



Nottinghamshire Healthcare
NHS Foundation Trust

SECTION: 4 - SERVICE USER/CARER/VOLUNTEER INFORMATION

POLICY AND PROCEDURE: 4.03

NATURE AND SCOPE: POLICY AND PROCEDURE – TRUST WIDE

SUBJECT: VOLUNTEERING

This policy is an inclusive policy for people who volunteer with the Trust and it is a statement and framework of the commitment that service users and external applicants can expect from the Trust prior to, and during, their period of volunteering with the Trust.

DATE OF LATEST RATIFICATION: FEBRUARY 2019

RATIFIED BY: EXECUTIVE LEADERSHIP TEAM

REVIEW DATE: JANUARY 2022

IMPLEMENTATION DATE: FEBRUARY 2019

**ASSOCIATED TRUST POLICIES
& PROCEDURES:**

Allegations of Abuse made Against an Employee, Agency Worker, Volunteer, Student or Bank Worker (17.05)

Animals in a Hospital Setting Policy (18.24)

Complaints (15.05)

Email/Internet General (7.14)

Employment Policy (10.08)

Domestic Violence and Abuse (17.06)

Health, Safety and Welfare (16.01)

Information Governance (7.15)

Involvement of Service Users and Carers (4.05)

Payments and Reimbursement to Service Users/Carers (4.06)

Public Interest Disclosure (Whistle Blowing) (10.15)

Safeguarding Adults at Risk (17.04)

Safeguarding Children (17.01)

Social Media (7.18)

Dress Code And Staff ID Badge Policy (10.18)

NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST

VOLUNTEERING POLICY

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NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST

VOLUNTEERING POLICY

1.0 INTRODUCTION

- 1.1. This policy is an inclusive policy for people who volunteer with Nottinghamshire Healthcare NHS Foundation Trust. It is a clear statement and framework of the commitment that service users, carers and external applicants can expect from the Trust prior to, and during, their period of volunteering with the Trust.
- 1.2. This policy relates to those who volunteer in clinical/therapeutic environments, those who support community activities (including befriending) and those who volunteer via the Trust's Involvement Centres, the Sure Start Children's Centres, the Trust's hospices, in support of research and other volunteering arrangements.

2.0 DEFINITION OF TERMS

- **Service User/Patient**
Those people who have used or are using the services provided by a health or social care organisation.
- **Carer**
This refers to people who support a person using the services provided by a health or social care organisation without receiving any payment.
- **Service Provider**
Any local health and social care organisation.
- **Volunteer**
Refers to people who offer their time and skills on a voluntary basis i.e. are not paid.
- **Patient and Public Involvement Contributor (PPI)**
Refers to contributors who are involved in research activity (e.g. aspects of: design, planning, co-ordination and delivery) taking place within the Trust.
- **Volunteer Support Officer (VSO)**
Refers to a paid member of staff who recruits, inducts and supports the on-going development of volunteers in all settings.
- **Volunteering and Befriending Manager (VBM)**
Refers to a paid member of staff who leads on elements of volunteering within Nottinghamshire Healthcare NHS Foundation Trust and provides best practice advice, guidance and support to the Trust on volunteering matters.
- **Placement Officer**
Refers to a paid member of staff, usually service manager, who would have day-to-day responsibility for a volunteer.

3.0 POLICY PRINCIPLES

- 3.1. The Trust will actively seek to identify and support placement opportunities for volunteers within the Trust. There are a number of distinct strands to this:
- 3.1.1. Volunteers within the Trust's clinical/therapeutic environments whose contribution complements the professional care provided by the Trust. Volunteers in placements

within the Local Partnerships and Forensic division, excluding Rampton Hospital, are supported by the Volunteer Support Officers or Volunteering & Befriending Manager. Volunteers in placements within Rampton Hospital are supported by the Voluntary Services Department based on site.

Please see associated procedure: FO-R-27 Volunteer Befriending Service (Issue 5)

- 3.1.2. Volunteers who support work as defined by the Trust's Involvement, Experience and Volunteering Strategy via the Involvement Centres. Volunteers are supported by the Volunteer Support Officers.
- 3.1.3. Volunteers who support the work of the Sure Start children's centres. Volunteers are supported by Community Development Workers at the children's centre to which the volunteer is registered.
- 3.1.4. Volunteers who support research activities are supported by identified Patient and Public Involvement Leads on the research teams.
- 3.2. Each volunteer will be supported by a named key contact within the relevant volunteering service/organisation to identify an appropriate role, taking into account the needs of the service, service users and carers and those expressed by the volunteer.
- 3.3. Volunteers will not be recruited in the place of paid staff.
- 3.4. Volunteers have a distinct, recognised and valued status in their own right within the Trust.
- 3.5. The contribution of volunteers will be recognised and acknowledged by the Trust at both local and Board level.
- 3.6. Volunteering activity will be reported to the Trust Quality Committee via the Involvement, Experience and Volunteering report (six monthly) and to Trust Board annually. This will include the level, range and benefits of volunteering activity with and for Trust service users.
- 3.7. Volunteering Services and the Involvement, Experience and Volunteering team will actively seek to develop volunteer capacity with and for Trust service users, in line with local demographics.
- 3.8. Taking into account service needs, volunteers will discuss the extent of involvement they wish to undertake, prior to commencement.
- 3.9. All managers and staff who are responsible for volunteers will receive the appropriate training and development opportunities so they are able to recruit, train, supervise and support volunteers effectively and safely.
- 3.10. The Trust will ensure that all volunteers and managers/staff with responsibility for volunteers are aware of and understand the content of this policy and any associated procedure, dependent on their volunteering placement/role.
- 3.11. All associated procedures are listed at the beginning of this policy, and referenced throughout where applicable.

4.0 TERMS AND CONDITIONS

- 4.1. All prospective volunteers will be interviewed and an assessment made of their skills, knowledge, experience, interests, values and behaviours. This will include any additional identified support or access needs of the volunteer.

