

Back to Health Final Impact report 2022 - 2025

*Now is the time to unlock the power
of volunteering*

helpforce





Welcome

Back to Health (BtH) has been our most ambitious campaign to date, in which we sought to scale our impact by building on the achievements and learning in our first five years.

Our goal was to work with 100 partners on volunteer-led programmes designed to help one million people get back to health, with a significant positive impact on staff, patients and the volunteers themselves.

We aimed to support partners to create, adopt and scale high-impact volunteer roles and develop a persuasive leadership case for increased investment in volunteering programmes.

At the start of the programme we set out our four-part offer of support:

- ▶ Raise the bar to help improve volunteering through sharing knowledge and resources
- ▶ Make the case to help secure more funding to expand volunteering
- ▶ Grow hands-on support through scaled-up volunteering
- ▶ Grow hands-on support through scaled-up volunteering

Building on our work with volunteers in hospitals, we aimed to work with statutory agencies and the voluntary sector to create an integrated health and care pathway for patients in most need of support between home and hospital to help:

- ▶ Improve health and wellbeing
- ▶ Reduce pressure on services
- ▶ Create valuable and fulfilling roles for volunteers.

I am delighted to share in this report that the campaign has now reached its finishing line, exceeding our target by supporting over 1M people.

I trust this impact report will ignite your passion for volunteering and its remarkable potential. Volunteering stands as the cornerstone of our society's foundation. The Government, local councils, health and care professionals, and grassroots organisations must collaborate to establish well-structured volunteer programmes. And that's why in 2025-26, we plan to launch a bold new programme that will build on the incredible legacy of Back to Health, transforming lives across the UK.

Amerjit Chohan,
Helpforce CEO



Outputs and outcomes we have achieved

We have achieved our target of working with 100 health and care partners to help **one million** people get back to health.

In the last year alone, we have supported almost 600,000 people including 548,017 patients, 31,449 staff and 19,314 volunteers.

Back to Health key outputs		
People supported: 1,119,481	Patients	910,954
	Staff	130,850
	Volunteers	77,677
	Partners	102
Grow- Adopt and Adapt	Roles adopted by partners	291
	Service guides accessed	170
Evaluate - Insight and Impact	Evaluated outcomes	459
Partners supported to leverage additional funding	Partners supported	60
	Funding raised	£4,770,668
Raise the bar	Network members	979
	Resources downloaded	88,082



What challenges have been faced

People are still waiting too long for appointments, treatment and surgery

The Darzi review of the NHS (September 2024) has been embraced by Government as the definitive document setting out the challenges facing the health of the nation and the NHS. This review highlighted multiple challenges, which mirror our own experience and that of our partners. People are still waiting too long for appointments, treatment and surgery.

There are over **7.6 million people** waiting for consultant-led care with many more waiting for appointments, mental health support and community services.

Missed appointments worsen health outcomes and, if unfilled, lengthen waiting lists. Each day a patient is immobile in hospitals they lose 2-5% of muscle mass, and the longer discharge is delayed, the less confidence and capability patients have to cope at home. Once home, many discharged patients lack the support they need and are vulnerable to being re-admitted. People are feeling socially isolated, disconnected and unsure of what's available to help them thrive in their community.

The NHS Long Term Plan highlights the need for an increased focus on prevention, supporting individuals to adopt healthy behaviours to help people live longer, healthier lives, and reduce the demand for and delays in treatment and care.

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“Too many people end up in hospital, because too little is spent in the community”

This is one of the key points in the Darzi review. We believe there is now a seminal opportunity to tap into the extensive goodwill of local communities with a particular focus on relieving pressure in the following areas:

- ▶ Waiting times
- ▶ Economic inactivity
- ▶ Public health challenges
- ▶ Low mood
- ▶ Shifting care closer to home



What activities have taken place?

Our approach enables integration of community assets and networks with hospitals

We are delighted to report that Back to Health has been a huge success. To support the wide array of our population's health needs, we created a framework which identifies four critical points along a patient journey where outcomes can be measurably improved, supporting people to live well, wait well, get well and recover well. Our approach enables integration of community assets and networks with hospitals to support people before they come to hospital and after they leave.

