

# **Red Cross Health Point**

Implementation instructions

 $Reducing\ health\ inequalities\ through\ health\ dialogues\ and\ encounters$ 

September 2025

## CONTENTS

ntı	oduction	3
1 F	led Cross Health Points	4
-	The mission and objective of Health Point activities	4
-	The foundation of Health Point activities	4
5	Starting Health Point activities	5
	Insurance policies	6
	Cooperation with municipalities and wellbeing services counties	6
	Cooperation with educational institutions and flexible internship	7
	Data collection	7
	Communications	7
	First aid preparedness	8
	Health Point models	8
	Accessibility of Health Points	8
	lob descriptions of Health Point workers	8
	Person in charge of the Health Point	9
	Health Point reception volunteer	9
	Health Point volunteer	9
-	he training path of a Health Point volunteer	. 10
2	Distribution of responsibilities in the organisation	. 11
	Rights and obligations of volunteers	. 11
	Rights and obligations of the organisation	. 12
3 E	ncounters at the Health Point	. 14
ľ	Notivational health dialogues	. 14
Į	Jse of health indicators at the Health Point	. 14
5	Supporting inclusion	. 15
(	Challenging situations	. 15
4 H	lealth Points as part of overall preparedness	. 15
Αр	pendices	. 16

### Introduction

The key objectives of Red Cross health promotion activities are to strengthen community health and reduce health inequalities. At Health Points, trained volunteers work in their local communities and changing health environments, engaging in evidence-based, motivational health dialogues with the people they meet. The aim of these encounters is to identify health challenges at an early stage and support health behaviours that promote wellbeing.

Health Point activities are part of the work to reduce health inequalities, together with other organisations, municipalities and wellbeing services counties. The activities are targeted at those most in need, such as people in challenging financial situations, the elderly or people who do not seek official healthcare services for fear of stigma. The activities are in line with the organisation's policy, values and principles and comply with the Health Policy 2024 provided by the Federation.

The implementation instructions are being revised as part of the work to develop the Health Points. The content of the implementation instructions has been compiled using the results of two surveys: one for healthcare planners in the districts (2019) and one for volunteers and employees of the organisation (2024). In addition to these, the cookies of the development workgroup and the results of the workshop held on Health Promotion Seminar (2024) have been taken into account in the preparation of these instructions. Furthermore, the results of the organisation's scenario work on the new direction of health promotion are reflected in their latest form in this version.

The Finnish Red Cross (FRC) Health Point implementation instructions are updated regularly and approved by the first aid and health operations expert group appointed by the FRC Board. These implementation instructions have been processed by the Health Point activities development group in the summer of 2025 and approved by the first aid and health operations expert group on 15 September 2025. The implementation instructions will next be discussed in autumn 2026, when the three-year period for developing Health Point activities is coming to an end.

The aim of these instructions is to support Red Cross branches in implementing high-quality Health Point activities and rewarding volunteer opportunities. The districts support the branches in this effort. The implementation instructions are applied at all Red Cross Health Points.

15 September 2025 Finnish Red Cross Headquarters

## 1 Red Cross Health Points

## The mission and objective of Health Point activities

Growing health inequalities make life more difficult for those in vulnerable positions. By strengthening the resources of **vulnerable people** and supporting them to take care of themselves and their loved ones, we can increase **health equity**.

Healthy and resilient communities are more able to cope with and recover from crises. We help people **in everyday crisis situations**, **no matter how big or small**. Our work supports the **crisis resilience of individuals and communities**. We strengthen the ability to deal with **health threats** by preparing for them.

#### The foundation of Health Point activities

The key objective of the Health Points is to work towards reducing health inequalities. The activities are targeted at **those most in need**, such as people in challenging financial situations, the elderly or people who do not seek official health information for fear of stigma, e.g. people who are undocumented, use intoxicants or live with mental health challenges. The activities are planned using the Stronger, Healthier Community needs assessment model.

The Finnish Red Cross Health Point activities are guided by the values and principles of the organisation. The activities respect the fundamental principles of humanity, impartiality, voluntary service, neutrality, universality, unity and independence, as well as the principles for a safer space. Health Points are low-threshold services, as they are **free of charge** and can also be visited **anonymously**. The activities are **confidential** and require volunteers to respect professional secrecy. Each volunteer signs a confidentiality agreement. The Health Points adhere to the organisation's Code of Ethics and the principles for a safer space.

The work carried out at the Health Points is volunteer work that **promotes health**, **prevents illness and focuses on early detection**. It does not involve making diagnoses, adjusting medication or performing procedures. If necessary, the Health Point will refer customers to their local health centre or other healthcare services. On the other hand, official healthcare providers can also refer customers to the Health Points to have their blood pressure measured, seek counselling or participate in volunteer activities. The activities are based on **community-oriented health work** and a **holistic approach to health**.

Health Point activities reinforce the work of the authorities and increase safety in communities by being a reliable partner and promoting wellbeing, health and safety in their own area. The Health Points are established in communities as part of the municipalities' wellbeing work together with other organisations. Health promotion work also involves cooperation with wellbeing services counties. The work carried out at Health Points supports national and regional health and wellness programmes and plans.

The Health Points disseminate information and engage in health dialogues using **evidence-based information**, which refers to the best available, up-to-date and scientifically proven information, as well as the current national standards of care. The Health Points can provide a meeting place and a space to engage in health dialogues with trained volunteers and receive support for coping with everyday life. Outreach and community-based methods are used to reach people and target activities at specific groups.

The counselling provided by volunteers is supported by methods and practices that have been identified as effective: motivational interview-style **health dialogues**, brief interventions and referrals to other services. Volunteers are trained in the selected methods. Health indicators can also be used to support counselling and dialogues, particularly when initiating the discussion. When using health indicators, screenings and tests, it must be ensured that volunteers understand what is being assessed and know how to proceed based on the results. In all encounters, the most important thing is to listen to the customer, not to focus on measuring.