- 4.2. Before a formal placement/role is proposed, a Trust Volunteering Registration Form must be completed and two satisfactory references obtained, one from a clinical professional, where appropriate. Referees will be asked if there are any known risks in relation to an individual or reasons why they should not carry out a particular volunteer role. Other relevant checks will be undertaken in accordance with National NHS Standards and Trust policies. In particular this will include confirmation of identity, verification of right to work in the UK status and a Disclosure and Barring Services (DBS) check, as appropriate for the role. The exception to this is within Rampton Hospital where specific procedures apply (see FO-R-27 Volunteer Befriending Service (Issue 5))
- 4.3. All volunteers whose role falls within the Regulated Activity as defined by the Independent Safeguarding Authority (ISA) will be required to undergo an Enhanced Disclosure and Barring Service (DBS) check in line with the Trust Employment Policy (10.08). All volunteers whose role falls within the definition of Controlled Activity will be required to undergo a Standard DBS check. In both cases, this will be required prior to the commencement of the role or placement. (DOH, Regulated activity, 2011)
- 4.4. If the volunteer satisfies the following definition the DBS check will be undertaken free of charge :-

“A volunteer is a person who performs any activity which involves spending time, unpaid (except for travelling and out of pocket expenses) doing something which aims to benefit someone (group or individual) other than or in addition to a relative or friend. It is not related to studies, qualification and/or work experience”
- 4.5. Where a volunteer already holds a DBS check dated within the past 3 years portability applies in line with the Trust Employment Policy (10.08). The exception to this is within Rampton Hospital where specific procedures apply (see FO-R-27 Volunteer Befriending Service (Issue 5)), and also where volunteers will work with children (under 18 years of age) where a fresh DBS must be undertaken following any significant break in volunteering.
- 4.6. Where the DBS check reveals a criminal conviction or other issue of concern disclosed as part of the DBS process, each situation will be reviewed and assessed individually in accordance with the Trust Employment Policy (10.8).
- 4.7. Nottinghamshire Healthcare NHS Foundation Trust will undertake DBS checks (including, where applicable, enhanced DBS and barring list checks) on their volunteers every three years.
- 4.8. Staff and volunteers are expected to abide by the relevant policies and procedures of the Trust and/or other relevant organisations, and will always be informed of these accordingly. All volunteers will be asked to sign an agreement which sets out the expectations of them as a volunteer and how the Trust will support them. Any volunteer failing to abide by the terms of the agreement may be subject to the problem solving procedure.
- 4.9. Applications to become a volunteer will not normally be considered from service users who are currently receiving inpatient treatment. Applications will be dealt with on a case by case basis.
- 4.10. A volunteer who becomes unwell will be encouraged to take a break from volunteering, and if necessary not permitted to continue in the volunteering role, until they are well enough to fulfil the expectations of their role and doing so will not risk further deterioration of their health (as agreed between volunteer, named key contact responsible for the volunteer and clinician if required).

- 4.11. A volunteer cannot normally volunteer in a location where they have previously received mental or physical health treatment, although requests will be considered and may be granted if all parties are comfortable with the circumstances and level of risk.
- 4.12. Volunteers who hold a professional qualification and wish to take up a volunteering role within their profession have to be registered with the appropriate professional body prior to commencing the role. Careful consideration should be given to such an arrangement, which should be signed off by a General Manager and evidence provided of the individual's current registered professional status.
- 4.13. Where volunteers are registered with a third party organisation, that organisation will need to ensure and evidence that the volunteers meet the requirements set out in this policy.

5.0 TRUST COMMITMENT

- 5.1. Each volunteer will have a clear description of their role and a copy of the volunteer agreement which sets out the Trust's expectations.
- 5.2. Volunteers will be provided with information about who to contact should they require support and advice.
- 5.3. Volunteers will be provided with the relevant training to help them carry out their role, as well as mandatory training on Safeguarding and Information Governance, which must be completed before they start their placement/role.
- 5.4. Volunteers details will be held electronically on the Trust's volunteer database and VSOS responsibility to keep up to date
- 5.5. Volunteers will be provided with the appropriate facilities and resources they need to volunteer, as agreed at initial interview stage or during review.
- 5.6. All volunteers will be supervised, monitored and supported by a named and accessible member of staff, in accordance with this policy.
- 5.7. There may be a specified, minimum period defined for each placement to which volunteers will be expected to agree to.
- 5.8. The Trust will ensure that appropriate preparation is made for the arrival of the volunteer.
- 5.9. There will be an initial review period agreed at the outset both for the volunteer and the Trust to decide that the placement is meeting expectations and needs, dependent on the placement. Initial reviews will be carried out by the relevant VSO or Placement Officer, with the volunteer.
- 5.10. In order for the Trust to be supportive and to develop its volunteer provision, volunteers will be given regular opportunities to feedback their experiences and opinions.
- 5.11. There will be regular, ongoing reviews to assess and ensure that the placement continues to meet expectations and needs, of both the volunteer and the Trust, and, wherever possible, an exit interview will be offered, with volunteers supported and signposted to the opportunities available.

6.0 TRAINING, INDUCTION & REVIEWS

- 6.1. All volunteers must complete an induction which will include information about:

- relevant aspects of the Trust; including how the Trust is structured and governed
- the role and department/team they will be volunteering with;
- how their contribution fits within the Trust;
- insurance cover for volunteers' duties;
- payment of out of pocket expenses;
- the review process; including reviews and support arrangements;
- procedures for volunteers to raise problems they may have with their role;
- procedures for the Trust to address any issues they have with volunteers;
- basic mental health and/or learning disability awareness, if appropriate;
- confidentiality;
- expectations and boundaries;
- the requirement to work within Trust policies;
- Health and Safety (including Fire Evacuation Procedures) as appropriate;
- Safeguarding;
- Information Governance;
- Equality and Diversity;
- use of social media.

6.2. The above elements of the volunteer induction may be refreshed or discussed annually as part of the volunteer review process. Refresher training will also be offered when required.

6.3. Volunteers may receive additional training relevant to their particular role or placement.

7.0 SAFEGUARDING

7.1. Safeguarding is everybody's business.

7.2. The Trust is responsible for taking all reasonable measures to ensure that the risks of harm to children, vulnerable adults and staff are minimised.

7.3. The Trust will ensure that all volunteers are properly recruited, selected, trained and supported. All volunteers will be required to complete Non Clinical Think Family Safeguarding Training and Information Governance Training at the start of their time as a volunteer with the Trust (and attend a refresher to ensure their knowledge about relevant policies and procedures and skills are up to date, every three years for Safeguarding, annually for Information Governance).

7.4. A database of volunteers will be maintained to ensure it is up to date and accurate and attendance sheets for training will be kept.

