



Regional Plan for Volunteering in Health and Social Care 2014 -2017

Consultation Document

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1. Introduction

Volunteering has always been part of the delivery of the statutory health and social care provision in Northern Ireland. Volunteers add value to the work of paid staff by providing befriending, meeting and greeting, transport, chaplaincy, meal time support, breast feeding support and many other roles. The Health and Social Care Board (HSCB) undertook a scoping study in 2011 to look at the number of volunteers involved in Health and Social Care Trusts (Trusts) across Northern Ireland and the kinds of roles they play. This report evidenced the substantial impact volunteers were making to health and social care and the value placed on volunteers by Trusts and made a number of recommendations for how the engagement of volunteers could be further developed.

In 2012 the HSCB commissioned Volunteer Now to support the development of a 3 year, Regional Plan for Volunteering in partnership with the Public Health Agency and Trusts across Northern Ireland. This plan sets out a series of proposals to promote and support the role of volunteers within health and social care, including, improved pathways and processes supporting volunteering in health and social care, supporting the quality of commissioning assessment and recognition of good volunteering practice and an increase in profile of health and social care employer supported volunteering opportunities. One example of positive development and progression of the current profile of volunteering within health and social care will be that each Trust will increase the numbers of men, young people and people from BME backgrounds as registered and active volunteers.

The broader role of the community, voluntary, private and public sector beyond health and social care in volunteering is addressed in the Department for Social Development's NI Volunteering Strategy and Action Plan which seeks to develop and support volunteering in its widest context. Consequently, this proposed Health and Social Care Board/Public Health Agency Plan, while acknowledging the crucial contribution made, does not aim to replicate this Inter-departmental and cross sectoral plan.

The HSCB is grateful to the participants on the Regional Steering Group, listed at Appendix 1, who have helped to bring this work to this stage.

The plan is being issued to a wide range of stakeholders for their views. The consultation period closes Friday 18th April 2014.

Responses should be returned on the using the Questionnaire that can be accessed on: www.hscboard.hscni.net/consult or www.publichealth.hscni.net/consultations and returned as indicated in the supporting documentation.

guiana.

Fionnuala McAndrew Director of Social Care and Children Health and Social Care Board Public Health Agency Charper

Dr Carolyn Harper Director of Public Health & Medical Director Public Health Agency

2. Context

The Health and Social Care Board carried out a scoping study on volunteering in 2011. This indicated that there were over 1,500 volunteers across all Health and Social Care Trusts, placed throughout all programmes of care, with the majority of volunteers being in acute settings. All Trusts placed high value on the work of volunteers. The HSCB made a number of recommendations as a result of this study and these are reflected in the Action Plan in this document and detailed at Appendix 2.

The Department for Social Development launched the first volunteering strategy for Northern Ireland in March 2012; it provides the policy framework and a context for this Regional Plan for Volunteering in Health and Social Care. Many of the concepts in the Strategy have been further developed for a statutory health setting as part of this regional Plan.

In December 2011, Transforming your Care: A Review of Health and Social Care in Northern Ireland, was published. This document will shape the development of health and social care services in Northern Ireland over the next five years. There is a focus on people's homes being the hub of care, avoiding admission to hospital/residential care and also the introduction of reablement. There are opportunities for Trusts to involve volunteers in a number of settings to support the implementation of Transforming Your Care. This plan seeks to provide a context for this involvement in terms of building good volunteering practice and providing the flexibility within the model of volunteering used by Trusts. This will enable the development of new roles and the deployment of increased numbers of volunteers, including in partnership with other organisations.

A number of other Department of Health Social Services and Public Safety, Health and Social Care Board and Public Health Agency strategies and plans such as , Promoting Good Nutrition, Personal and Public Involvement, Community Development, the new Public Health framework 'Making Life Better', among others, reference the critical involvement of volunteers. This Regional Plan seeks to provide a framework to support the implementation of good quality volunteering opportunities wherever they arise within the statutory health and social care environment. It also seeks to consider opportunities for employer supported volunteering in appropriate situations within Health and Social Care.