We work in partnership with local health and care organisations to develop innovative and impactful volunteering programmes. There are three main areas of activity:

▶ Programme management:

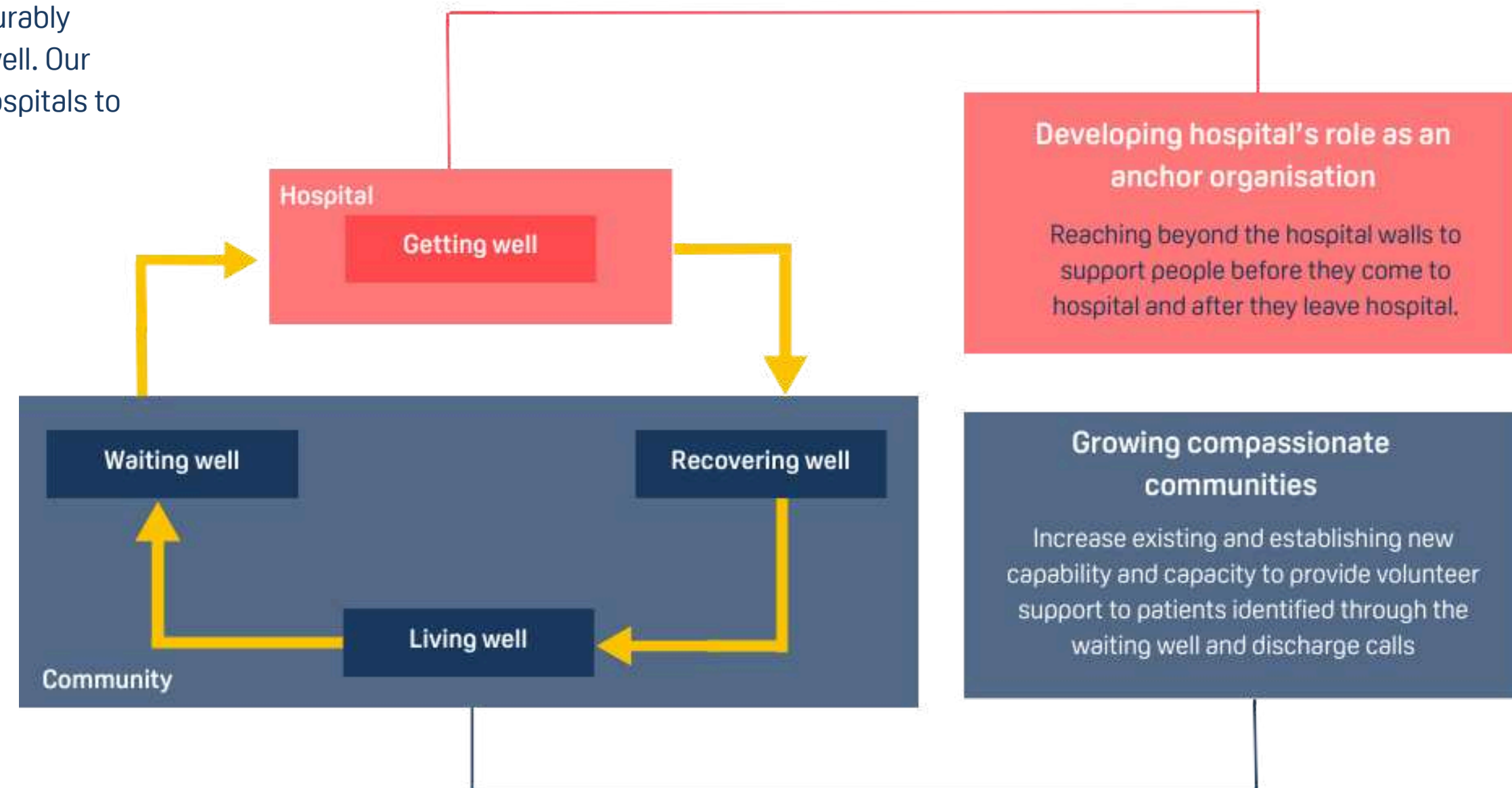
Our team co-design and support implementation of volunteering programmes using our Adopt and Adapt methodology or bespoke services.

