (if any)
- Support required for client (if any)
- Support required for volunteer (if any)





Recommending Support Services

Many of the services, community groups, and activities on your Hand to Heart database may either close or offer alternative services during a pandemic, and new services will commence to offer emergency relief and support to vulnerable people within the community.

In the instance of a pandemic, compile a new directory of services available to older people within your local area.

This can include:

- Emergency relief services
- Food hampers and delivery
- Telephone counselling
- Telehealth services
- Financial support and counselling
- Emergency accommodation
- Community social initiatives (ie. Penpals)

Should a Hand to Heart client require support, utilise your database to identify and recommend suitable services to the client's paired volunteer who will be responsible for:

- passing the information on to the client; and
- following up to ensure the client received adequate support

Program Delivery Pre/Post Lockdown

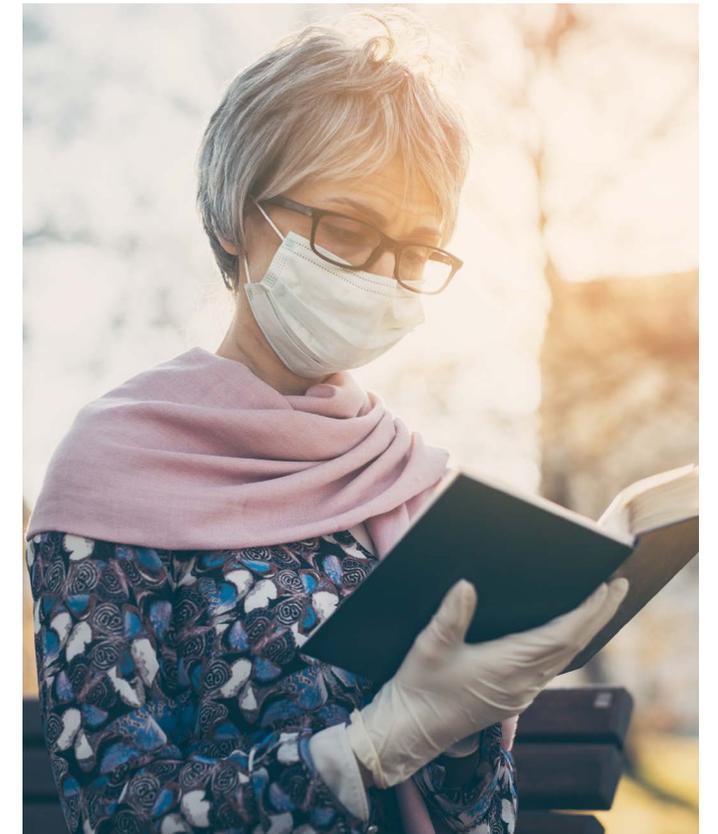
In the phases before and after lockdown, Hand to Heart visits can be conducted, provided:

- You and your volunteers adhere to any Government restrictions
- Clients are comfortable allowing volunteers into their home
- Volunteers are comfortable providing in-home visits

Your LGA will need to monitor Government recommendations during a pandemic to identify the right time to halt visits pre-lockdown, and the right time to re-commence visits post-lockdown.

Volunteers and/or clients who are not comfortable in providing or receiving home visits can continue to provide and receive phone support. This means there may be a cross-over period in which your LGA will offer both Hand to Heart visits and phone support.

Your LGA must provide volunteers with hand sanitiser and have personal protective equipment (PPE) on hand should a client or volunteer request it.





Client Assessment

Pre/post lockdown home visits will require an additional assessment for clients to ensure volunteer and client safety.

Assessment will vary depending on the pandemic, but will include questions such as:

- Are you feeling well?
- Is anyone in your household unwell?
- Have you travelled overseas recently?
- Have you been in contact with anyone who has recently been overseas?
- Do you require our volunteers to wear personal protective equipment? (PPE)

Advise clients that your volunteers will be maintaining a 2m distance from the client and each other during the visit and that no physical contact will be permitted.

During the visit reminder call, ask the client again if they are feeling well, to ensure they have not become unhealthy since the initial booking was made.

Should the client indicate at any point that they are feeling unwell, or that a member of their household is unwell, the visit must be cancelled and you will need to provide a follow up call in two weeks' time to schedule a new visit time when all household members are healthy, in compliance with the program's pandemic response.



Volunteer Procedures

Volunteers providing visits pre/post lockdown must be provided with updated procedures for conducting visits during a pandemic.