The recent census¹ statistics show a rise in the population of Northern Ireland with an increase of 18% in the number of people over 65 including a 35% rise in the population over 85. This population change presents challenges for us all but also opportunities to involve older people as volunteers in a statutory health and social care context. Many older people are already actively volunteering in Trusts across Northern Ireland and this plan will seek to extend that number to make the best use of the skills and experience of older people.

Involving volunteers in a statutory health and social care context is not about replacing paid staff. Across all Trusts arrangements exist to ensure trade unions are consulted about the development of roles such as befriending, meeting and greeting, reading to patients etc. In recent months for example, the Royal College of Nursing has recognised the role that volunteers can and do play. This Plan will look at building on this work with trade unions to consider how new volunteering roles can be developed which can add value to the work of paid staff in the changing health and social care environment.

³Northern Ireland Statistics and Research Agency, NI Census, 2011.

3. Vision, definition, aims and principles

Volunteering is defined as:

"The commitment of time and energy, for the benefit of society and the community, the environment or individuals outside, (or in addition to) one's immediate family. It is unpaid and undertaken freely and by choice"

(Department for Social Development, Join in Get Involved, Build a Better Future 2012).

Our **Vision** is that volunteering will be welcomed and supported wherever it is additional to the role of paid staff, to improve people's experience of statutory health and social care services, in a range of settings, across Northern Ireland.

Aims

This plan aims to:

- Promote recognition and value for volunteering in health and social care.
- Enable volunteering in health and social care to develop.
- Improve the experience of volunteers in health and social care.
- Build an evidence base to support and develop volunteering in health and social care.
- Support staff to ensure volunteers are involved effectively.
- Enhance service user experience of health and social care.

Underpinning Principles

A number of principles have been identified which are key to the success of the delivery of the plan:

Leadership – a commitment that volunteering will have strong leadership at all levels in health and social care

Equality – a commitment to fairness in recruitment and involvement.

Adding Value – a commitment that volunteers will only be engaged where they can add value to the role of paid staff and will not be used to replace staff.

Partnership – a commitment to working in partnership with individuals, organisations and communities to deliver the best health and social care service possible.

Volunteer Management – a commitment to striving for the best possible volunteer management in health and social care, including in commissioned services, based on the Investing in Volunteers² standard.

Commissioning – a commitment to ensuring that commissioning processes consider how volunteering can enhance service provision and resource it appropriately.

Impact – a commitment to seeking to measure the impact volunteering is making.

² Investing in Volunteers is the UK quality standard for the involvement of volunteers within an organisation. It is designed to help volunteer-involving organisations review and improve their volunteer management. It is a nationally recognised award that allows organisations to publicly demonstrate and promote their commitment to volunteering.

4. Action Plan

The working group have developed the following Action Plan to take forward the vision and aims of the plan between 2014 and 2017. The Action Plan contains are a range of practical tasks which will seek to build a strong foundation to develop volunteering in Health and Social Care. We have also included a Quality Indicator for each Action which will help practitioners decide if they have met the Action.

	Theme 1: Promote recognition and value for volunteering in health and social care.				
	Action	Quality Indicators			
1	All Trusts provide recognition for volunteers at least annually	Trusts have volunteer policies in place based on principles of equality and diversity; Trust staff recognise volunteers' contributions and effectively communicate their appreciation to volunteers both formally and informally.			
2	All Trusts raise awareness with staff about the role and value of volunteers	People at all levels of Trusts have been informed of and can articulate the Trusts' reasons for involving volunteers and the benefits to volunteers.			
3	Trusts, HSCB, PHA review policy to promote volunteering in the workforce.	Trusts have employer supported volunteering policies in place based on principles of equality and diversity;			
The	Theme 2: Enable volunteering in health and social care to develop				
	Action	Quality Indicators			
1	All Trusts should have a plan to develop	Trusts have a plan for volunteering which is			

