



It takes a village: Collaborations for virtual volunteering in a hospice during COVID-19

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Background

COVID-19 has impacted the healthcare sector in many ways. Social safety measures in hospices in Singapore include cessation of non-essential services such as volunteering. Literature has shown that volunteers are valuable in enhancing the quality of life of patients in hospices, with typical volunteer activities in hospice including animal assisted activities (Nepps et al., 2014). With the rise of telehealth during COVID-19, there is also an increase interest in virtual volunteering (VV) such as virtual animal assisted activities (VAAA). However, there is still a lack of literature on VV. Due to safety precautions during COVID-19 such as restricted staff movement, collaboration between staff is even more crucial for the effective implementation of VV.

Aims

This study aims to highlight VV in a hospice in Singapore through a retrospective case study of VAAA. The objectives are

- (1) Highlight the collaborative efforts between staff required for VV in a hospice.
- (2) Add to the experiential practical knowledge in the literature about VV in end-of-life care during COVID-19.



Patient experiencing VAAA

Method

It involved a collaboration between the volunteer management team and volunteers, alongside staff from the Social Work and Psychosocial Services (SWPSS) team who were the physical facilitators. Further questionnaire and survey were also conducted about the experience of VV in the study.

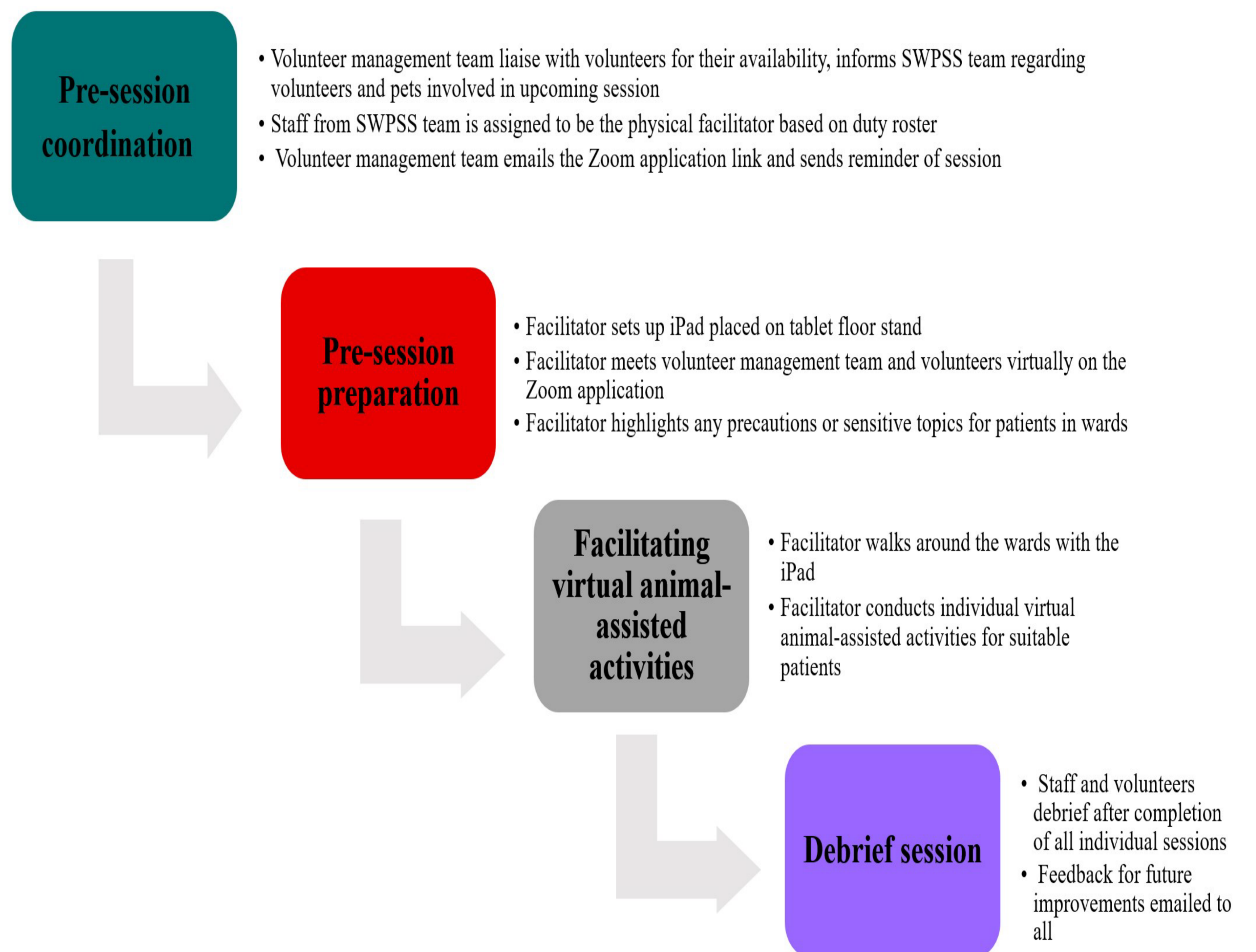


Figure 1. Overall structure of VAAA sessions.

Results

Benefits of VV include increased comfort as virtual interactions can be less intimidating, the ease of incorporating other technological elements such as videos. Rapport building and engagement were also effective on virtual platforms. Challenges for VV include communication difficulties, as well as technical difficulties.

Conclusion

This study recommends VV to be implemented with an inter-staff collaborative approach, and be explored as an additional alternative way of volunteering in end-of-life care as part of normal practice.