# Handholding volunteers Evaluation report

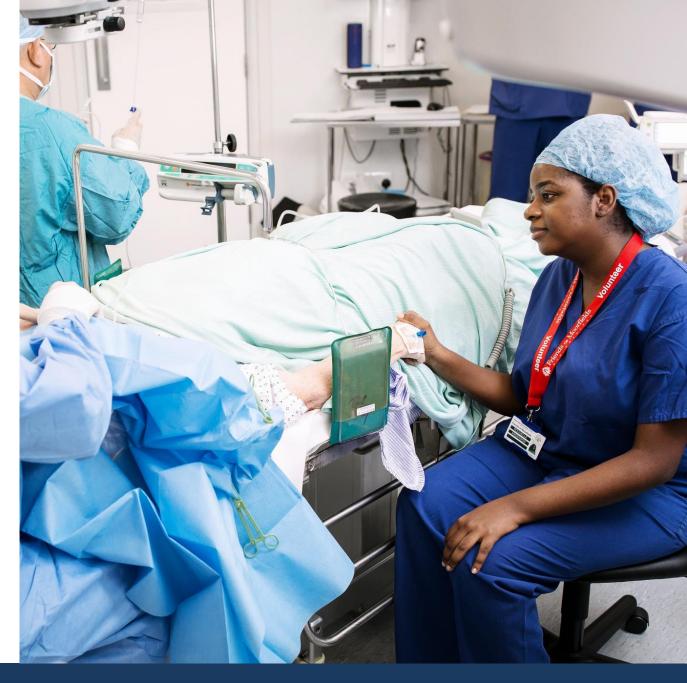
**Moorfields Eye Hospital** 

October 2024



### Service overview

- Eye surgery is usually undertaken using local anaesthetic and can be uncomfortable for patients and make them feel anxious.
- Moorfields Eye Hospital NHS Foundation Trust uses volunteers in a 'handholding' role to provide comfort and support to patients undergoing operations.
- This role was introduced in 2018, and there are currently 56 trained volunteers providing the service.
   28 of these volunteers are active at the main City Road hospital site, while 28 are at network sites.
- To help evaluate this volunteer intervention, data collection was introduced during Helpforce's Volunteering Innovators Programme (VIP)<sup>1</sup> and has continued ever since.



<sup>1</sup> Volunteering Innovators Programme | Helpforce

# **Executive summary**

### The project

Moorfields Eye Hospital's handholding volunteers provide comfort and support to patients undergoing eye surgery.

### **Evaluation approach**

Using its established <u>Insight & Impact</u> evaluation service, Helpforce follows a consistent methodology to determine the impact of volunteering roles on health and wellbeing outcomes. Target outcomes are identified across a range of beneficiaries, and then we collect the necessary data to prove and evidence the outcomes. This evaluation included:

- Patient survey completing by both patients who had and did not have volunteer support (949 responses in total).
- Volunteer survey (39 responses out of 56 trained volunteers).
- Post-shift activity tracker to measure the number of patients supported.

### **Key findings**

- Almost all patients supported by handholding volunteers agree that the volunteer helped to cheer them up and to reduce their anxiety.
- Patients who had volunteer support are significantly more likely to say they would be 'extremely likely' to recommend Moorfields and score the hospital as 'excellent' on four patient-centred measures, than those who did not have volunteer support.
- Volunteers report being happy and well supported in the role, and feel their volunteering is of benefit to patients, staff
  and the organisation as a whole. They also report personal benefits of volunteering, such as sense of purpose and
  improved confidence.



A selection of outcomes evidenced by this evaluation.

#### **Conclusions & recommendations**

This evaluation shows that handholding volunteers are delivering value for patients by improving their experience and enhancing the quality of care they receive. Moorfields should continue with the high-quality volunteer service being delivered to patients and their excellent support to volunteers, but should also consider suggested improvements to further enhance patient and volunteer experience.

