

Volunteering Futures Fund

Final report – May 2023

NHS Charities Together
in partnership with the
Department for Digital, Culture, Media and Sport



Department for
Digital, Culture,
Media & Sport

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1. Key messages

- The Department for Digital, Culture, Media and Sport (DCMS) and NHS Charities Together match funded the Volunteering Futures Fund (VFF). The core objective of the programme was to support young people who experience barriers to volunteering to build their skills, wellbeing and social networks through volunteering. This report presents insights from data collated over the lifetime of the programme, exploring if and how Onward Grant Recipients (OGRs) created volunteering opportunities for young people from underrepresented groups, and the successes and challenges in doing so.
- The VFF programme has been successful in its aim of supporting young people into volunteering, reaching over 2,000 volunteers under the age of 26. Individuals from a diverse range of ethnic backgrounds were represented and a large proportion (84%) of young volunteers lived in the 50% most deprived local authorities.¹ Collaboration with Trust colleagues, external organisations and existing volunteers has been key to engaging young people, understanding their needs and creating valuable volunteering experiences. However, more can be done across the sector to engage young people who may face barriers to volunteering. Co-designing opportunities with volunteers and working strategically with local education, community and charitable organisations are likely to be integral to the success of this.
- The nature of this programme resulted in OGRs working with groups of young people who they may not otherwise have contact with, which created additional and sometimes unexpected considerations. Changes to process and policy have been undertaken to ensure opportunities are accessible and appropriate for all young people. Tailored, enhanced support packages have been provided to individuals with additional needs due to financial or health circumstances, including the provision of flexible roles, additional training, one-to-one support, and mentors. OGRs have reported good volunteer engagement and retention as a result.
- Young volunteers discussed the value they gained from their volunteering experience, such as achieving a sense of purpose, improved confidence, and developing new skills. It also appears to have provided clarity for their future careers, with 80% of volunteers suggesting they were more interested in pursuing a health care career path and some individuals who participated in the programme already progressing on to further education and careers in the sector.² This clearly illustrates a potential for young volunteers to become part of the NHS' future workforce. Organisations providing volunteering opportunities for young people should, therefore, establish pathways for individuals to explore their career aspirations.
- Participating in the programme has also delivered several benefits to the OGRs. Staff members were reported to have been appreciative of volunteer support; volunteers were able to reduce pressure and enhance patient experience through undertaking essential non-clinical tasks. Additionally, OGRs experienced increased recognition of and senior buy-in to volunteering within the Trust. To maximise the impact of volunteering, organisations should consider establishing a joint volunteer strategy, produced with partners and respective NHS Trust representatives. This is likely to lead to better supported and integrated volunteer services.

¹ Of 539 pre-survey respondents, 44% were from Asian or Asian British ethnic groups, 24% were from White ethnic groups, 16% were from Black, Black British, Caribbean or African ethnic groups, 9% were from Mixed/Multiple ethnic groups, and 5% were from Other ethnic groups. 14 volunteers did not provide their ethnicity. 451 of 539 volunteer pre-survey respondents (84%) lived within the 50% most deprived local authorities in the UK.

² N=189 of 235 post-survey respondents agreed or strongly agreed that their volunteering has increased their interest in a health and care job in the future.

2. Executive Summary

The Department for Digital, Culture, Media and Sport (DCMS) and NHS Charities Together match funded the Volunteering Futures Fund (VFF). The core objective of the programme was to support young people who experience barriers to volunteering to build their skills, wellbeing and social networks through volunteering.

NHS Charities Together administered funds to 14 NHS charities - referred to as Onward Grant Recipients (OGRs) - following a competitive application process. These OGRs delivered volunteering projects between January 2022 and March 2023.³

Throughout the programme there was an impressive level of activity across the OGRs' projects, with a broad range of young people engaged across a variety of opportunities. OGRs offered different volunteering roles, suited to the Trust and the patient community they serve, including ward-based, digital, hospitality, and peer support roles. The most popular role types were flexible roles, and the most frequently offered role length was long term opportunities.⁴

The VFF programme has been successful in its aim of supporting young people into volunteering, reaching 2,296 volunteers under the age of 26. Of those, 1,349 (59%) were volunteering for the first time. Individuals from a diverse range of ethnic backgrounds were represented and a large proportion (84%) of the young volunteers lived in the 50% most deprived local authorities - groups which may face barriers to volunteering.⁵

The OGRs provided helpful insights into what worked well and the challenges experienced in project delivery.

- A number of factors appear to have been important in the successful operation of the projects, including:
 - engagement with schools, colleges and other external organisations;
 - building internal networks with clinical and non-clinical teams;
 - using various marketing / promotional activities;
 - accessible and simple application and onboarding processes;
 - adaptable and flexible volunteering roles;
 - supportive and communicative volunteering teams; and
 - the provision of ongoing support, tailored to specific needs.
- Engaging with young people and those with specific needs required additional considerations and different ways of working than OGRs had previously been used to. OGRs discussed the importance of providing ongoing support to volunteers during the VFF project, including providing additional training, volunteering team mentors, staff champions, and the creation of handbooks. Peer-to-peer mentoring, shadowing and buddy systems were also frequently mentioned as a positive source of support to help volunteers understand and become more comfortable in their role.
- Some of the main challenges arose from the varying engagement of volunteers due to academic commitments, the differing availability of young volunteers compared to OGRs' existing volunteer base, OGRs not having experience working with young volunteers with additional needs, and the

³ One OGR, East and North Hertfordshire Hospitals Charity, has had a project extension until June 2023.

⁴ N=1,034 of 2,009 (51%) of new volunteers were in flexible roles. Flexible volunteering is defined as volunteering as and when it suits you with no regular pattern of commitment or minimum hours each week. 1,075 of 2,009 (54%) of new volunteers recruited undertook long term opportunities.

⁵ Of 539 pre-survey respondents, 44% were from Asian or Asian British ethnic groups, 24% were from White ethnic groups, 16% were from Black, Black British, Caribbean or African ethnic groups, 9% were from Mixed/Multiple ethnic groups, and 5% were from Other ethnic groups. 14 volunteers did not provide their ethnicity. 451 of 539 volunteer pre-survey respondents (84%) lived within the 50% most deprived local authorities in the UK.

accessibility of application and onboarding processes. Many OGRs appear to have adapted processes and ways of working in response to these challenges and have resultantly reported good engagement and retention of young volunteers.

The overall experience for volunteers appears to have been positive, resulting in benefits for both individuals and the organisation.

- Volunteers had positive perceptions of their experience. 94% were satisfied or very satisfied with their role, 89% were likely or very likely to recommend it and 88% reported that it met or exceeded their expectations.⁶ Many individuals experienced benefits such as achieving a sense of purpose, developing new skills, and improved confidence. Further, there were some reports of volunteers progressing into further education and careers.
- OGRs have gained over 47,000 hours of volunteering time through their projects, with large numbers of service users and staff supported.⁷ Positive effects have arisen from this, with OGRs experiencing a raised profile of volunteering in their organisation, increased requests for volunteering support and strengthened collaboration with internal colleagues and external organisations.
- All OGRs who participated in the VFF programme hope to continue their projects in full or at least in part. There are emerging signs that the programme has prompted longer term change at some OGRs, including development of volunteering strategies and plans to make working with young volunteers part of business-as-usual.

Considering the learning from the VFF programme, recommendations for future projects of a similar nature have been established.

- More can be done across the sector to reach young people who face barriers to volunteering. Collaborating with external organisations who work with these individuals can provide an excellent means to attract applications and ensure the right support is in place. Providing opportunities for collaboration with volunteers from within target volunteer groups should also be explored to ensure their voices are heard and needs are captured within the design and delivery of the volunteering service.
- The NHS is currently experiencing high vacancy rates. 80% of volunteers suggested they were more interested in pursuing a health care career path following their volunteering experience.⁸ Further, some of the individuals who participated in the VFF programme progressed on to further education and careers in health and care, clearly illustrating a potential for young volunteers to become part of the NHS' future workforce. Organisations providing volunteering opportunities for young people should establish pathways for individuals to explore their career aspirations.
- OGRs and volunteers reflected on the positive impact their support had for staff members. OGRs also discussed positive outcomes of working with Trust representatives to create and integrate volunteering roles within their departments. Therefore, working with staff to design roles collaboratively should be considered to ensure maximum benefits for all parties. However, this has to be balanced with time pressures and conflicting demands which staff members may face.
- To maximise the impact that volunteering can make on local health and care services, organisations should consider establishing a joint volunteer strategy, produced with their partners and respective NHS Trust representatives. This is more likely to enable further integration of volunteer roles across the sector.

⁶ N=132 of 235 post-survey respondents (56%) suggested volunteering experience exceeded their expectations, and 74 (32%) said it met their expectations. 220 of 235 post-survey respondents (94%) suggested they were satisfied or very satisfied with their volunteering role. 208 of 235 (89%) post-survey respondents were likely or very likely to recommend their volunteering role.

⁷ 47,432 volunteering hours estimated to have been completed. Data was provided by twelve OGRs. Helpforce has not been able to validate this data.

⁸ N=189 of 235 post-survey respondents agreed or strongly agreed that their volunteering has increased their interest in a health and care job in the future.

3. Introduction

The Department for Digital, Culture, Media and Sport (DCMS) and NHS Charities Together match funded the Volunteering Futures Fund (VFF). The core objective of the fund was to support young people who experience barriers to volunteering to build their skills, wellbeing and social networks through volunteering.

Helpforce worked with NHS Charities Together to support monitoring activities aligned to the VFF. This report presents insights from data collated over the lifetime of the programme, exploring if and how OGRs created volunteering opportunities for young people from underrepresented groups, and the successes and challenges in doing so. OGR projects varied, so direct comparisons are not drawn between them. Instead, key lessons from across the programme are identified, which can be used to inform the implementation of similar projects in the future.

Feedback from OGRs did not always separate out details of working with the target audiences for this programme from information about working with young volunteers more generally. Where it has been possible to pull out insights relating to specific target groups, this has been done in the report. Where not otherwise stated, insights relate to working with young volunteers more generally.

Projects overview

NHS Charities Together administered a total of £1,420,203 to 14 NHS charities - referred to as Onward Grant Recipients (OGRs) - following a competitive application process. These OGRs delivered volunteering projects between January 2022 and March 2023. These projects varied in scale and approach depending upon the needs of the NHS Trust and the patient community it serves - some developed new volunteering initiatives, whilst others used the funding to build on existing projects by expanding roles and recruiting additional volunteers.

Several of the volunteering opportunities were **ward and clinical support roles**, including active response, way finder, befriending, and activity roles.⁹ Great Western Hospitals NHS Foundation Trust Charitable Fund, for example, had volunteers working alongside Occupational Therapists and the Falls Lead to provide meaningful activities to patients on elderly care and rehabilitation wards.

Volunteers have also been taking part in **digital support roles**, such as digital ambassadors who support older adults to access electronic care resources. Royal Marsden Cancer Charity reported that their volunteers provided front-line support to launch a new Trust app, assisting patients to sign up and helping with queries. Shrewsbury and Telford Hospital NHS Trust Charity's volunteers used devices to support patients to complete the Trust's Friends and Family Test survey.

Hospitality and retail assistance roles were offered by some OGRs. University College London Hospitals Charity's young volunteers provided a daily snack trolley in the Oncology department, helping to support the hydration and nutrition of patients.

Volunteers have also been offered opportunities to undertake **peer support roles**, where they provide information or assistance to other volunteers, young patients or hospital staff. Dudley Group NHS Foundation Trust Charity have trained some of their existing volunteers to be peer mentors for new

⁹ Active responders are volunteers who respond to staff and patient requests, undertaking activities to support hospitals to run well. These can include pharmacy runs, discharge support, and admin tasks ([Active Responder Service Guide](#), Helpforce). Way finder volunteers support patients to navigate the hospital, providing directions to ensure they can find the correct place for their appointments ([Way finder volunteer role description](#), Helpforce).

volunteer recruits, offering mentorship and undertaking best practice assessments. CW+ Charity have recruited young volunteers who have lived experience of mental health challenges, to support and empower young service users as they go through the mental health pathway.

For more information regarding the OGRs and their projects, please see [appendix A](#).

Monitoring approach

Each of the OGRs completed a monthly monitoring form reporting on project progress during the previous month. The monthly monitoring forms captured quantitative data for numbers of volunteers recruited, as well as qualitative insights into project progress and lessons learned.

Volunteers were asked to complete a survey upon finishing their induction (known as the pre-survey). Between March 2022 and April 2023, 539 of these surveys were submitted – 482 (89%) were from new volunteers and 51 (9%) were from continuing volunteers. There were an additional six responses from individuals who did not identify as either a new or continuing volunteer.¹⁰ Data captured included feedback on the recruitment and induction process, as well as baseline data on volunteers' intended personal and professional outcomes.