	volunteering.	reviewed regularly.
2	Trusts increase the number and variety of roles available across all programmes of care.	If feasible a variety of tasks is made available which will attract a range of people while still meeting the needs and aims of the organisation; where possible tasks are adapted to suit the needs, abilities and interests of individual volunteers.
3	Trusts, HSCB and PHA establish a mechanism for ensuring any new plans for health and social care supports volunteering	Trusts, HSCB and PHA review policy annually to ensure it supports volunteering.
4	A mechanism is put in place for sharing roles across Trusts.	If feasible a variety of tasks is made available which will attract a range of people while still meeting the needs and aims of the organization; where possible tasks are adapted to suit the needs, abilities and interests of individual volunteers and these are shared between Trusts.
Then	ne 3: Improving the expe	rience of volunteers in health and social care
1	Trusts give consideration to skill development for volunteers in relation to their role.	Volunteers are provided with the necessary information and/or training to carry out their role, including any policies as appropriate.
2	All Trusts review volunteer recruitment processes in light of new Safeguarding Vulnerable Groups Guidelines	Trusts approach to the use of official checks takes into account the relevant Government guidelines and the roles in which volunteers will be placed.
3	Trusts will set consistent	People interested in volunteering are provided

	standards for the time recruitment processes should take.	with clear information about the opportunities, the recruitment and selection procedure, what volunteers can expect from the Trust and what the Trust's expectations are.
4	The Public Health Agency/Health and Social Care Board will review guidance to Trusts about Occupational Health screening for volunteers	The Trust asks only for information needed in order to involve a volunteer and this is recorded in a consistent manner.
5	The Public Health Agency/HSCB/Trusts to ensure that assessment includes volunteering practice when commissioning services involving volunteers	Where there is commissioning or procurement of services involving volunteers, Trusts/PHA/HSCB will ensure that consideration will be given to good volunteer management. An example of a Funders Toolkit has been included at Appendix 3 for consideration, a similar toolkit for commissioning or procurement may be developed.
6	Trusts will seek to involve a diverse range of volunteers reflective of the community.	Trusts are committed to involving volunteers from a wide range of backgrounds and abilities and to ensure the necessary resources to support such diversity. Specifically each Trust will increase the numbers of men, young people and people from BME backgrounds as registered and active volunteers.
7	Implement equality monitoring system for volunteers	Trusts monitor the diversity of the volunteer team and implement procedures that aim to increase diversity and representation from the local community.
8	Trusts will benchmark volunteering practice against national	Trusts benchmark against quality indicators in Regional Plan.

	volunteer management standards (Investing in Volunteers)	
9	Agree a consistent approach to paying volunteer expenses across Trusts.	There is a clear policy on the reimbursement of volunteers' out of pocket expenses which is rooted in the Trusts' ethos and which takes into account the Trusts' financial situation.
	ne 4: Build an evidence b al care.	ase to support volunteering in health and
1	Agree consistent definitions for volunteers across all Trusts	Trusts are clear about volunteers' roles and opportunities especially in relation to partner organisations.
2	Agree consistent volunteer data collection methods for all Trusts.	Trusts only ask for information needed to make a placement and this is recorded in a consistent manner.
3	Trusts will assess the impact of volunteering	Volunteers are asked for feedback about their role and their involvement with the Trust.

Ther	Theme 5: Support staff to ensure volunteers are involved effectively.				
1	Trusts will provide training for staff working with and managing volunteers	Trusts take steps to ensure that those who supervise volunteers have the relevant knowledge and experience.			
2	Include information about how the Trust involves volunteers in Trust corporate inductions for staff.	People at all levels of Trusts have been informed of and can articulate the Trusts' reasons for involving volunteers and the benefits to volunteers.			
Ther	Theme 6: To enhance service user experience of health and social care.				
1	Agree a mechanism to consulting patients about impact of volunteers to inform role development Trusts adopt appropriate procedures for regularly reviewing volunteer involvement in the organisation, including policies and procedures.				

5. Implementation

In order to ensure effective implementation of the regional plan for volunteering it needs to be given sufficient priority. A project board led jointly by the HSCB and PHA will be established with nominations from Trusts, Volunteer Now and other partners from the voluntary and community sector. Each Trust will nominate two volunteers to take part in a Regional Volunteering Group which will send two representatives to the Project Board. A report on the achievements within the framework of the regional plan will be produced annually and circulated to key stakeholders and published on the Health and Social Care Board website & PHA Websites.

6. Finance

The levels of investment in Volunteering by the Trusts, Human Resources and Financial, were identified in a scoping exercise carried out by the HSCB and PHA in July 2011. Further detailed analysis is needed to provide clearer, current information in relation to existing investment and the overall investment required to implement this plan. This will be taken forward by the Project Board.

