

Volunteer to Career Programme

Findings Report

Hospice VtC Programme

October 2025

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Executive summary

The programme

Helpforce's **Volunteer to Career (VtC)** Programme provides an opportunity for volunteers to gain experience and skills in a healthcare setting, while creating a pool of experienced potential employees with a realistic understanding of what working in health and care involves.

Between April 2024 and October 2025, working in Partnership with Hospice UK, Helpforce supported seven hospices to design a volunteer career pathway around their identified workforce needs. The hospices then ran a VtC programme that allowed volunteers to move towards making an informed decision about applying for employment or starting education or clinical training.

Evaluation approach

Using its established *Insight & Impact* evaluation service, Helpforce follows a consistent methodology to evaluate the impact of volunteering programmes. Target outcomes are identified across a range of beneficiaries representing the people and organisations involved, and then the necessary data is collected to evidence the outcomes and provide insights. For the evaluation of the hospice VtC programme, three data collection methods were implemented (*see slide 7 for more details*) to evaluate the impact of the programme for the hospice site and volunteers involved.

Key findings



¹ n=31. ² n=35. ³ n=7

Conclusions and recommendations

The Hospice VtC Programme appears to have been successful in supporting the development of well-designed and managed VtC pathways, as well as increasing the profile of volunteering in hospice settings. Additionally, a large proportion of volunteers have been successful in exploring their health and care career options, with many going on to secure employment or further education within this field. Aligning with the hospice sector's long term workforce plans, there is an opportunity to build on the learnings from this programme to further embed and consider future VtC initiatives as a potential route for people and communities to develop skills, confidence and a potential route into hospice employment.

Programme Overview

The Helpforce Volunteer to Career (VtC) Programme

Working with health and care partners, the Volunteer to Career (VtC) approach was designed by Helpforce and first delivered in April 2021 as part of the charity's mission to accelerate the growth of volunteering in health and care.

VtC projects always work to a career pathway, designed around identified workforce needs. The pathway sets out how volunteers can make step-by-step progress towards making an informed decision about applying for employment or starting education or clinical training.

VtC has been designed to support organisational improvement across three key strategic components, identified as essential to achieving systemic change:

- **Clinical/Health and Care Leadership:** Developing a network of senior clinical/health and care leaders to harness their expertise to positively influence wider effective engagement, and ultimately adoption of, VtC projects.
- **Environment and Culture:** Utilise best practices to raise the value of the volunteer workforce in the health and care environment to enhance the likelihood of volunteers wanting to adopt a career in health and care.
- **Volunteer to Career Pathways:** Develop innovative and impactful volunteer roles and career pathways, linked to local recruitment needs, to encourage and enable volunteers to use this as a route to a career in the healthcare sector.

The Hospice VtC Programme

With the aim of supporting volunteers to gain experience of working within a hospice environment, Helpforce worked in partnership with Hospice UK to deliver a hospice VtC programme as of 1st April 2024. A competitive tendering process was run to attract participating hospice sites between April-July 2024 to attract cohort 1 and subsequently ran another tendering process to attract cohort 2.

Between July 2024 and October 2025, Helpforce set up and implemented volunteering projects which incorporate career pathways for volunteers within seven hospice sites.

Delivery sites were split into two cohorts⁴:

- **Cohort 1, commencing delivery in September 2024:** Ardgowan Hospice; Compton Care; Forget Me Not Children's Hospice; and St Michael's Hospice, Hereford.
- **Cohort 2, commencing delivery in January 2025:** Saint Michael's Hospice, Harrogate; St Margaret's Hospice; and St Michael's Hospice, Hastings and Rother.

This VtC project was aligned to individual hospice workforce needs and opportunities for entry level roles. Volunteers were provided with experience of working alongside existing staff, supported to undertake relevant training, and made aware of career opportunities within the hospice.

Throughout the duration of the programme, Helpforce worked alongside a nominated clinical/project lead within each hospice (responsible for setting up and managing the VtC project within their organisation), providing one-to-one support, support for steering groups and facilitation of peer support via Community of Practice sessions. Helpforce also provided an evaluation framework to determine the impact of both individual VtC projects and the overarching programme.

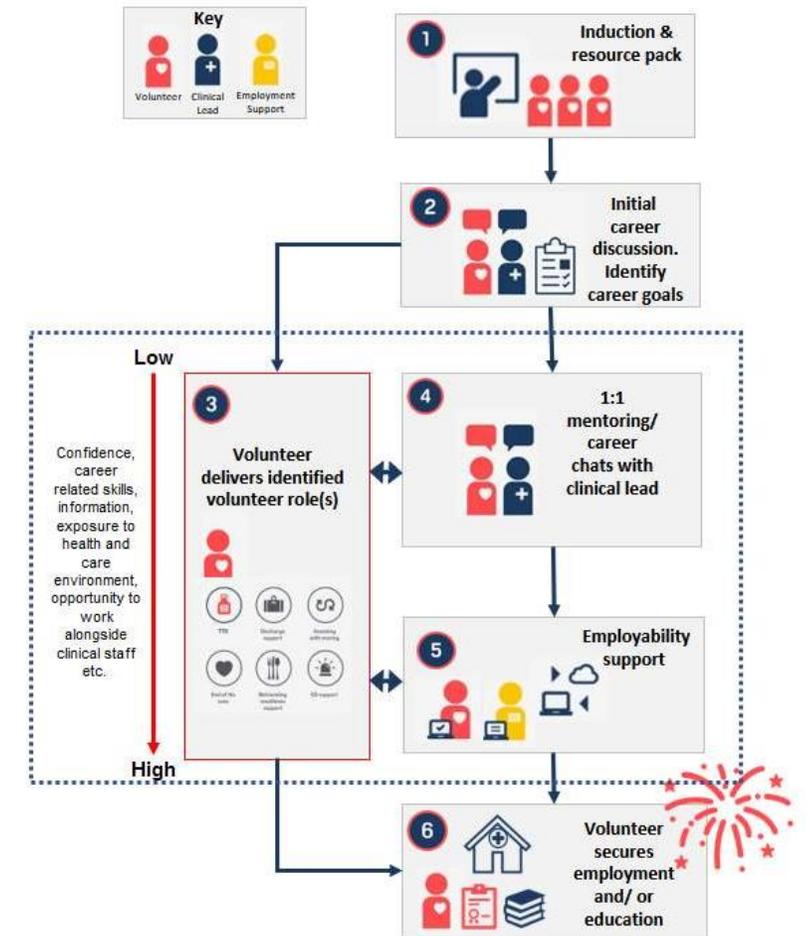
This report sets out the combined evaluation results from the seven hospice projects delivered.