# **Evaluation approach: Outcomes**

### Helpforce's approach to evaluating...

Using its established <u>Insight & Impact</u> evaluation service, Helpforce follows a consistent methodology to determine the impact of volunteering roles on health outcomes. Target outcomes are identified across a range of beneficiaries representing the people and organisations involved, and then the necessary data is collected to prove and evidence the outcomes.



### **Patients**

Improved emotional wellbeing, reduced feelings of anxiety

Feel better about / during surgery

Enhanced quality of care

Improved patient / service user experience



### Volunteer

Improved confidence and sense of purpose

Feel well supported in undertaking their role

Satisfied with and happy in their role

Confidence that time spent volunteering is of benefit to patients, staff and the organisation

The possibility of evidencing staff outcomes was also scoped, however due to other data collection that staff were having to complete, it was not felt to be an appropriate time to seek their feedback.

# **Evaluation approach: Methodology**

Using its established <u>Insight & Impact</u> evaluation service, Helpforce follows a consistent methodology to determine the impact of volunteering roles on health and wellbeing outcomes. Target outcomes are identified across a range of beneficiaries representing the people and organisations involved, and then we collect the necessary data to prove and evidence the outcomes.

The evaluation consisted of three different data collection methods:

- A **patient survey**, completed while waiting to go home after surgery. Patients who received volunteer support and those who didn't are both asked to complete the survey to compare their responses.
  - This report combines data from the original VIP project in 2019/20 with data that has continued to be collected since, covering the period from December 2019 to September 2024. The surveys are currently only carried out at the City Road and St George's sites (the two biggest sites).
- A **volunteer survey** to understand the impact they feel they are having in their role, on themselves, patients, staff and the organisation, plus their thoughts on the support they receive.
  - This survey was introduced in May 2024 and provides a snapshot of opinions from current volunteers (and four who recently stopped volunteering).
- A post-shift activity tracking form, to understand the number of hours completed and patients supported.
  - This form was also introduced in May 2024.

Throughout the report, data findings are linked back to the data collection method using icons at the top right-hand side of the screen. Evidence strength is also rated used icons. These icons are as follows...







949
patient responses



Please note that most chart labels under 3% for patient responses or under three for volunteer responses have been removed to aid chart readability.



# **Insight: Volunteer activity**

Between May and September 2024, the post-shift activity tracking form recorded...





However, the Moorfields volunteering team approximate that there are 185 volunteering hours completed per week in the handholding role. Therefore, we estimate that only around a fifth of volunteering hours have been recorded in the tracker, implying that the total number of patients supported would be much higher in reality.

The volunteers who provided feedback for this evaluation appear well engaged with their role:

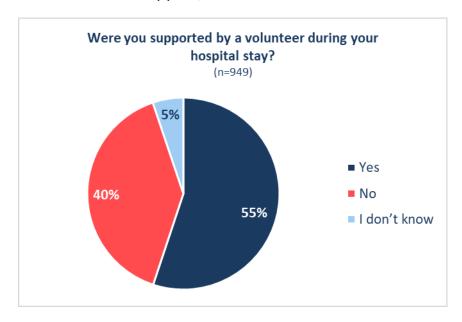
- 26 of 40 have been in their role for over a year;
- 28 of 40 are currently volunteering at least once a week; and
- Each volunteer is spending an average 15 hours volunteering in a typical month.

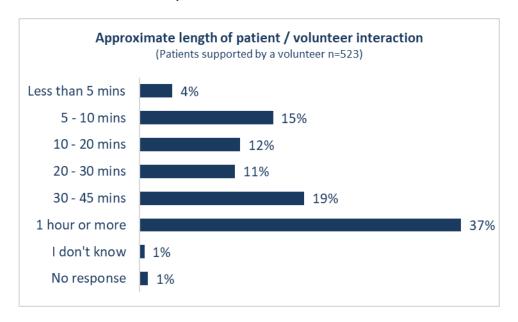
Approximated volunteering hours from Moorfields = 185 per week. 21 weeks of data collection would equate to 3,885 approximated hours of volunteering. 721 hours recorded in the form as a proportion of 3,885 = 19%.