Appendices

Appendix 1 – Regional Steering Group for volunteering in Health and Social Care

Moira Mannion	Belfast Health and Social Care Trust		
Denise Hayward	Volunteer Now		
Fionnuala McAndrew	Health and Social Care Board		
Sonya Duffy	South Eastern Health and Social Care Trust		
Jason White	South Eastern Health and Social Care Trust		
Kristy-Lee Greene	Northern Health and Social Care Trust		
Kathey Neill	South Eastern Health and Social Care Trust		
Marie Mullan	Northern Ireland Ambulance Service		
Anne Mills	Department of Health and Social Services and Public Safety		
Anne Love	Western Health and Social Care Trust		
Harry Armstrong	Department for Social Development		
Bernie Mitchell	Belfast Health and Social Care Trust		
Maurice Meehan	Public Health Agency		
Carolyn Agnew	Southern Health and Social Care Trust		

Appendix 2 – Recommendations from Health and Social Care Scoping Study.

Recommendations for the HSCB and PHA to adopt in the absence of a Regional Strategy

- 1. That there is an expressed commitment to the involvement of volunteers and recognition throughout the organisation that volunteering is a two-way process which benefits volunteers and the organisation.
- 2. The Trusts commit appropriate resources to working with all volunteers, such as money, management, staff time and materials.
- The Trusts are open to involving volunteers who reflect the diversity of the local community and actively seeks to do this in accordance with its stated aims.
- 4. The Trusts develop appropriate roles for volunteers in line with their aims and objectives, which are of value to the volunteers.
- The Trusts are committed to ensuring that, as far as possible, volunteers are protected from physical, financial and emotional harm arising from volunteering.
- 6. The Trusts are committed to using fair, efficient and consistent recruitment procedures for all potential volunteers.
- 7. Clear procedures are put into action for introducing new volunteers to their role, the organisation, its work, policies, practices and relevant personnel.
- 8. The Trusts takes account of the varying support and supervision needs of volunteers.
- 9. Trusts are aware of the need to give volunteers recognition.
- 10. Develop and bring forward a Regional Plan for Volunteering in Health and Social Care.
- 11. Address the uneven nature of volunteering across Health and Social Care Trusts.
- 12. Adequate resources need to be secured across the Trusts.
- 13. The volunteer application and registration process needs to be simplified and streamlined as it is presently too cumbersome and slow.
- 14. There is a need for more awareness training and good practice training for staff and managers on a regular basis.
- 15. Occupational health checks BCG, MMR, Immunisation history appears to be an obstacle to volunteering and needs to be addressed.

Appendix 3: Sample Toolkit

Toolkit for Assessing Funding Applications that Involve Volunteers

This toolkit has been developed by Volunteer Now with input from BIG Lottery, Community Foundation for N Ireland, Belfast City Council, BBC Children in Need, Lloyds TSB Foundation and the Public Health Agency.

Purpose of Toolkit

Volunteers are central to many funding applications and they add value to a range of work across the voluntary, community and statutory sectors. However volunteering works best when it is resourced and supported and when systems are in place for the effective involvement of volunteers.

This toolkit aims to raise the profile of volunteering and highlight the best practice that is needed for effective volunteer involvement. It has been developed to meet an action in The Volunteering Strategy for N Ireland (DSD 2012):-

Encourage regional funders to ensure the quality of volunteer involvement and management is of an effective standard when considering funding an organisation or awarding a contract where volunteers play a significant part in delivering services.

How to Use

The toolkit is designed in such a way as to stand alone as an assessment tool – for use when assessing application forms, in telephone or face to face interviews. However it is recognised that funders will have their own assessment checklists and this document could be used as a resource for an Assessor to become familiar with the standards expected when involving volunteers. It will help them consider the areas of practice that should be pertinent to the application under assessment, bearing in mind, size of organisation, activity being carried out and number of volunteers.

The toolkit is based on the Investing in Volunteers Quality standard for Volunteer Management. It is recognised that not all organisations will have all these practices in place and it is hoped that funders will work with organisations to develop the practice through the period of their funding cycle, perhaps even supporting them to do so. Assistance, including training and publications based on the standards, is available from Volunteer Now.