The procedures will vary depending on the pandemic, but will include items such as:

- Do not conduct a home visit if:
 - You are feeling unwell
 - A member of your household is unwell
 - You have been in contact with someone who has recently returned from overseas
- Personal protective equipment (PPE) is available on request
- Maintain a 2m distance from your volunteers, clients, and anyone else within the household during home visits.
- Sanitise your hands before entering the home and after exiting the home.
- Avoid touching your face during the visit.
- Avoid touching any surfaces during the visit.
- Do not accept any food or beverages from the client during the visit.
- If you become unwell during a visit, leave the premises immediately and notify the LGA.
- If a client becomes unwell during a visit:
 - If the illness is severe, call an ambulance and notify the LGA
 - If the illness is not severe, leave the premises immediately and notify the LGA





Recommending Suitable Services

Should a volunteer or client become unwell during a visit, determine the severity of the illness and any follow up actions, such as:

- Contacting the client's next of kin
- Contacting volunteers' next of kin
- Advising volunteers and clients to seek medical attention

At the pre/post lockdown stage of a pandemic, only a selection of the services, community groups, and activities on your Hand to Heart database will be active, and are likely to have smaller capacity and social distancing measures in place.

Update your database regularly to reflect what activities are operating and any restrictions that your clients need to be aware of if they wish to join.

It is recommended that your volunteers advise Hand to Heart clients to take precaution when attending activities by maintaining social distancing, sanitising hands, and utilising personal protective equipment (PPE).





Sylvia's Story

Sylvia lost her husband five months prior to accessing Hand to Heart. Her friends had all passed away and her family had gone on holiday, leaving her feel very isolated and alone. She used to do everything with her husband when he was alive, and so did not have any hobbies of her own and was lacking the confidence to get out and meet new people.

After receiving two Hand to Heart visits, Sylvia was connected to local Probus Club where she has since become a member. She has made new friends at the club and although she still gets anxious leaving the house, she has noted that it gets easier each time she attends the group. She is planning on trying out one of the senior's clubs that was recommended during a Hand to Heart visit, and is also looking at joining an oil painting class.

“One of my first visits was to a lovely 80-year-old lady who had lost her husband a few months prior to that. They did everything together and she just didn’t know what was available out there. Fay (volunteer) and I went in and we came away almost in tears, because she was so accepting... she just enveloped us really and the fact that we could offer so many ideas of what was available in the community.”

“Once she realised there were things out there that she could go out and do, we came away and she was a totally different woman.”

- Dawn, Hand to Heart Volunteer -



"I get a lot out of the visit, especially after we've left and [the senior has] a big smile on their face.

"It helped me getting out and communicating with people as well as I was helping the community."

- Dave, Hand to Heart Volunteer -

Howard's Story

Howard, a war veteran living with a condition affecting his speech, balance, swallowing, and eye movement, was referred on to Hand to Heart by his wife. He and his wife were having difficulty finding appropriate social groups or meaningful and engaging activities within their local area and he was socially isolated as a result of this.

Howard received two Hand to Heart visits, in which volunteers were able to suggest community groups including the local RSL, a local coffee and chat group, and the local Men' Shed that he might be interested in attending for the social aspect. With Howard's main barrier being transport, the volunteers suggested he contact his assessor who referred him on to Hand to Heart to find out his eligibility for subsidised transport.

Upon follow up, Howard and his wife were over the moon with the outcomes of the program. Howard was approved for a home care package and now has access to volunteer transport twice a week, and can also access a volunteer for \$7/hour to take him on outings. Howard's wife said it was wonderful to have him out of the house trying new things and also allowing for some respite for herself.





Useful Links

My Aged Care

My Aged Care is the starting point to access Australian Government-funded aged care services. The phone line and website can help older Australians, their families and carers to get the help and support they need.

Council of the Ageing (COTA)

COTA provides leadership in social policy and community information and education for all older persons in Australia.

Dementia Australia

Dementia Australia supports and empowers Australians living with dementia and people involved in their care. They provide trusted information, education, and support services.

National Seniors Australia

National Seniors is a not-for-profit organisation that fights hard for seniors' rights and to achieve better outcomes for all older Australians.

COMPASS - Guiding Action on Elder Abuse

Provides information, advice, and a guide to support services that help against elder abuse in Australia.

GLBTI Rights in Ageing Inc. (GRAI)

GRAI is a voluntary group that works to enhance the quality of life for GLBTI elders, focusing on improving GLBTI awareness in aged care services.

Centre for Cultural Diversity in Ageing

The Centre for Cultural Diversity in Ageing provides expertise in culturally inclusive policy and practices for the aged services sector.

National Aboriginal Community Controlled Health Organisation (NACCHO)

NACCHO is the national leadership body for Aboriginal and Torres Strait Islander health in Australia.

People with Disability Australia (PWDA)

PWDA is a national disability rights, advocacy and representative organisation that is made up of, led and governed by people with disability.

Palliative Care Australia (PCA)

PCA represents all those who work towards high quality palliative care for all Australians. They influence, foster, and promote the delivery of quality palliative care for all who need it, when and where they need it.

Carers Australia

Carers Australia is the National peak body representing Australia's carers. Carers are people who provide unpaid care and support to family members and friends who have a disability, mental illness, chronic condition, terminal illness, and alcohol or other drug issue, or who are frail aged.





*"You are never too old to set another goal
or to dream a new dream."*

- C.S. Lewis -





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