

## Project Review Summary

### Introduction

In 2019, NHS England published the “NHS Long Term Plan”<sup>1</sup>. In this plan, a spotlight is shone on how “staff, patients and volunteers benefit from well-designed volunteering initiative”, raising the profile of NHS volunteering at a national level.

- Locally, in 2017 the Together a Healthier Future Pennine Lancashire Volunteer Strategy and Action Plan<sup>2</sup> set out a vision to “maximise opportunities for volunteers and organisations to support the health and wellbeing of residents”. In order to do this, eight work streams were identified, and East Lancashire Hospitals Trust was identified as a key partner organisation.
- Volunteers have always been an important part of the East Lancashire Hospital’s Trust team, with variety of roles and locations. The volunteer service was identified as needing significant improvement. The service was identified to form a part of the wider development to create a whole system approach to volunteering in health and social care across Pennine Lancashire. The volunteer service development project is sponsored by Together a Healthier Future after receiving funding from Health Education England to carry out this development.
- In order to improve the voluntary services, the project leaders identified Lancashire Volunteer Partnership as local experts in delivering quality voluntary services for public sector members. Lancashire Volunteer Partnership was formed in 2016 between public services (Lancashire County Council and Lancashire Police Constabulary in the first instance). It’s aim is to provide a gateway into public sector volunteering, focusing on improving the lives of local citizens by supporting meaningful volunteering opportunities to benefit local people and the local area. Many public sector organisations across Lancashire are now members of Lancashire Volunteer Partnership and use their volunteer data management system, the website to advertise voluntary opportunities, and access to advice and guidance from partner groups.

### Aims of the project

A number of issues were identified when the service was taken on by the Bank and Temporary staffing department within the HR directorate in 2017. These included;

- Managing volunteer information was challenging. There was no way to know which of the individuals whose data was held, were still actively volunteering, and it was unclear how best to communicate with volunteers
- Reporting on volunteer activity and the impact volunteers were having was not possible, there was little or no information regarding where and when volunteers were carrying out activity. Benefits could not be measured and information about volunteers could not be analysed e.g. diversity of volunteers, compliance with training

---

<sup>1</sup> <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/01/nhs-long-term-plan.pdf>

<sup>2</sup> <https://www.healthierlsc.co.uk/application/files/7715/4288/1406/Pennine-Lancashire-Volunteer-Strategy-1.pdf>

- There was initially little or no process for recruiting or training volunteers and therefore a temporary process was put in place however this was lengthy and a more robust streamlined process was required

Based on these issues the project had five key goals;

1. **To map volunteer provision across East Lancashire Hospital Trust, including reviewing and updating volunteer role descriptions**
2. **To build a bespoke electronic system using Lancashire Volunteer Partnership ICT volunteer system to hold volunteer data for East Lancashire Hospital Trust**
3. **To consult and support volunteers and staff to move data onto Lancashire Volunteer Partnership ICT volunteer system**
4. **To ensure all volunteers have appropriate up to date checks in place including DBS and mandatory training**
5. **To measure and evaluate project progress through agreed outcomes**

## Outcomes

1. **To map volunteer provision across East Lancashire Hospital Trust, including reviewing and updating volunteer role descriptions**

At the start of the project information on how many volunteers and where activity was taking place was inaccurate. In order to cleanse data and become compliant with new legislation, communications were sent to volunteers requesting them to confirm they were actively volunteering. This was then followed up by seeking information from wards and units and departments to confirm information that had been received from volunteers. While this was a time consuming process, the service can be confident that the resulting information is accurate.

Volunteers had not received copies of role descriptions and it is therefore unclear without consultation how accurate existing role descriptions are. The reviewing and updating of role descriptions has begun. This is being done by hosting focus groups with volunteers carrying out the same or similar roles to coproduce accurate role descriptions and disseminate them.

2. **To build a bespoke electronic system using Lancashire Volunteer Partnership ICT volunteer system to hold volunteer data for East Lancashire Hospital Trust**

The Better Impact cloud based volunteer management system is used by many NHS Trusts. It can be designed for each affiliated member of Lancashire Volunteer Partnership to capture and record information based on individual service needs. The account for East Lancashire Hospitals Trust was successfully built with consideration given to unique service needs. For example, including different training records, variety of services and locations within one account, and the need to record occupational health information.