Tel: 028 9023 2020 E: info@volunteernow.co.uk W: www.volunteernow.co.uk

Further help for Funders is available in the "Guidance Notes for Funders Assessing Against Indicators in the Funder's Toolkit" at the end of this toolkit and by contacting Volunteer Now or visiting their website.

Toolkit for Assessing Funding Applications that Involve Volunteers

Name of Organisation: _____ Number of Volunteers:____

Application for:		Date:		
Indicators	Practices needed to demonstrate Indicator	Consider and decide if practice is important to this application (Mark with *)	Is this practice in place? (Yes/No/Partly)	Notes

Indicator 1	Written, current policy on volunteer involvement.
The basis for volunteer	
involvement.	Appropriate policies & procedures for volunteers.
There is an expressed	
commitment to the involvement of volunteers, and recognition throughout the organisation that volunteering is a two-way process, which benefits volunteers and the organisation.	Value base and rationale for volunteer involvement.

Indicators	Practices needed to demonstrate Indicator	Consider and decide if practice is important to this application (Mark with *)	Is this practice in place? (Yes/No/Partly)	Notes
Indicator 2	Person(s) assigned responsibility for volunteer management.			
How the organisation resources volunteering. The organisation commits	Objectives for volunteer involvement are part of organisational plan.			
appropriate resources to working with all volunteers, such as money, management, staff time and materials.	Commitment to resourcing volunteers' travel, training costs, social events, childcare costs, materials used by volunteers and other volunteer support including evaluation costs.			
Indicator 3 Diversity in volunteering.	Openness to involving volunteers from a wide range of backgrounds and abilities.			
The organisation is open to involving volunteers who	Images and/or descriptions of the			

reflect the diversity of the local community and actively seeks to do this in	organisation reflect the diversity of the community.	
accordance with its stated aims.	Volunteer opportunities are promoted widely.	
	Diversity of volunteer team is monitored and steps taken to target under represented groups.	

Indicators	Practices needed to demonstrate Indicator	Consider and decide if practice is important to this application (Mark with *)	Is this practice in place? (Yes/No/Partly)	Notes
Indicator 4	Role descriptions are in place.			
The development of volunteer roles. The organisation develops	Organisation is clear on the skills, attitude, experience and availability needed to carry out role.			
appropriate roles for volunteers in line with its aims and objectives, which are of value to the volunteers.	Tasks are developed and adapted to suit needs, abilities and interests of individuals.			
Indicator 5 Steps taken to protect	Risks to volunteers are identified when designing roles.			
volunteers.	Appropriate insurance is in place for volunteers.			
The organisation is committed to ensuring that, as far as possible, volunteers are protected from physical,	Policy and procedures on reimbursement of actual out of pocket expenses.			

deta	nteers' personal ils are held in line with protection principles.	
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Indicators	Practices needed to demonstrate Indicator	Consider and decide if practice is important to this application (Mark with *)	Is this practice in place? (Yes/No/Partly)	Notes
Indicator 6 Fair recruitment procedures.	 Appropriate information provided for potential volunteers about opportunities, recruitment & selection, expectations. 			
The organisation is committed to using fair, efficient and consistent recruitment procedures for all	Appropriate procedures for matching volunteers with roles.			
potential volunteers.	Opportunity for a taster or settling in period.			
	Clear rationale for taking up references (or not) as part of recruitment procedures.			
	Organisation is following Government guidelines regarding safeguarding			

	vulnerable groups and use of police record checks.			
Indicators	Practices needed to demonstrate Indicator	Consider and decide if practice is important to this application (Mark with *)	Is this practice in place? (Yes/No/Partly)	Notes
Indicator 7 Volunteer induction.	 Full induction to organisation and role including scope/ boundaries of role. 			
Clear procedures are put in place for introducing new volunteers to their role, the organisation, its work, policies, practices, relevant personnel.	Training on how to carry out the role is provided			
	 Procedures for dealing with problems with volunteers, including complaints. 			
Indicator 8	Clear contact person for volunteer.			

Volunteer support and supervision needs.	One to one /group support and supervision opportunities.		
The organisation takes account of the varying support and supervision needs of volunteers.	Two way communication systems between volunteers and staff.		