▶ Insight and Impact Service:

A team of expert analysts measure and evaluate the impact of volunteering services.

▶ The Helpforce Network:

A space for health and care professionals to come together and share innovations, experience, learning, know-how and resources, with over 1,000 members - 78% being volunteer service managers and 13% in senior leadership positions.



Our Back to Health model

What activities have taken place? (Cont'd)

We have proven that well designed volunteering services are a triple win

We also launched five training modules with Skills for Care accessed by over 1,000 people, raising awareness of the Back to Health Pathway and empowering volunteers to confidently support patients. Our goal was to work with 100 partners on volunteer-led programmes designed to help one million people get back to health, with a significant positive impact on staff, patients and the volunteers themselves.

We have proven that well designed volunteering services are a **triple win**:



A win for **patients** in both outcomes and experience of care



A win for **health and care systems** in addressing operational pressures, staff wellbeing and workforce challenges



And a win for **volunteers** themselves.

Through the Adopt and Adapt platform, volunteer leaders are accessing service guides for a range of volunteer services including Volunteer to Career, Mealtime Support, Emergency Department, Contact Centre, and more.

The service guide provides the information needed to implement the service into a new organisation. The guide is complemented by courses that provide all the information and actions required to implement the service, including skills-based modules that provide the professional development needed to successfully manage embedding of new services. In the last year, **1,383** lessons were accessed.

The Adopt and Adapt service has been integral to our success in achieving the target to get one million people back to health. It is a blended service and combines self-led e-learning, peer groups and 1:1 support sessions. Volunteer leaders learn at their own pace and choose their preferred mix of support and courses based on their own experience and confidence in setting up new volunteer services.



Outputs and outcomes we have achieved (Cont'd)

Examples

We have delivered a wide range of volunteering projects with partners across the country, with outcomes that benefit patients, volunteers, staff and organisations/systems. Below are some examples:

Example 1: Working with the elderly care physiotherapy teams and volunteering team in Kingston hospital, we developed the first volunteer led falls prevention model.

Elderly patients being discharged from hospital were matched with a volunteer who would visit their home for eight weeks to undertake physiotherapy prescribed exercises with them.

During the visits, patients worked on their strength, balance and mobility; were provided with healthy living messaging and signposted to community-based services that could support other needs such as loneliness / social isolation. The pilot was a huge success:

- ▶ The scores of all three functional fitness tests improved across the cohort
- ▶ 63% of patients took on additional activities as a result of the programme including increased exercise and attendance at day centres.
- ▶ Self-assessed health and wellbeing scores across the cohort increased from 59.1 to 71.8 out (100 being best possible health)
- ▶ Fear of falling decreased from 5.9 to 5.2, and confidence in performing daily activities increased from 6.4 to 7.5 across the cohort
- ▶ Volunteers reported higher levels of life satisfaction and when asked about how long they aspire to continue the role, 90% told us they do not see themselves stopping.

Eager to reach and impact more people, we supported Kingston hospital to develop a successful business case for a dedicated hospital-based physiotherapist to work with anticipatory care teams, Primary Care GPs and care homes.

The model was adapted to these new settings, and hospital and community resource was bridged to ensure people most at risk are identified and prevented from falling.

The service continues to mirror the success of the pilot and a further six organisations are adopting the model.



Jackie Harris received falls prevention support after returning home from a hospital stay.

“The exercises aren’t difficult. It was about getting my legs and hips strong. I got encouragement from my excellent volunteer.”

Outputs and outcomes we have achieved (Cont'd)

Example 2: Over the past four years we have built strong statutory and voluntary sector partnerships in North West London (NWL) Integrated Care System, developing programmes to support their local communities and health equity aims.