7.5. The Trust will ensure that all volunteers are appropriately supervised and supported.

7.6. Managers/staff responsible for volunteers will be required to undertake Clinical Think Family Safeguarding Training.

7.7. The Trust will ensure that an appropriate range of information in relation to safeguarding is available on a range of issues. Managers and staff responsible for supporting volunteers will be able to signpost and refer appropriately; taking into account the individual needs of each volunteer.

8.0 INFORMATION GOVERNANCE

8.1. The Trust is responsible for taking all reasonable measures to ensure that it provides a fully confidential service and is therefore responsible for ensuring that all volunteers understand confidentiality and that all security measures: people, physical and electronic are all equally important.

- 8.2. All volunteers will be required to attend Information Governance Training at the start of their time as a volunteer with the Trust and also attend an annual refresher to ensure their knowledge about relevant policies and procedures and skills are up to date.
- 8.3. A database of volunteers will be maintained to ensure it is up to date and accurate and attendance sheets for training will be kept. The Trust will ensure that all volunteers are appropriately supervised and supported. The Trust will ensure that any breaches of confidentiality are investigated promptly and dealt with appropriately.

9.0 MANAGEMENT AND SUPERVISION

- 9.1. The Trust Volunteering Network will work with services to ensure that all staff responsible for volunteers receive the appropriate training and development opportunities to be able recruit, train, supervise and support volunteers effectively and safely.
- 9.2. The Trust will ensure that all managers responsible for volunteers know who to refer to for advice and support. The Trust Volunteering Network will serve as a confidential advisory group for all volunteer coordinators/managers.
- 9.3. The Corporate Safeguarding team provide professional support and advice to the voluntary services about safeguarding issues.
- 9.4. Members of staff from Human Resources will provide professional support and advice on issues relating to employment law and workforce-related issues (particularly where disputes occur, or the problem solving procedure is enacted).
- 9.5. Volunteers will have the opportunity to review their roles/placements on a six monthly basis with a named member of volunteering services staff. There will be a written record of this meeting, with a copy for both the volunteer and the Trust. Volunteers can have more regular reviews if required, in accordance with their identified needs and risks.

10.0 EQUAL OPPORTUNITIES AND DIVERSITY

- 10.1. The Trust is committed to equality, diversity and inclusion. Consequently the Trust's Single Equality Scheme (2016 - 21) underpins all aspects of volunteering, including the recruitment and selection of volunteers. As with staff, Equality and Diversity monitoring information will be requested from all volunteers, who are able to decline to share this information if they wish.
- 10.2. The Trust will actively seek to recruit a diverse population of volunteers to match the diversity of our service users/patients and the wider population. Accordingly the implementation of this policy and its impact will be monitored via Trust Volunteering Network.
- 10.3. As with staff, volunteers are required to abide by the policies and procedures of the Trust and must not discriminate against anyone whom they come into contact with as they carry out their volunteering role. This includes discrimination on the grounds of age, disability (including mental health status), race, ethnicity or nationality, sexual orientation, gender, gender identity, religion/belief, marital/partnership status, pregnancy or maternity or social and employment status.

11.0 HEALTH AND SAFETY

- 11.1. The Trust is committed to the health and safety of its volunteers. It carries out risk assessments which are acted upon to lower risk. The Trust will provide volunteers with any information, training or equipment needed for them to remain safe. Volunteers are

expected to remember their duty of care towards the people around them, and not act in any way that might endanger those around them. Volunteers are included in the Trust's Health and Safety policy.

12.0 DATA PROTECTION

- 12.1. The Trust takes its obligations under Data Protection Legislation seriously and reaffirms that there is a legal requirement for all of its employees and volunteers to make themselves aware of, and to understand, their own responsibilities within the provision of this legislation.
- 12.2. It is necessary for the Trust to request and store personal details from its volunteers on the Trust's volunteer database. This is to ensure that volunteers are properly checked and registered, are monitored and managed appropriately (for the safety of themselves and of patients and staff), and can be contacted. The Trust will respect volunteers' privacy, and have registered with the Information Commissioner who is responsible for Data Protection Legislation.
- 12.3. The Trust will follow Data Protection Legislation at all times when requesting, storing, sharing or deleting volunteers' information. The Trust only asks for information that is needed, keeps the information securely, limits access to it and will not pass details on without the volunteers consent unless legally obliged to do so or have a duty to do so to keep the volunteer, patients or staff safe.
- 12.4. Sometimes the Trust asks for information that the law considers particularly sensitive. The Trust will always ask for explicit consent before taking or using this information.

13.0 VOLUNTEERS EXPENSES

Volunteers will be paid expenses in line with the Reimbursement of Expenses to Volunteers – 4.06

14.0 INSURANCE

- 14.1. For purposes of insurance, all registered volunteers are classed as employees whilst volunteering within the Trust and, as such, come under Trust Employers Liability cover within the NHS Litigation Authority scheme.
- 14.2. It should be noted that this is the sole purpose for which volunteers are classed as employees and they attract no employment rights within the course of their volunteering.

15.0 PATHWAYS BEYOND VOLUNTEERING

- 15.1. The Trust values the contribution made by volunteers and recognises that voluntary experience may be a way of accessing further opportunities, including training, education and/or employment. The Trust will signpost volunteers to organisations or professionals who can provide information and advice about a range of opportunities beyond volunteering. The Trust will therefore provide references for volunteers if requested to do so.

16.0 VOLUNTEER PROBLEM SOLVING PROCEDURE

- 16.1. Volunteers have a right to raise concerns or issues about any aspect of their volunteering. If volunteers wish to raise a concern or issue relating to their placement or a member of staff, they should follow the Volunteer Problem Solving Procedure (Appendix 1, Flowchart 2).

16.2. In the case of a concern or issue raised about a volunteer, this will be dealt with quickly and effectively in accordance with the Volunteer Problem Solving Procedure (Appendix 1, Flowchart 1).

17.0 IMPLEMENTATION

18.1 All volunteers, staff responsible for volunteers and external voluntary organisations placing volunteers within our services will be made aware of this policy and be expected to understand and adhere by it.

18.2 All volunteers will be provided with a printed copy of the policy and/or shown how to access the policy on the Trust's intranet.

18.3 The implementation of this policy will be monitored through the Trust's Volunteering Network which meets bi-monthly and at which all volunteering services leads are expected to attend.