Volunteers were also asked to complete a further survey upon leaving their volunteering role or when VFF projects concluded (known as the post-survey). This survey asked for feedback from the volunteers on their experience and follow up outcome questions. Between June 2022 and April 2023, 235 of these surveys were submitted – 225 (96%) were from new volunteers and seven (3%) were from continuing volunteers. There were an additional three responses from individuals who did not identify as either a new or continuing volunteer.¹¹

OGRs were also provided with a staff and patient feedback survey. These surveys asked participants for feedback on the difference volunteer support had made to them. Unfortunately, no responses were received to either survey. OGRs and volunteers were asked to reflect upon their perceptions of the value volunteers had for staff members and service users within the data collection methods detailed above.

Data limitations

As above, feedback from OGRs in their monthly monitoring forms did not always separate out details of working with the target audiences from working with young volunteers more generally. Where information is specific target groups, this is detailed within the report.

Numbers of completed volunteer surveys varied with a discrepancy of 304 responses between pre- and post-surveys. OGRs reported that they had made multiple efforts to engage volunteers in the follow up survey but struggled to get a response. For pre-surveys, responses are equivalent to

¹⁰ Within the pre-survey, six individuals selected 'Other' but did not provide clarification of they were new or continuing volunteers, stating they had recently applied to become a volunteer or had completed their training, but had not yet commenced volunteering.

¹¹ Within the post-survey, three individuals selected 'Other', stating they did not complete the pre-survey, therefore, could not provide clarification on if they were new or continuing volunteers at that time.

approximately 24% of new volunteers and 18% of continuing volunteers.¹² For post-surveys, responses are equivalent to approximately 11% of new volunteers and 2% of continuing volunteers.¹³ Participants were not asked to identify themselves to ensure survey responses were anonymous. However, this does mean that it has not been possible to ascertain if the same individuals completed both the pre- and post-surveys. Overall, these discrepancies limit the ability to draw firm conclusions from comparing pre- and post-programme data.

Response rates to both the pre- and post-survey varied per OGR. Numbers of survey participants varied from zero responses from one OGR to 191 responses from another OGR in the pre-survey and from zero to 61 in the post-survey. There were also some large discrepancies in numbers of pre- and post-survey responses submitted by each OGR, including instances where more responses were received to the post-survey than the pre-survey. Consequently, data has been reviewed in totality for the VFF programme, rather than examining responses per individual OGR. A full breakdown of responses per OGR has been provided in [appendix D](#).

East and North Hertfordshire Hospitals Charity have secured a 3-month extension. Consequently, this OGR has not yet provided volunteer post-surveys and the data provided within this report is not final. A separate short report will be provided on their project in July 2023 as an annex to this final report.

Alder Hey Children's Charity did not submit volunteer surveys due to concerns around sensitivities for their volunteers. While these issues were not flagged by other OGRs, it is unclear to what extent the accessibility of the surveys may have impacted on the number of volunteers with long-standing illness, disability or infirmity who completed them. Therefore, it is possible that this group of volunteers may be under-represented in the volunteer survey data.

Some differences are also seen between the demographic breakdown of pre- and post-survey responses, most notably:

- People from Asian or Asian British ethnic groups accounted for the largest proportion of volunteer pre-survey responses (44% of the pre-survey sample vs. 26% of the post-survey), but this changed to people from White ethnic groups in the post-survey (24% of the pre-survey sample vs. 41% of the post-survey);¹⁴
- The pre-survey had a greater proportion of respondents living in the most deprived areas in England (52% in the pre-survey vs. 34% in the post-survey lived in the 10% most deprived local authorities in England).¹⁵

A full breakdown of responses per demographic, per survey is provided in [appendix E](#).

¹² 482 new volunteers completed pre-surveys vs 2,009 recruited to the projects. 51 continuing volunteers completed pre-surveys vs 287 recruited to the projects.

¹³ 225 new volunteers completed post-surveys vs 2,009 recruited to the projects. Seven continuing volunteers completed post-surveys vs 287 recruited to the projects.

¹⁴ 238 of 539 pre-survey responses received from people from Asian or Asian British ethnic groups vs 62 of 235 post-surveys. 131 of 539 pre-surveys received from people from White ethnic groups vs 97 of 235 post-surveys.

¹⁵ 282 of 539 pre-surveys received from individuals who live in the 10% most deprived local authorities vs 81 of 235 post-surveys.

4. Project delivery & sustainability

Project delivery

Overall, delivery of the projects appears to have been in keeping with original plans. OGRs discussed undertaking multiple activities to ensure the successful delivery of their projects, including marketing, collaborating with internal colleagues, working with external partners, and reviewing policies and procedures to ensure they were appropriate for young volunteers from their target groups. These activities were felt to have facilitated good volunteer engagement and are further explored later in this report.

Additionally, OGRs noted the importance of staff recruitment to ensure they had sufficient capacity to deliver their volunteering projects. Shrewsbury and Telford Hospital NHS Trust Charity noted that the *“funding has increased the capacity within the Volunteer Team, which has enabled us to promote the scheme and therefore receive a higher volume of applicants. The resource within the team is crucial for us to maintain this level of engagement, training, and recruitment of our volunteers”*. Although a Volunteer Coordinator was the most reported role that OGRs sought to fill, other roles were also identified as being required. These include Project Managers, Clinical Support Workers and Volunteer Service Administrators. Some of the OGRs required more unique roles, for example:

- an NHS professional to help clear a backlog of volunteer applications;
- a Population Health Fellow to undertake an evaluation of the project;
- a Software Developer to implement a volunteer management system;
- a College Placements Coordinator;
- a Digital Pioneer to set up a new programme of digital volunteering; and
- a Co-Production and Delivery Manager to assist the Project Manager.

In most cases, recruitment appeared to have been completed successfully. There were, however, some delays. Birmingham Community Healthcare NHS Foundation Trust General Charity faced challenges with getting the Volunteer Co-ordinator role approved and banded correctly, limiting applications from candidates with the right experience. Dudley Group NHS Foundation Trust Charity did not initially get sufficient suitable applications for the Clinical Support Worker role and had to extend the job advert. OGRs did not provide further insights into why these challenges occurred, however, both were able to successfully recruit after these delays. This highlights some of the challenges of staff recruitment in the NHS, and the wider health and social care system.

Three OGRs experienced additional challenges related to the delivery of specific roles that they had designed for their VFF projects, however, these were successfully addressed and responded to.

- **Sandwell and West Birmingham Hospitals NHS Trust Charity** experienced a setback in the construction of their ‘Outdoor Gym’ which a volunteering role had originally been created around. The OGR overcame this challenge by signposting volunteers who were interested in supporting this activity to other volunteering initiatives in the interim. The installation works of the gym later commenced in March 2023;

- **Dudley Group NHS Foundation Trust Charity** experienced barriers when trialling a ‘check-in and chat’ role which involved young people ‘checking-in’ with the patient by phone, providing reassurance and making sure they were well. Unfortunately, when applicants learnt they would need to use their own mobile phones they withdrew their application for the role. As a successful alternative, the OGR created in-person activities for young people to support patients in developing their digital skills by creating digital story boards; and
- **CW+ Charity** experienced delays in establishing community elements of their project, resulting in a pause in volunteer recruitment. The OGR has now recruited volunteers and supported them to undertake roles within the hospital. They are continuing build relationships with community partners and have agreements in place to ensure roles will be developed and delivered at a local level.

Project sustainability

OGRs are continuing with their projects, either in totality or taking forward specific elements of them. Many of the OGRs highlighted the legacy of their VFF projects, suggesting the work undertaken has created a lasting change within their organisation. For example, Alder Hey Children’s Charity reported that *“a key outcome is that the project is providing a sustainable framework for the Trust to better understand our current approach and volunteering model. The ambition is that this project will becoming integral contribution to the delivery of the high level of health care we provide at Alder Hey”*. Others discussed the desire to continue building on external relationships formed as part of the programme. For instance, Royal Marsden suggested *“throughout the course of the project we have formed strong relationships with a number of local schools and will continue to closely work with them in providing voluntary opportunities for their students”*.

Variation in future funding has affected how OGRs will carry their VFF projects forward. For some, the VFF programme provided the initial funding needed to build the infrastructure required to develop and deliver the project, which will be sustained as business as usual. As Robert Jones and Agnes Hunt Orthopaedic Hospital Charity explained, *“the VFF funds have enabled us to put the framework in place to continue to offer meaningful opportunities to local youth groups”*.

Others sought to secure additional funding, but at this time were unfortunately unsuccessful. Dudley Group NHS Foundation Trust Charity, for example, were unable to secure further external funding to recruit staff members to support the ongoing management of the project. Moving forwards, therefore, they will focus on continued recruitment of young volunteers and developing volunteer mentors, but likely at a smaller scale.

Other OGRs have sought or plan to seek additional internal funding to continue the project:

- University College London Hospitals Charity, for example, have themselves funded the project for a further two years;
- Sandwell and West Birmingham Hospitals NHS Trust Charities have secured a 12-month commission with the Prince’s Trust to continue elements of the project, and are continuing to explore additional internal and external funding avenues; and
- Shrewsbury and Telford Hospital NHS Trust Charity have secured funding from Health Education England to implement a Volunteer to Career programme in which volunteers are supported on a tailored pathway to progress into careers and training in health and care.

As discussed in the data limitations section, East and North Hertfordshire Hospitals Charity have secured a 3-month extension. Therefore, considerations for project sustainment after June 2023 are yet to be established.

5. Volunteer outputs

OGRs reported the following metrics regarding volunteer recruitment.



OGRs reported that the additional funding secured through the VFF allowed them to increase opportunities for local, young individuals who have previously faced barriers to volunteering. Across the course of the programme, 2,247 young people undertook volunteering activities.

Across all of these volunteering roles, OGRs estimate over 47,000 volunteering hours were undertaken across the course of the VFF projects.¹⁷



Demographics

Volunteer demographics were gathered to monitor the programme against its aims to support young people who may experience barriers to volunteering, including those living in areas of deprivation, those with disabilities and those from racially minoritised communities.

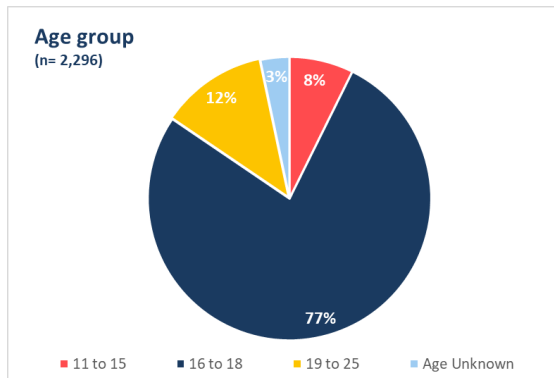


Chart 1 - Volunteers by age group

Volunteer age group data, for both new and continuing volunteers, was provided by OGRs through the monthly monitoring form. The majority of volunteers (77%) were aged 16 to 18.¹⁸ Additionally, 12% of volunteers were aged 19 to 25 and 7% were aged 11 to 15. OGRs were unable to provide age ranges for 76 volunteers. Age breakdowns by OGRs are provided in [appendix B](#) and [appendix C](#).

Volunteers were also asked to provide additional demographic information through the pre-surveys.¹⁹ 539 surveys were received from individuals volunteering at 13 of the 14 OGRs.²⁰

¹⁶ New volunteers are defined as individuals who are first time formal volunteers (never formally volunteering anywhere before), have been volunteering with the hospital for a while, but started a new role as part of the VFF project, or have volunteered with other organisations before but have started volunteering for a VFF project. 1,349 of new volunteers 2,009 volunteers, or 67% were first time formal volunteers (individuals who have never formally volunteered anywhere before). Continuing volunteers are defined as individuals who have been volunteering for the organisation, in their VFF role, for some time (starting 2021 or earlier).

¹⁷ Figure for volunteering hours is an estimate. Twelve OGRs provided volunteering hours data. Helpforce has not been able to validate this data.

¹⁸ N=1,772 of 2,296 new and continuing volunteers recruited.

¹⁹ Demographic information other than age was collected directly from volunteers in the pre-survey to give them the opportunity to self-identify.

²⁰ Volunteer surveys were not submitted by one OGR, Alder Hey Children's Charity, due to concerns regarding sensitivities for their volunteers. Volumes of surveys received from other OGRs were variable – please see Appendix for a breakdown of responses by OGR. Demographic information was also provided through the volunteer post-survey; however, the pre-survey results have been used as the indication of volunteer demographics as it is the more robust dataset.