This system continues to be flexible and can be adapted as the service develops and grows.

3. **To consult and support volunteers and staff to move data onto Lancashire Volunteer Partnership ICT volunteer system**

The Volunteer Service staff member was introduced to and trained to use Better Impact. The system was picked up quickly and feedback has been positive.

*"It's amazing. Better Impact is a fantastic system to be used for volunteers. It's simple and easy to use. All the information is at your fingertips, no more cumbersome spreadsheets."*

Volunteer Administrator

The implementation of Better Impact was communicated to volunteers in November 2018. The communication highlighted the need for the system and the benefits to volunteers and the service. This was shared alongside feedback from the volunteer survey to show how the use of an ICT system could help improve the quality of the services, and by extension the volunteering experience. Volunteers were given the option to sign up independently or could give consent for the service to transfer data on the volunteer's behalf. Six information sessions were held, being mindful to provide a variety of days, times and venues and offered to meet volunteers on a one to one basis to provide volunteers with information and seek consent to transfer information.

By April 2019 all active volunteer data had been transferred to the Better Impact system either by the volunteer or by staff with consent from the volunteer. Volunteers continue to engage with the system and it is being well used to record information, report on volunteering hours and communicate securely with volunteers.

#### **4. To ensure all volunteers have appropriate up to date checks in place including Disclosure and Barring Service (DBS) and mandatory training**

**DBS** - Historically there had been a lack of consistency to how volunteers were recruited and the background checks conducted before their appointment. Under regulations set out by the DBS Service, the need to run checks and the level of check an individual is eligible to undergo is specifically related to the tasks a role required them to carry out. When the service was taken on by the bank and temporary staffing department, volunteers and roles were risk assessed and those requiring a DBS were informed and these were conducted. A total of 77 volunteer have not undergone a DBS check. The Trust's current policy does not require DBS checks to be done periodically, only when an individual joins the Trust.

All new roles are risk assessed on an individual basis and the level of check required is made clear in adverts.

**Training** – The launch of the Volunteer Learning Passport has changed the way in which volunteers are provided training. All volunteers taken on since the start of this project have received full training. Of the 215 active volunteers 84 have not received training or their training has expired. Of this number, 46 have been provided information on how to complete the volunteer learning passport and are being actively encouraged and offered support. The remaining 38 are unable to complete the Volunteer Learning Passport because they do not have an email address or use a computer. Concerns around excluding people who do not use computers have been raised with the Volunteer Learning Passport, the platform provider E-Learning for health are able to offer access to the Passport without requiring an email to register however this still requires volunteers to use a computer to complete the learning.

## 5. To measure and evaluate project progress through agreed outcomes

A number of key outcomes were identified to measure the impact and outcome of the project. The table below indicates the information available at the start of the project and what our current position is.

Measurable outcome	Baseline in June 2018	Position as of May 2019
Number of active volunteers	Information not currently available <i>320 volunteers on current database, no information on how many of these are currently active</i>	215 active volunteers <i>An additional 35 are at the "In process" stage with 7 ready to be placed and 12 still to complete eLearning.</i>
Number of volunteer hours undertaken	Information not currently available	59,005 per year <i>Based on the hours logged per week as an average per volunteer</i>
Number of service areas engaged	Information not currently available	Volunteers are active in 6 of 7 divisions <i>The Medicine and Emergency care division has the highest number of volunteer roles and the Corporate division has the largest share of volunteers The Diagnostics and Clinical Services division is the only division not currently being supported by volunteers. *</i>
Return on Investment (through volunteer hours)	Information not currently available	Estimated social value of £472,929**
Number of volunteer roles available	Information not currently available <i>15 role profiles exist but there is no information about volunteer access to these profiles</i>	15 <i>15 roles types exist, work is underway to ensure all volunteers have access to an accurate role description</i>
Number of hours/staff time needed to coordinate volunteers in comparison to active volunteers	Information not currently available <i>this is due to lack of information regarding active volunteers</i> <i>1 x whole time equivalent administrator</i> <i>0.2 x whole time equivalent recruitment support</i>	3 x whole time equivalent <i>1 x service manager</i> <i>2 x administrators</i>
Volunteer demographics including hard to reach groups	Information not currently available	Demographics provided by 50% of volunteers*
Volunteer satisfaction/feedback	Information not currently available <i>Volunteers were surveyed during</i>	Case Studies have been provided A survey will be completed