18.0 TRAINING

18.1 All voluntary services managers, volunteer coordinators and placement officers will be offered training of an appropriate level in supervising and supporting volunteers. The Trust Volunteering Network will advise on relevant training for all.

18.2 All those responsible for supporting volunteers day-to-day will complete mandatory safeguarding training, and where appropriate, Level 3 Think Family Safeguarding training.

19.0 TARGET AUDIENCE

19.1. All Trust employees (and all those working on behalf of Nottinghamshire Healthcare NHS Foundation Trust) and volunteers.

20.0 REVIEW DATE

20.1. This policy will be reviewed in 3 years or in light of organisational or legislative changes.

21.0 CONSULTATION

21.1. This policy has been agreed in consultation with active volunteers in the Involvement Centres, the Trust Volunteering Network, the Involvement Experience and Volunteering Team and the Trust Safeguarding Team.

22.0 RELEVANT TRUST POLICIES/PROCEDURES

Allegations of Abuse made Against an Employee, Agency Worker, Volunteer, Student or Bank Worker (17.05)

Animals in a Hospital Setting Policy (18.24)

Complaints (15.05)

Email/Internet General (7.14)

Employment Policy (10.08)

Domestic Violence and Abuse (17.06)

Health, Safety and Welfare (16.01)

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Safeguarding Children (17.01)
 Social Media (7.18)
 Dress Code and Staff ID Badge Policy (10.18)

Strategies:

Involvement, Experience and Volunteering
 Trust wide Safeguarding Think Family
 Trust wide Domestic Violence and Abuse
 Trust wide Safeguarding

23.0 MONITORING COMPLIANCE

23.1 The Trust Volunteering Network will monitor compliance with this policy, and will ensure that all those with responsibility for volunteers understand the policy and its application within their service/s.

23.1 Where issues arise with the compliance of this policy, the Trust Volunteering Network will discuss and agree the resolution to the issue, or will escalate the issue as a risk through the Trust Patient Experience and Service Improvement Committee.

24.1 The Volunteering and Befriending Manager will ensure that all external voluntary organisations are aware of and compliant with this policy, and that this is stated within all contracts.

24.0 EQUALITY IMPACT ASSESSMENT

24.1. This policy has been assessed using the Equality Impact Assessment Screening Tool. The assessment concluded that the policy would have no adverse impact on, or result in the positive discrimination of, any of the diverse groups which include the disability, ethnicity, gender, gender identity, age, sexual orientation, religion/belief, social inclusion and Human Rights.

24.2. The policy aims to be fully inclusive and take positive action to welcome, engage and include volunteers from any background and heritage. Changes have already been made to the policy to ensure that all volunteers are recruited, supported and actively cared for whilst volunteering.

25.0 LEGISLATION COMPLIANCE

- Health and Social Care Act 2001
- Data Protection Act 2018
- Health and Safety at Work Act 1974
- Sex Discrimination Act 1975 (amended 1986)
- Race Relations Act 1975 (amended 2000)
- Disability Discrimination Act 1995 (amended 2005)
- Employment Equality (Religion or beliefs) Regulations 2003
- Employment Equality (Sex Discrimination) Regulations 2005
- Employment Equality (Sexual Orientation) Regulations 2003
- Employment Equality (Age) Regulations 2006
- Safeguarding Vulnerable Groups Act 2006
- Care Act 2014
- Lampard Report 2014
- Department of Health, Regulated activity (Adults) 2011

26.0 CHAMPION AND EXPERT WRITER

26.1. The champion of this policy is Dr. Julie Attfield, Executive Director of Nursing, and the Expert Writer is Joanna Rapson, Volunteering & Befriending Manager.

Appendix 1 – Volunteer Problem Solving Procedure

INTRODUCTION

Volunteers make a unique and valuable contribution to patients, visitors and staff. It is recognised that volunteers are not only an essential resource in helping us to achieve an organisations goals, but that by providing opportunities for, and supporting volunteering, it helps to promote active citizenship and social inclusion.

Whilst the involvement of volunteers is generally a positive experience for everyone involved, there are times when problems arise. A volunteer may wish to raise an issue or concern about something or someone, and similarly the volunteer may not be meeting the requirements of them or their role, or someone may wish to raise an issue or concern about a volunteer.

These are rare occurrences, but in an effort to ensure a fair, equitable, and consistent approach to dealing with them, it is essential to have a formal procedure. This document sets out the procedure.

When reading this procedure it is important to note that volunteers have no legal employment rights and therefore are not subject to, or protected by, the usual employee policies and procedures.

SOME POINTS TO REMEMBER

- All issues/concerns must be treated confidentially, and should only be discussed amongst those who are directly involved in trying to resolve the issue.
- An effort should be made to resolve the problem informally at a local level.
- A written record of all incidents and issues/concerns should be maintained.
- Allow enough time for all meetings, and conduct them in a private place.
- Keep all parties informed at every step of the procedure.
- Volunteers have the right to be accompanied by a colleague or friend in any meetings that form part of the problem solving process.

IF A VOLUNTEER WISHES TO RAISE AN ISSUE OR CONCERN (FLOWCHART 1)

This part of the problem solving procedure sets out the process for a volunteer to raise an issue or concern.

Volunteers may raise an issue or concern verbally, or in writing, within 20 working days. If the issue is raised in writing, it should be acknowledged within 3 working days of receipt.

In the first instance, volunteers should discuss the issue with, or address the issue to, their VSO/Placement Officer (unless the issue relates to that individual), and a local resolution sought if possible. If the complaint is about the VSO/Placement Officer, then the matter should be referred to the relevant line manager.

The issue or concern will be dealt with quickly and confidentially, and the volunteer should receive a response promptly. The response should set out any actions taken and allow for the volunteer to comment on whether they feel the response (and any action) is appropriate and proportional.

If the issue cannot be resolved at this stage then the issue should be escalated to the Voluntary Services Manager or an appropriate senior manager, ideally in writing.

An investigation into the issue/concern will be then be undertaken, this will generally include a review of any written records and/or procedures, as well as interviews with the volunteer, the person(s) who the issue/concern is about and any witnesses (or statements from these people). At the conclusion, the results and subsequent actions will be discussed with the volunteer within 20 working days of the original raising of the issue (if the investigation requires more time, the volunteer will be informed). During this meeting the volunteer can be accompanied by a colleague

or friend, not acting in a legal capacity, if they wish. The actions or decision taken should be confirmed in writing to the volunteer.