The Health Points **do not provide medical care**. If necessary, visitors are referred to local health services for treatment. The Health Points do not create patient records or keep patient registers of the counselling and health dialogues provided in their activities. Statistics are compiled while maintaining customer anonymity. The Health Points do not collect personal data or other information that could be used to identify visitors. Volunteers are not allowed to keep any visitor identifiers in paper form either. Visitors can be given the information written on their health cards or a written referral to health services.

The Health Point workers may not recommend alternative therapies or refer people to them. Alternative therapies are treatments and methods that are not based on the medical knowledge of our official healthcare system and whose efficacy or safety has not been reliably proven. The Health Point workers are not permitted to make or suggest diagnoses, nor are they allowed to interfere with a customer's medication or treatment plan. If they identify any problems in this regard, they should refer the visitor to their own healthcare provider.

The activities include theme and training days, various forms of group activities and national theme weeks and days. The Health Points can also serve as mobile service points or pop-up points with different themes, depending on the needs arising in the area. Accident prevention plays a key role in the pop-up events and health dialogues carried out by the Health Points.

Online help is part of Health Point activities, and it is carried out in close cooperation with online volunteers. Separate online Health Points are not currently considered necessary, as public health services are expanding their digital services. If a branch or district identifies the need to set up an online Health Point, it is advisable to do so in close cooperation with the headquarters' online help team. It is not possible to limit online help within geographical boundaries.

Health Points are part of the preparedness of branches and prevent the occurrence of disruptions by promoting health, preparing for local disruptions (such as pandemics) and strengthening the crisis resilience of communities. In 2026, the third year of the three-year development project, we will take a closer look at the role and tasks of Health Points as part of the organisation's overall preparedness.

#### **Starting Health Point activities**

Health Point activities can be initiated by a volunteer or a member of a branch based on their observations in their area. Anyone can propose to their local branch that a Health Point be established to meet local health needs. The need for health promotion in branches may arise from their own activities, such as local needs assessment work (the Stronger, Healthier Community model). Once the branch has a common will to establish a Health Point, the planning and launching of activities in the branch can begin. The decision to start Health Point activities is made by the branch board. When starting new activities, it is a good idea to appoint volunteers to be responsible for them. At least one volunteer with a professional background in healthcare should be appointed for the Health Point activities. To reduce the

vulnerability of the activities, it may also be advisable to appoint a team of responsible persons.

An action plan for the Health Point will be drawn up as part of the branch's action plan. A budget will also be drawn up in conjunction with the preparation of the action plan. The budget sets out how the branch will support the activities financially. When drawing up the budget, the branch surveys the subsidies offered by the municipality and the wellbeing services county and applies for them, if necessary. New Health Points can order a start-up package (Appendix 1). The district employee in charge of the Health Points will assist in obtaining the start-up package.

It is recommended to use the method of the Stronger, Healthier Community needs assessment model, the objectives and contents of the Red Cross health promotion programmes and the Health Point model options in the preparation of the Health Point action plan. The purpose of the activities is to meet the health promotion objectives and health needs of the branch's area.

As the core task of a Health Point is to respond to local health needs in cooperation with partners in the area, each Health Point and activity group is different. It is essential to ensure that when a Health Point is set up, it adheres to these implementation instructions and complies with the Decree on the Finnish Red Cross.

## **Activity group**

Volunteers are widely recruited to join the activities, and attention is paid to the diversity of the group. The Health Point activities are carried out in a way that strengthens inclusiveness and ensures accessibility. The Health Point volunteers will form an activity group.

The activity group is created digitally in the Oma system for volunteers. Being in digital format, the activity group allows you to receive national bulletins, inform other volunteers about your group's activities, access the future digital map on the organisation's website, report on activities and communicate any findings concerning the operating environment to the organisation's situation centre (part of the contents of the development plan will be implemented in 2026).

The activity group can be established in cooperation with a neighbouring branch or between all volunteers involved in health promotion. The wellbeing of vulnerable people can be promoted together with the volunteers in food aid activities, substance abuse work, accident prevention work, first aid group operations or other activities.

#### Insurance policies

The Red Cross has insured its volunteers with collective accident insurance and liability insurance. The healthcare professionals working as volunteers have their own patient insurance. For events that require insurance, you should always contact the district employee in charge of the Health Points.

#### Cooperation with municipalities and wellbeing services counties

Health Point activities can be carried out as a joint wellbeing work between the municipality and organisations. The promotional activities of the Health Points support municipalities' health promotion obligations and wellbeing plans and respond to the needs of local communities.

Preventive action, using the method of early intervention, supports the wellbeing plans of the wellbeing services counties. Individual support tasks can be agreed with the wellbeing

services county, and it is particularly advisable that the wellbeing services county professionals support further training of the organisations and ensure that the organisations are informed about changes in the healthcare system.

The Health Points can have agreements with municipalities or wellbeing services counties. The content of the activities can be carried out in cooperation with other organisations. All agreements must be drawn up using the Red Cross agreement template, and the district must be made aware of all agreements. Agreements with wellbeing services counties are always concluded in cooperation with the district.

## Cooperation with educational institutions and flexible internship

It is possible to undertake practical nursing training by volunteering at a Health Point. Internships are carried out in cooperation with educational institutions and according to official guidelines. The flexible internship model developed at Youth Shelters enables nursing and healthcare students to train in an organisational environment. Each student signs an internship agreement and is supervised by an employee of the organisation with qualifications and skills in the healthcare sector. In the Helsinki and Uusimaa region, a flexible internship model is being piloted in the programme for undocumented immigrants.

#### **Data collection**

It is important to report on the activities carried out at the Health Point to demonstrate its impact, secure funding and increase the visibility of the Health Points.