Indicators	Practices needed to demonstrate Indicator	Consider and decide if practice is important to this application (Mark with *)	Is this practice in place? (Yes/No/Partly)	Notes
Indicator 9	Recognition of volunteers from all levels.			

Recognition of volunteer contributions. The whole organisation is aware of the need to give volunteers recognition.	Volunteers can input views into organisation's work.
	Volunteers can develop skills within roles.
	References given to recognise contribution.
	Feedback received when volunteers leaving.

Guidance Notes for Funders Assessing against Indicators in Funder's Toolkit

Indicator No 1

There is an expressed commitment to the involvement of volunteers, and recognition throughout the organisation that volunteering is a two-way process which benefits volunteers and the organisation.

- A **volunteer policy** sets the framework for how volunteers will be valued and involved in an organisation. This is an important document that may provide evidence for various practices. 'Based on principles of equality and diversity' means that equal opportunities, inclusion and diversity should be reflected in every aspect of the policy. A policy should include the organisation's position statement on equal opportunities/diversity in particular if the organisation has identified specific volunteers they are seeking to attract. A volunteer policy should indicate dates for regular review. *Template Volunteer Policy Framework is available from* http://www.volunteernow.co.uk/fs/doc/publications/volunteer-policy-framework.pdf
- Volunteers should only be included in **organisational policies** if appropriate e.g. they should not be included if policies relate to staff terms and conditions of employment (e.g. discipline, grievance procedures, etc.) but they may be included in e.g. the organisation's general health and safety policy.
- Policies should reflect appropriate volunteer management language/terminology and ensure differences between volunteers and staff are recognised. Volunteering and the Law Information Sheet is available from http://www.volunteernow.co.uk/fs/doc/publications/volunteering-and-the-law-information-sheet-nl.pdf
- Evidence needs to show that volunteers are **valued** throughout the organisation (by management committee, management, staff, volunteers, clients, supporters) and that they are an important part of the organisation, maybe even integral to how the organisation runs. Evidence needs to show the **commitment at all levels** of the organisation to making

volunteering inclusive and ensuring that volunteering is a two way process.

• Evidence needs to show that organisations **review** their volunteering programme to ensure relevance, currency and effectiveness. Evidence may include systems for gaining feedback from volunteers on how policy and procedures impact on them or examples of where policy or procedure has been reviewed.

Indicator No 2

The organisation commits appropriate resources to working with all volunteers, such as money, management, staff time and materials.

- Evidence needs to show that someone has been assigned **responsibility for volunteer involvement** and that they have been informed of their responsibilities. Where this role is taken on by a volunteer, e.g. by a member of the management committee, a volunteer role/task description would be appropriate evidence. Where staff have responsibility, job descriptions need to reflect this.
- Any specific volunteer management training should be evidenced but transferable skills from staff management are also appropriate. Induction should show that those who work with volunteers have been made aware of the organisation's volunteer policies and procedures and provided with the necessary information or training on the needs and issues of the volunteers involved.
- Minutes of team meetings are acceptable evidence where volunteer issues or representatives are identified.
- Evidence needs to show that there has been some **planning** in relation to volunteer involvement and its future development. This may include targets for increasing number and diversity of volunteers, volunteer opportunities, improving areas of practice such as training or recognition.

Expenditure for the volunteer programme might include travel expenses, volunteer training, refreshments for volunteer social events, volunteer support costs, child care costs and the cost of materials used by volunteers. Organisations could also show how they aim to make volunteering accessible for all by making reasonable adjustments or making resources available for volunteers with particular needs. Procedures should show that it is reimbursement for out of pocket expenses - lump sum payments and regular gifts are not recommended due to inland revenue implications. Volunteers and Expenses Information Sheet is available from http://www.volunteernow.co.uk/fs/doc/publications/volunteers-and-expenses-information-sheet.pdf

Indicator No 3

The organisation is open to involving volunteers who reflect the diversity of the local community and actively seeks to do this in accordance with its stated aims.