If the volunteer is not satisfied with the outcome, then they can appeal in writing to a Senior Manager* within the organisation within 20 working days of the decision meeting. (*This could be the VSM's manager or other senior manager as appropriate)

An investigation will be undertaken, the results and subsequent actions will be discussed with the volunteer within 10 working days of the appeal letter. During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish. The Senior Manager will confirm their decision in writing. Their decision is final.

FLOWCHART 2 - IF SOMEONE RAISES AN ISSUE/CONCERN ABOUT A VOLUNTEER

This part of the problem solving procedure sets out what the volunteer can expect in relation to an issue or concern raised about them or their conduct.

Sometimes minor issues can arise during the course of volunteering, such as a volunteer not fitting into the team as well as was expected, not meeting the required standards when undertaking tasks, or being unreliable. However, if a more serious issue occurs then immediate action may be necessary (see exceptions on page 13).

Minor issues are usually detected during regular reviews, and may be quite easy to resolve either by the placement officer or manager for the area, without resorting to formal procedures.

This checklist suggests how some issues can be dealt with:

- A comprehensive induction to the ward or department on commencing a volunteer placement.
- Assessment of the volunteer's training needs and addressing them.
- Providing the volunteer with support and supervision.
- Undertaking an initial check with a volunteer after a month of them starting in role
- Undertaking regular quarterly reviews with the volunteer.

However, if these do not address the issues then the following procedure should be instigated.

Verbal discussion – usually undertaken by the VSO

The first step is to discuss the issue with the volunteer. There could be external factors influencing their ability to carry out tasks, their behaviour or their attitude.

- Identify goals that will help the volunteer to fulfil their role, and offer extra support, supervision and training where necessary.
- Document your discussion and the agreed actions. Set and agree a time for a review meeting.
- Notes of the discussion, agreed actions and the date of the review meeting should be sent to the volunteer within 10 working days of the meeting.
- If at the review meeting the issue remains then a more formal approach may be followed, and a written warning sent.

Written warning

If the issue hasn't been resolved by the verbal discussion or the review, then an appropriate manager or senior manager will meet with the volunteer, in conjunction with the volunteer coordinator or Placement Officer where appropriate, to discuss the situation and to issue a written warning which clearly sets out the expectations of the volunteer (and of the Trust) and sets a date for a review meeting.

An investigation into the issue/concern may then be undertaken, which would generally include a review of any written records and/or procedures, as well as interviews with the volunteer, the person(s) who has issued the written warning and any witnesses (or statements from these people). At the conclusion, the results and subsequent actions will be discussed. During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish. The actions or decision taken should be confirmed in writing to the volunteer.

Depending on the nature of the issue raised:

- Further objectives could be set, and help offered to the volunteer.
- The volunteer may be moved to another placement.
- The volunteer may be dismissed.

A decision to dismiss a volunteer should be a last resort.

Whatever the decision, the volunteer has the right to appeal.

Stage 3 - Right to appeal

If the volunteer is not satisfied with the outcome, then they can appeal in writing to a Senior Manager* within 20 working days of the decision meeting. (*This could be the VSM's manager or other senior manager as appropriate)

An investigation into the complaint should be undertaken, the results and subsequent actions should be discussed with the volunteer within 10 working days of the appeal letter. During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish.

The Senior Manager will confirm their decision in writing. Their decision is final.

CONDUCTING A DISMISSAL MEETING

If a decision is made to dismiss a volunteer, the following good practice guidelines should be adhered to:

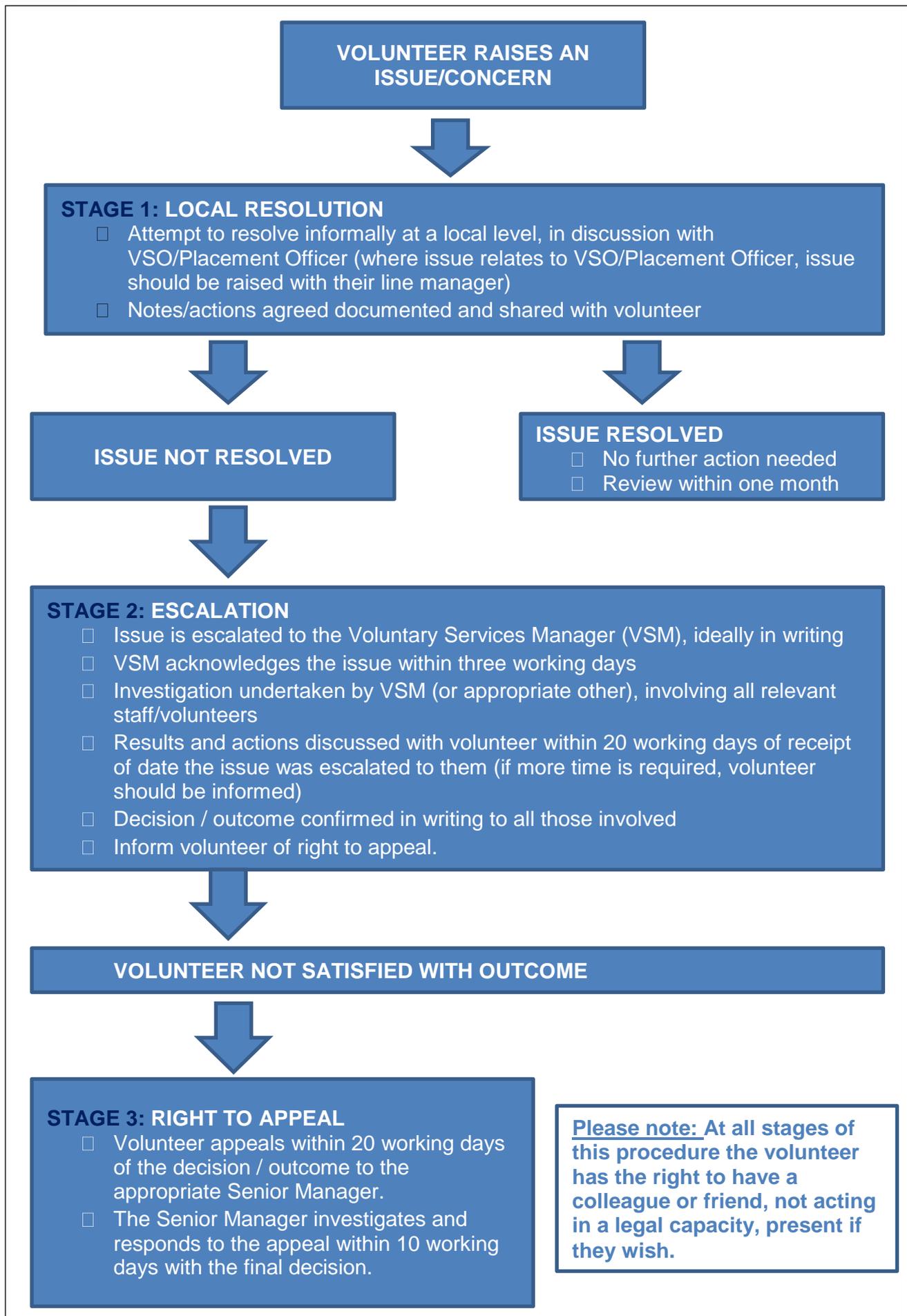
- The meeting should take place in a private setting.
- Be quick and direct. The decision has been made, so ensure the volunteer is informed in a timely manner.
- Inform the volunteer of their right to appeal.
- A letter should be sent to the volunteer to re-iterate the decision to dismiss, as well as outlining the reasons why, and their right to appeal. A copy of the Problem Solving Procedure should be included with the letter. Include any information relating to their departure e.g. return of Trust ID badge, parking permit and uniform.