Reporting is carried out using forms linked to the Oma system's activity group. The volunteer in charge of the Health Point sets up the activity group in the Oma system (Appendix 3). The branch's health operations coordinator and the Oma system's administrator can help with this if necessary. It is recommended that all Health Point volunteers create a profile and log in to the Oma system. Reports can only be submitted when logged in.

Health Points use the visitor survey to report information such as visitor background data, the reason for visiting the Health Point and whether the visitor received the help they needed. The other form is used to report on events and occasions. The information is reported completely anonymously and based on the volunteer's assessment. The data collection is being developed with the aim of enabling each Health Point to access its statistics in real time in the future. In 2025, the headquarters collects the data and distributes it to the districts.

Visitor surveys are carried out every six months. The aim of the visitor survey is to assess visitors' inclusion and access to help. The first visitor survey was conducted in November 2025.

## **Communications**

All communications should have a consistent visual style and adhere to the messages outlined in the health promotion communications plan (Appendix 2) as well as the organisation's visual identity and photographs. Multilingualism should be taken into account in communications. The aim is to produce content in Finnish, Swedish and English and to take into account the need for easy language where necessary.

Interpretation software can be used when communicating with a person without a common language. The Health Points for undocumented immigrants use the Túlka interpreting software, but free tools such as Google Translator and DeepL are also available.

The organisation's communications specialist and the headquarters employee in charge of the Health Points provide support with media cooperation when necessary.

#### First aid preparedness

The preparedness to help in situations requiring first aid is part of the basic skills of volunteers, and the contents of the start-up package have been designed with this preparedness in mind. All volunteers working at Health Points should have a basic understanding of first aid. It is recommended that they take the FRC First Aid Course EA 1® and maintain their emergency first aid skills. Since Health Points operate in the healthcare sector, most volunteers have professional-level first aid skills, but it is also important to ensure that these skills are practiced in changing conditions outside of clinical settings. The Health Point group may include a volunteer responsible for first aid, which means that at least one member of the group would have up-to-date emergency first aid skills.

No medical treatment is provided, but help is always given in the event of accidents, incidents or medical emergencies where basic first aid skills are sufficient. The most important thing is to be prepared to help, prevent further incidents and call for help.

#### **Health Point models**

Most of the Health Points are permanently located in the premises of a branch or partner. Some of them operate as mobile or pop-up Health Points. Health Point volunteers also participate in campaigns, fairs and other events.

As the focus of activities is increasingly shifting towards vulnerable groups, the number of mobile Health Points using an outreach approach is growing. In addition to this, it is recommended to organise Health Points in collaboration with other volunteers from the organisation. These include communal meals organised with food aid volunteers, meeting places organised with volunteers in loneliness or immigration work, where the Health Point can operate as an outreach service, or online help groups that are guided together with volunteers in loneliness work.

## **Accessibility of Health Points**

When selecting the location for a Health Point and planning its activities, careful consideration should be given to accessibility. By doing so, we can promote equality among different visitor groups and ensure that everyone has safe access to the activities. In terms of physical accessibility, consideration should be given to factors such as ease of movement (the location should be easy to access with a walker or wheelchair). In terms of the accessibility of information, issues such as comprehension and communication should be taken into account, and information about the Health Point's activities should be provided in easy language. When setting up the Health Point, particular attention should be paid to the primary target group of the Health Point's activities.

## Job descriptions of Health Point workers

Originally, all volunteers working at Health Points were healthcare professionals. According to the current implementation instructions, other health promotion volunteers can also work at Health Points, supplementing the services provided by Health Point receptions with their skills and training. The Health Point volunteers can also carry out health briefings within the scope of their own expertise and skills.

Each volunteer logs into the Oma system, creates a volunteer profile and joins their own Health Point activity group. The Oma system also includes a nationwide group of Health Point volunteers open to anyone interested in Health Point activities.

Each Health Point volunteer signs a confidentiality agreement and commits to complying with it in the activities. It is also recommended that volunteers read the ethical guidelines on which Red Cross volunteer activities are based.

#### Person in charge of the Health Point

The person in charge of the Health Point must be a qualified healthcare professional with a valid licence or protected occupational title. They are primarily responsible for ensuring that the health counselling provided is based on evidence. Other tasks include coordinating the activities of the Health Point and guiding the activities of the activity group. In cooperation with the branch's health operations coordinator, the person in charge of the Health Point ensures that its activities are linked to the branch's operations and overall readiness and that the training paths for volunteers are realised. The person in charge of the Health Point ensures the quality of the Health Point's activities, the orientation of new volunteers and their competence for each task. They ensure that volunteers are suitable for the task and agree on the volunteers' tasks at each Health Point separately, depending on the theme or nature of the counselling provided, as well as the volunteer's educational background, other training and orientation.

The person in charge of the Health Point ensures the quality of the Health Point's activities, the orientation of new volunteers and their competence for each task. It is recommended that responsibility for the Health Point be shared between a pair or team. The team divides the tasks according to their interests and expertise. The person in charge of the Health Point is supported in their duties by the district's health operations coordinator.

#### **Health Point reception volunteer**

Volunteers who engage in health dialogues in reception-type settings should be well versed in health promotion content and methods, as well as in assessing healthcare needs. The requirements for professional qualifications depend on how the Health Point profiles itself and what kind of training and skills the volunteer has. If health screenings are used in the activities, their management must be ensured. A professional background in the social or healthcare sector is an advantage in this role.

In order to measure blood sugar levels, volunteers must have healthcare training and complete the course 'Measuring blood sugar levels in volunteer activities' in accordance with the course requirements.

Healthcare students who are authorised to work as nurses in the healthcare sector can also become Health Point reception volunteers. Students always work under the guidance of experienced volunteers, and the actual responsibility for guidance lies with district employees who have a professional background in healthcare.