⁴ Cohort 1 and 2 completed a 3-month discovery phase before commencing delivery. The discovery phase supported the sites through Helpforce's Adopt and Adapt learning programme to develop a project scope document. Cohort 1 started the discovery phase in July 2024 and cohort 2 in November 2024.

Volunteer to Career Pathway Support

Working alongside respective Clinical Teams, each hospice site either designed new or embedded existing volunteer roles to work alongside the VtC project. The pathway provided across hospice sites included various support offers...

- 1. Volunteer induction and resource pack:** Provide an initial meet-and-greet forum; receive a welcome resource pack with information about the role, organisation and pathways available. This is also an opportunity for new volunteers to meet their peers, hear from clinicians and ask questions.
- 2. Initial career goals discussion/interview:** The career conversation is important to have early on with the volunteer to establish their career ambitions. Working with the clinical lead, the volunteer identifies their career goals and agrees on the steps needed to support them to achieve them through VtC.
- 3. Impactful volunteer roles:** The volunteer role is mapped to local recruitment needs to help the volunteer to develop the required skills, experience and exposure. HR and clinicians are collaborated with to ensure the role is well designed, meets needs, and enables the volunteer to move through the pathway.
- 4. Mentoring and ongoing career support:** Ongoing opportunity for volunteers to receive a mix of information and more structured career-based conversations with the VtC clinical lead.
- 5. Work experience through volunteering:** Volunteers attend volunteering sessions in the clinical environment, approximately 30-60 hours over a maximum of 6 months. Support and mentoring are available from healthcare professionals.
- 6. Employability support:** Provision of employment skills such as interview techniques and CV writing are offered to volunteers through HR and/or local community providers.
- 7. Securing employment or education:** Volunteers are supported to undertake applications to identified relevant employment opportunities or further education.



VtC pathway example – Ardgowan Hospice

1. Application

Volunteers will submit their application via Google Form

Volunteers will attend an open day/informal interview

Successful applicants will be on-boarded to the programme (including receiving a welcome pack and uniform)

Unsuccessful candidates may have an opportunity to join a subsequent cohort

2. Training

Volunteers will access LearnPro (NHS Scotland's E-Learning site) and complete the following modules (this is the same as the mandatory training for Ardgowan Hospice staff):

- Fire Safety (GGC 001)
- Health and Safety (GGC 002)
- Reducing Risks of Violence and Aggression (GGC 003)
- Equality and Human Rights (GGC 004)
- Manual Handling Theory (GGC 005)
- Public Protection (Adult and Child) (GGC 006)
- Standard Infection Control Precautions (GGC 007)
- Security and Threat (GGC 008)
- Safe Information Handling (GGC 009)

3. Placement

Volunteers will complete a combination of theory and practical experiences - changing each week:

Volunteers will have practical experience of the role of a HCA in our Patient Unit (IPU) - gaining hands on experience shadowing our HCA's and being supported by mentors.

Volunteers will have the option to 'exit' the clinical aspect of the programme and move to a non-clinical department in the hospice.

Volunteers will have access to TURAS – a digital learning resources platform developed by NHS Education for Scotland (NES) which has over 700 courses to explore.

Volunteers will also have the opportunity to attend an in-house Education Day, featuring speakers from Ardgowan Hospice's Community Team, Wellbeing Team, IPU Staff and HR team.

Volunteers will complete the 'Informed about palliative and end of life care' course from the Scottish Ambulance Service (via TURAS) which has seven short modules:

- 1.Introduction to Palliative and End of Life Care
- 2.Recognising the Dying Patient
- 3.Future Care Planning
- 4.Symptom Management at End of Life
- 5.When Death Occurs
- 6.Confirmation of Death and Managing Death in the Community
- 7.Effective Communication Skills

4. Support

- Volunteers will be supported to gain further education, employment or training
- Volunteers will have the option to attend a CV/interview skills input with representatives from Ardgowan Hospice's HR and IPU Teams
- Support will be tailored to each volunteer's individual wishes/goals

5. Completion

- Volunteers will complete the programme (April and September 2025)
- Volunteers will be invited to reflect on and celebrate their experiences at a Celebration of Learning event
- Volunteers will continue to be supported by IPU staff/HR if and when they wish to seek further education or employment

Helpforce's Evaluation Approach

Using its established [Insight and Impact](#) 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.

The outcomes the evaluation aimed to measure included...

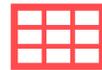
**Volunteer**
Investment in volunteer's skills and interests that improve employability.
Increased interest in health care career.
Satisfied with their VtC pathway experience.

**Organisation**
Conversion of volunteers into paid employment or further education/training within health and care organisations.
Corporate change in behaviour - senior leadership buy in and investment in volunteering.
Corporate change of behaviour - increased recognition of volunteering on the HR agenda/strategy as part of the future workforce.

Helpforce utilised three data collection methods to evaluate this programme:



- A **'VtC Self-Assessment Tool'** (referred to as SAT) was completed by the project's clinical/health and care lead at the start and again near the end of the project. More information about the SAT is included on [slide 11](#).



- An **outcomes tracker**, completed by the VtC programme lead throughout the duration of the programme. The excel tracker captures any employment or education outcomes achieved by each VtC volunteer.