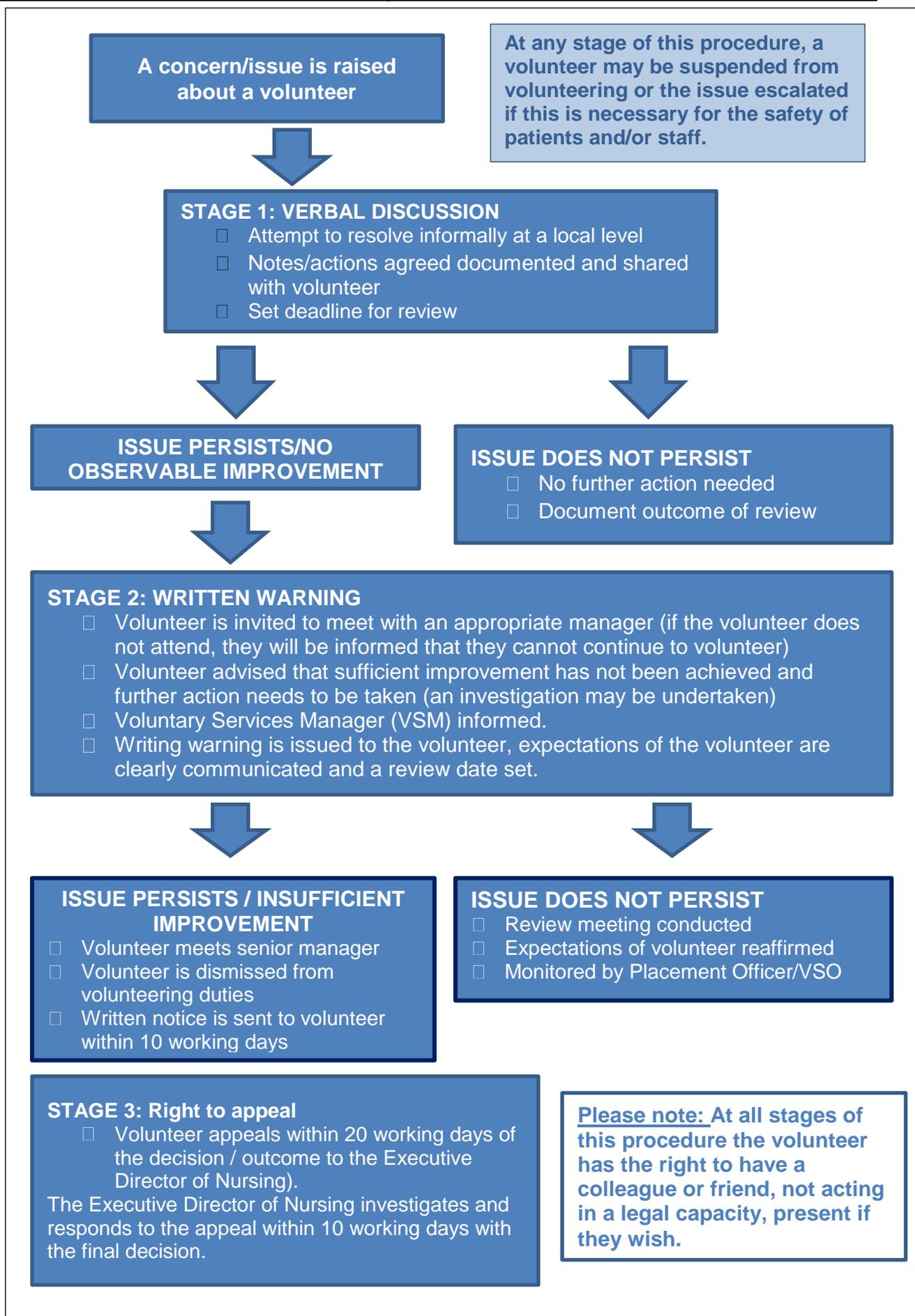
EXCEPTIONS

There are some occasions on which volunteers can be suspended immediately while an investigation is carried out. These include, but are not limited to, acts that constitute gross misconduct, e.g. theft, assault, act of violence, malicious damage, and deliberate falsification of documents, harassment or being under the influence of drugs or alcohol.

- Illegal or criminal acts will be reported to the police and may result in prosecution.
- The Involvement, Experience & Volunteering Team must be informed immediately.
- The decision to suspend a volunteer must to be confirmed in writing to the volunteer.

All issues/concerns relating to a volunteer should be recorded on the volunteer's profile on the Trust's volunteering database.

Flowchart 1 - Volunteer Problem Solving Procedure – A volunteer raises an issue or concern

Flowchart 2 - Volunteer Problem Solving Procedure – An issue is raised about a volunteer

Appendix 2 – EVCO Memorandum**MEMORANDUM OF UNDERSTANDING BETWEEN THE NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST AND EXTERNAL VOLUNTARY/CHARITABLE ORGANISATIONS (EVCO)**

The Trust values the support that external voluntary/charitable organisations (EVCOs) provide and acknowledges the beneficial effect for its patients / users and the wider organisation.