Measurable outcome	Baseline in June 2018	Position as of May 2019
	<i>the second month of the project to ascertain a baseline of satisfaction*</i>	annually to prevent volunteers being saturated with information but to understand improvement.
Reasons for volunteering	Information not currently available	Reason for volunteers known for 50% of volunteers 39.4% volunteering to “Make a difference or give something back”*
Patient satisfaction	Information not currently available	Information not currently available
Staff satisfaction	Information not currently available	Information not currently available

\*Data in full report

\*\*In 2019, Lancashire Volunteer Partnership had their work evaluated by RSM Audit Consultants to assess the social value of the volunteering projects<sup>3</sup>. They indicated a social value of £8,383,444 based on the activity of 4,212 volunteers, providing an estimate of £1,990 per volunteer. This figure has been used to estimate the social value of volunteers at East Lancashire Hospitals Trust.

### Additional Outcomes

**Reduced Risk:** At the initiation of the project, a risk assessment was created to assess the risks associated with the service development, and the risks associated with the project. This was a live document and updated with new risks as they were identified throughout the course of the project. Analysis of the risk assessments throughout the project indicates a reduction over the course of the project.

At the beginning of the development project, five identified risk areas were considered high risk, this included the risk to patient safety from volunteers being high. Following the work that has been completed, the risk from volunteers to patients is now considered low, and none of the areas identified in the risk assessment are considered high risk, with four of the five previously high risk concerns being reduced to low risk.

This risk assessment can be found in the full report

### Volunteer Survey 2018

In August 2018, volunteers were asked to complete a survey to share their views and experiences of the Volunteer Services. The aim of the survey was to find a baseline for volunteer satisfaction and to understand from volunteers how they felt the quality of experience could be improved. From the responses we received we shared feedback with volunteers in the form of “you said, we will”. Generally, volunteers wanted to improved communication including face to face contact with voluntary service staff, to be better recognised and rewarded and for more clarity in roles. Over the

<sup>3</sup> <https://lancsvp.org.uk/wp-content/uploads/2018/10/Lancashire-Volunteers-Partnership-Evaluation-Final.pdf>

last year the Voluntary Service team has completed all the actions that were pledged as a result of the volunteer's feedback. Details can be found in the full report.

### **Recruitment Pilot**

The Trust is keen to increase the overall number of volunteers that carry out activity across all services and locations with an aim of volunteer number reflecting 10% of the workforce. From reviewing the existing volunteer recruitment pathway, it was felt this journey was lengthy and inflexible to the needs a volunteer applicant may have.

A pilot was undertaken to use Better Impact to recruit volunteers. Adverts were published for specific roles, interviews were booked at mutually convenient times and locations and voluntary service staff were responsible for completing pre-placement checks (DBS checks going through Lancashire County Council's DBS portal).

The piloted recruitment journey was successful in being more personal and increased the flexibility offered to applicants, department staff were more engaged, and more relevant information was collected and stored on Better Impact as it came directly from the volunteer. However, using Better Impact required a huge time resource as it is a manual system and long term use of Lancashire County Council's DBS portal would be costly.

### **Conclusion**

Overall, the Volunteer Development project has met all of the aims of the project. The project has ensured the East Lancashire Hospitals Trust Voluntary Service is compliant with NHS and government recommendations and legislation and the risk to patients and the Trust has been reduced by having a clear record of volunteer activity. By building and delivering a bespoke electronic volunteer management system, the service has more accurate and up to date information about the volunteers and the activity they carry out. The service is now able to report on the impact of volunteering in terms of estimated hours and can use demographic data to target recruitment when required.

The recommendations of this project will form part of a two year volunteer strategy to build on the improvements made during the course of this project.

### **Recommendations**

- **Continue to hold focus groups with volunteers to coproduce volunteer role descriptions to ensure all volunteers have an accurate role description**
- **Volunteers should continue to be supported to complete the volunteer learning passport, and explore options to ensure there is an inclusive training option for volunteers who do not use a computer**
- **Complete a second phase of the recruitment pilot, learning lessons from this pilot and explore the possibility of blending the Better Impact and Trac systems**
- **Explore ways to increase capacity to take on new volunteers with a focus on increasing the capacity of volunteer induction**