- **Volunteer survey responses** ($n=35$). The survey captured data around the volunteers' level of interest in a health and care career, how they feel participating in the VtC programme has benefited them, and their overall satisfaction with their VtC experience. Surveys were completed at the end of the programme, or as the volunteer completed the VtC pathway. Helpforce aim for a 50% survey response rate in order to undertake the evaluation. The survey response rate for this programme was representative of ~58% of the total number of active volunteers on the VtC programme across the seven hospice sites.

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

Findings / outcomes related to...
 Volunteers
 Organisation

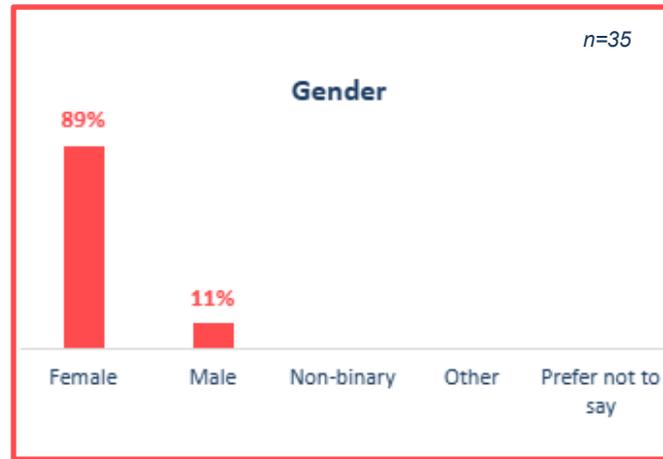
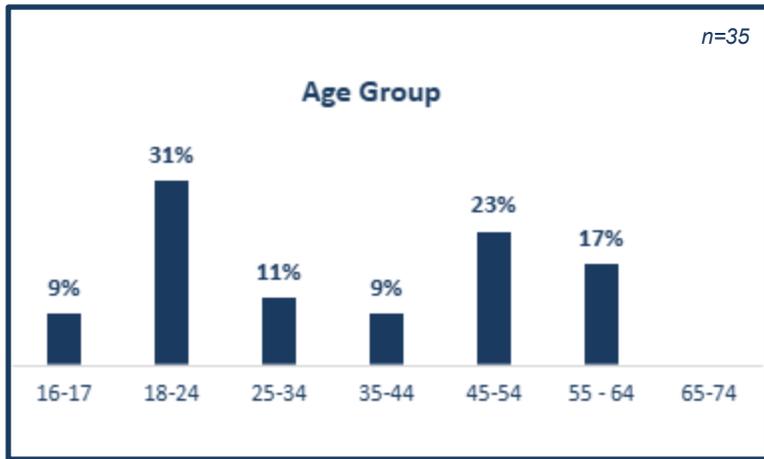
Insights vs Impact
 Insight
 Impact

Evidence strength ...
 Compelling
 Promising
 Limited



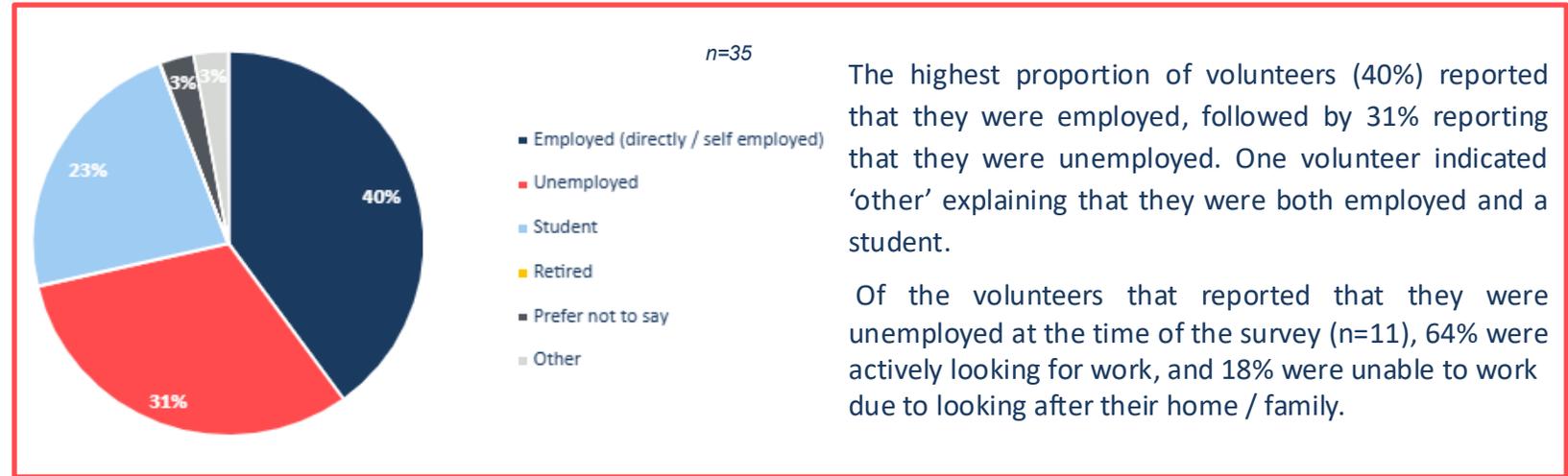
Insight: Volunteer Demographics

Within the volunteer survey, volunteers were asked to provide their demographic information if they felt comfortable to do so. The charts and infographics below illustrate the demographics of the VtC cohort across hospice sites.



- **Volunteers aged 18-24 account for the largest proportion of individuals (31%).** This was followed by those in the 45-54 age group (23%) and those aged 55-64 (17%).
- **60% of volunteers were aged 44 and under, indicating a higher prevalence of younger volunteers recruited to the VtC programme.** However, 40% were aged 45 and over, suggesting there is interest amongst those from older age groups to join a VtC pathway.
- The data illustrates that **the majority of volunteers recruited to the VtC programme identify as female (89%),** with 11% identifying as male.
- Furthermore, individuals from **white ethnic backgrounds accounted for 83% of volunteers.** Individuals from ethnic minority backgrounds accounted for 18% of volunteers.