It is important that the Trust understands the role that the EVCO will play in the organisation. The Trust acknowledges that relationships with EVCOs must have clear boundaries so that both parties benefit from the involvement and neither is affected detrimentally.

The following sets out the Memorandum of Understanding between the Nottinghamshire Healthcare NHS Foundation Trust and the [name of the EVCO] with regard to volunteering activity undertaken by [name of the EVCO] for or within the Trust.

The Trust will provide [name of the EVCO] with information regarding planned changes within Nottinghamshire Healthcare that may impact on the services provided by [name of the EVCO].

It is recognised that EVCOs can differ enormously in size and by the infrastructures that they have in place to support the work they do and the valuable contribution they make to the NHS. This document has been written with this in mind, and should be read with consideration to this.

Recruitment of Volunteers

The external voluntary/charitable organisation (EVCO) agrees to obtain:

	A completed registration form containing a declaration regarding criminal convictions	See note 1
	An identification check of all prospective volunteers for eligibility to volunteer in the UK against photo identification, date of birth and address history.	
	A Disclosure & Barring Service check for all volunteers taken on to volunteer in regulated areas in line with DBS guidelines	See note 1
	Two references for all prospective volunteers	See note 2

The EVCO agrees to:

	Interview all prospective volunteers	
	Meet their obligations with regard to health and safety legislation including appropriate risk assessments and ensure that volunteers keep within their specified roles.	See note 3
	Provide an induction and training in line with mandatory training required by the Trust and appropriate to the needs of the volunteer placement.	See note 4
	Ensure that volunteers are covered by a current appropriate insurance policy.	
	Ensure that volunteers will have a signed statement of understanding for their volunteer role and responsibilities and wear a security/ID badge as required	
	Meet volunteer expenses according to the EVCO's policy.	
	Adopt a fair and equitable approach to problem solving and incident reporting	See note 5
	Provide information on volunteering activity and volunteers to the Trust's Involvement, Experience & Volunteering department as agreed by both parties. Provide regular opportunities for contact between the Trust's Voluntary Services Manager and the EVCO's project manager.	See note 6
	Review this agreement every 2 years	
	The EVCO will / will not* require the Trust to act as an umbrella body for DBS disclosures. * delete as appropriate	See note 1a

Signed on behalf of (name of EVCO)	Name:
	Signature
	Date:

Signed on behalf of (name of Trust)	Name:
	Signature
	Date:

EXTERNAL VOLUNTARY/CHARITABLE ORGANISATION REGISTRATION FORM

ORGANISATION DETAILS

Organisation name:			
Project Title:			
Address:			
Telephone:		Mobile:	
Email:		Website:	
Mission statement/Role of the organisation within the Trust:			
Number of employed staff that will be on-site			

Registered charity <input type="checkbox"/>	Charity registration number:
Statutory <input type="checkbox"/>	Voluntary/community <input type="checkbox"/>
Other <input type="checkbox"/>	

Main Contact	Second Contact
First name:	First name:
Surname:	Surname:
Telephone:	Telephone:
Mobile :	Mobile:
Email:	Email:

The organisation must have adequate and sufficient insurance cover including but not limited to Public Liability Insurance, Employer's Liability Insurance.

Insurance Company:	
Policy Number:	
Expiry Date:	

Volunteer Activity

Purpose/Aim of Volunteer Role:

I confirm that the information I have given on this form is correct and that I will inform the Voluntary Service Department of any changes to the information given.

First name:	Surname:
Position:	Organisation:
Date:	Signature:
Review Date:	

Note 1: Protection of children and vulnerable adults

The NHS has a duty to ensure the safety of its patients / users. Volunteer posts in the NHS are therefore exempt from the Rehabilitation of Offenders Act 1974. When EVCOs become aware of information regarding criminal convictions they should assess the risk to their own organisation and to the Trust. Advice regarding how to undertake a risk assessment can be sought from the Trust's Voluntary Services Manager.

Note 1a: Disclosure and barring Service Applications

NHS Employers require all volunteers with regular access to patients to undertake a DBS check. If there is any uncertainty about the level of disclosure required, the Trust's Voluntary Services Manager will be able to advise.

Some Trusts have the facilities to act as an umbrella body for organisations that are unable to process their own DBS applications.

If the EVCO elects to use the Trust as an umbrella body there are two ways that they can proceed:

1. Where the disclosure shows criminal history, the Voluntary Services Manager will discuss the content with the EVCO and ask them to undertake a risk assessment (for example see appendix1) for consideration. The outcome of the risk assessment will determine whether or not the volunteer is offered a place. The Trust will retain the right to refuse the services of anyone it considers to be a risk to the organisation. Under these circumstances the Trust may bear some responsibility for the recruitment decision.

Or

2. The Voluntary Services Manager will send the disclosure to the EVCO and the recruitment decision will be entirely managed by the EVCO. Under these circumstances the Trust will bear no liability for the recruitment decision.

If the EVCO does not require the Trust to act as an umbrella body the information on the disclosure will not be shared with the Trust and the Trust will have no liability for the recruitment decision.

Note 2: References

If the prospective volunteer is, or has recently been in employment or been involved with voluntary activity, one reference should be from that organisation. Where this is not possible, references should be provided by someone who is a person of standing in the community. Where references cannot be obtained in this way, they should be sought from personal acquaintances, aged 18 and over, who have known the applicant for more than 2 years and are not related to or involved in any financial arrangements with the applicant.

Note 3: Risk assessment

Each activity that volunteers undertake should be risk assessed and risk assessments should be updated annually. This need not be an onerous process as where groups of volunteers undertake the same role; a generic risk assessment will suffice. However, volunteers under the age of 18 should have a risk assessment in line with the Health and Safety Executive's guidelines for the safety and well-being of young people.

Note 4: Mandatory training

All Trusts will have their own requirements for mandatory training based on the services they provide to patients and service users. It is recommended that a common sense approach is taken to the training provided so that it meets the needs of the role of the volunteer.

As a minimum, volunteers should undertake the following training at a level and using a method appropriate to volunteers:

Safeguarding – Children and Adults
Information Governance

The Trust will be able to provide the EVCO with the information and training materials used for its own volunteers. Some Trusts also provide the induction and training required for the volunteers.