#### **Health Point volunteer**

Anyone interested in health promotion can volunteer at the Health Point. Volunteers who do not have training in the healthcare sector can perform tasks that are not comparable to medical care. All volunteers meet visitors and are there to listen to them. One of the most important goals of the Health Point volunteer activities is to make visitors feel seen and heard. Other duties may include arranging the coffee service, managing communications, compiling/monitoring statistics/reports, acting as a first aid officer or driving vehicles. All

Health Point volunteers commit to following the implementation instructions and ensuring that the information provided at the Health Points is evidence-based.

#### **Dress code for volunteers**

The dress code for each volunteer includes at least a volunteer photo ID card and the organisation's lanyard. The ID card indicates the Health Point and branch. The volunteer cards are issued after completing the 'Basics of Health Point activities' course. Districts are responsible for managing the ID cards. Information on the use of the ID cards can be requested from district employee in charge of the Health Point activities. The activity groups may also agree on the use of vests, hoodies or other organisation accessories in accordance with the requirements of the type of activity. The choice of vest depends on the task: on-call vests are used when out in the field, while regular volunteer vests are sufficient at fixed partner locations. When volunteers are out in the field wearing on-call vests, they must be prepared to administer first aid.

## The training path of a Health Point volunteer

Training		Contents	Prerequisites
Online induction to health promotion	online	Introduction to our shared history and the Red Cross health promotion programmes. Using reliable sources of health information.	Welcome to our shared story
Basics of Health Point activities	IN-PERSON / HYBRID	Framework for Health Point activities Volunteering in Red Cross health promotion activities Launching Health Point activities Customer work at the Health Point	Online induction to health promotion
Interactive webinar	WEB	Applying the motivational interviewing method Safety of volunteers and those they encounter Bringing up challenging issues, motivating change and engaging in safe encounters	Recommended for all health promotion volunteers
FRC First Aid Course EA 1®	IN-PERSON, HYBRID	The course can be taken either through the branch or district, or by participating in courses offered by Punainen Risti Ensiapu	Recommended for all health promotion volunteers
Stronger, Healthier Community model	IN-PERSON	Identifying and assessing local health needs Implementation of needs-based Health Point activities Preparation of an action plan	Complementary module
Use of health indicators at Health Points	WEB	Contents of the indicators set out in the implementation instructions:  - AUDIT, AUDIT 65  - KaatumisSeula  - Bringing up loneliness  - FINGER model  - T2DM risk test	Complementary module for people with a professional background

		- Coping - VS, RR	
Referral to services in volunteer activities	WEB	Using the Finnish Service Catalogue and referring visitors to social and healthcare services FSC driving licence – Basic skills and practical use of the Finnish Service Catalogue – eOppiva (in Finnish)	Complementary module to be available in autumn 2025
Induction to mobile activities (Southwest Finland)	in-person	Special characteristics of mobile activities and training in vehicle operation	Training included in the project of the Southwest Finland district
Social and healthcare services for undocumented immigrants, WEB	WEB	Support for operating at Health Points for undocumented immigrants	Complementary module / Programme for undocumented immigrants, Helsinki and Uusimaa district
Mental health support at Health Points	?	Discussions and encounters to support mental health	Complementary training to be produced in the project of Lapland and Oulu districts in 2026
Measuring blood sugar levels in volunteer activities  Vuolearning	online	Taking measurements Special situations and interpretation of the results Blood exposure guidelines Responsibilities of volunteers	for people with a professional background in the healthcare sector
Health Promotion Seminar	in-person / hybrid	Annual training and development event and networking opportunity	Complementary for all health promotion volunteers

Training courses designed to support Health Point activities.

## 2 Distribution of responsibilities in the organisation

## Rights and obligations of volunteers

Volunteers have the right to participate in Health Point volunteer activities that match their skills and to receive orientation, training, information and support related to their role. Volunteers must be offered guidance on the activities, support in dealing with challenging

situations and aftercare. Red Cross volunteers are covered by volunteer insurance whenever they are volunteering.

Volunteers are obliged to act in accordance with the values and principles of the Red Cross, as well as the guidelines and rules approved by the Red Cross. Volunteers agree to maintain confidentiality as required by their activities and tasks and sign a confidentiality agreement. Volunteers accept responsibility for their volunteer role on a voluntary basis and commit to performing the tasks as agreed. Volunteers receive training for their tasks and may refuse tasks that are unsuitable for them, for example for health reasons or due to insufficient orientation.

#### Rights and obligations of the organisation

The organisation has the right to monitor the quality of the activities and decide on their continuation, select volunteers who are suitable for the tasks in question and terminate the activities if they are not in line with the principles of the Red Cross. The organisation encourages volunteers to become members.

It is the responsibility of the organisation to plan, implement and evaluate activities from the perspective of volunteer activities. The organisation guarantees the rights of volunteers and allocates sufficient resources for volunteer activities. Anyone interested in participating is welcome to join, and tasks are assigned according to their skills. Volunteers are provided with the necessary orientation, training, professional support, guidance and tools for their tasks. The implementation instructions define the rights and obligations of volunteers and guide the implementation of activities in accordance with the organisation's policies. Volunteers are offered opportunities to develop their skills in their tasks. The organisation is responsible for providing a sufficiently safe operating environment.

The obligations of the organisation are fulfilled in accordance with the distribution of responsibilities and tasks between the branches, districts and the headquarters.

### Role of the branch

In accordance with the distribution of responsibilities agreed upon within the branch, the branch will:

- contact the district employee in charge of healthcare to appoint a person in charge of the Health Point, obtain instructions and materials, seek funding and draw up an action plan and budget;
- appoint a person in charge of the Health Point after the district's approval;
- discuss the establishment of the Health Point and approve it at its board meeting;
- negotiate and agree with local social and healthcare services on the role and tasks of the Health Point in the municipality;
- fund the Health Point activities and volunteer training where possible;
- ensure that the activities are carried out safely;
- recruit volunteers for its activities, instruct them to participate in training and provide them with practical orientation;
- monitor the level of volunteers' skills and ensure that the activities comply with the implementation instructions and meet the quality requirements;
- participate in municipal wellbeing work and cooperate with other organisations;
- establish a Health Point activity group in the Oma system and report on the activities;
   and
- include the Health Point volunteers in its preparedness plan.