Volunteer postcodes were concentrated around approximately 50 local authority areas. 30 of these rank within the 50% most deprived local authorities in England, and 20 rank within the 20% most deprived. This equates to 84% of volunteers' postcodes ranking within the 50% most deprived and 64% within the 20% most deprived.²¹

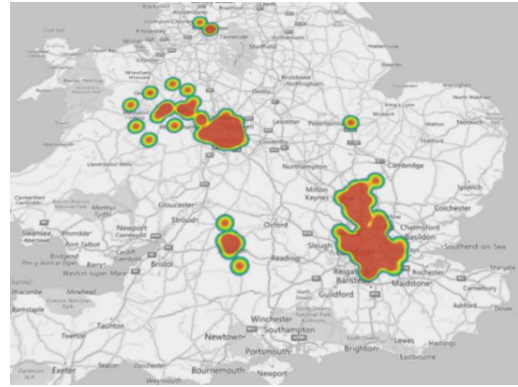


Chart 2 - Heatmap of volunteer postcodes

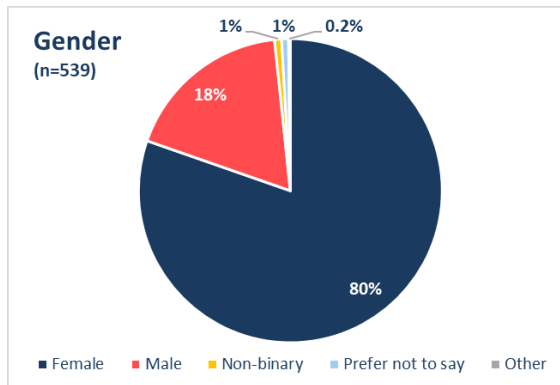


Chart 3 - Volunteers by gender

80% of volunteers identified as female. 18% of volunteers identified as male, and 1% identified as non-binary. One volunteer identified as transgender male and four individuals did not provide their gender.

7% of volunteers identified as having a long-standing illness, disability or infirmity. 11% of young people are estimated to be disabled, therefore the volunteers surveyed under-indexed on this demographic.²² As discussed in the [data limitations](#) section, it is possible that volunteers with long-standing illness, disability or infirmity may be under-represented in volunteer survey data.

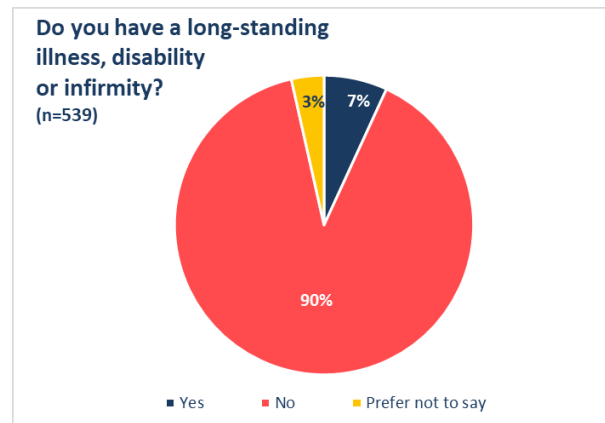


Chart 4 - Volunteers by health status (long-standing illness, disability, or infirmity)

²¹ Based on first half of postcode as provided by volunteers. If first half of postcode fell into multiple local authority areas, it was assigned to the local authority that accounts for the largest proportion of that postcode. Rankings as per [English indices of deprivation 2019 - local authority district summaries](#). Two volunteer postcodes were in Wales, but they could not be included in the rankings of local authorities due to differences in how England and Wales report on their data.

²² Calculated using [2021 census data on disability](#). Based on England and Wales, age groups 10-24 (the age groups closest to the 11 to 25 age range of volunteers).

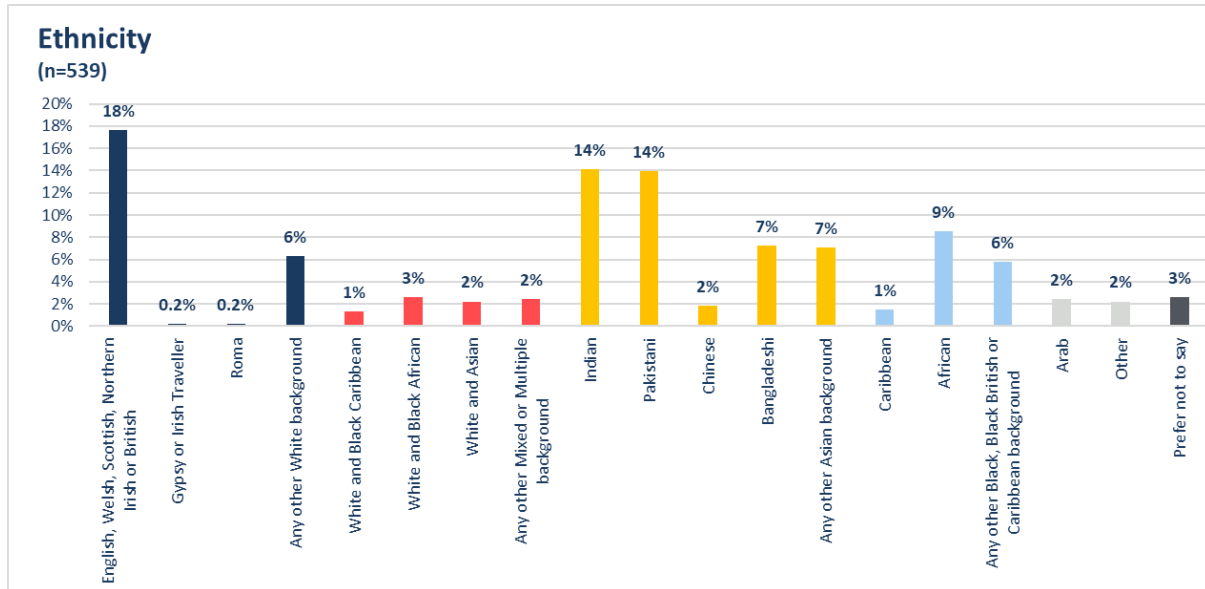


Chart 5 - Volunteers by ethnicity ²³

People from Asian or Asian British ethnic groups accounted for the largest proportion of volunteers at 44%.²⁴ People from White ethnic groups accounted for the second largest percentage of volunteers (24%), followed by Black, Black British, Caribbean or African ethnic groups (16%), Mixed/Multiple ethnic groups (9%) and Other ethnic groups (5%). 14 volunteers did not provide their ethnicity. Compared to UK population of young people, based on the 2021 census data on ethnicity, the volunteers surveyed over-indexed on being from Asian or Asian British, Black, Black British, Caribbean or African and mixed or multiple ethnic groups.²⁵

These demographics suggest that the programme has been successful in supporting young people from some target audiences that may usually face barriers to volunteering, namely those living in deprived areas and those from racially minoritised communities. While only a small proportion of volunteers surveyed self-identified as having a long-standing illness, disability or infirmity, it is unclear whether this is due to under-representation in the survey data or whether this is reflective of the VFF volunteer demographics (as discussed in the [data limitations](#) section).

Opportunity type

Since the project began, 1,034 (51%) of the new volunteers took on flexible roles which required no regular pattern of commitment or minimum number of hours each week. Indeed, flexibility of volunteering commitments appeared to be key in retaining volunteers, something which is explored further later on in the report. The least common opportunity type was micro (specific time-bound tasks that could be undertaken as a one-off) with 178 (9%) of new volunteers undertaking this role

²³ Participants were also offered with the option of selecting Irish as their ethnicity group, however, no individuals selected this and therefore it has been removed from the graphical representation of the data.

²⁴ N=539. Ethnicities, as stated in the [2021 census](#) (gov.uk), are grouped as

- Asian or Asian British: Indian, Pakistani, Bangladeshi, Chinese, any other Asian background
- Black, Black British, Caribbean or African: Caribbean, African, any other Black, Black British, or Caribbean background.
- Mixed or multiple ethnic groups: White and Black Caribbean, White and Black African, White and Asian, any other Mixed or multiple ethnic background.
- White: English, Welsh, Scottish, Northern Irish or British, Irish, Gypsy or Irish Traveller, Roma, any other White background.
- Other ethnic group: Arab, any other ethnic group.

²⁵ Calculated using [2021 census data on ethnicity](#). Based on England and Wales, age groups 10-24. From census data, it is estimated that 75% of people aged 10 to 24 belong to White ethnic groups, 12% to Asian ethnic groups, 6% to black ethnic groups and 5% to mixed ethnic groups.

type. 213 (11%) of new volunteers took on digital roles and 824 (41%) took on other formal roles.²⁶

1,075 (54%) of new volunteers recruited undertook long term opportunities, the most common role length to have been recruited to. 727 (36%) new volunteers took on short to medium term opportunities and 276 (14%) engaged in one-off opportunities.²⁷

²⁶ Digital roles are activities that take place remotely or in person. Other formal roles are opportunities not covered by the other modalities. Opportunity types are not mutually exclusive.

²⁷ Role duration was not mutually exclusive - volunteers have been recruited to multiple roles which span different durations.

6. Value

Value for the individual

Within the pre- and post-surveys, volunteers were asked to consider how far they agreed with five statements related to their wellbeing.

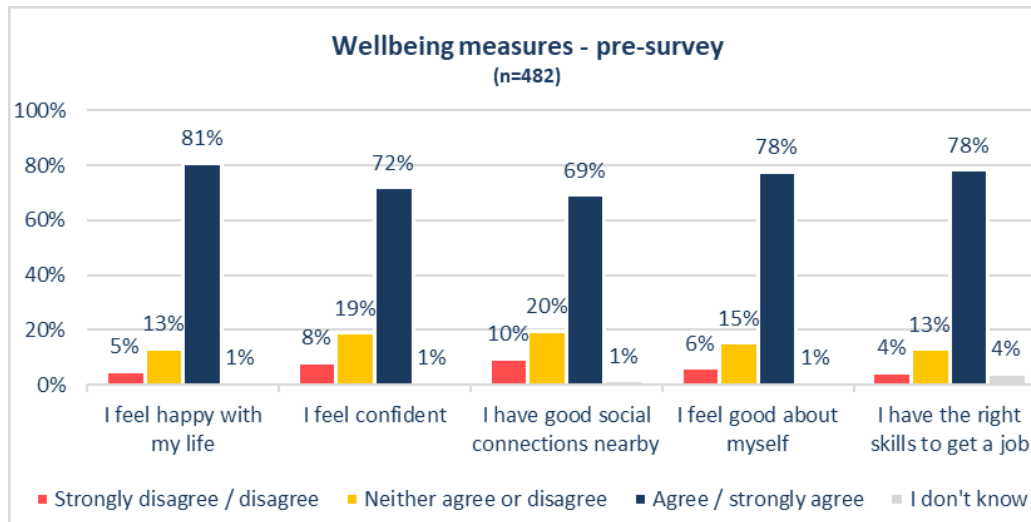


Chart 6 - Volunteer wellbeing measures (pre-survey - new volunteers only)

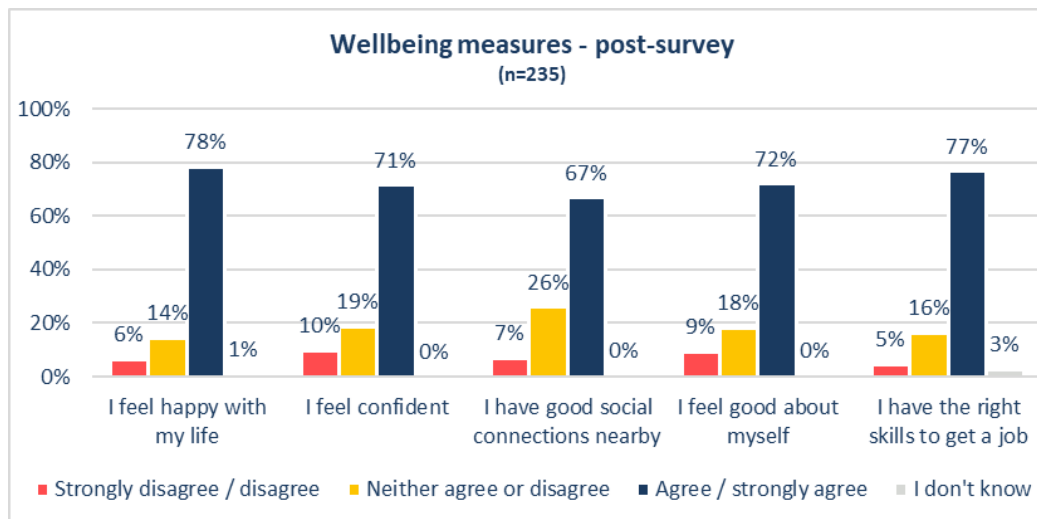


Chart 7 - Volunteer wellbeing measures (post-survey)

While there were some small reductions in the proportion of volunteers who agreed with the statements, there were no considerable shifts.²⁸ Further, it should be noted that wellbeing scores were relatively high across both surveys and that there are multiple, widespread factors that can affect a volunteer's wellbeing outside of their volunteering role. As discussed in the [data limitations](#) section, results from the pre- and post-survey are not directly comparable, therefore conclusions cannot be drawn around the impact of the programme on volunteer wellbeing.

Volunteers were also asked about outcomes which directly related to their volunteering experience.

²⁸ As the pre- and post-survey samples are neither paired nor independent, it has not been possible to complete formal statistical significance testing. High level investigations would suggest the differences are unlikely to be significant, but this cannot be confirmed.