With a diverse population of 2.1 million people across eight boroughs where 29% of people do not have English as first language, we have supported a variety of Back to Health projects including:

- ▶ Two completed Volunteer to Career projects and three current
- ▶ Two current projects focused on reducing non-attendance and preparing patients for appointments
- ▶ Various ongoing hospital-based roles supporting patient flow and discharge
- ▶ Current Primary Care Companion role in Golborne, most deprived ward in London
- ▶ Completed Mental Health project understanding local people's needs and matching them with available voluntary services.

Learning has been presented and shared with various groups across NWL with a view to scaling the projects further.

Our support spans the lifecycle of the programmes

From analysis of local data and bringing together local partners and stakeholders to understand the issues, design and development the volunteer service, evaluating the impact of the service and writing business cases to ensure their sustainability.



These projects have supported nearly 5,000 people to date. The initial six months of a DNA (Do Not Attend) project in Hillingdon has seen a 22% relative reduction in DNA rates.



Impact and long-term consequences

Compelling evidence proves the power of volunteering

Our Insight and Impact service measures the impact of volunteering on patients, staff, volunteers and organisations. A 4-stage process allows us to evaluate singular volunteering programmes, while compounding our evidence to demonstrate the impact of volunteering across the health and care sector.



of people agreed volunteer support reduced their anxiety
(n=796, 14 orgs)



of volunteers reported that volunteering gives them a sense of purpose
(n=651, 28 orgs)



of staff agreed volunteers improve the quality of service they provide
(n = 662, 42 orgs)

Examples of the impact achieved from some of our projects include:

- ▶ Discharge and settling in and support services have seen a 20% increase in patient confidence levels and a reduction in the rate of readmission to hospital from 25% to 9%
- ▶ The falls prevention service has resulted in improved strength, mobility and a reduction in fear of falling for those people supported; resulting in quicker and more sustained recovery
- ▶ The volunteer call centres contacting people on waiting lists have seen a reduction in the rate of clinic non-attendance falling from 12% to 5%; resulting in quicker diagnosis and recovery
- ▶ The volunteer call centres contacting people following hospital discharge have seen an increase in referrals to local community support services rising from 6% to 15%; resulting in the increased likelihood of quicker recovery and decreased chance of readmission.

Our Volunteer to Career Programme (VtC) has continued to be adopted by more partners with 42 organisations (Hospices, Integrated Care Boards, Primary Care & Ambulance Trusts). Having now completed the programme, 30 of which have secured further investment internally to sustain it. Evaluation of the most recent 28 organisations shows:

- ▶ 83% of volunteers were aged under 45, 26% aged 25-34
- ▶ 61% lived in most deprived areas
- ▶ 41% were from ethnic minority backgrounds
- ▶ 72% went on to secure employment or education e.g. Assistant Physiotherapist, Lab technician, Patient Pathway facilitator, Mental Health Support Worker, Biomed, Cancer Medicine.



How we are disseminating the information

Sharing insights to influence decision makers

Through our Insight and Impact Service

Our Insight and Impact service provides organisations with a methodology for measuring the impact of their services (shaping their practice) and packaged toolkits make this widely available for others to adopt.

The data and insights from these evaluations influence decision makers to invest in their local volunteering infrastructure, which has resulted in 60 partners securing investment of over £4.5million.

Through the Helpforce Network

The Helpforce Network now has 1,100 members where we share learning from our work as well as facilitating peer-to-peer support. Our resources have been downloaded over 76,000 times.

Last year, we hosted 50 events attended by a total of 1,266 people including networking sessions, webinars and fortnightly focus discussions. 133 members receive the Network weekly digest newsletter and 1,111 people are subscribed to our monthly Helpforce Update newsletter.

Through direct conversations

More strategically, a key part of our work going forward is to share the insights gained from our programmes to influence the policy and practice of the wider health and care professional community.

Our current facilitating and convening of senior leaders within the health and care system- such as the Helpforce Network webinar programme, the NHSE Task force and the ICS (Integrated Care System) senior leaders group - allows us to do this regularly throughout the year.

Through partnership

We recently launched a report with our learning and recommendations at a House of Commons event attended by senior policymakers and leaders in health and care.