# Insight: Support provided and time spent

55% of patients who completed the survey had received volunteer support during their stay at Moorfields, whilst 40% had not. 5% were unsure whether they had received volunteer support, and therefore have been excluded from the remainder of the analysis.



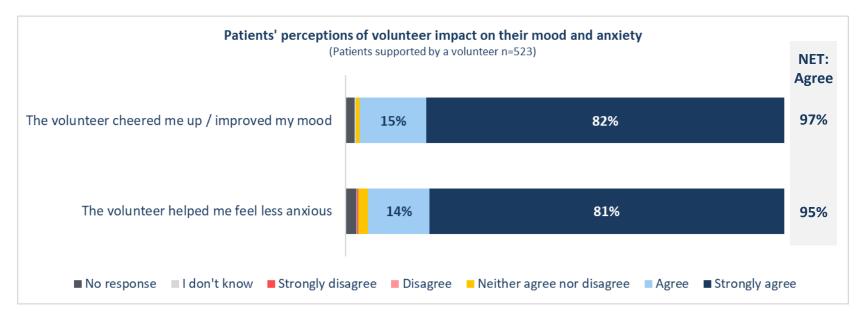


Amongst those who received volunteer support, there were a range of time lengths of the interaction, although the largest proportion (37%) said the volunteer had spent at least an hour with them. The average length of time spent with the volunteer was approximately 35 minutes.



# Impact: Patient perceptions of volunteer impact

Patients who had volunteer support were asked to what extent they felt that the volunteer had helped to improve their mood and make them feel less anxious.

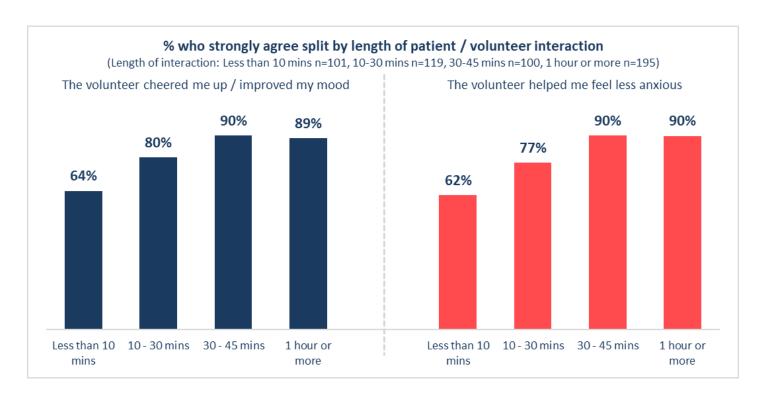


Feedback from patients was overwhelmingly positive. 97% agreed or strongly agreed that the volunteer cheered them up / improved their mood, while 95% agreed or strongly agreed that the volunteer helped them to feel less anxious. The majority strongly agreed with each statement, and 78% strongly agreed with both.



# Impact: The effect of time spent

There appears to be a positive connection between the amount of time the volunteer spent with the patient and how likely the patient was to strongly agree with the statements. Patients who spent 30 minutes or more with the volunteer were significantly more likely to strongly agree that the volunteer cheered them up / improved their mood and helped them to feel less anxious, than those who spent up to 30 minutes with the volunteer.



The following lengths of patient / volunteer interaction were combined in the chart to give sufficient base sizes for analysis: Less than 5 mins with 5 – 10 mins, 10 – 20 mins with 20 – 30 mins. Significance testing performed at 95% confidence level, using a two-tailed z-test. Comparison of patients who had support for up to 30 mins (n=220) vs those who had support for more than 30 mins (n=295).



# **Impact: Patient feedback**

"I am terrified of clinic invasive procedures and could not have coped without the hand holder. Thank you so much."