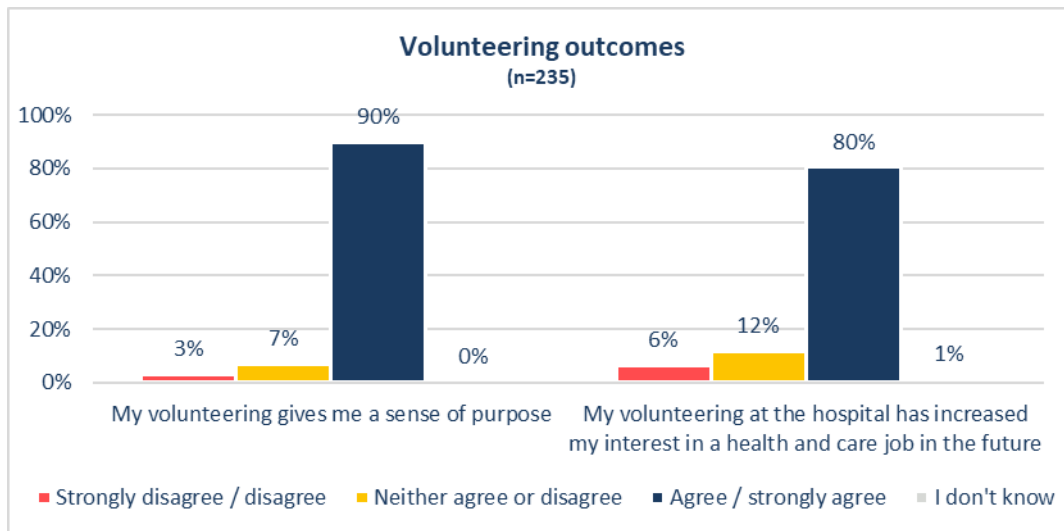


Chart 8 - Additional volunteer outcomes

At the end of their experience, 90% of volunteers agreed or strongly agreed that their volunteering gives them a sense of purpose.²⁹ This was reflected in volunteers' comments, with one volunteer mentioning that volunteering *"increased my feeling of purpose in the community, makes me feel valued. [I] have had amazing feedback from staff themselves taking the time to tell me what an amazing role I do"*. Volunteers also reported feelings of being able to make a difference when their roles involved supporting hospital wards. For example, a University College London Hospitals Charity volunteer reflected, *"with volunteering and work experience placements I've done in the past, I've often felt like what I'm doing either isn't helpful or that it's actually worse off me being there. At UCLH I really feel like I'm making a difference, especially when I see patients"*. Some individuals also discussed appreciating the opportunity to give back to their local community, reporting *"I like that I'm helping patients and [giving] back to my community... it provides me with a sense of fulfilment"*.

Another positive outcome was that 80% of volunteers agreed or strongly agreed that their volunteering had increased their interest in working in health and care in the future.³⁰ This aligns with a number of OGRs reporting that volunteering had helped to raise the young person's awareness of health and care career opportunities and the paths they could take to get there. Further, OGRs reported that some of their volunteers had moved into education and work related to health and care; including degrees in nursing, paramedic training, clinical apprenticeships and paid roles in clinical support, mental health and the ambulance service. Some OGRs actively helped to facilitate this by offering events and support in career awareness, career pathways and interview preparation. Dudley Group NHS Foundation Trust Charity, for example, reported that 56 of their young volunteers had taken part in career awareness sessions, with 54 of those individuals continuing to have one-to-one career sessions with specific Trust staff in areas of interest to them.

There was a feeling from both OGRs and volunteers that the experience had supported volunteers' prospects in further education and careers, regardless of whether this will be in health and care. As one volunteer reported, *"volunteering has facilitated my personal and professional development. It has equipped me with the necessary skills to apply for further experience"*. OGRs identified that their roles had allowed volunteers to gain experience of the world of work generally. As King's College

²⁹ N=211 of 235 post-survey responded agreed or strongly agreed that their volunteering gives them a sense of purpose.

³⁰ N=189 of 235 post-survey responded agreed or strongly agreed that their volunteering has increased their interest in a health and care job in the future.

Hospital Charity noted, *“students do not have lots of real-world experience in being accountable and completing applications independently. This is a very tangible secondary benefit to the process that prepares them for adult life simply by having gone through this process”*.

In addition, volunteers highlighted that they were able to develop transferable skills, including communication, confidence, working under pressure and team working. As one volunteer mentioned, volunteering *“greatly enhanced my personal skills and confidence”*. OGRs noted this same development in volunteers and additionally mentioned skills in organisation, working independently and understanding boundaries. Alder Hey Children’s Charity commented that *“the volunteers are not only learning role specific skills, but they are also working together and learning skills in communication, building relationships outside of their school environment”*.

OGR spotlight: Supporting volunteers to achieve their goals

King’s College Hospital Charity’s volunteering for young people programme focussed on those who wanted to pursue a career in health care but did not necessarily have the highest academic attainment levels or the same opportunities as some of their peers.

One young volunteer who participated in the programme, Sarah*, had experienced health problems in the family. As a result, she was mainly looked after by her sister, missing out on parental care and guidance. This had affected Sarah’s confidence and led her to doubt her abilities. This also impacted her socially and academically, leading Sarah away from enrolling in A-levels and instead undertaking a BTEC (Business and Technology Council qualification). After seeing the impact that a lack of appropriate care can have within her own family, Sarah chose a Health and Social Care qualification as she wished to support others in the same situation.

Sarah began volunteering on the paediatric critical care ward. The OGR reports that volunteers of all ages can struggle in this environment, as it can be extremely distressing to see babies in such states of dependency. However, Sarah thrived in the environment and relished the opportunity to help. She was very proactive, reading to babies in comas, engaging and supporting parents when possible, and seeking staff out to ask how she could support them administratively. Sarah later moved onto the children’s surgical ward, where again her application and drive to support people shone through and made a wonderful impact not only on the patients and family, but on staff and other volunteers in the placement, setting a great example to others.

In her time with King’s College Hospital Charity, the OGR reflects that Sarah has grown immensely, learning about care, bedside manner and communicating in a highly pressured environment. Through the non-traditional route of BTECs and practical experience, Sarah has successfully been accepted on a university Paediatric Nursing course. When asked about her volunteering experience, Sarah said *“thank you once again for always supporting and believing in me, I can’t tell you how grateful I am for always supporting and believing in me. Thank for your kind words and wishes”*.

**Name has been changed*

Volunteers were asked to reflect on their overall experience in their volunteering role, including if the role met their expectations, their satisfaction with their experience and their likelihood of recommending the role to others.

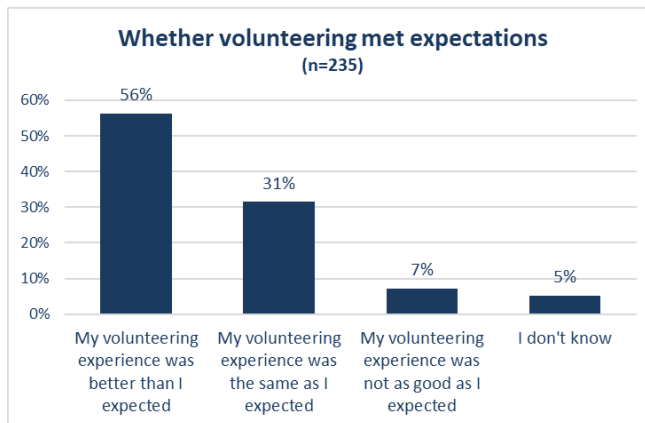


Chart 9 - Volunteer feedback on if role met their expectations

Over half (56%) of volunteers reported that their role exceeded their expectations.³¹ These volunteers described rewarding experiences with supportive staff, opportunities to meet new people and to gain new skills.

A further 32% of respondents felt that their experience lined up with what they had expected.³² For some individuals, they had had previous experience of hospital volunteering and knew what to expect.

Others mentioned that the job description set realistic expectations of the roles before they started or that they had been introduced to the role by families and friends, so they had a good insight into what the role would entail.

However, 17 volunteers (7%) felt that their experience was worse than expected. As explored previously in the report, reasons for this related to difficulties in engaging staff, experiencing barriers in staff members understanding what volunteers were there to do, and a lack of variation in activities.

The majority of volunteers, however, reported that there was nothing they wished to change about their volunteering experience. Indeed, 94% of volunteers were satisfied or very satisfied with their experience and 89% reported that they would be likely or extremely likely to recommend it to others.³³

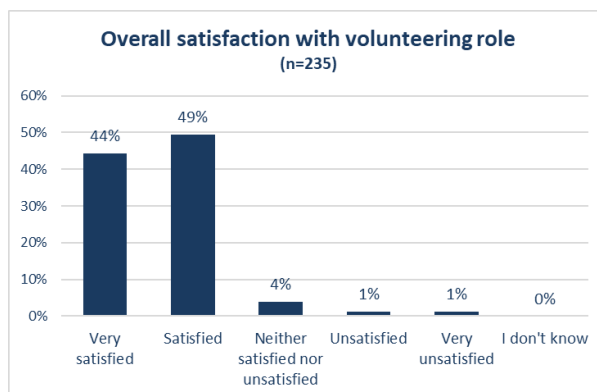


Chart 10 - Volunteer satisfaction with their role

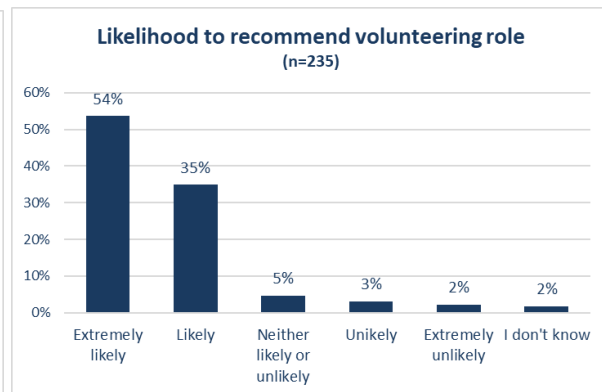


Chart 11 - Volunteer likelihood of recommending the volunteering role

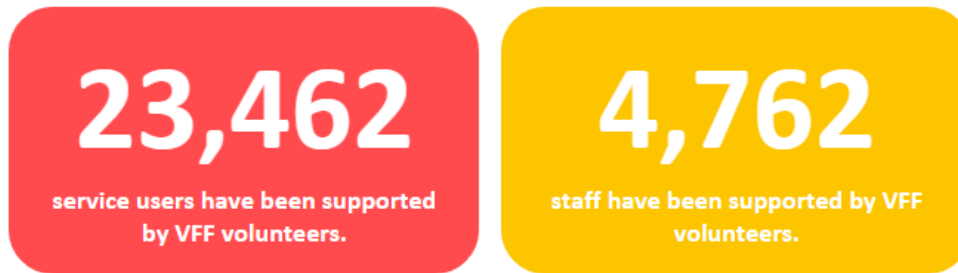
³¹ N=132 of 235 post-survey respondents suggested volunteering experience exceeded their expectations.

³² N=74 of 235 post survey responses said their volunteer role had met their expectations.

³³ N=116 of 235 (49%) post-survey respondents were satisfied with their role and 104 (44%) were very satisfied. 82 of 235 (35%) post-survey respondents were likely to recommend their volunteering role to others and 126 (54%) were extremely likely.

Value for the organisation

Between January 2022 and March 2023, OGRs estimate many staff and service users have been supported by VFF volunteers.



34

Volunteers were asked about the impact they felt that their volunteering had made to others. There were strong levels of agreement from volunteers that their role had a positive impact on service users (86%) and on the organisation or community they volunteer for (84%).³⁵ Just over three quarters of volunteers agreed or strongly agreed that they had a positive impact on staff, with some individuals suggesting they felt they were able to relieve pressure on staff time by helping with admin tasks and befriending. However, this was lower than the other measures. It is not clear whether this may be due to some volunteers having less contact with staff members than others or if it may be linked to the difficulties some volunteers reported in engaging with staff and staff not understanding what they were there to do (which is explored further in the [ongoing volunteer support](#) section).