#### Role of the district

The district employee in charge of the Health Point activities or another employee designated by the district is responsible for:

- supporting Health Point activities by advising the persons in charge of Health Points on regional needs assessments and operating principles and by providing them with the necessary information;
- ensuring that the Health Point's operating environment and implementation methods are safe;
- supporting the branch in local negotiations with stakeholders;
- negotiating matters related to the Health Points in regional agreements and participating in or applying for funding/grants;
- maintaining and updating the Health Point contact information;
- supporting the planning of activities and monitoring their implementation;
- monitoring and ensuring the quality of the activities:
- encouraging volunteers to participate in the training path of the Health Point activities:
- supporting the Health Point volunteers in their introduction to the content, quality and monitoring of the activities;
- organising meetings and training courses for health promotion volunteers in the district;
- appointing, together with the branch, the person in charge of the Health Point;
- recruiting trainers for Health Point activities and providing them with regional support; and
- organising training and communications in their area.

## Role of the headquarters

The headquarters supports the persons in charge of the Health Point activities in the districts in coordinating the Health Point activities. The headquarters is responsible for the quality and validity of the implementation instructions and training path, as well as for national visibility.

The specialist in charge of the Health Point activities is responsible for:

- supporting the work of the specialists in charge of the Health Point activities in the districts;
- maintaining up-to-date implementation instructions;
- planning and coordinating training in accordance with the training path in cooperation with district specialists;
- organising national complementary training courses;
- managing the training of the trainers in health promotion or Health Point activities;
- maintaining the national network of Health Point volunteers in the Oma system;
- developing data collection methods in collaboration with information specialists and providing training in data collection and exploitation;
- supporting the implementation of communication related to Health Points;
- preparing and maintaining the recommendations for materials used at Health Points;
- providing support for funding applications together with the headquarters' project coordinator; and
- developing activities and training in cooperation with the districts' responsible specialists.

### 3 Encounters at the Health Point

### Motivational health dialogues

The Health Point volunteer activities involve meeting people and engaging in equal health dialogues. In the health dialogues, volunteers provide visitors with a space to be heard and talk about health-related issues. Elements of evidence-based motivational interviewing methods and service guidance are utilised in the health dialogues. **A motivational health dialogue** (Appendix 4) is an interventional and motivational approach used at the Health Points. The most important thing in health dialogues is that visitors feel seen and heard. The aim is to help the visitor find and strengthen their motivation to make health-promoting changes. People are also supported in finding their own agency.

The health dialogues are based on methods used in the healthcare sector, but the discussions are not regarded as social or healthcare work. Instead, they are volunteer activities carried out on a person-to-person basis, in which volunteers use their own skills to promote the health of others.

#### Use of health indicators at the Health Point

The mission of Red Cross Health Points is primarily to help those in need, identify health risks and illnesses at an early stage and refer people to services. The measurements and screenings carried out at Health Points support this goal and are linked to our work to address loneliness, brain health, substance abuse and accident prevention, as well as being part of the fight against the obesity epidemic (Terveydeksi – national health and wellbeing programme). In addition to these, mental health is supported and the need for mental health services is assessed in all activities. The indicators used include AUDIT and AUDIT65, KaatumisSeula fall risk screening, Bringing up loneliness, T2DM risk test/Risk test for chronic diseases (in Finnish) and the FINGER model risk test. The ability to cope can be assessed using either the R-BDI or the GDS-15 questionnaire. The key questions from these questionnaires have been compiled for use in the volunteer work to make it easier to assess visitors' ability to cope.

Health screenings primarily support the decisions made by volunteers in health dialogues, helping to raise issues for discussion.

Blood pressure and blood sugar levels can be measured at the Health Point in connection with lifestyle guidance. Measurements are a good way to engage people in conversation. The most important thing is to meet people, give them a chance to be heard and engage in a health dialogue. The Health Point can also operate without taking any blood sugar or blood pressure measurements and focus solely on supporting mental health, for example.

Blood sugar can be measured by Health Point volunteers who are healthcare professionals, have completed the relevant complementary Red Cross training and have agreed to start taking measurements at the Health Point and to ensure quality with the district employee in charge of the Health Point activities. Health Points can provide health measurements in line with the expertise of the activity group members and in accordance with the implementation instructions. If health indicators are used, it is recommended that volunteers participate in the 'Use of health indicators at the Health Point' training module.

### Exposure to blood and bodily fluids

Volunteers must wear gloves when measuring a visitor's blood sugar or administering first aid in situations involving bodily fluids. It is important to know what to do in situations involving exposure to blood.

## **Supporting inclusion**

In Red Cross activities, we support inclusion and strengthening the experience of inclusion, particularly among the most vulnerable groups. Health Points contribute to this goal by giving visitors health information and skills, but also by getting them involved in volunteer activities or hobbies. In fact, sometimes it helps the most to become a helper yourself after being helped.

## **Challenging situations**

The training path for a Health Point volunteer includes a webinar on challenging situations and motivational interviewing. The webinar is a brief introduction to dealing with challenging situations. It is a good idea to discuss challenging situations in the Health Point activity group and to adopt the mood check-in method, either by attending a course organised by the organisation or by utilising the expertise of the activity group members.

## 4 Health Points as part of overall preparedness

The purpose of the Finnish Red Cross is to supplement social and healthcare services and to support operational preparedness during various incidents, crises, wars and national disasters. Health promotion plays a significant role in overall preparedness: improving people's health and capacity to act reduces the risk of disruption, and an increased capacity to act helps people to cope with and recover from crises and disruptions more effectively. Health promotion is part of the organisation's preparedness to help in emergency situations. Skilled volunteers and professionals are ready to carry out Red Cross activities wherever help is needed.