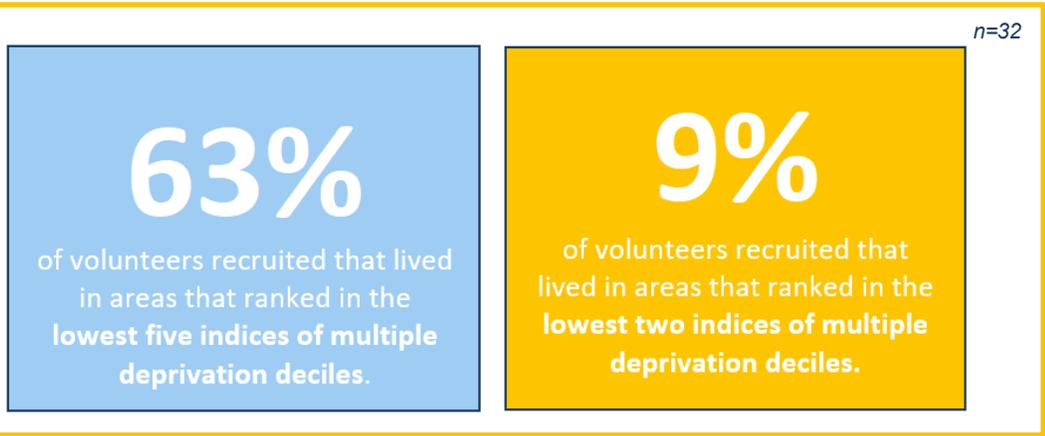
Insight: Volunteer Demographics



VtC volunteers lived in areas of varied levels of deprivation, as indicated by their home postcode decile rankings within the Index of Multiple Deprivation (IMD).⁴ **63% of volunteers lived in areas that ranked within the 50% most deprived areas.**

Furthermore, **9% of volunteers lived in areas that were classified within the 2nd decile**, indicating a high level of deprivation.

The findings suggest that the **VtC programme was successful in reaching individuals from diverse socio-economic backgrounds.**



⁴IMD deciles for England found using [Ministry of Housing, Communities and Local Government Postcode Lookup](#). IMD deciles for Scotland found using [Scottish Government Postcode Lookup](#). LSOAs in decile1 fall within the most deprived 10% of LSOAs nationally and LSOAs in decile 10 fall within the least deprived 10% of LSOAs.

Volunteer Activity



Whilst participating in the VtC programme, volunteers undertook various roles, including Clinical Support Volunteer and Family Support and Care Volunteer roles.

- **Clinical Support Volunteer role** – VtC volunteers at St Margaret's Hospice had the opportunity to help facilitate therapeutic activity sessions with patients, listen to patients and use effective communication skills in a group setting, support the administration and co-ordination of clinical services, and support the wider multidisciplinary team.
- **Family Support and Care Volunteer role** – This role focused on a variety of experiences supporting children and families across Forget Me Not Children's Hospice. This included supporting clinical care staff, hydro-therapy, children and family peer support, and activities and events.

Activity data related to the delivery of these roles was collected, illustrating that there was a great deal of support provided by VtC volunteers:



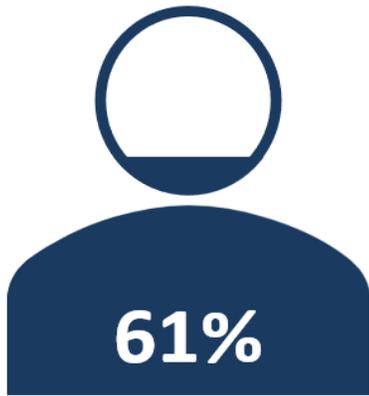
Upon completing **over 1,421 hours** of volunteering, VtC volunteers supported almost **670 patients** and **334 staff** within the period activity data was collected.⁵

⁵ Number of active volunteers data was collected across all seven sites between July 2024 to September 2025. Activity tracking was not a mandatory data collection tool. Therefore, number of patients/service users supported, staff supported, and volunteer hours was provided for four sites only, with data collected between January and September 2025.

Evaluation Findings: Conversion Rate

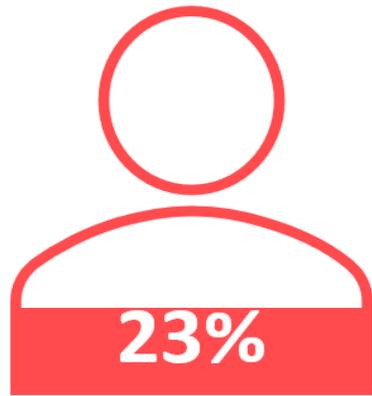


At the time of evaluation, **31 volunteers** had completed the VtC career pathway across six hospice sites.⁶ Through the pathway and career support provided, a number of volunteers **secured employment**, including Healthcare Assistant and Clinical Administration Assistant roles. Additionally, a number of volunteers secured **further education places within health and care**, including a nursing degree, an occupational therapy course, and a paramedic course.



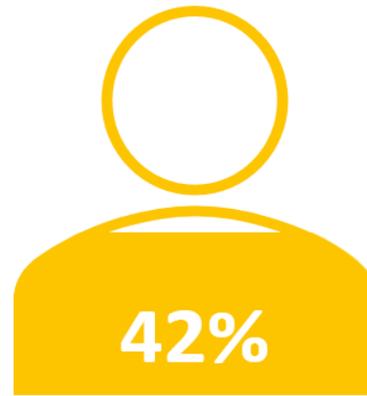
of volunteers who completed the volunteer to career pathway secured **employment or further education and training.**

number of volunteers that completed the pathway = 31



of volunteers who completed the volunteer to career pathway secured **employment within health and care.**

number of organisations = 6



of volunteers who completed the volunteer to career pathway secured **further education and training within health and care.**

The conversion rate for volunteers that completed the VtC pathway and secured further employment or further education and training is 61%.