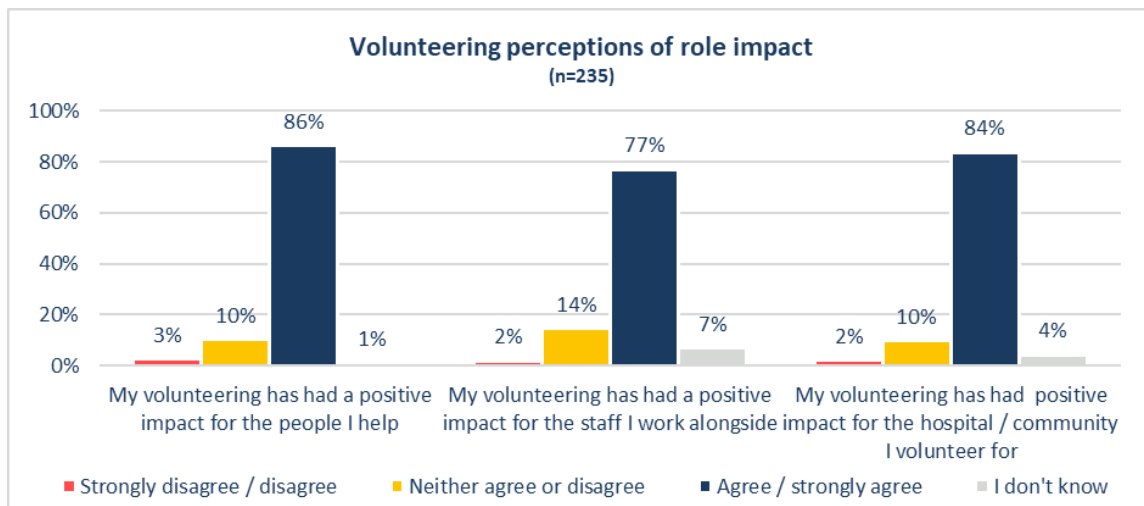


Chart 12 - Volunteer perceptions of role impact

A key organisational outcome of the VFF project reported by OGRs was the increased profile of volunteering as a result of the presence of the young volunteers and staff’s positive experiences with them. Royal Marsden Cancer Charity noted that they had raised the profile of volunteering from clinical staff to senior management: *“the reintroduction of volunteer ward support has made staff more aware of volunteer presence around the hospital. We have been recognised on an organisational*

³⁴ Figures for staff and patients helped are an estimate. Nine OGRs provided an estimate of service users helped. Nine OGRs provided an estimate of staff helped. Helpforce has not been able to validate this data. Dudley Group NHS Foundation Trust Charity also provided an estimate of 115,575 service users and 84,860 staff helped, however this was a calculation based on volunteer hours so has been excluded from the total. University College London Hospitals Charity (UCLH) also provided the number of patient interactions as 20,590, but as patients may have multiple interactions with volunteers, this data has also been excluded.

³⁵ N=203 of 235 post-survey respondents agreed or strongly agreed their volunteering had a positive impact for the people they helped. 197 of 235 respondents agreed or strongly agreed their volunteering had a positive impact for the organisation/community.

level as our digital volunteers were spoken about and praised in our internal comms email, as well as by our Deputy Chief Nurse". While much of this appears to have been generated organically, a small number of OGRs reported taking a more proactive approach to profile-raising, for example, using ward information packs, social media and hospital communications channels. Shrewsbury and Telford Hospital NHS Trust Charity reported that the Trust is now *"recognising the volunteer workforce as part of the Trust workforce, something we have previously struggled to achieve, but they are now included in comms messages and staff benefits i.e., flu jabs, food vouchers"*. A result of this was that some volunteer teams saw an increase in requests from clinical teams to have support in their area. King's College Hospital Charity reported seeing *"more proactivity and belief from wards hosting volunteers, with requests on the rise as trust is instilled in the volunteers to do what they are tasked with"*.

OGRs also reported an increase in collaboration with other teams in their organisation. Some OGRs worked with other departments to deliver outreach to young people. Shrewsbury and Telford Hospital NHS Trust Charity, for instance, ran a number of 'Young People's Academy' days in co-operation with the Careers and Community Engagement teams and some clinical staff, to showcase careers and volunteering in the NHS. Other OGRs noted that their VFF project had enabled them to start building relationships with teams they would not previously have come into contact with, such as Moorfields Eye Charity who felt that their *"digital volunteering programme has opened up new avenues for us to collaborate with other departments that we may not have previously worked with"*.

There were signs that VFF projects had prompted the development of volunteering strategies or longer-term volunteer services plans in some OGRs. This included planning recruitment strategies, refining processes and setting up volunteering or youth-focussed networks or working groups. Sandwell and West Birmingham Hospitals NHS Trust Charity, for example, set up a partnership steering group to oversee the project, including representatives from clinical teams, Communications teams, Volunteer Services and the Charity. These individuals all had specific interests in the project, and in turn became programme advocates to ensure its success. Additionally, the OGR felt that these strategic changes had resulted in positive changes more widely than just within the volunteering team, with their project having bolstered *"how as a Trust we provide supportive engagement opportunities to people from marginalised backgrounds irrespective of age, gender or ethnicity"*.

OGR Spotlight: Development of volunteer strategy

A key part of Alder Hey Children's Charity's project was to develop a volunteer strategy, looking at how they can support young people through a positive volunteering experience as well as exploring how they can support the Trust with their young volunteers. The strategy included marketing plans, reviews of recruitment processes and procedures, implementation of a volunteer management system and working with teams across the Trust to embed a culture of volunteering. The OGR also set up a Young Volunteer Steering Group in which they discussed the project with key stakeholders across the Trust. The hope was that their project would help them to create a framework to develop new projects and initiatives, with the expectation that they would *"reflect and review our work, building on our success and looking to the future for how this role can bring about fundamental changes to organisational volunteering"*.

They appear to have achieved this aim and reported that their *"project has been hugely successful, and an additional impact has largely been around the longevity of the program"*. It has resulted in

a new band two project support assistant being recruited to promote volunteering to young people, the development of a volunteering module in their charity database and an Operations team member having their role expanded to include volunteer management. Their role will include further developing processes to recruit and celebrate volunteers and engaging with community organisations to support more young people into voluntary roles. They felt that the *“expansion of this role will ultimately lead to more opportunities and better outcomes for young people”*.

Overall, they reported that they had received *“overwhelming support for this project throughout the hospital and from senior leadership teams”*. The strategy provided a framework for senior leaders to better understand the volunteering model, illustrating the integral contribution volunteers can make to the delivery of high-quality care.

As a consequence of their VFF projects, OGRs also reported a number of benefits to patients, including:

- more organisational surveys being completed;
- patients being connected to family via virtual visiting;
- young patients having support in their interactions with clinical teams; and
- increased technological inclusivity for patients.

OGR spotlight: Service user and staff impact

Robert Jones and Agnes Hunt Orthopaedic Hospital Charity’s young volunteers participated in a Ward Friends role within the Midland Centre for Spinal Injuries (MCSI). Volunteer responsibilities involved providing essential non-clinical support to patients and staff, including mealtime support and companionship.

The OGR reports that this volunteer role is hugely appreciated by patients, supporting those who are in hospital for long periods to help reduce anxiety and provide a listening ear. A MCSI Ward Manager fed back: *“we’re delighted to have the Ward Friends supporting – the pandemic has been difficult for our patients, with limited visits from friends and family, so a regular visit from a friendly volunteer goes a long way. The volunteers make such a valuable contribution to the ward – supporting with non-clinical jobs allows nurses and other healthcare professionals to dedicate their time to clinical duties”*.

7. Learning around engaging volunteers

Levels of attrition were monitored throughout the programme to understand the success of keeping volunteers engaged in their roles. In total, 314 volunteers left their roles earlier than expected across 12 of the 14 OGRs.

OGRs reported cases of volunteers leaving their roles due to positive outcomes. Some roles had come to a natural conclusion, either due to the role being for a specific amount of time or the volunteer having completed the number of hours they had initially committed to. Other volunteers were reported to have left due to progressing into further education, university, or paid work.

314
individuals have dropped out
of their volunteering role

OGRs reported that, in some cases, individuals had left after experiencing difficulties volunteering in a hospital environment and concerns related to the COVID-19 pandemic. Other individuals appear to have left their role due to a change in circumstances, including:

- academic schedules and commitments;
- a change in academic direction meaning that they no longer needed to volunteer;
- overseas students returning home for the summer or after their studies;
- changes in financial situation meaning paid work was a necessity over voluntary work; and
- a change in career aspirations.

OGRs implemented measures to maximise engagement and to help young volunteers get the most they could out of their experience. These measures were integral to the successful delivery of projects and were reported to help with retaining volunteers. Being aware and considerate of the needs and preferences of young people and specific target groups appears to have been key in achieving this.

Networking and promotion

OGR feedback highlighted the importance of working with partners to promote the volunteer roles, identify suitable candidates and to obtain specialist advice, guidance and support. A wide variety of networking partners were mentioned. These included:

- hospital teams, including management, administrative staff, nursing staff and clinicians;
- schools and colleges;
- local community organisations, such as community centres and youth centres;
- local Council for Voluntary Service;
- local councils;
- non-profit organisations that have expertise working with young people or target audiences;
- faith networks; and
- representatives from NHS Charities Together.

Internal partnerships

Internal collaboration with other hospital teams has enabled OGRs to develop their VFF programmes further. Building relationships with clinical and non-clinical staff allowed for promotion of the benefits of volunteering in their area and development of new roles. As Shrewsbury and Telford Hospital NHS

Trust Charity noted, *“going out and talking to other departments in the hospital is crucial to understand workstreams and how we can support each other”*.

Partnering with other departments, such as falls teams and porter teams, also enabled OGRs to offer more specific training to meet volunteer needs and increase the scope of their work. A number of OGRs also worked collaboratively with teams that tend to have more contact with young people, such as those leading on work experience and apprenticeships. Dudley Group NHS Foundation Trust Charity became part of a new youth network group internal to the Trust which helped to *“shape the delivery, support with promotion and look at the sustainability of the project past VFF”*.

External partnerships

The partnerships most frequently established by OGRs were with schools and colleges, including education centres for young people excluded or self-excluded from school and those with mental health conditions, disabilities and learning difficulties. The main benefit of these relationships was being able to reach young people within the target audience directly and promote volunteering opportunities to large groups of students at the same time. This involved delivering presentations, workshops and assemblies and attending events such as career fairs. It was reported to have had a positive impact on interest from and recruitment of new volunteers. Some OGRs also found value in working closely with teachers to understand individual volunteers better and ensure opportunities were adapted to them and their needs. King’s College Hospital Charity commented that *“these relationships allow King’s to be aware of the background of certain students to help tailor support to their needs which mitigates future challenges ensuring the programme is accessible to all”*.

OGRs also explored working with school enrichment teams to offer volunteering activities. Birmingham Community Healthcare NHS Foundation Trust General Charity in particular worked with a local school to offer volunteer training and opportunities as part of their enrichment programme.

OGR spotlight: Working with school enrichment programmes

Birmingham Community Healthcare NHS Foundation Trust General Charity highlighted challenges related to the provision of volunteering opportunities and training around busy educational environments, pressures and timetables. As a result, the OGR found that schools were often willing to sign up but did not consider their schedules to accommodate them.

The OGR initially looked to offer flexibility, online training and meeting with students as and when time allowed. They were then provided with an opportunity to be a part of one local school’s enrichment programme - a 6-week programme of weekly 2-hour sessions where the students had the opportunity to learn additional skills. Although this would be more of a commitment than the OGR had originally planned, they decided to go ahead as it appeared an excellent opportunity. Further, this was a great way to expand and deliver the project to a wide range of students in one setting.

A group of 20 students were taken through a programme of extended volunteer training, followed by additional health training in CPR, falls prevention, and infection control. The project then supported the young people to produce art works about volunteering in the NHS, as well as undertaking an engagement event at a local supermarket where the young people used the skills they had learned to promote digital health resources. Throughout, activities were linked back to

the aims of the VFF project to improve the health of the local communities and address health inequalities. The OGR explained, *“seeing the engagement and confidence of the students to be able to explain the App Library and convince older adults on the safety of verified online resources was extremely satisfying. We saw a great change in many of them who had initially struggled with the concept but by the end were all confidently enjoying being a part of helping improve the health outcomes of the local community”*. The OGR continues to offer the students more volunteering opportunities, including roles relevant to the knowledge gained through their health training.

The overall programme developed into a well-rounded health education and promotion programme. Due to its success, Birmingham Community Healthcare NHS Foundation Trust General Charity plans to offer similar programmes to schools going forward, continuing the legacy of their VFF project.

Although working with schools and colleges has been positive on the whole, it has not come without challenges. There were some difficulties in OGRs being able to get sufficient time in the school timetable to deliver sessions, due to busy schedules. Moorfields Eye Charity reported challenges in communicating with school staff due to their capacity, where *“staff have been unresponsive for long periods of time and then exceptionally busy with other priorities”*.

Partnering with non-profit organisations was reported to be an effective way of engaging with young people from target volunteer groups. Three OGRs successfully recruited young people seeking asylum and those with learning disabilities as a result of their work with organisations such as Breadwinners, Mencap and My Options. Two other OGRs collaborated with organisations that work with young people not in education, employment or training. Manchester University NHS Foundation Trust Charity worked in partnership with Manchester Young Lives, successfully receiving volunteer applications as a result. Robert Jones and Agnes Hunt Orthopaedic Hospital Charity worked with Shropshire Youth Support Trust, reporting that they had built stronger relationships and hoped to have more involvement with the organisation going forward.

OGR spotlight: Working with partner organisations to reach target volunteer groups

University College London Hospitals Charity has worked in partnership with Breadwinners, a grassroots charity that support young refugees and people seeking asylum, since 2019. The VFF funding allowed the OGR to continue this partnership, offering ‘taster sessions’ for young people supported by Breadwinners to shadow existing volunteers and learn about the hospital environment.