We are currently working to highlight the importance of volunteering in the NHS 10-Year Health Plan and with the strong reputation and relationships we have built, we plan to increase our engagement at policy level.

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“Helpforce’s expertise has supported us to design a highly-effective, volunteer-led falls prevention service that meets the needs of our local community. We’re proud of the impact it has had on patients, staff, and our incredible volunteers.”



*Jo Farrar, Chief Executive
Kingston and Richmond NHS Foundation Trust*

How we can make a difference

Integrate NHS services with community based VCSE organisations to deliver place-based care

We have already developed, tested and evaluated effective volunteering interventions in each of these areas. Working closely with senior leaders in ICBs (Integrated Care Boards) and NHS Trusts, we are tackling the challenge of how to integrate NHS services with community based VCSE (Voluntary, Community and Social Enterprise) organisations to deliver place-based care with stronger pathways pre and post hospital. In this work, we have identified key themes that influence the effectiveness of programmes. These are summarised below:

- ▶ Senior leaders need to **communicate** a compelling vision of, and a commitment to, the benefits of closer working of the NHS, VCSE and Local Authorities (LA)
- ▶ Senior staff within integrated care systems move to new roles frequently and at short notice - so instead of working with individuals, we are **building relationships across the system** and particularly with senior clinicians who move less often
- ▶ All partners / stakeholders need **equal status** in discussions of future service development
- ▶ Leaders who have experience of working in at least two of the three stakeholder groups (NHS, LA, VCSE) seem to demonstrate a more **collaborative** approach to developing a care pathway
- ▶ Grouping the myriad of VCSE organisations into **'themes'** (eg mental health, housing, neighbourhood support) makes coordination and access more straightforward
- ▶ **Inclusion** of a strong CVS (Council of Voluntary Service) umbrella body enables quicker decision making.



Delivering volunteering projects that address health inequalities

In response to the identified challenges, we now want to build on the learning from our Back to Health programme and the development of the Back to Health framework / pathway, which we are delivering in partnership with six Integrated Care Systems.

In 2025-26, we plan to launch a new national programme that will complement Back to Health. It will be built on our evidenced understanding that support provided by volunteers and VCSE (Voluntary, Community and Social Enterprise) organisations in the community can have a huge impact in providing people with better place-based care and take pressure off NHS staff and services.

Partnering

In the ICS (Integrated Care System) programme, we are largely working from NHS (hospitals) reaching out to the community ('recovering well', 'waiting well'). With our new programme, we will also work from the other direction - partnering with community-based VCSE schemes that benefit the NHS ('living well' / prevention focus).

Addressing health inequalities

We will deliver volunteering projects that address health inequalities for people living in areas of deprivation. We will integrate with and benefit community-based statutory bodies such as Primary Care Networks, Local Authorities and VCSE organisations. We aim to scale these projects from places to systems, which could impact millions of people.

Sharing learning

These programmes align with emerging national (DHSC - Department of Health and Social Care) and regional (Integrated Care System - ICS) strategies such as Work Well, Healthy at Home, and the 'Left Shift': moving funding and focus from hospitals into communities. Using our existing senior relationships at DHSC, NHS England and other bodies, we will also share learning from this programme to influence national health policy.