When compared to other VtC programmes delivered by Helpforce, this conversion rate is lower than has been seen elsewhere. For example, comparing to the NHS England (NHSE) VtC Programme, the conversion rate for the Hospice VtC Programme was 11% lower.⁷ However, there are limitations when comparing these two programmes due to differences between healthcare settings and the number of sites involved in the evaluation.

Volunteers provided some additional insights into their VtC experience...

"I thoroughly enjoyed working within the clinical support team. It has showed me lots of different career avenues and roles that I would not have known about if I didn't take part in the Volunteer to Career programme."

VtC volunteer

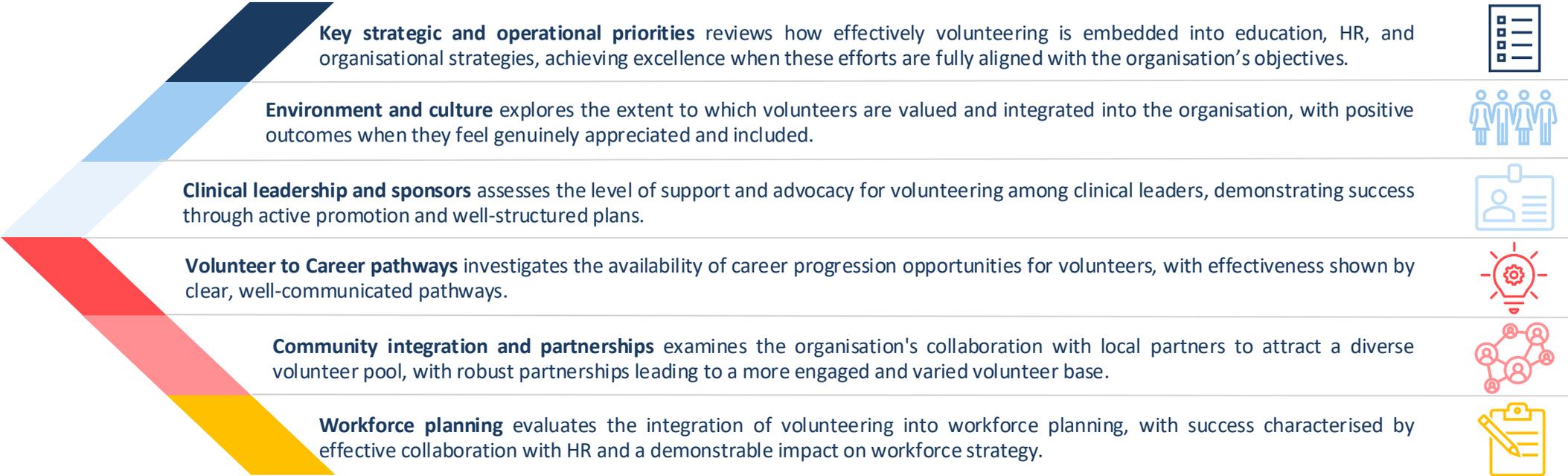
⁶Conversion rate percentages are based on volunteers that have completed the pathway, excluding volunteers who are still actively volunteering on the VtC pathway or those that left the pathway before completing. One site had no volunteers complete the pathway and therefore have been excluded from the findings.

⁷Comparisons made to the NHSE macro report data refers to n=257 volunteers who completed the VtC pathway across 25 organisations that provided conversion rate data. Please find the [link to the NHSE VtC programme macro report here.](#)

Organisation: Integration of and behaviours towards volunteering

In order to determine improvements in volunteering infrastructure resulting from participation in the VtC programme, organisations participated in a self-assessment. As part of the **Self-Assessment Tool (SAT)**, volunteers and staff are invited to complete feedback surveys to provide insight into their perceptions of behaviours towards and integration of volunteering within their organisation. These insights are then provided to the VtC Project Lead to help inform completion of the main SAT. Results between the first and second SAT are then analysed to determine whether there have been any improvements in integration of and behaviours towards volunteering post-programme participation. For the purposes of this report, individual organisation SAT scores have been averaged to provide an overall view of systematic improvements as a result of the programme.