The OGR explained that these sessions allowed young people, who perhaps would not be able to access traditional volunteering sessions due to language barriers, college or caring commitments, to learn about possible future careers. It also provided an opportunity for participants to meet new people, gain confidence in spoken English, and develop an understanding of the local community.

A volunteer who participated in the programme reported, *“in my home country I was training to be a nurse. The [taster session] let me see the NHS hospitals and I would like to continue to be a nurse here after college”*.

Since receiving VFF funding, University College London Hospitals Charity has engaged approximately 50 young people from the service. A representative of Breadwinners explained, *“the young people we work with are very ambitious, and many of them are interested in healthcare and medicine as a career. Having a partnership with UCLH has meant that the young people can move from our programme into experience and the hospital. This experience is of so much value at such an early stage, and all participants have loved it! We really hope we can continue to refer young refugees and people seeking asylum to UCLH volunteering programmes”*.

OGR spotlight: Working in partnership to deliver volunteering opportunities

Sandwell and West Birmingham Hospitals NHS Trust Charities partnered with a multitude of local organisations to develop volunteering opportunities for young people. The OGR worked with local schools and colleges to offer work experience tasters to students aged 16 to 18. Each volunteer undertook an eight-to-twelve-week volunteering programme, aimed to provide both work experiences and access to an accredited learning pathway.

Volunteering placements were available both within the Trust or within local community organisations, including the Aston Villa Football Club Foundation, West Bromwich African Caribbean Resource Centre, and the Inside Outside arts project led by Sandwell Cultural Education Partnership. This led to a range of opportunities being provided to young people, including health and care, customer services, catering and media.

Additionally, the OGR has been working in partnership with charitable organisations, such as Mencap, a UK charity for people with learning disabilities. This relationship facilitated a number of young people with disabilities to actively volunteer with them.

The Handsworth Association of Schools supported the recruitment of young volunteers and the OGR developed good working relationships with schools, particularly Halesowen and Sandwell Colleges. Going forwards, they have plans to expand on the engagement built during their VFF project and broaden it out into quarterly outreach programmes with senior schools to identify and support young people who are interested in longer-term internships.

Marketing volunteering opportunities

Much of attracting young people within specific target groups appears to have been via partnership working, as discussed above. However, OGRs did also explore additional marketing techniques to reach young people more generally, including:

- social media campaigns, website promotion and pay-per-click digital marketing;
- displays and posters in prominent locations, such as hospital entrances;
- promotional videos and podcasts;
- physical promotional materials, such as leaflets and filled tote bags;
- issuing press releases to local newspapers and appearing on local radio stations;

- attending one-off events, for example, food and job fairs; and
- targeting places that are used regularly by young people, including youth and sports clubs.

Some OGRs employed the skills of specialist marketing companies to assist with promotional activities. Shrewsbury and Telford Hospital NHS Trust Charity developed a digital marketing campaign with an external agency, which resulted in more than double the number of visits to their volunteering website compared to the same period in the previous year. Alder Hey Children’s Charity contracted a marketing agency to create a brochure for their programme *“using appropriate language and branding that will speak to both young volunteers and their parents/carers to encourage them to take part in our project and answer any questions or concerns they may have”*.

However, some OGRs found that usual routes of advertising, such as via their website, were not as effective as they may have expected. Birmingham Community Healthcare NHS Foundation Trust General Charity reported that *“the advertising route is a little too slow for achieving our goals”*, instead preferring face-to-face contact via partnerships with schools and other organisations. Indeed, face-to-face interactions appeared valuable for a number of OGRs, allowing them to speak to large volumes of young people at once or to get direct access to specific target volunteer groups. East and North Hertfordshire Hospitals Charity noted that through face-to-face contact they *“have been able to bring volunteering ‘to life’ and engaged with young people who would not usually be looking on the NHS Trust website for information”*.³⁶

Shrewsbury and Telford Hospital NHS Trust Charity reported that the *“promotion of volunteering needs to be constant to maintain the number of new applications coming in each month”*. While this was not explicitly mentioned as a consideration by other OGRs, it is clear that ongoing promotion and networking activity to attract new volunteers continued throughout the duration of the project.

Tapping into individual motivation

Understanding young people’s motivations to volunteer is important when considering how to market roles and engage potential volunteers. Both new and continuing volunteers were asked to report their reasons for volunteering.³⁷

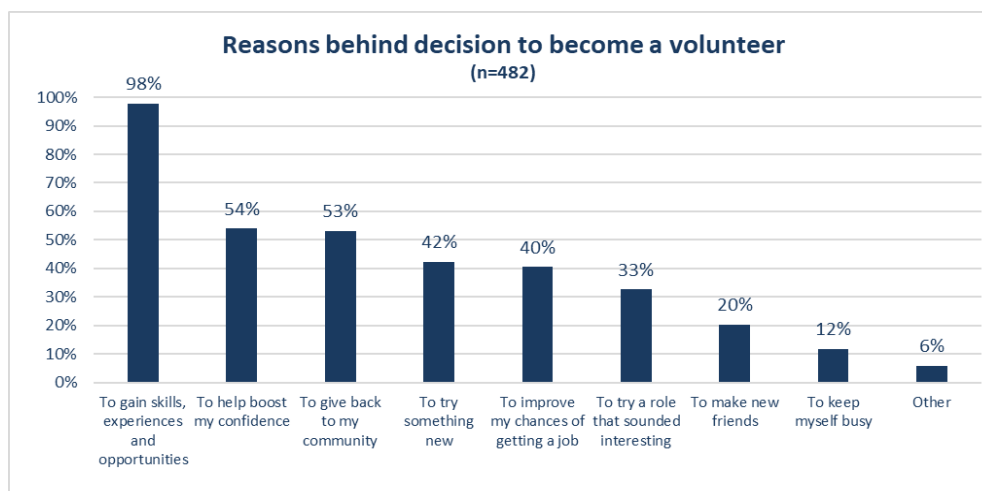


Chart 13 - New volunteers' reasons for becoming a volunteer

³⁶ East and North Hertfordshire Hospitals Charity have secured a 3-month extension. Consequently, the data provided within this report is not final.

³⁷ Reasons behind becoming or continuing as a volunteer are not mutually exclusive - volunteers can select all reasons that apply to them.

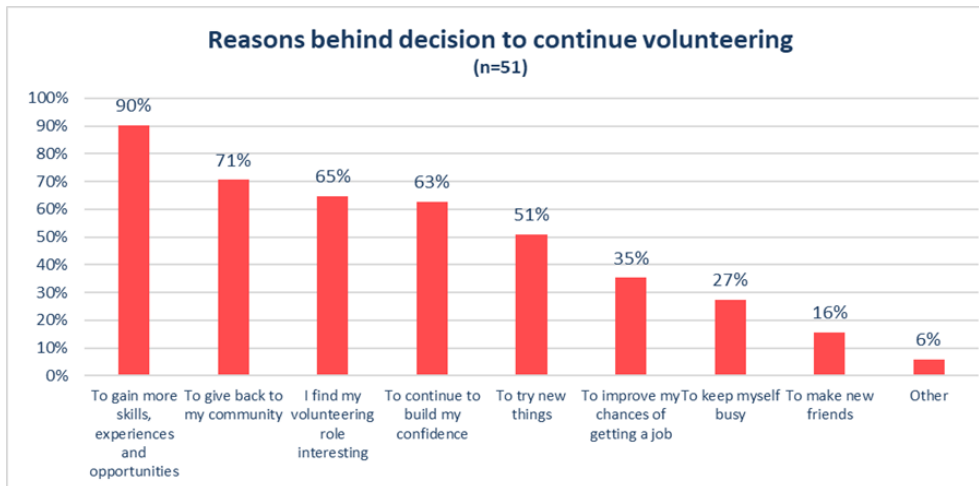


Chart 14 - Continuing volunteers' reasons for continuing volunteering

Overall, continuing volunteers tended to select a greater number of motivating factors, an average of 4.2 compared to 3.6 for new volunteers. The most highly rated reason behind both new and continuing volunteers being a volunteer was to gain skills, experience and opportunities, with 471 (98%) new volunteers and 46 (90%) continuing volunteers selecting this as a motivating factor. This was consistently the highest rated factor behind being a volunteer throughout the duration of the programme.

Both new and continuing volunteers also cited specific reasons, including:

- to gain experience in a healthcare setting, sometimes to support pursuit of a career or further education in this field;
- to more generally gain work experience or help with further education applications (not specified whether this is in a related field); and
- as part of a college placement/coursework/DoE award.

Making application and onboarding accessible

Both OGRs and volunteers reflected on their experience of the application and onboarding processes.

52% of volunteers reported that applying to become a volunteer had been easy or very easy, while 36% rated the process neutrally and 11% as difficult or very difficult. “Straightforward” and “easy to comprehend” processes, with supportive and timely communication with volunteering staff, appear to have been key in providing a positive application experience.

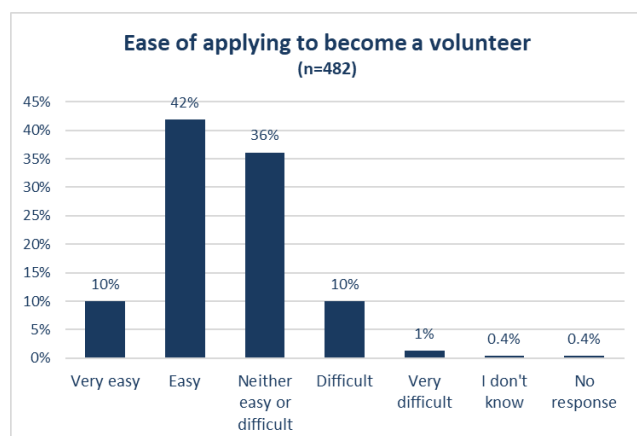


Chart 15 - New volunteers' perceptions of application processes

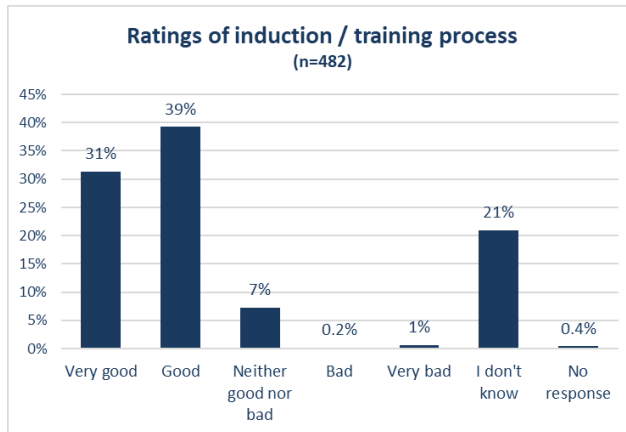


Chart 16 - New volunteers' perceptions of induction / training processes

70% of volunteers rated the induction and training process as good or very good, describing it as “*informative*” and “*easy to understand*”, providing them with the knowledge and confidence to undertake their role. 7% were neutral about the process, and only 1% rated it as bad or very bad. 21% responded that they ‘don't know’, most frequently due to the volunteers having not yet received training at the time of completing the survey.

One of the main reasons why volunteers found the application and onboarding processes difficult was how lengthy they were and the number of steps within them. It was noted by some OGRs that recruitment and onboarding processes can be as intensive as for paid members of staff, which could create barriers for volunteers, including:

- finding a sufficient number of references which meet the criteria for the length of time the young person has been known to the referee;
- having ID documents to complete DBS and hospital checks, which can affect all young people but may be a particular issue for certain groups, such as asylum seekers, who may experience challenges relating to the costs of obtaining ID documents or in meeting the specific requirements of the process;
- needing support to complete applications as it may be a new experience for them, or the application may not be accessible to them; and
- having sufficient time around other commitments, such as schoolwork and exams to complete applications and training.

The length of time taken to complete the different steps was sometimes extended further by delays on the OGRs' side. This included delays in processing applications due to unexpected demand and/or lack of capacity within the volunteering team, being able to book applicants onto Trust-wide training sessions and processes such as Occupational Health checks being completed.

Other difficulties were highlighted by volunteers who rated the processes negatively. These included:

- delayed or confusing communication with the volunteering team;
- technical difficulties, such as navigating online application forms and training modules;
- a lack of practical training elements, explaining their inductions were “very much just sit and listen” and that they felt “overloaded with information”; and
- feeling that they had not received sufficient training and had been “thrown into the deep end”.

Across the duration of the programme, 253 young people dropped out during onboarding across eight of the 14 OGRs.³⁸

King's College Hospital Charity commented that *"onboarding remains a recurring issue where students seem to be either uninterested or daunted by the application process and the result is that they fall silent and do not complete their application"*. This OGR, therefore, identified the need to focus on the quality of the volunteering onboarding experience for the young person, rather than the quantity of volunteers recruited. They explained, *"the priority therefore shifted to focus on the on-boarding process and how resources and activities could be more usefully directed on making the volunteer experience more meaningful all round"*. The OGR looked to offer an increase in tailored, one-to-one support, offering better application and volunteering experiences for young people.