- Evidence needs to show that there is an active **commitment to increasing diversity** in the volunteer pool. Organisations could show how they are targeting specific groups that are under represented in their existing volunteer teams. If the organisation's community is limited e.g. a women's group that involves only female volunteers then the rationale should be clear for this as per the organisation's aims.
- Evidence needs to show how the organisation's commitment to diversity is communicated to volunteers and staff.
- Evidence needs to show how the organisations' **commitment to diversity is portrayed** both visually and in writing so as the organisation appears welcoming to a wide range of people.

The 'community' may be interpreted as the geographic, cultural or service user group if appropriate.

- Evidence needs to show that opportunities for volunteers are marketed widely in order to attract a diverse range of volunteers.
- There should be evidence to show that the organisation knows what their local community looks like and aims to make sure that their **volunteer base is reflective** of this. Evidence should show how the monitoring data of the organisation's volunteer base is compared with that of the community within which it operates and with its client/user group. It would be useful to have documentation showing how the organisation addresses issues of under representation.
- Best practice guidance on how to develop diversity in a volunteering programme is available from the Equality and Diversity section of Volunteer Management resources.

http://www.volunteernow.co.uk/publications/?category=13&type=45&Search.x=52&Search.y=24&Search=Search

The organisation develops appropriate roles for volunteers in line with its aims and objectives, which are of value to the volunteers.

- Task/role descriptions should provide as much information as possible about the volunteer role but terminology should
 not imply an employment relationship. A Recruitment Plan for Involving Volunteers is available from
 http://www.volunteernow.co.uk/fs/doc/publications/plan-for-recruiting-volunteers-information-sheet-nl.pdf
- Details of the **skills**, **attitude**, **experience** etc can be included with the task descriptions showing that the organisation has given some thought to how they can match volunteers to the roles.
- An organisation may have a variety of different roles, or it may be able to provide a variety of tasks within one role. Where possible, organisations should show that they are **designing a range of roles or tasks** that can suit a range of abilities and interests and that are in line with the aims and objectives in the organisation's annual plan.
- An organisation should be able to show that they are open to meeting the needs of volunteers where possible, taking
 into account the varying abilities of volunteers when designing roles and being flexible or willing to adapt roles.

The organisation is committed to ensuring that, as far as possible, volunteers are protected from physical, financial and emotional harm arising from volunteering.

- Completed risk assessments should be available for all the role descriptions. If organisations are involving vulnerable groups then evidence needs to show that thought has been given to their safe involvement. A Risk Assessment and Volunteers Information Sheet is available from http://www.volunteernow.co.uk/fs/doc/publications/risk-assessment-and-volunteering-information-sheet-nl.pdf
- Insurance certificates and guidelines should clearly show the cover for volunteers.
- Evidence needs to show that the organisation has a commitment to trying to cover **out of pocket expenses**, making volunteering accessible for all.

See also guidance notes under indicator 2 around eligible expenses and additional expenses.

Organisations need to ensure procedures are in place in line with current **Data Protection legislation**. More information can be obtained from the Information Commissioner's Office at www.ico.gov.uk.

The organisation is committed to using fair, efficient and consistent recruitment procedures for all potential volunteers.

- Evidence should show that organisations are providing volunteers with **key information** to help them make decisions as part of the recruitment process.
- This information could include:
 - the type of volunteering opportunities available (roles);
 - the application process;
 - the selection or matching process;
 - whether there is any compulsory training;
 - > a summary of the organisation's expectations of volunteers; and
 - what volunteers can expect from the organisation.
- Accessibility issues also need to be addressed so information may be in different formats or with an option for oral application.
- Evidence should show that procedures are in place and used consistently to **recruit and match** volunteers with the roles outlined in 4. Procedures should address how individual's needs will be considered during the recruitment process e.g. literacy issues, disability, language.
- Evidence needs to show that potential volunteers are recruited using the **criteria** laid down in the role descriptions and specifications and are only asked for relevant information.
- Evidence should show that volunteer motivation is considered by the organisation during recruitment.