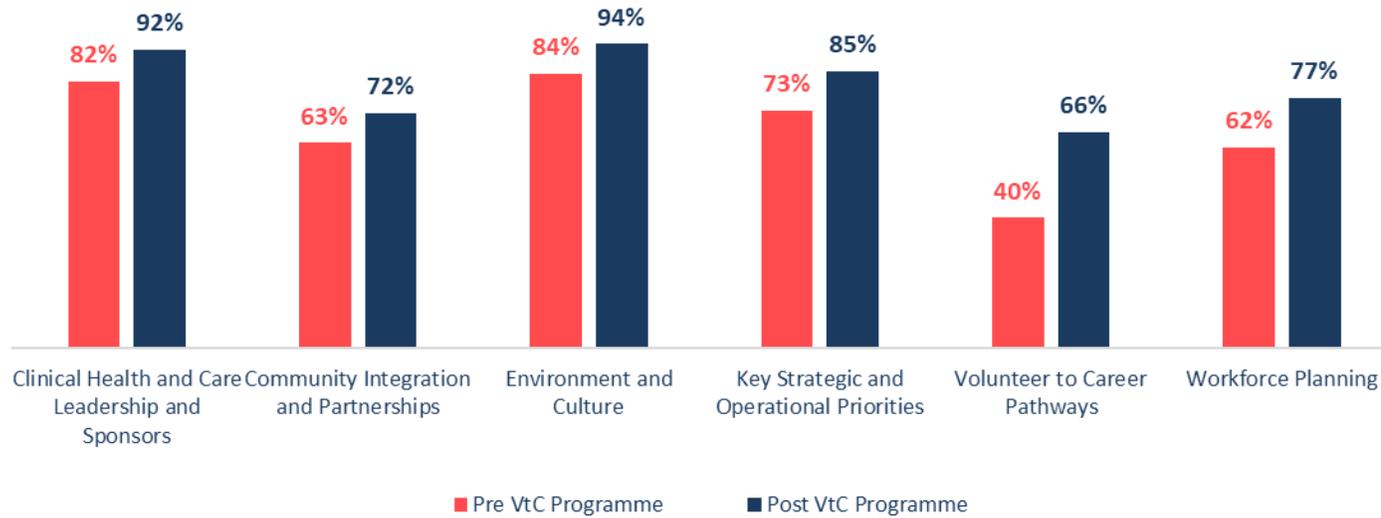
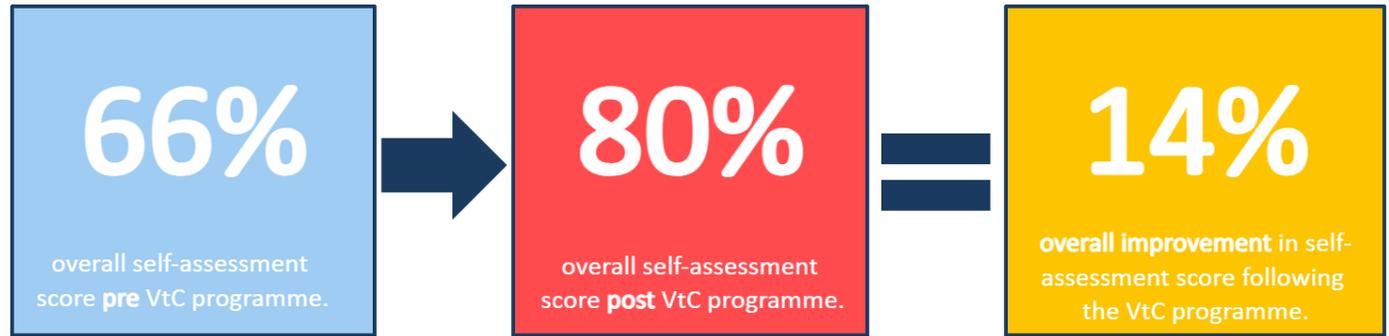
SAT offers a holistic view across six categories of volunteering infrastructure, measuring systemic change within organisations as a result of VtC:



Evaluation Findings: Organisation



Hospice sites participated in the VtC self-assessment tool to measure the programme's success in achieving corporate changes in behaviour as a result of the programme.



number of organisations = 7

After completing the Hospice VtC Programme, the average self-assessment scores across both cohorts **increased by 14%**. This shift indicates an improvement in how well volunteering was integrated into the organisation, strategy, and operations, alongside perceptions of and behaviours towards volunteering. Similarly, we **observed improvement in the average scores for all six elements of the SAT**.

As was considered for the VtC conversion rates, a comparison to other Helpforce programme SAT results has been undertaken. For the VtC NHSE macro report we saw an overall 16% improvement in SAT scores. The NHSE evaluation revealed a larger increase across all category scores, in comparison to the Hospice VtC Programme, with the exception of workforce planning which saw the same increase (15%) across both programmes.

When reflecting on the VtC programme, one staff member explained...

“VtC has been a fantastic way to further embed volunteering throughout Ardgowan Hospice and to strengthen our existing relationships in the local community. It has been a pleasure to watch each of the volunteers' confidence, resilience and skills grow throughout the programme.”

VtC staff member – Ardgowan Hospice

⁸ Comparisons made to the NHSE macro report data refers to n=27 organisations that participated in the SAT