253
individuals dropped out
during onboarding

In an effort to improve prospective volunteers' experiences and ensure continued engagement throughout the recruitment process, many OGRs reported making adaptations to their onboarding processes. Changes included:

- working collaboratively with other teams in the Trust to find solutions, such as agreeing with HR that teachers and faith leaders could be acceptable referees or creating a streamlined health clearance process with Occupational Health;
- working with school and college staff to support the application process;
- adapting processes to make them more accessible, including creating a streamlined application form for applicants with learning disabilities;
- offering different training options, including the choice of online or face-to-face sessions, or offering sessions in evenings and at weekends;
- providing helplines or drop-in clinics for one-to-one assistance, acknowledging that certain applicants may need more tailored support than others; and
- putting actions in place to more effectively manage the volume of applications, including pausing promotional activity or using periods where they received fewer applications to process backlogs or ensuring that those applying were highly engaged to reduce time spent processing applications which were not progressed by the applicant.

OGR spotlight: Reviewing recruitment and application processes to ensure accessibility

Manchester University NHS Foundation Trust Charity took a formalised approach to changing their processes. They completed SWOT analysis (strengths, weaknesses, opportunities and threats) on their recruitment process and Equality Impact assessments to ensure the application process was inclusive.

The findings from these exercises helped them to identify where there may be barriers for young people and how support could be provided to overcome them. The adaptations, which included having the voluntary services teams at each site work collaboratively to shortlist and interview

³⁸ 253 individuals dropped out during onboarding processes in addition to the 314 who dropped out of their role.

applicants, *“had positive impact on the way the team works as a whole as we are able to speed up the application process as seen by reducing the waiting time of interview from twelve to four weeks”*.

Being flexible

One of the greatest challenges that OGRs reported was the varied engagement and availability of young volunteers throughout the year, largely due to academic schedules. Revision, coursework and exam periods resulted in reduced engagement with applications, training and active volunteering. OGRs tried to show flexibility around this, for example offering to pause their volunteering temporarily and return after exams. University College London Hospitals Charity reported that they offered *“flexible volunteering or fixed time periods that avoid exam seasons and an open line of communication with volunteers”* to try to reduce volunteers dropping out completely during these times. School holidays also had an impact on volunteer engagement but there was no consensus as to whether this was positive or negative. Some OGRs saw a reduction in active volunteers during holidays, while others, such as Robert Jones and Agnes Hunt Orthopaedic Hospital Charity, found that *“younger volunteers are able to commit more time during school holidays”*.

Young people mainly having availability to volunteer in the evenings and at weekends as opposed to during the daytime posed a challenge for some OGRs. However, a number reported that they had created or adapted roles to run outside of typical office hours. Offers of evening and weekend shifts, reduced shift lengths during the day, summer programmes and one-off or time-bound opportunities all appeared to fit better with young people’s academic schedule and therefore helped to maintain their engagement. Some OGRs commented that this had actually been of benefit to their organisation, as it meant that there was increased coverage of volunteers compared to previously. King’s College Hospital Charity commented that *“these students are able to volunteer at some of the more difficult time slots to fill, with the result being a steady supply of keen and able volunteers filling in King’s peaks and troughs to help further stabilise our service”*.

In general, OGRs showing flexibility and adapting their approach appeared important to help with retaining volunteers. For some this was a different way of working, but there was acknowledgement that this was necessary when trying to engage with a new volunteer demographic. As Shrewsbury and Telford Hospital NHS Trust Charity reported, *“flexibility is key when working with young people, which makes our jobs slightly more complicated but produces better outcomes”*.

OGR spotlight: Offering flexibility

Royal Marsden Cancer Charity demonstrated different ways that they offered flexibility within their volunteer roles. They provided one-off opportunities which proved to be popular. Additionally, they opened up Saturday shifts after noting that some volunteers had been finding it difficult to attend consistently during the week. Their typical volunteering shifts had previously been four hours long, but they started to offer shorter two-hour shifts to make them more accessible and manageable for young volunteers. As a result of this, they saw an increase in applications from those with additional support needs, such as mental health difficulties and type 1 diabetes.

Alongside in-person volunteering, the OGR also offered some opportunities which could be completed remotely. This included creating ward quizzes for patients and their ‘cards for

wellbeing' project, which was designed so that it could be completed on-site at a specific time or at home at any time. They reported that it had allowed them to overcome challenges that some volunteers have with time constraints and travel and had enabled them to engage individuals as young as 11 who would not normally be able to volunteer due to age restrictions on site.

The OGR felt that this flexibility had led to good levels of retention, stating that this approach has *“been particularly successful in retaining and engaging younger volunteers, specifically between the ages of 16-17. Our volunteers have said that they have particularly enjoyed the varied activities that they are given each shift and the fact that the shifts are flexible and take into consideration their frequently changing schedules”*.

Offering variety

Volunteer feedback suggests that they felt more engaged with their volunteering roles when they were able to try new things and meet different people. One individual reflected *“I liked how there was a variety of different activities you could do which meant there were many opportunities to talk with different patients and staff members”*. Conversely, others discussed a lack of variation in the activities they could take part in or feeling restricted in the support they could provide. For instance, one volunteer suggested *“I expected more variation in the role as I am an active responder but often all we do is tea rounds”*. Others requested opportunities to try different volunteer roles or work in different departments, explaining *“I would enjoy working on other wards... to get a chance to expand my experience with different patients”*. Providing volunteers with varied roles and experiences therefore appears to be an important consideration in maintaining engagement.

Recognition and celebration

A number of OGRs held events to recognise and celebrate the work that their volunteers had done, involving awards, small treats (for example, a cream tea) and hearing from staff and management about the value they were providing. Some hosted these during national volunteers' week, whilst others were standalone events. Dudley Group NHS Foundation Trust Charity identified five volunteers from their VFF project who had gone above and beyond in their role. The OGR reported that these individuals *“were invited to our Charity's Glitter Ball fundraising event as representatives of the project and were recognised for their hard work”*. Although less frequently mentioned, some OGRs also tried to facilitate opportunities for volunteers to build social connections. University College London Hospitals Charity offered some additional one-off craft sessions to enable *“different volunteers to meet who don't normally see each other - this was a good opportunity to be sociable”*.

Working collaboratively with volunteers

Providing opportunities for young volunteers to contribute to the design and delivery of volunteer services was by mentioned by some OGRs as a positive way to engage them. Further, OGRs were able to use young people's knowledge and experience to improve projects.

OGRs discussed co-designing elements of marketing and promotion activities with their volunteers. Shrewsbury and Telford Hospital NHS Trust Charity developed promotional materials and a practical volunteer handbook jointly with their young volunteers, and reported very positive outcomes as *“it*

really feels like a collaborative piece of work coming to fruition". University College London Hospitals Charity invited young volunteers to partake in weekly workshops, planning and designing their promotion videos. The OGR suggested this had been an *"outstanding success"* in sharing volunteer experiences. Additionally, they noted that participating in the workshops limited volunteer attrition whilst other volunteer roles were paused due to a COVID-19 outbreak, suggesting that this collaborative activity had maintained engagement.

Two ORGs involved volunteers in discussions about branding and identity. Moorfields Eye Charity asked their existing volunteers to help them decide on a name and branding for workshops they would be delivering in schools to ensure it was as engaging as possible for young people. Alder Hey Children's Charity asked volunteers to help in choosing a uniform to help create a sense of belonging. Further, the OGR wished to ensure the needs of individuals from target volunteer groups were reflected, noting that *"given the challenges some of the volunteers experience around sensory issues, where colours can be overwhelming and distracting, we wanted to ensure young people were involved. We are committed to ensuring young people are at the heart of our campus facilities and are truly youth-led. We gave the volunteers a choice of three calming colours and the volunteers chose green as their visual identity"*.

Additionally, OGRs requested insights from existing volunteers about the best ways to attract and recruit new volunteers. CW+ Charity successfully completed some recruitment through barber shops following suggestions from young people. Shrewsbury and Telford Hospital NHS Trust Charity gathered information in a more formal way by conducting a short survey to ask their current young volunteers for feedback and ideas for recruiting more people. The young volunteers themselves were also valuable in aiding recruitment in some cases, with Dudley Group NHS Foundation Trust Charity reflecting that *"recruitment is made easier by each participant as they go back to any groups they may attend or speak to friends about their experiences"*.

Some OGRs also worked collaboratively with their volunteers to understand how they could make their experience as positive as possible, actively seeking feedback and suggestions from them. For instance, University College London Hospitals Charity did this on an ongoing basis by asking volunteers to rate their shifts out of five and implemented a system to ensure that *"volunteers that rate the session three or below receive a follow up call to double check if there have been any issues or if they need any additional support to improve their experience"*. Shrewsbury and Telford Hospital NHS Trust Charity reported offering evening training sessions as a direct result of volunteer feedback. Others worked with volunteers to develop existing roles or new types of opportunities to fit with their aspirations and interests. King's College Hospital Charity described creating new roles in Endocrine Admin, Renal Outpatients and Autotonics, as getting feedback from volunteers had allowed them to *"better tailor student experiences to their aspirations"*. Robert Jones and Agnes Hunt Orthopaedic Hospital Charity developed a Volunteer Charter and were keen for their volunteers to have input into this and the volunteer environment in general, therefore one volunteer from their VFF project sat on their Volunteer Charter working group.

Consideration of volunteer needs

The nature of this programme resulted in OGRs working with groups of young people who they may otherwise not have contact with, which created additional and sometimes unexpected considerations. As Manchester University NHS Foundation Trust Charity commented, *"there may be barriers that you*

will come across that you did not consider to be a challenge". King's College Hospital Charity reflected that *"you stand the best chance if you have a full picture of the young people you are working with, this includes a rounded view of their characteristics and their socio-economic backgrounds"*. To this end, OGRs took measures to ensure their volunteers' needs were being met.

Young people living in areas of deprivation could face challenges in paying for travel to their volunteering role or may not have access to technology at home to complete online training. Practical measures were taken by some OGRs to support those who may otherwise face financial exclusion. Four OGRs discussed that they provided financial stipends, vouchers, or the ability to claim back expenses. King's College Hospital Charity reported that, despite support being in place, volunteers continued to be *"vocal about the challenges around the cost of transport"*, due to them needing to spend the money and claim it back, rather than being assisted upfront. Further compounded by recent rises in the cost of living, it is important to consider whether making expenses reimbursable will be sufficient financial support for volunteers from deprived backgrounds. It was also noted that some volunteers may not have access to technology at home, therefore creating difficulties with applications and onboarding. Manchester University NHS Foundation Trust Charity reported that they wanted to make the process accessible for all, and developed a paper application form for those who needed it and created hot desks to allow volunteers to complete e-learning on-site.

Young people with mental health challenges, such as anxiety and depression, may find coming into hospital and/or taking part in a volunteering programme overwhelming. For this reason, they and other young volunteers may require more individualised support. Royal Marsden Cancer Charity gave a good example where one of their young volunteers, who experienced social anxiety, did not feel confident enough to go onto the ward in their intended role straight away. In this case, they provided additional shadowing and one-to-one support and gradually increased their responsibilities and the tasks they did over time. They reported that it *"has been extremely beneficial for the individual and we are planning to implement this for volunteers as a first step before going on wards if they are struggling with their confidence"*. Other OGRs noted that these types of approaches can be time-intensive but can also lead to more successful outcomes.

Alder Hey Children's Charity reported that taking an individualised approach for young people with mental health difficulties had been very valuable and that *"the partnership with their teachers and wider support staff enables us to consider each on a case-by-case basis"*.

OGR spotlight: Supporting volunteers with complex needs

The Alder Hey Children's Charity's Volun'teens project worked with children with long-term mental health conditions. They worked very closely with local specialist education providers across all stages of the project to ensure all young people taking part could comfortably integrate into the role and hospital setting. This collaboration allowed them to get to know the volunteers on an individual basis and to use the teachers' knowledge of their students to identify which young people would be most suited to each volunteer role that they created. The support offered when the young people were starting in their roles included completing orientation sessions where they could see where they were working and meet the wider team, having a teacher/mentor there for the first few sessions to settle them in, and offering daily debriefs with a volunteer mentor to make

sure that they had the time and space to talk about any challenges or difficult situations they encountered during their day.

The OGR felt that working with a small cohort of volunteers and taking a slow and structured approach to recruitment and onboarding allowed them to provide the person-centred, wrap around support that was required. They reported *“our key focus isn’t just on recruiting; it’s about breaking down barriers before volunteers even set foot in the hospital. We have been keen to ensure we get this right, and this has taken up a lot of time in the project set up process”*.

One young person who has benefitted from the Volun’teens programme is Jamie*. Aged 14, he suffers from autism and anxiety and attends an education centre for students who cannot go to their own school for medical reasons. As part of the programme, Jamie was supported to work as a meet-and-greet person for new medical students. Jamie’s Mum, Emma*, reported that the volunteering experience has helped Jamie to be more comfortable around new people. She explained, *“Jamie wouldn’t have ever done anything like this because he wouldn’t have had the access to do so. He would never have approached anyone previously, so the programme is amazing for young people like Jamie. It means everything to me that Jamie has been chosen for this programme, as he struggles with social communication and interaction and it’s helping him so much to break through those barriers. He’s also learning new skills which I honestly never thought he would be able to. I am so thankful the opportunity was there for him to do so”*.