103 healthcare organisations joined the Back to Health campaign

Alder Hey Childrens Hospital NHS Foundation Trust
Aneurin Bevan University Health Board
Ardgowan Hospice
Association of Ambulance Chief Executives
Barking, Havering and Redbridge University Hospitals NHS Trust
Bart's Health NHS Trust
Beatson Cancer Charity
Bradford District and Craven Health and Care Partnership
Bradford District Care NHS Foundation Trust
Brent Carers Centre
Brent CVSC
British Red Cross - South East of England
Cambridgeshire and Peterborough NHS Foundation Trust
Central and North West London NHS Foundation Trust
Central London Community Healthcare NHS Trust
Chelsea and Westminster Hospital NHS Foundation Trust
Cheshire and Wirral Partnership NHS Foundation Trust
Compton Care
Cornwall and the Isles of Scilly Health and Care Partnership
Cornwall Partnership NHS Foundation Trust
Cornwall Voluntary Sector Forum
County Durham and Darlington NHS Foundation Trust
Derbyshire Community Health Services NHS Foundation Trust
Dorset County Hospital NHS Foundation Trust
East Kent Health and Care Partnership
East Lancashire Hospitals NHS Trust
East of England Ambulance Service NHS Trust
East Sussex Healthcare NHS Trust
Forget Me Not Children's Hospice
Foundation Group (Coventry & Warwickshire)
Friends of Moorfields Eye Hospital
George Eliot Hospital NHS Trust
Great Western Hospitals NHS Foundation Trust
Guy's and St Thomas' NHS Foundation Trust
H4All
Hale Community Centre
Hillingdon Hospitals NHS Foundation Trust
Holme Farm
Hospice UK
Mid Cheshire Hospitals NHS Foundation Trust
Mid Yorkshire Teaching NHS Trust
Moorfields Eye Hospital NHS Foundation Trust

James Paget University Hospitals NHS Foundation Trust
Kent Community Health NHS Foundation Trust
KIDSGROVE MEDICAL CENTRE
Kingston and Richmond NHS Foundation Trust
Leeds Teaching Hospitals NHS Trust
Lewisham and Greenwich NHS Trust
Lincolnshire Community Health Services NHS Trust
Liverpool Women's NHS Foundation Trust
London North West University Healthcare
Mid and South Essex NHS Foundation Trust
Newcastle Upon Tyne Hospitals NHS Foundation Trust
NHS Borders
NHS Cornwall & the Isles of Scilly ICB
NHS Gloucestershire ICB
NHS Healthcare Improvement Scotland
NHS Sussex ICS
NHS Tayside
Norfolk and Norwich University Hospitals NHS Foundation Trust
Norfolk and Waveney Health and Care Partnership
North Cumbria Integrated Care NHS Foundation Trust
North East and North Cumbria ICB
North London NHS Foundation Trust
North Tees and Hartlepool NHS Foundation Trust
North Tyneside Voluntary Organisations Development Agency (VODA)
North West Ambulance Service NHS Trust
North West Anglia NHS Foundation Trust
North West London ICB
Northern Care Alliance NHS Foundation Trust
Northumbria Healthcare NHS Foundation Trust
Oxford Health NHS Foundation Trust
Portsmouth Hospitals University NHS Trust
Queen Elizabeth Hospital King's Lynn NHS Foundation Trust
Royal Berkshire NHS Foundation Trust
Royal Cornwall Hospitals NHS Trust
Royal Devon University Healthcare NHS Foundation Trust
Royal United Hospitals Bath NHS Foundation Trust
Saint Catherine's Hospice
Saint Michael's Hospice (Harrogate)
Somerset Partnership NHS Foundation Trust

South Central Ambulance
Charity
South London and Maudsley
NHS Trust
South Tees Hospitals NHS
Foundation Trust
South Warwickshire University
NHS Foundation Trust
St Margaret's Hospice
St Michael's Hospice (Hastings &
Rother)
St Michael's Hospice (Hereford)
St Oswald's Hospice
Suffolk and North East Essex ICS
Sussex Community NHS
Foundation Trust
Tees, Esk and Wear Valleys NHS
Foundation Trust
The Lighthouse
The Shrewsbury and Telford
Hospital NHS Trust
Torbay and South Devon NHS
Foundation Trust
University College London
Hospitals NHS Foundation Trust
University Hospitals Coventry
and Warwickshire NHS Trust
University Hospitals Plymouth
NHS Trust
University Hospitals Sussex NHS
Foundation Trust
Volunteer Cornwall
West Hertfordshire Teaching
Hospitals NHS Foundation Trust
West London NHS Trust
Worcestershire Acute Hospitals
NHS Trust

Thank you

We are extremely grateful to all our funders for their generous support of our work. And we would like to thank our partners, volunteers, and our staff for working with us to deliver this campaign. It is only with this support that we have succeeded in helping over one million people back to health!

Thank you.