Evaluation Findings: Volunteer Outcomes

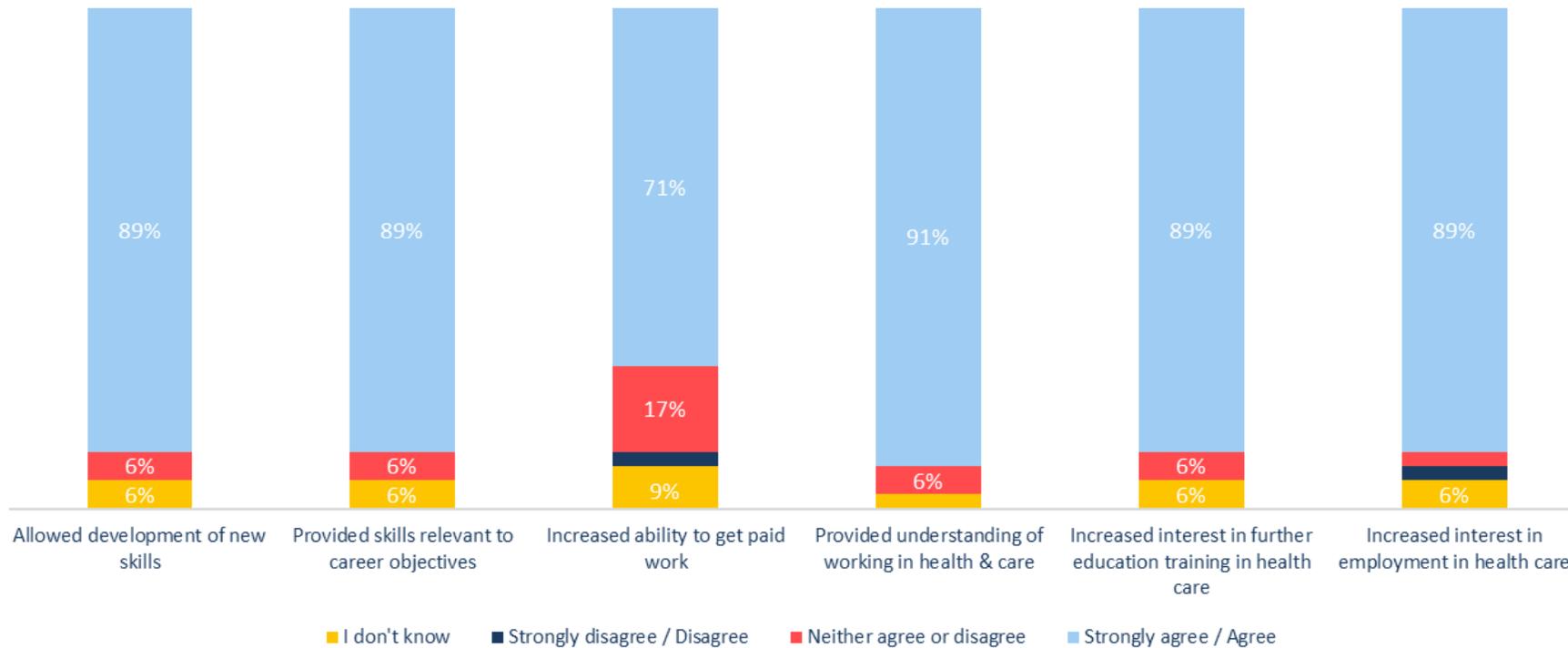


Volunteers were asked their perceptions as to whether they felt the VtC programme had any impact on their skills, knowledge, and future career paths.

Volunteer Employment and Skills Outcomes

The volunteer to career programme has...

n=35.7



Results were overwhelmingly positive, with high **agreement across all employment and skills outcome statements**. Particularly high levels of agreement were seen in relation to volunteers' perceptions that participating in VtC had provided an understanding of working in health and care.

The findings signify optimism and certainty among volunteers and confirm their interest in a health and care career.

⁹Percentages under 3% have been removed from the graph to aid visibility.

Evaluation Findings: Volunteer Satisfaction



Finally, volunteers were asked to rate their overall satisfaction with their VtC experience and their likelihood to recommend it to others.

Of the 35 volunteers that completed the feedback survey:

- 94% reported they were **satisfied or very satisfied** with their VtC experience.
- 94% reported they were **likely to recommend** VtC to others.

The findings suggest that volunteers appear to be appreciative of their VtC experience.



Volunteers provided some additional insights into their experience of being a VtC volunteer...

"It was very eye opening to a healthcare career and I'm so thankful for it. I genuinely believe if anyone wants to pursue a healthcare career this programme would be perfect."

VtC volunteer

"It's a great opportunity for people who have no or limited experience in the sector. There was a lot of enthusiasm and support from those who organised and oversaw the programme and many of the clinicians and staff were very helpful and encouraging. There were a couple of staff who didn't appear to be on board with the programme, and this showed. However, I think this was more to do with pressures in their service areas and possibly low morale."

VtC volunteer

"The most rewarding thing I've ever been a part of. I would like to also like to thank all the staff and volunteers for their time and it's been an honour to work with them."

VtC volunteer

Evaluation Findings: Volunteer Case Study



Nicole Lambert
VtC Volunteer -
St Michael's Hospice,
Harrogate

As a teenager, Nicole Lambert had always dreamed of being a paramedic. She did a pre-nursing course at college and began a BTEC in Science and Health Studies. But real-life demands kicked in, and Nicole had to give up her college course and get a job to pay the bills. She began working as a retail assistant, eventually switching to business sales. Her dreams of a medical career bit the dust...*"I got no satisfaction out of my job anymore and it made me feel really low. I was doing it for all the wrong reasons. **I wanted to start over and have a new career in the medical field, but I had no idea how to go about it.** That's when an administrative job came up at the hospice,"* said Nicole.

*"I loved the job immediately. It gave me lots of contact with people and I got to learn about all the different functions of the hospice. But the idea of doing something clinical had never really left me. Originally, I wanted to be a paramedic, at the sharp end, saving lives, but **the moment I joined the hospice team I knew that palliative care was perfect for me.**"*

*"I'd heard about Helpforce's Volunteer to Career programme, but I didn't think I would be eligible because I already had a job. I couldn't have been more wrong." Not only was Nicole encouraged to apply for the VtC programme, but her manager at the hospice also went out of her way to make sure to she could fit it around her full-time role. Soon Nicole was putting in four hours of volunteering a week as part of the VtC programme. **The structured scheme gave her experience and training in various different aspects of the hospice's activities, offering her a comprehensive overview of different fields.***

Nicole enjoyed every aspect of the work, but after completing the full programme she decided that she wanted to work as a healthcare assistant with in-patients. *"**All the experience and insight I'd gained gave me the confidence to apply for a job when one came up. I was over the moon when I got it!**"* said Nicole. She now works three days a week as a healthcare assistant and is being trained in all aspects of the role, while continuing to work two days in administration.

*"I would recommend Volunteer to Career 150% - **it's a fantastic scheme.** The biggest worry I had about switching to a new job was making a mistake and regretting it. VtC gave me the chance to try it out and now I've found my niche...To anyone thinking of volunteering in hospice care I would say: 'Try it. **It's such a rewarding role and you gain so much more from it than you would ever imagine!**'"*

Successfully sustaining VtC projects

Of the seven participating hospice sites, five are working towards sustaining their VtC projects beyond the initial year of delivery. Some sites are developing new volunteering roles and rolling VtC out into their Retail Operations, which demonstrates that the VtC model is not only effective but also viable for long-term integration within hospice organisations. With some hospices having continued their projects independently, this highlights strong organisational commitment and the perceived value of the VtC pathway for both workforce development and community engagement.

Additionally, a number of participating hospice sites have told us that the VtC programme is now viewed as an entry-level pathway into employment for people from local communities. However, some sites still need to strengthen their engagement with community-based referral partners. Furthermore, several sites also shared their perception that the contribution of VtC volunteers has freed up time for existing Healthcare Assistant (HCA) staff to complete their training, supporting their career development and progression.