Health risks and the consequences of climate change are well known, and preparing for new types of pandemics is part of health work. We monitor health-related factors of global warming, such as zoonotic diseases, heat hazards and mass migration. Health Points can also decide to specialise in health risk and safety work and cooperate closely with local preparedness volunteers.

## **Appendices**

## Appendix 1

#### **HEALTH POINT MATERIAL PACKAGE**

Materials can be ordered for the Health Point from the Kalkku logistics centre.

Orders are placed by sending information about the Health Point to the district employee in charge of the Health Point activities and asking them to place the order.

They will then place the order by sending an email to <a href="mayorit@redcross.fi">myynti@redcross.fi</a>. A copy of the order will also be sent to the headquarters employee in charge of the Health Points at <a href="mayoritmagnetis">laura.tyyskanen@redcross.fi</a>.

The order must include a list of the products ordered, the branch of the Health Point, the delivery address and the name and phone number of the contact person. Orders are primarily delivered to a pick-up point. For compelling reasons, the package can also be delivered to the door.

During the 2025 development project, the headquarters will provide all Health Points with a start-up package if needed.

#### Contents

- 1 policy brochure, Fin/Swe/Eng
- 100 pcs of Health Point health cards, Fin/Swe/Eng
- Static sign, Fin/Swe
- 4 pcs of Red Cross lanyards for volunteer cards
- 1 table stand + Health Point cardboard sign in three languages
- 60 copies of the health promotion brochure, Fin/Swe
- 10 copies of the Safe Years guide, Fin/Swe
- 6 copies of the Safety at home checklist, Fin/Swe
- 50 copies of the Fragile brochure
- 10 pcs of Don't be alone friend activity cards
- 4 pcs of the Can you identify loneliness? Bringing up loneliness tool, Fin/Swe
- 20 copies of the Food waste guide, Fin/Swe
- 10 copies of the psychosocial support brochure, Fin/Swe/Eng
- 10 copies of the physical capacity checklist, Fin/Swe
- 2 pcs of Moomin stickers, bilingual
- FRC Travel First Aid Kit
- 1 blood pressure monitor with an arm cuff / can only be ordered if the Health Point does not have one yet
- 1 Health Point roll up (not available yet, expected to be completed in spring 2026)

Depending on how the Health Point profiles itself, it is also possible to order the following:

- Checklists of the accident prevention work
- Campaign materials of the accident prevention work: the Pysy pystyssä anti-slipping campaign and Accident Prevention Day
- Teddy Bear Hospital material
- Introductory first aid course material
- A foil sheet
- (Organising blood donation events)

## Digital material (Tieto ja Taito):

- Health Point implementation instructions
- Action plan and annual report
- Stronger, Healthier Community model / for those who have completed training
- Mood check-in instructions
- Reporting on Health Point activities
- Health risk tests:
  - o Identifying Ioneliness
  - o KaatumisSeula fall risk screening
  - Diabetes risk test
  - o FINGER memory disorder risk test
  - o AUDIT
  - Discussing the ability to cope

#### Appendix 2. The messages outlined in the Health Point communications plan

## 1. Growing health inequalities make life more difficult for vulnerable people

- Health inequalities between population groups are growing. Social inequality is increasing. Poverty and loneliness make it difficult to make choices that promote/support health.
- As the economic situation tightens, we must ensure the wellbeing and social inclusion of vulnerable people.
- · Low levels of education and income are reflected in the risk of illness and people's ability to take care of their health and seek services.
- Those in a particularly vulnerable position include people in a weak financial situation, people who have substance abuse problems or are at risk of developing them, the unemployed, people at risk of illness and/or social exclusion, people experiencing loneliness and some immigrants.
- Reducing inequality requires cross-cutting societal measures and structural changes. The goal of reducing health inequalities must be taken into account in all activities and decision-making processes. The greatest benefits are achieved by investing in the promotion of the health of the most vulnerable people.
- · Health, social wellbeing and inclusion are closely connected.

## 2. We are reducing health inequalities through human encounters

- Growing health inequalities make life more difficult for vulnerable people.
- The Red Cross promotes health and helps reduce health inequalities. In this way, we can reduce inequality in society.
- We promote health through human interaction, listening and counselling at Health Points, as well as at various other events, sobering stations and educational institution visits.
- We empower people by providing communities and environments that support them in making health-promoting choices. These include Health Points and first aid training for people who use intoxicants.
- People who receive help can become helpers themselves. We offer those who have received help opportunities to help others in roles such as volunteer trainers.

## 3. We support people's ability to cope with crises and function during them

- In crises and accidents, special attention must be paid to the health and wellbeing of vulnerable people, as they are often less able to adapt to and recover from changes compared to others. The Red Cross operates in cooperation with social and healthcare authorities, municipalities and other organisations.
- Through small everyday actions, we can take care of not only our own health and wellbeing, but also that of those around us. At the same time, we foster an atmosphere of caring.

## 4. We offer low-threshold discussion support for people's own health choices

- The Red Cross provides low-threshold, anonymous counselling on health and coping with everyday life. Health Points operate close to people, even in areas where healthcare services are far away.
- The content of the health dialogues is based on official recommendations and researched information. We supplement the wellbeing work of municipalities and support wellbeing services counties in service guidance by guiding visitors in the use of and access to social and healthcare services.
- At the Health Points, volunteers can talk to visitors about issues related to maintaining functional capacity, including nutrition, exercise, mental wellbeing
  and the use of intoxicants. The health dialogues are carried out using the FINGER model to support memory and cognitive functions in the elderly,
  UKK Institute's KaatumisSeula fall risk screening, AUDIT questionnaires to assess the risks of alcohol consumption, the Red Cross loneliness
  questionnaire and the T2DM test to assess the risk of diabetes. No medical procedures are performed, records are kept or registers are maintained at
  the Health Points. Paper referrals to healthcare services may be issued.
- The Health Point volunteers are mostly healthcare professionals. The Red Cross has around 110 mobile and permanent Health Points across Finland. Around 360 volunteers work at these locations.
- As a health promotion volunteer, everyone can help vulnerable people through human encounters. The Red Cross has volunteer roles in health promotion that require professional skills, as well as those that do not require any qualifications. We train volunteers for their roles.