Patient who had volunteer support

"A similar Op was carried out ten years ago without [the] option of handholding, was very pleased with decision to take up offer. Really nice to have [the volunteer] there as op was long and tedious."

Patient who had volunteer support

"The volunteer was really good at making me at ease. She is an excellent carer, empathetic, calming and caring. She made a big difference to how relaxed I felt before and during surgery."

Patient who had volunteer support

"To feel the support of the hand holder throughout 16 operations was a great comfort. I was very grateful to her."

Patient who had volunteer support

"The volunteer held my hand during my surgery and made me feel very relaxed and comfortable. My anxiety level went down a lot! Thank you for the support."

Patient who had volunteer support

"It was nice to have someone ask was I ok, and did I need anything, I felt that I was not forgotten.
Very useful for you the volunteer to take me to the toilet after being in recovery as sight in 'other' eye poor."

Patient who had volunteer support

"This idea with volunteers is excellent. I am very satisfied and would love this service to continue at NHS!"

Patient who had volunteer support

"As a fellow healthcare professional, I was amazed at how kind the volunteer was and how wonderful the service is. My 88-year-old mother was very anxious about her surgery, and the hand holding service meant she felt supported during surgery, as I could not be with her. It is a truly amazing service so keep up the fabulous work!"

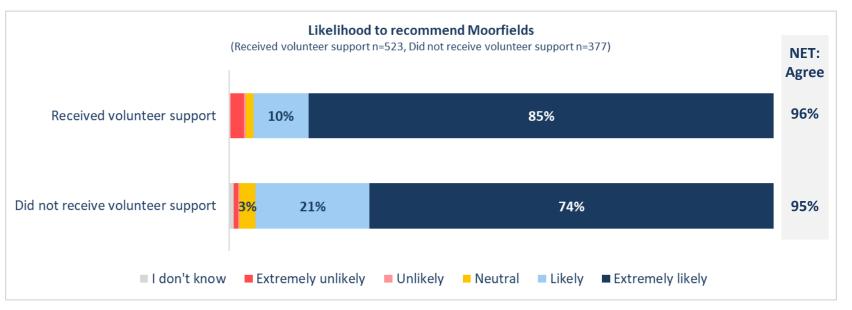
Family member whose relative had volunteer support





# Impact: Patients' likelihood to recommend

Patients who were supported by a volunteer and those who weren't were both asked how likely they would be to recommend Moorfields to friends or family if they needed similar care or treatment.



Both groups had very similar proportions who said they were likely or extremely likely to recommend Moorfields (96% and 95% respectively). However, patients who received volunteer support were significantly more likely to say that they would be extremely likely to recommend (85% vs 74% for patients who did not receive volunteer support).

While a greater proportion of negative responses can be seen amongst those who received volunteer support, it appears that most of these responses may have been selected in error. 12 out of the 15 who selected 'unlikely' or 'extremely unlikely' had only positive comments about their experience, while the remaining three commented on waiting times.

Significance testing performed at 95% confidence level, using a two-tailed z-test.



## **Impact: Patient-centred care**

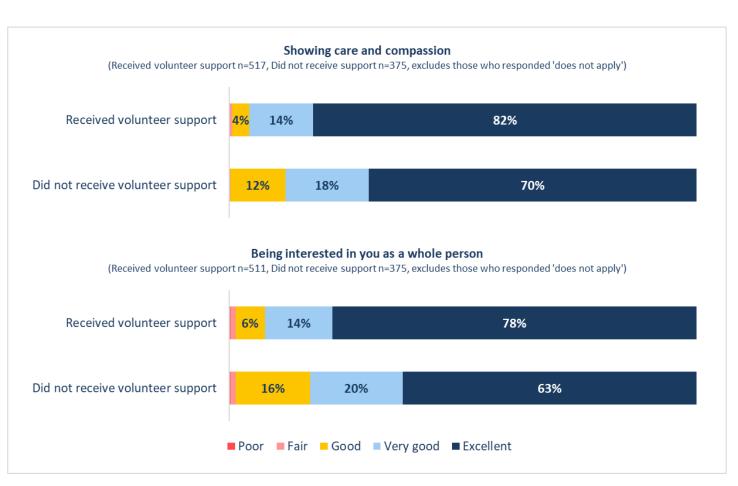
All patients who completed the survey were also asked to rate Moorfields on four indicators of patient-centred care based on their latest stay:

- Showing care and compassion;
- Being interested in you as a whole person;
- Really listening;
- Making you feel at ease.

