Service Priorities and Programmes

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The Carers and Volunteers Partnerships Activity Program

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Introduction

The Carers and Volunteers Partnerships Activity Program was a program created and implemented out of a mission to assist ward staff and families to connect with one another meanwhile foster the community participation through voluntary workers. It was also a program that helped patients increase social interactions with outsiders through inter-ward recreational activities and the involvement of volunteer workers.

Objectives

1) To promote the optimum health and well-being of families and careers of people with intellectual disability 2) To promote patients recovery process through principles of social inclusion 3) To enhance community partnership

Methodology

The program was conducted on once every four weeks in a period of 6 months. There were 8 sessions in the program including ball games, group games, group singing, food party, community orientation, educational talks and group discussions. Program promoted family involvement in patients' caring and building relatives- staff partnerships as well as volunteers-staff partnerships. A self-report pre-post design was used. There are 2 sources of information to evaluate the effectiveness of the program, the first one is the "Training Program Evaluation Questionnaire" to evaluate the content and overall arrangement. The second one is the "Family Involvement Questionnaire" completed by each family member to reflect their attitude change on patient's recovery process.

Result

From May to October 2014, there was 14 patients with 16 relatives attended the program. Higher scores indicated greater knowledge. The mean Family Involvement

Questionnaire pre-program score was 38.3 and that for post-program score was 46.7. All of these relatives reported having greater levels of attitude change on patient's recovery process after program. A paired t-test on the collected data was performed producing a t-value of -4.91 and a p-value of p=0.039 (<0.05, confidence level 95%). The p-value, smaller than 0.05. The relatives completed the "Training Program Evaluation Questionnaire" right after each activity. All of them were satisfied in varying degrees with activities of the program. .Indeed, the overall satisfactory level towards the content and overall arrangement of the program according to the survey rose gradually from 25% "satisfied" and 75% "very satisfied" with the first activity up to 100% "very satisfied" with the last three. Conclusion: Families need to feel empowered to take ownership of caring the hospitalized patients and invest in building them to capacity. Hospital workers must move from the traditional perspectives of what and how families should be involved in caring of the LD patients. Barriers must be overcome. One recommendation is to create more family involved activities in future. Wards should also implement appropriate family involvement practices. Also developing the value and significance of the voluntary workforce as community partners should be enhanced. A recommendation is to provide more opportunities for volunteer workers to participate in the future programs.