## **Reporting on Health Point activities**

## **Background**

An activity group will be set up in the Oma system for each Red Cross Health Point. In Oma, users can inform other volunteers about the activities of the Health Point and use the activity group to inform their own volunteer group and report on their activities.

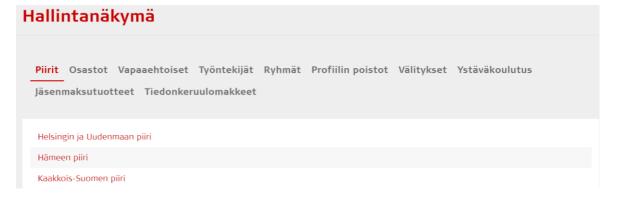
The activity group can be created by the branch's Oma system administrator. Link to the Oma Punainen Risti system.

Create a description of the Health Point that is suitable for publication in the map application.

## Creating an activity group

1. Select Administration

District



**Branch** 

Groups

Activity Groups -> Create Group.



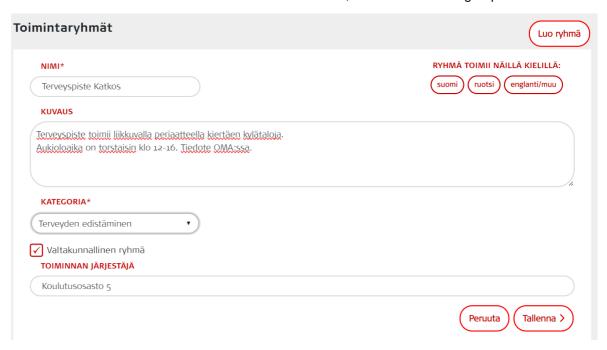
2. Enter the following information for the activity group

Name 'FRC Health Point Branch'

Describe the Health Point's activities, opening hours, etc. The description will be displayed in the map application.

Select category: Health promotion

If the intention is to collaborate across district boundaries, select the national group.



3. Click Save, and the activity group is ready.

You can either add members who are already registered in the Oma system to the activity group or request them to join the Health Point group. Make sure that only volunteers who are actively involved in the activities are accepted into the group.

Add a link to the reporting form on the activity group's page according to the instructions on the next page.

Please note that the activity group is a national group. This way, the Health Point will be visible to all users of the Oma system and will be included in national maps in the future.

## Data collection on Oma Punainen Risti activity groups using external forms

## **Background**

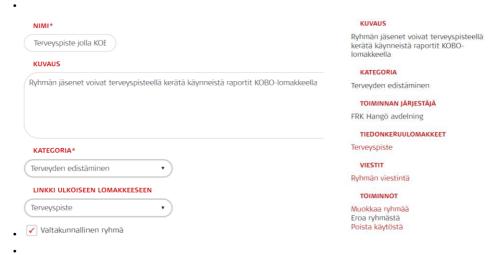
You can add a link to an external data collection form to the Oma system's activity group.

The form is used to collect data about the group's activities and results. The data is reported in the Power BI tool, which can be accessed by branches, districts and the headquarters. The aim is to provide up-to-date information to all parties responsible for the activities.

Note! You must always be logged in to the Oma system when submitting reports.

## Introduction of the form

- 1. The form for Health Point activities has been built into the IFRC KoboToolbox system. The form is administered by the headquarters employee in charge of the Health Points.
- 2. The Health Point form has been added to the Oma system (Administration -> Data Collection Forms). You can access the form through a link labelled with Health Point.
- 3. Each Health Point activity group adds the form to its own activity group page. Group members can see the link under Data Collection Forms. The form is always used in this view when reporting on activities.



- 4. Click the link to open the form.
- 5. Fill out a separate form for each encounter.
- 6. If you encounter any problems or have suggestions for improvement, please contact <a href="mailto:oma.tuki@redcross.fi">oma.tuki@redcross.fi</a>.

## REPORTING ON HEALTH POINT ACTIVITIES

## **Background**

Health Points are a key part of the Red Cross health promotion activities. Health Points are asked to report so that we can obtain up-to-date information on their activities. There are several purposes for using the information:

- Monitoring the activities of Health Points in branches and districts
- Justifying the significance and impact of the activities to stakeholders and potential financiers
- Communication about the activities (map application 2026).

The data is reported in the Power BI tool, which will be accessible to branches, districts and the headquarters in the future. The aim is to provide up-to-date and useful information to all parties involved in the activities.

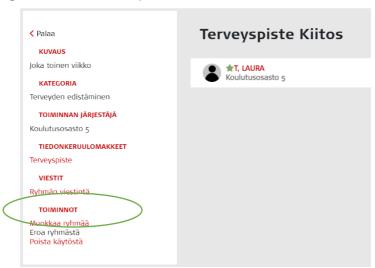
## Reporting using the visitor form

The form for Health Point activities has been built into the IFRC Kobo system. Each Health Point activity group adds the form to its own activity group page according to separate instructions.

The volunteer reporting on the activities creates a profile in the Oma system.

The Oma system profile is used to join the activity group of your own Health Point. Group members have access to the reporting form.