A **significant difference** can be seen in the proportion rating Moorfields as 'excellent' on each indicator between those who received volunteer support and those who did not.

82% of patients who had volunteer support rated their experience of being shown care and compassion as excellent, compared to 70% of those who did not.

Similarly, **78% rated their experience of interest in them as a whole person as excellent**, compared to 63% of those without volunteer support.



Base sizes for each indicator differ because respondents reporting that the indicator 'does not apply' to them have been excluded. Significance testing performed at 95% confidence level, using a two-tailed z-test.





# **Impact: Patient-centred care**

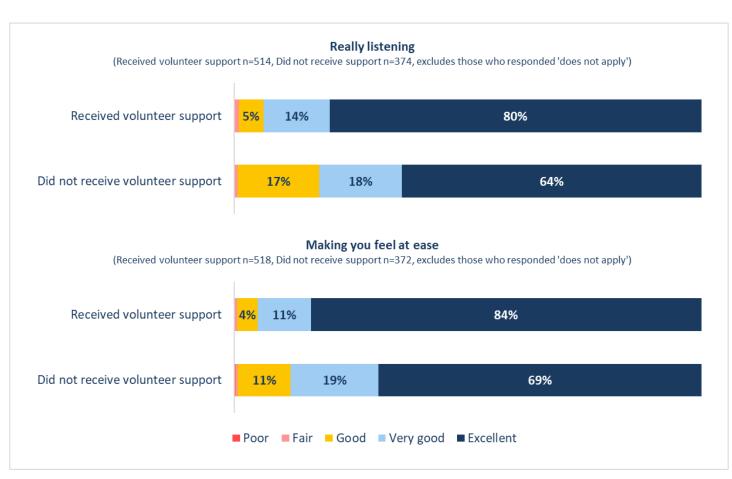
A similar picture is seen across the remaining two indicators.

80% of patients who received volunteer support rated their experience of Moorfields really listening as excellent, compared to 64% of those who did not.

Similarly, 84% rated their experience of being made to feel at ease as excellent, compared to 69% of those without volunteer support.

For all four indicators, the differences between those with and without volunteer support who scored their experience as excellent are **statistically significant**.

Across all indicators, feedback from both groups of patients was largely positive, but a greater proportion of those who did not receive volunteer support rated Moorfields as 'very good' or 'good' compared to those who had support.

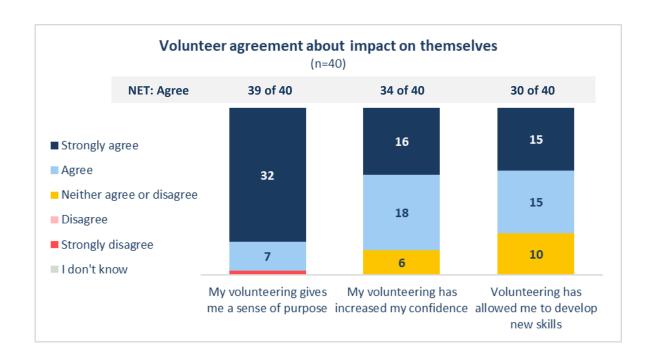


Base sizes for each indicator differ because respondents reporting that the indicator 'does not apply' to them have been excluded. Significance testing performed at 95% confidence level, using a two-tailed z-test.





## **Impact: Benefits for volunteers**



"I enjoy my conversations with the patients (I learn so much from them!) and making them feel supported and relaxed, and of course holding their hands in the theatre is one the most rewarding experiences I have ever had."