- Best practice guidance on how to attract and select volunteers is available from workbook 2 of the 'As Good As They Give' Resources- available from http://www.volunteernow.co.uk/fs/doc/publications/as-good-as-they-give-workbook-2-attracting-and-selecting-volunteers-2013.pdf
- Evidence needs to show how **unsuccessful applications** are dealt with at any stage of recruitment. Providing volunteers with feedback about why they are not successful and signposting to other organisations such as Volunteer Centres is useful.
- Evidence needs to show that organisations are open to letting volunteers "**try out**" volunteering through introductory visits or settling in periods, if appropriate.
- Evidence needs to show whether or not references are part of the selection procedure. In some circumstances
 organisations may consider taking references to be inappropriate e.g. the target group of volunteers may not be able to
 obtain references.
- Evidence should show that organisations are aware of their responsibilities in relation to **safeguarding vulnerable groups**.
 - Best practice guidance on safeguarding children and vulnerable adults are available from the safeguarding section of the publications http://www.volunteernow.co.uk/publications/?category=7&type=0&Search.x=26&Search.y=12
- Evidence needs to show that organisations have thought about dealing with convictions and agreed how they will manage
 it.

Clear procedures are put into action for introducing new volunteers to their role, the organisation, its work, policies, practices and relevant personnel.

- A good induction procedure will include introductions to those that the volunteers will come into contact with. If
 organisations have a lengthy induction procedure then a checklist is a useful tool to use and provides evidence of the areas
 covered.
- The evidence may include copies of relevant policies/procedures/guidelines these may be summarised in a **volunteer handbook**. The evidence also needs to show how the organisation communicates this information to the volunteer.

A **checklist for induction** will show that volunteers are being told about the policies and not just being given a large, sometimes inaccessible, handbook. E.g. - risk assessments, health and safety issues, expenses policy should be fully discussed with the volunteers. Organisations should also address any accessibility issues as part of induction, ensuring a variety of communication methods is used. A template induction checklist is available from

http://www.volunteernow.co.uk/fs/doc/publications/volunteer-induction-checklist-nl.pdf

- Evidence needs to show **boundaries** to the volunteer roles that are appropriate to the organisation. Examples of this might include:
 - limits to the volunteer's relationship with service users;
 - > limits to the type of information and/or advice given to members of the public; and
 - > any limitations necessary to comply with health and safety or insurance policies.
- Evidence should show how policies and procedures on **inappropriate behaviour** are communicated to volunteers.
- Evidence needs to show that the organisation has appropriate procedures in place for **complaints** and has communicated this to the volunteers.

Indicator No 8

The organisation takes account of the varying support and supervision needs of volunteers.

- Evidence needs to show how the organisation will provide support and supervision and how this is communicated to volunteers.
- The organisation must take in to account the **varying needs of volunteers**, the varying demands of volunteering roles and the importance of support being accessible.
- The evidence should illustrate how the organisation makes it clear to the volunteers that they can refuse to carry out tasks they feel inappropriate or unrealistic.
- Evidence needs to show that volunteers are asked for **feedback** on their role and their experience with the organisation. This could be through formal monitoring and evaluating procedures or informal methods.

It would be useful to have documentation showing how the organisation addresses feedback received.

• Evidence needs to show that **communication** in the organisation extends to volunteers particularly around issues that are relevant to them.

Good practice guidance on the management and motivation of volunteers is available from work book 3 of the 'As Good As They Give'

Resources http://www.volunteernow.co.uk/fs/doc/publications/workbook3-managing-and-motivating-volunteers-2013.pdf

The whole organisation is aware of the need to give volunteers recognition.

- The evidence should illustrate ways in which the management and staff (including Trustees and Boards) say **thank you** to the volunteers in words and actions.
- The evidence should reflect how the organisation **consults with and obtains feedback** from volunteers on how the organisation operates and makes decisions. This could be through formal monitoring and evaluating procedures or informal methods.
- Evidence should show that the organisation has considered what the volunteers want from volunteering and is trying to **meet those needs**. E.g. some volunteers may need help with progression routes from volunteering; some may want to develop existing or new skills; some will just want to volunteer and not want any development opportunities.
- Evidence may be in a volunteer policy or handbook where the organisation gives a commitment to provide a reference when a volunteer leaves.
- Evidence needs to show that organisations try to gain feedback on **what volunteers thought about their experience**. It would be useful to have documentation showing how the organisation addresses feedback received.

Volunteer Management Best Practice

Additional best practice guidance in the form of information sheets and best practice checklists are available from the Volunteer Now website.

http://www.volunteernow.co.uk/supporting-organisations/publications