Sustained projects serve as examples of good practice, showing that with senior sponsorship in place and a good governance structures, VtC pathways can become a lasting part of hospice workforce strategies. This is also evidenced by the SAT results and the shift in systemic change, which demonstrates the perception of value that volunteers can bring to a hospice site along with recognition for volunteers as the future workforce.

The Hospice VtC Programme has demonstrated a similar sustainment rate when compared to other VtC programmes. Of the 61 VtC projects that Helpforce have supported to deliver across the health and care sector, 75% (n=46) have sustained, compared with a 71% (n=5) sustainment rate amongst the seven participating hospice sites.

The continuation of the VtC projects beyond the funded period suggests that the VtC approach is adaptable and can be embedded into routine operations, increasing the likelihood of ongoing positive outcomes for both volunteers and hospices.

This sustainability also reflects well on the collaborative efforts between Helpforce and the participating hospice sites, as well as the effectiveness of the support and resources provided during the programme.

Conclusions and Recommendations

Conclusions

- **Positive volunteer outcomes** - The programme delivered strong results for volunteers, with participants reporting that it provided them with the skills needed for their career objectives and increased their interest in a health and care career.
- **Integration of career pathways** - Hospice sites successfully integrated effective career pathways for volunteers, resulting in 61% of volunteers who completed the VtC pathway securing paid employment or further education and training within health and care.
- **Strengthened partnerships and community engagement** - The programme enabled and encouraged increased partnership working, as evidenced by improvements in the SAT. By strengthening relationships with local communities, hospices have positioned themselves as anchor organisations, attracting a more diverse demographic of volunteers.
- **Attracting a younger demographic of volunteers** - With 31% of volunteers representing those from an 18-24 age group, the programme has been successful in attracting a younger demographic of volunteers to the programme.
- **A model for sector-wide impact** - The programme is an excellent example of how targeted career support and practical experience in a hospice setting can lead to positive career outcomes within the health and care sector.

Helpforce Recommendations

- **Continue to develop VtC pathways** - With the positive outcomes achieved from this pilot, Helpforce would encourage other hospices to adopt and adapt VtC pathways to act in response to their workforce needs.
- **Continue to strengthen community partnerships** – With the programme’s success in increasing partnership working and strengthening relationships with local communities, hospices should continue to position themselves as anchor organisations, using these partnerships to attract a more diverse range of volunteers.
- **Focus on diversity and inclusion** – With individuals from white ethnic backgrounds accounting for 83% of volunteers, this is an area of development as other Helpforce VtC programmes delivered have seen greater diversity in the ethnic backgrounds of people being attracted to the pathway. Moving forward, it would be beneficial to work hyper-local to attract more people from ethnic minority backgrounds to the pathway.

Some success from the NHSE VtC Programme was achieved by undertaking the following steps:

- Assessing local population needs and ensuring that recruitment strategies reflect the diversity of the community.
- Using data to identify gaps and target groups that are underrepresented among current volunteers.
- Review and adapt volunteer roles and pathways to ensure they are accessible and appealing to people from a range of backgrounds, including those from ethnic minority communities.
- **Sustain and share good practice** - Hospices that have successfully sustained their VtC projects beyond the initial grant period are encouraged to share their learning and good practice with others in the hospice sector.
- **Acknowledge and build on success** - The programme is presented as an excellent example of how targeted career support and practical experience in a hospice setting can lead to positive career outcomes. Hospices are encouraged to recognise and build on these successes as part of their workforce development strategies.

Acknowledgements

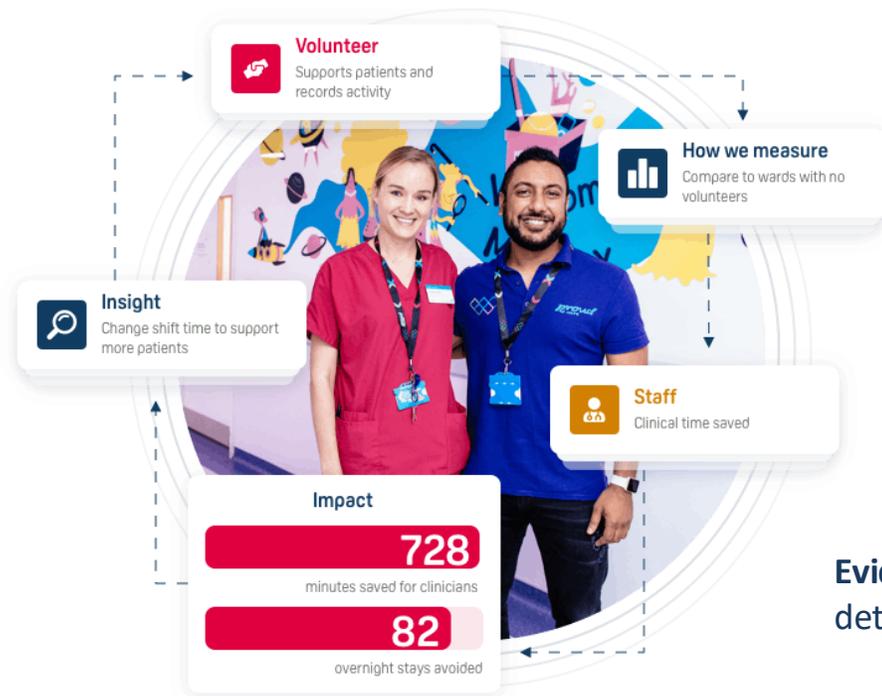
Helpforce would like to pass on our thanks to Hospice UK as a delivery partner.

We would also like to pass on our immense gratitude to the participating hospice sites, staff and volunteers for providing their insights and feedback. Without them, this evaluation would not have been possible.

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.



How the service is making a difference

We have worked with many NHS and VCS organisations to collect data on high-impact voluntary projects. We have produced [evidenced findings](#) against a broad range of health and care outcome measures that have helped to scale up volunteering services and unlock additional funding for our partners.

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?

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Thank you

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