**Handholding volunteer** 

"It is rewarding to feel that you are helping many patients in a very practical way when they are usually feeling nervous and vulnerable."

**Handholding volunteer** 

When asked about the impact the role has had on them, almost all volunteers agreed or strongly agreed that it gives them a **sense of purpose**, with some describing the role as 'rewarding' in their comments.

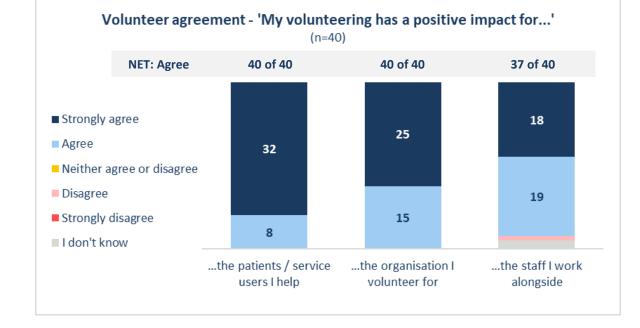
While smaller proportions, the majority of volunteers surveyed still agreed or strongly agreed that their volunteering has **increased their confidence** and facilitated them to **develop new skills**.



# Impact: Volunteer perception of difference made

All volunteers agreed or strongly agreed that their role has a **positive impact for the patients they support and for Moorfields as a whole**. Most volunteers strongly agreed with each statement.

The majority agreed or strongly agreed that they have a positive impact on staff, but this was lower than the previous two measures. Some volunteers specifically commented on positive interactions with staff, but there were mentions about not being sure if they are sometimes disrupting or getting in the way of staff.



"Being able to support someone when they are so in need at such a vulnerable time in their life. Hearing from medical staff the difference my presence has made to their patient."

Handholding volunteer

"Being recognised when you walk on shift by previous cataract patients who are returning to have their other eye operated on. Especially if I have held their hand before and they say, 'I am so glad you are here today'."

**Handholding volunteer** 

"Interaction with patients and knowing afterwards that it has made a big difference to their experience and made it less traumatic and difficult for them."

Handholding volunteer





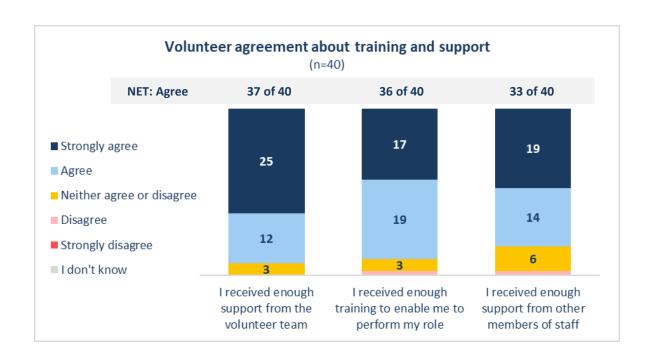
# **Impact: Support for volunteers**

There were **positive responses about the support and training received** by volunteers, again with the majority agreeing or strongly agreeing with each statement.

Given that the patients they are supporting can sometimes be distressed, further questions were asked about the impact the role can have on volunteers' wellbeing.

Only six volunteers agreed that their role can be emotionally exhausting. Comments from volunteers showed that most find the role rewarding and emotionally uplifting, whilst others said it can be tiring but the benefits outweigh this.

35 of 40 agreed or strongly agreed that they know where to get support if their wellbeing is affected by their role. Some volunteers mentioned staff members by name, whilst others said they would feel comfortable speaking to volunteering staff, ward staff or other volunteers, or they have seen posters for wellbeing support.



"I feel I have had lots of support from the organisation as well as other volunteers and staff, which makes it easy for me to ask for help if/ when needed."

Handholding volunteer

"I believe I had received enough support to be able to reciprocate it and give the same energy to the patients to give them such support."