Note 5: Problem Solving and incident reporting affecting Trust business

Complaints made regarding a volunteer registered with the EVCO, or the activities undertaken by the EVCO, should be dealt with in a fair and equitable manner and shared with the Voluntary Services Manager. In line with the recommendation of the Volunteer Rights Enquiry, it is recommended that the EVCO has a problem solving procedure in place.

The outcome of any investigation and the actions taken to resolve the problem should be shared with the Trust's Voluntary Services Manager.

Note 6: Communication

In order to continue to provide excellent services to patients and service users, NHS Trusts would like to encourage communication with EVCOs and promote the sharing of information.

As part of its duties to regulatory organisations such as Monitor, Care Quality Commission, Health & Safety Executive, and the NHS Litigation Authority, the Trust is required to provide information relating to the number of volunteers active within the organisation and the training and other records. Therefore, the Trust may ask the EVCO to provide this information on a recurrent basis.

Any personal information about individual volunteers will only be provided with the volunteer's knowledge and agreement in line with Data Protection Legislation.

EQUALITY IMPACT ASSESSMENT (EIA) SCREENING TOOL (Towards an Equality and Recovery Focused Organisation)

Name of policy/procedure/strategy/plan/function etc being assessed:	Volunteering Policy - 4.03
Brief description of policy/procedure/strategy/plan/function etc and reason for EIA:	This policy is an inclusive policy for people who volunteer with the Trust and it is a statement and framework of the commitment that service users and external applicants can expect from the Trust prior to, and during, their period of volunteering with the Trust.
Names and designations of EIA group members:	Joanna Rapson – Volunteering & Befriending Manager Amy Gaskin-Williams – Involvement and & Experience Manager Paul Sanguinazzi – Head of Involvement and Experience Trust Volunteering Network Meeting
List of key groups/organisations consulted	Trust Volunteering Network Meeting Service user and carer volunteers Involvement, Experience and Volunteering Team Trust Patient Experience and Service Improvement Sub-committee
Data, Intelligence and Evidence used to conduct the screening exercise	Volunteering Policy 4.03 Verbal input from volunteering coordinators/manager Verbal input from service user and carer volunteers

Equality Strand	Does the proposed policy/procedure/ strategy/ plan/ function etc have a positive or negative (adverse) impact on people from these key equality groups? Please describe	Are there any changes which could be made to the proposals which would minimise any adverse impact identified? What changes can be made to the proposals to ensure that a positive impact is achieved? Please describe	Have any mitigating circumstances been identified? Please describe	Areas for Review/Actions Taken (with timescales and name of responsible officer)
Race	Positive impact: The policy is applied equally and fairly to people from all diverse groups; copies of the policy could be translated into other languages if required.			Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
Gender Inclu. Transgender and Pregnancy & Maternity	As race.			Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
Disability	Negative impact: Where mental ill-health is considered a disability, the policy states that applications from those currently receiving treatment will not normally be considered, and existing volunteers who are admitted will be restricted from volunteering during the time of the admission and potentially for a time after discharge (dependent on circumstances).	In the best interests of the patients located in the services where our volunteers operate, and in the best interests of the volunteers themselves, it would not be appropriate to allow volunteers who are unwell to take up volunteering placements.	N/A	Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
Religion/Belief	As race.			Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
Sexual Orientation Incl. Marriage & Civil Partnership	As race.			Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
Age	Negative impact: It is the policy of the Trust not to accept volunteers younger than 16 years of age.	We feel the age limit is appropriate given the nature of our services.	N/A	Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
Social Inclusion*¹	As race.			Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.
	n/a.			Policy to be reviewed in 3 years or

Community Cohesion*²				in light of organisational or legislative changes by author.
Human Rights*³	As race.			Policy to be reviewed in 3 years or in light of organisational or legislative changes by author.

*¹ for **Social Inclusion** please consider any issues which contribute to or act as barriers, resulting in people being excluded from society e.g. homelessness, unemployment, poor educational outcomes, health inequalities, poverty etc.

*² **Community Cohesion** essentially means ensuring that people from different groups and communities interact with each other and do not exclusively live parallel lives. Actions which you may consider, where appropriate, could include ensuring that people with disabilities and non-disabled people interact, or that people from different areas of the City or County have the chance to meet, discuss issues and are given the opportunity to learn from and understand each other.

*³ **The Human Rights Act 1998** prevents discrimination in the enjoyment of a set of fundamental human rights including: The Right to a Fair Trial, Freedom of Thought, Conscience and Religion, Freedom of Expression, Freedom of Assembly and Association and the Right to Education.

Conclusions and Further Action (including whether a full EIA is deemed necessary and agreed date for completion)	This policy does not require a full EIA as the document aims to be fully inclusive and take positive action to welcome, engage and include volunteers from any background and heritage. Changes have already been made to the policy to ensure that all volunteers are recruited and supported in equitable ways across each of our volunteering services and to ensure that all volunteers are actively cared for if they appear to become unwell whilst volunteering.
Screening Tool Consultation End Date	12 th November 2018
Name of Equality and Diversity (E&D) Group Approving EIA (i.e. Directorate E&D Group, Divisional E&D Forum or Trustwide E&D Steering Group)	
Name of Responsible Officer Name and Contact Details (tel. e-mail, postal)	Joanna Rapson Volunteering & Befriending Manager joanna.rapson@nottshc.nhs.uk Based at Rosewood Involvement Centre (ext. 10709)

Appendix 4

Policy/Procedure for: Volunteering

Issue: 06

Status: APPROVED

Author Name and Title: Joanna Rapson, Volunteering & Befriending Manager

Issue Date: FEBRUARY 2019

Review Date: JANUARY 2022

Approved by: EXECUTIVE LEADERSHIP TEAM

DATE	AUTHOR	PROCEDURE	DETAILS OF CHANGE
11/06	J Fleet	PE/43	Change to review date/house style only
10/10	L Walker	4.03	Changes throughout document
12/13	J Rapson	4.03	Changes throughout document
02/14	A Gaskin-Williams	4.03 (Issue 4)	Changes throughout document, in line with conditions associated with Investors in Volunteers Accreditation.
29/11/17	J Rapson	4.03 (Issue 5)	Changes throughout document
12/11/18	A Gaskin-Williams	4.03 (Issue 5)	Changes throughout document