

HOME Hospice

enabling people to die in dignity and peace

Watching someone die can be one of life's most traumatic events. Allowing them to die at home surrounded by loved ones in a familiar setting can dramatically ease the pain for all those concerned. Between 80 to 90 per cent of people wish to die in this way. Sadly, only 10 to 20 per cent of Australians get their wish.

Apart from the obvious emotional consequences to the dying and their carers, institutionalised death costs the Australian health system millions of dollars each year. As the cost of delivering new technology and demand for too-few beds increases, so will this number, especially given the rate at which our population is expected to age over the next 40 years. By 2044, one quarter of Australians (or eight million people) will be aged 65 years or over, roughly double the present proportion.

HOME Hospice is a national organisation which uses a unique model of community-engaged care – refined over the organisation's 27-year history and gaining significant interest internationally – to address the growing demand to die at home in a 'living environment', a circumstance that used to be the norm but has been forgotten.

To this end, families and carers are able to tap into HOME Hospice's support network via the internet, a telephone hotline, or via rigorously trained volunteer 'mentors' to identify their own resources or request external assistance from the community.

This is important because it costs about \$72,000 on average for someone to die in hospital. HOME Hospice, on the other hand, spends about \$600 per family to guide them through this time with practical, spiritual and emotional support for the entire journey regardless of length. This service,

which costs less than one day's stay in an acute hospital bed, is free to families.

But the benefits of enabling people to die at home extend far beyond economics: the dying person experiences significantly less physical, emotional and spiritual pain; increased comfort; lower anxiety levels; and reduced isolation and loneliness.

Carers gain comfort and peace as a direct result of the contact they have with their loved one during those final days.

WHY SVA BACKS HOME HOSPICE

SVA supports HOME Hospice because the venture fills a significant gap in the current provision of palliative care. Most palliative care strategy and policy is heavily focused on symptom/pain management. HOME Hospice's community-engagement model provides choice with holistic support beyond purely medical interventions.

HOME Hospice has operated on a volunteer basis since 1980, helping 350 people die at home. The success of its proven model has attracted significant international interest, with organisations in South Africa, the United States and Vietnam indicating their interest in adopting the program.

GROWTH

HOME Hospice founders Helen-Anne and Gerard Manion decided to create the HOME Hospice model after witnessing time and again a profound need for such a service in their respective work with the dying, Helen-Anne as a palliative care GP and Gerard as a counselor running a holistic cancer care program. It was their collaborative work with a terminally ill cancer patient who wanted to die at home that brought life to the venture's future.

In the ensuing years, the Manion's worked hard to build on their foundation – formulating and updating training modules for volunteers, training mentors, providing links from healthcare services to homes, trying to drum up international interest. They successfully incorporated HOME Hospice into a non-profit organisation and charitable entity in 1994.

But the competing demands of growing the organisation, attracting new funding and restoring in the community a sense of responsibility in caring for its dying saw the Manion's struggle to make things work. It was at this point that they sought support in formerly passing on their legacy.

HOME Hospice largely shut down during 2006 to develop a 'survival-and-growth' strategy to shift it from being a purely volunteer organisation into a dynamic social venture. It recommenced operations in February 2007.

In our short engagement with HOME Hospice, SVA has helped fund the salary of the venture's first CEO and to develop a Board. We have also assisted in strategic planning for the next three years and in building partnerships for financial independence. With this capacity funding, HOME Hospice launched its website and is developing an eLearning platform for its mentors.

WHAT'S AHEAD

HOME Hospice officially relaunched at an October 2007 ceremony in Sydney. It has made strong progress with its program development in NSW, with plans to extend to VIC and QLD by the end of June 2008. By then it hopes to have hired a national outreach program manager and executive assistant, and have trained 30 new mentors to work in the three States mentioned here. HOME Hospice also plans to provide support to any international groups adopting its program.

By mid-2008, the organisation plans to have directly supported 100 dying people and their carers through the mentor network and have more than 400 people access information from the HOME Hospice website or its 1800 Hot Line. Its longer term goal is to see 40 per cent of people die in their own homes over the next five years. SVA will help facilitate that growth through continued funding, including \$240,000 over the next two years.