Handholding volunteer



# Impact: Volunteer satisfaction



**38 of 40** volunteers were satisfied or very satisfied with their role



30 of 40 were very satisfied



While most volunteers were satisfied, some provided suggestions for improvement:

- Knowing the surgery timetable would enable them to keep patients informed and prioritise who to support;
- Making patients aware before their appointment or at the reception desk about the handholding support being available;
- Wheelchair training to allow them to take patients back to the waiting area;
- Better communication between the clinical and volunteering team so that volunteers don't come in when clinics have been cancelled;
- Ensuring the clinical staff are fully aware of who the volunteers are and what they're there to do.

Volunteers provided positive comments when asked what they most enjoyed about their volunteer role...

"The joy on people's faces when they go to recovery and they realise they have remained still and the operation has gone to plan! The thanks they give me for such a simple and little task including those that I have just sat and chatted to."

**Handholding volunteer** 

"Being welcomed into the medical team & being accepted (& thanked) in my role as hand holder."

Handholding volunteer

"Feeling that I have helped the patient feel comfortable and relaxed during the operation. Often the patient or family/friend member accompanying them have thanked me afterwards and said how much the hand holding support has helped them."

**Handholding volunteer** 

### Conclusions and recommendations

#### **Conclusions**

- Feedback from patients who have received handholding volunteer support are **very positive**, with almost all agreeing or strongly agreeing that **the volunteer helped to cheer them up and to feel less anxious**.
  - There appears to be a **relationship between time spent and strong agreement** with these statements: those who had longer interactions with the volunteer were more likely to strongly agree.
- Clear differences can be seen in feedback on Moorfields as a whole between patients who had and did not have volunteer support. While perceptions of the hospital are positive amongst both groups overall, those who had volunteer support were significantly more likely to rate Moorfields as 'excellent' across four indicators of patient-centred care and say they would be extremely likely to recommend Moorfields to family or friends who needed similar care.
- Handholding volunteers also give very positive feedback on the role, with high levels of satisfaction and meeting or exceeding of expectations.
   They feel they are having positive impact through their role and have also seen benefits for themselves.
- Most volunteers were not concerned about emotional impact from the role and were aware of how to seek support in needed. In general, the support and training provided by the hospital was rated well.

#### **Recommendations**

- Continued provision of high-quality volunteer support.
- Consideration of how to ensure patient / volunteer interactions are of an optimal length to deliver strong impact.
- Reflection on suggested improvements provided by volunteers which may help to further enhance the experience for both volunteers and patients.

### **Appendix: About the Helpforce Insight and Impact Service**

### What is it?

- The I&I Service is an online tool to help you easily and effectively evaluate your voluntary project or initiative.
- It guides you on a simple 4-step process, from designing outcomes for your beneficiaries through to what data we will need to collect - how, when, and from whom.
- Resulting in an evaluation report that our team produces for you, showing evidence of impact made against the outcomes and insights around how the project is working.



### A guide to some key terms we use



**Insights** provide an understanding of a situation or problem. They help us to share valuable information around what is working well, and what is not working so well, so that we can advise on potential service improvements and developments.



**Impact** relates to evidence of lasting and sustainable changes. Impact data helps us to understand the value and difference being made as a result of the project.

**Evidence** is reviewed against the following criteria to determine if it is compelling, promising, or limited:







- Is the sample size / response rate reliable and robust?
- Is the data direct or a proxy measure?
- Is there a causal link between the evidence and the outcome?
- Is there a control group or comparative data set?
- How was the evidence gathered directly from participants, or via a third party?
- Was the survey question well designed, or has there been signs of misunderstanding by participants?

### How the service is making a difference

We have worked with many NHS and VCS organisations over the last 3 years to collect data on over 100 high-impact voluntary projects. We have produced <u>evidenced findings</u> against a broad range health and care outcome measures, that have helped to scale up volunteering services and unlock additional funding for our partners.

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# Thank you

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