Group members can see the link under Data Collection Forms. The form is always used in this view when reporting on activities. Example from Health Point Kiitos:



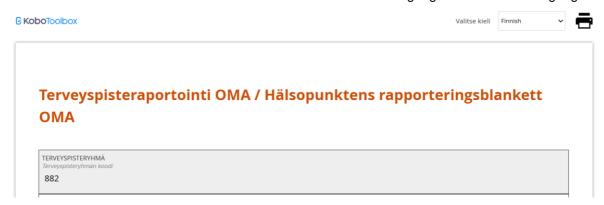
- 7. Click the link to open the form.
- 8. Fill out a separate form for each encounter.

## Filling out the Kobo form

Each Health Point activity group has its own code. In this example, it is 882.

Based on the code, the data is transferred to the data of the Health Point in question and can later be used by that Health Point.

The form is available in Finnish and Swedish. You can select the language under Select Language.



The form has been designed to be as quick as possible to fill out by adding response options to the questions.

KÄYNNIN KESKEISIN AIHE Mikä oli käynnin keskeisin aihe vapaaehtoisen arvioimana.				
Elintapakeskustelu (ravitsemus, liikkuminen tai uni/lepo)				
Henkinen tuki (akuutti tilanne, kriisi)				
Kiinnostus Punaisen Ristin toimintaan tai terveyspistetoimintaan				
Kiinnostus terveysmittauksiin				
Mielenterveyden tukeminen				
Palveluohjaus				
Päihteiden käytön puheeksiotto				
Riippuvuudet (päihteet, seksi, pelit)				
Seksuaalisuuteen liittyvät asiat				
Taloudellisen niukkuuden asettamat haasteet				
Tuki sairauteen tai sairastamiseen liittyvissä asioissa				
☐ Yksinäisyyden tunne				
MUU KÄYNNIN AIHE, MIKÄ?				
INICO NATININI AITE, WINA:				

None of the questions are mandatory. You can select one or more options.

When responding, it is worth considering the genuine reasons why visitors come to the Health Point.

You can freely write your observations in the open questions.

If you encounter any problems or have suggestions for improvement, please contact <a href="mailto:oma.tuki@redcross.fi">oma.tuki@redcross.fi</a>.

#### **TERVEYSKESKUSTELU**

Terveyskeskustelu on <u>interventiivinen</u>, motivoiva toimintatapa Terveyspisteillä.

#### **Tavoitteet**

- auttaa kohdattavaa henkilöä löytämään ja vahvistamaan omaa motivaatiota terveyttä edistävissä muutoksissa.
- tukea häntä löytämään oma toimijuutensa.
- selvittää tarve sosiaali- tai terveyspalveluille.

#### Periaatteet

- 1. jämäkän empatian osoittaminen
- kohdattavan omien tavoitteiden ja arvojen selvittäminen
- muutoskyvyn vahvistaminen korostamalla vahvuuksia ja onnistumisia
- 4. muutosvaiheen tunnistaminen ja tarpeettoman neuvonnan välttäminen eli kuuntele enemmän kuin puhut



#### Menetelmät

## 1. Avoimet kysymykset

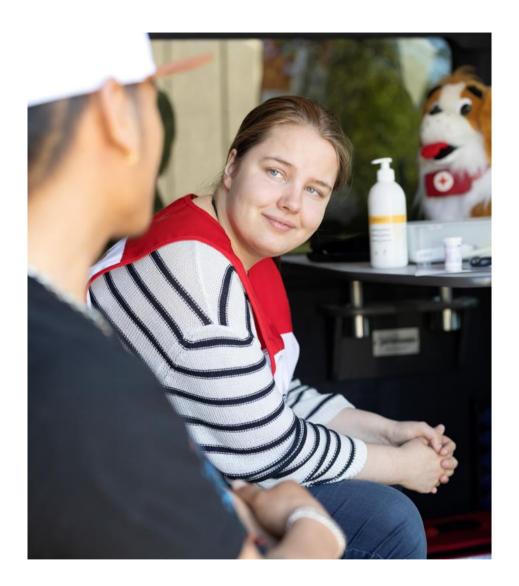
- · Tee kävijän ajatukset näkyviksi
- Kuvaile, kerro, miten, millä tavoin...
- · Vältä antamasta suoria ohjeita

#### 2. Vahvistaminen

- Tue kävijän päätöksiä
- Ilmaise, että uskot kävijän pystyvän muutokseen
- Vältä tekemästä päätöksiä kävijän puolesta

#### 3. Reflektoiva kuuntelu

- Toista kävijän ajatuksia ja tee tarkentavia kysymyksiä
- Tarkista, että ymmärrät ja tee yhteenvetoja
- Osoita tunnistettuja ristiriitoja: saavuttaako kävijä sen, mitä haluaa?
- Vältä omien tulkintojen tekemistä



## Terveyskeskustelun vaiheet

#### 1. Luottamuksen rakentaminen

- · Kuuntele ja anna tilaa kertoa
- Vältä väittelyä ja tuomitsemista
- · Osoita kiinnostusta elein ja ilmein

#### 2. Motivaation tutkiminen

- Arvioikaa tilanne esim. hyödyntämällä terveysseuloja ja/tai antamalla kävijän vapaasti kertoa
- · Tarjoa tietoa sopivasti motivaation herättämiseksi
- · Tue eteenpäin muutoksen kehällä

#### 3. Toimijuuden tukeminen toimintasuunnitelmalla

- · Tue kävijän omaa asiantuntijuutta omassa tilanteessaan
- Anna vastuuta ja korosta itsemääräämisoikeutta
- · Vahvista kävijän omia kykyjä toimia terveytensä edistämiseksi
- Keskity onnistumisiin, älä anna epäonnistumisten lannistaa
- · Ohjaa ja saata tarvittaessa palveluihin

#### 4. Päätösviesti

- Kerro, mitä hyvää ja mahdollisuuksia näet kävijässä ja/ tai hänen tilanteessaan
- · Kerro, miksi uskot hänen pystyvän muutokseen.