*Names have been changed

In some cases, working with different groups of volunteers appears to have affected longer term changes to policies and procedures in the Trust. OGRs reported reviews and updates being made to safeguarding, expenses, young persons’, and disability policies as a result of learnings from their VFF project. For some, additional steps were taken to address the volunteering team’s gaps in knowledge. Shrewsbury and Telford Hospital NHS Trust Charity, for example, attended Makaton training and a special educational needs awareness course to allow them to better support young people with disabilities.

Ongoing volunteer support

The ongoing support provided by OGRs appeared to have been positively received by volunteers, with the vast majority (95%) rating the ongoing training and support as good or very good.³⁹

A range of methods were employed, including having mentors in place from the volunteering team, identifying staff champions on wards to provide additional

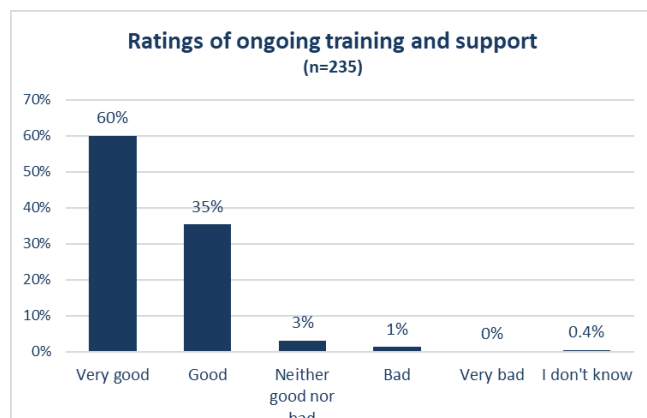


Chart 17 - Volunteer perceptions of ongoing training and support

³⁹ N=141 of 235 (60%) post-survey responses rated the ongoing training and support as very good. 83 of 235 (35%) rated it as good.

support day-to-day, and the creation of documentation and handbooks containing important information for volunteers.

Building positive relationships between the volunteering team and volunteers appeared to be key. Volunteers described *“kind and approachable”* staff being on hand for any questions or concerns they had. Some OGRs undertook one-to-one reviews with volunteers to better understand their needs and to ensure they were getting value from their participation. Dudley Group NHS Foundation Trust Charity was one of the OGRs to do this, reporting that their new administrator had *“met with almost all the young people on the programme and is getting to know them and review their volunteering to date, establish training needs and any additional support required”*. Great Western Hospitals NHS Foundation Trust Charitable Fund implemented measures to encourage volunteers to communicate with them more, including stickers on the back of ID badges with the volunteer team’s contact details and providing reminders about keeping the team informed as needed. Some volunteers who rated the support they received neutrally or negatively discussed that they struggled to get support from the volunteering team as they volunteered outside of office hours, which is an important consideration in offering flexibility around shift times.

More variability was seen in the support received from hospital staff teams. Several volunteers stated that staff members were friendly, helping them to feel a part of the team. However, in some instances, volunteers reported less positive experiences. Some experienced barriers in staff members understanding what volunteers were there to do, with one volunteer suggesting *“I think it would be valuable to offer extra awareness courses to ward staff on how volunteers could help as there were a few discrepancies when it came to different staff expectations”*. Others suggested staff were often busy and therefore difficult to engage with. Dudley Group NHS Foundation Trust Charity noted that clinical staff often had limited time to provide the one-to-one support or guidance needed by some volunteers, and they utilised peer mentors to provide additional support as required.

OGR spotlight: Peer support

Dudley Group NHS Foundation Trust Charity recruited existing student volunteers to act as peer mentors on their project. They provided the mentors with training and development to enable them to give continuous support to other volunteers, which was particularly helpful during times of reduced staffing. It was identified to be an excellent source of support for new volunteers but also a great additional development opportunity for the peer mentors.

They also reported that volunteers who had been with them on the VFF project for some time had been involved with interviewing new volunteer applicants. The benefits of this had been twofold: it gave existing volunteers experience in interview processes, but also positively impacted the applicants as they *“found that new candidates feel more at ease when utilising experienced younger volunteers in the process”*.

Indeed, OGRs frequently mentioned peer-to-peer mentoring as a positive source of support, and volunteers suggested that it helped them to feel that they were regularly being checked-in with. Some OGRs implemented buddy systems, including Great Western Hospitals NHS Foundation Trust Charitable Fund who reported that their *“younger volunteers much prefer working in pairs or small groups and are much more likely to continue volunteering if they feel supported and confident in their*

role”. Setting up opportunities to shadow existing volunteers appeared to have benefits for both staff and volunteers: OGRs noted that it could help to reduce the amount of time staff needed to spend settling volunteers into their role, while volunteers felt that it helped them to build a better understanding of their responsibilities. One respondent, for instance, reflected that “volunteers with more experience never fail to support newer volunteers and teach them valuable skills”.

8. Conclusions and recommendations

Monitoring the VFF programme has resulted in a wealth of insights and evidence of value for the participating organisations. However, there have been a number of challenges in relation to data collection, and therefore this needs to be considered in terms of the use of these findings.

All OGRs who participated in the VFF programme hope to continue their projects either in full or in part. There are emerging signs that the programme has prompted longer term change, including development of volunteering strategies and plans to make working with young volunteers part of business-as-usual. **There are further strategic considerations that could benefit the wider sector.**

- Many of the OGRs worked with internal and external partners to build and strengthen their volunteering initiatives, taking on expert advice to develop and deliver strategies. To maximise the impact that volunteering can make on the sector, organisations should consider establishing a joint volunteer strategy, produced with partners and respective NHS Trust representatives, and reviewed regularly by the Trust's board. This is likely to lead to better supported, integrated and funded volunteer services.

Evidence indicates that the VFF programme has been successful in its aim of supporting young people who experience barriers to undertake volunteering opportunities. Projects reached 2,296 new or existing volunteers under the age of 26, including a high proportion of individuals from racially minoritised communities and those who live in areas of high deprivation. However, **more can be done to ensure individuals from target volunteering groups are reached.**

- Working with external organisations who support individuals within target volunteer groups can provide an excellent means to attract applications. Several of the OGRs who participated in the VFF programme expressed the value of working with education providers, local community organisations and charities as a means of engaging young people who may experience barriers to volunteering.
- Processes such as online application forms, DBS and hospital checks, and requests for multiple references, can be barriers for young volunteers from target groups. Application and induction processes should be reviewed to ensure they are appropriate, accessible and proportionate for volunteers, as well as considerate of organisational requirements.
- Flexibility is key. Often young volunteers will have educational commitments and schedules that will impact upon their availability. To ensure volunteering is viable for the young person, efforts should be made to provide both training sessions and volunteering shifts during alternative times and days. Additionally, individuals from target groups should be provided with the flexibility to explore different volunteering roles to ensure they are comfortable with their responsibilities and environment.
- Collaboration with existing volunteers was reported to have been beneficial in maintaining engagement, as well as finding ways to attract and recruit new volunteers. Co-design with individuals from target volunteer groups should be considered to ensure they have a voice in making sure that roles, and the supporting infrastructure, are built around their needs.
- Working with young people within target volunteering groups requires tailored training, support and communication. Time and resource should be invested in order to achieve successful outcomes for both the individual and the organisation.

Participating in the programme has also delivered several benefits to the OGRs. Gaining over 47,000 hours of volunteering time through their projects, large numbers of service users and staff have been supported by VFF volunteers.⁴⁰ Additionally, as a result of the integration of volunteers within the Trust, OGRs experienced a raised profile of volunteering in their organisation, increased requests for volunteering support and strengthened internal collaboration. If designed effectively, volunteer roles can have multiple benefits for staff members and the organisation.

- According to the 2021/22 State of Care report, only 43% of NHS staff said they could meet all the conflicting demands on their time at work.⁴¹ OGRs and volunteers reflected on the positive impact their support had for staff members, with feelings that their roles reduced pressures on staff time. Further, previous Helpforce research suggests that volunteering can reduce staff members' feelings of stress.⁴² Volunteering initiatives that are designed to support essential, non-clinical activities should be considered to support NHS staff and improve wellbeing.
- When reflecting on their experience, some young people discussed challenges with a lack of understanding from staff members around volunteer roles and responsibilities. Conversely, OGRs discussed positive outcomes of working with Trust representatives to create and integrate volunteering roles within their departments, building opportunities that both met volunteer aspirations as well as staff and patient needs. Therefore, working with staff to design roles collaboratively should be considered to ensure maximum benefits for all parties. However, this has to be balanced with the aforementioned time pressures and conflicting demands which staff members may face.
- NHS digital reported there were over 133,000 full-time equivalent vacancies across the health service in September 2022. This equates to a 9.7% vacancy rate - the highest since June 2018.⁴³ 80% of volunteers suggested they were more interested in pursuing a health care career path following their volunteering experience.⁴⁴ Additionally, some of the individuals who participated in the VFF programme progressed on to further education and careers in Health and Care, clearly illustrating a potential for young volunteers to become part of the NHS' future workforce. In light of this, it is recommended that organisations providing volunteering opportunities for young people establish pathways for individuals to gain experience and skills that allow them to explore their career aspirations. Further, organisations should advertise these pathways as part of their application and induction procedures to help attract volunteers who have an interest in the field.

⁴⁰ Figure for volunteering hours is an estimate. Twelve OGRs provided volunteering hours data. Helpforce has not been able to validate this data.

⁴¹ [Workforce - State of Care 2021/22 report](#) – Care Quality Commission, October 2022.

⁴² 81% of staff members surveyed agreed that volunteer support helped them to feel less stressed – [Back to Health Year 1 Impact Report 2022/23](#) – Helpforce, May 2023.

⁴³ [NHS Vacancy Statistics England April 2015 to September 2022 Experimental Statistics](#) – NHS Digital, December 2022

⁴⁴ N=189 of 235 post-survey respondents agreed or strongly agreed that their volunteering has increased their interest in a health and care job in the future.

9. Appendices

Appendix A - Overview of onward grant recipients and their projects

Ref	Charity name	Geographical area	Project Title	Project summary (50 words)	Type of volunteering	Target volunteer groups
1	Alder Hey Children's Charity	Liverpool	The REYVAA project (Recruiting Young Volunteers to support the Alder Hey Academy)	Through this new project, over 1000 clinical students on placement with us each year will have an opportunity to listen to young volunteers and their families about a range of health condition/s and gain insight into 'what it's like to be me'. Project activities will include 3 volunteer roles; filming a short summary video explaining about their condition and what's important to them with input from family members / carers; opportunities to support the medical trainee programme such as student meet and greets, and tours, or involvement in skills training; and involvement in small group workshops, or in the charity shop.	Micro Formal Flexible	Marginalised and underserved ethnic groups. Individuals with any long-standing illness, disability or infirmity. Individuals who live in deprived areas.
2	Birmingham Community Healthcare NHS Foundation Trust General Charity	West Midlands	Young digital ambassadors	This project provides an enhanced volunteering programme for young people from disadvantaged backgrounds to learn the necessary skills to become a digital ambassador as well as gain access to the wider opportunities within the health and social care setting. Young digital ambassadors will have a positive impact on health outcomes for older adults in their community.	Digital	Young people (aged 16 to 18). Marginalised and underserved ethnic groups. Individuals who live in deprived areas.

3	CW+ Charity (Chelsea and Westminster)	London	Recruiting, Training and Supporting young volunteers with lived experience of mental health conditions as part of Best for You.	Best For You is a partnership programme between three North West London Trusts to redefine how young people access mental health support. The project is co-designed with existing beneficiaries, which include ex- CAMHS users on the board providing insight and guidance on supporting young people who experience barriers to engage in volunteering. The peer-to-peer volunteering of young people who have recovered from similar experiences will help to bridge the gap between clinical staff and patients; provide young people with guidance through the mental health pathway digital platform; support lived experience volunteers on their recovery journey ensuring they gain new life skills, build confidence and self-esteem and access to new opportunities to gain further education and employment opportunities.	Formal Flexible Digital	Young people (aged 16 to 25). Individuals with any long-standing illness, disability or infirmity.
4	Dudley Group NHS Foundation Trust Charity	West Midlands	The Dudley Group NHS Foundation Trust Young People Volunteering Programme	Building on our existing student volunteering programme, this project will recruit and train 10 of our existing student volunteers as mentors and best practice assessors to support 150 new young volunteers who are currently experiencing barriers to volunteering in Dudley to participate in flexible and digital volunteer roles at the Trust. The project will host a range of volunteer roles, including Ward Volunteers, Admin and Clerical volunteers, Way Finder Volunteers, Emergency Department Volunteers, Patient Experience Survey Volunteers, Digital Volunteer Befrienders, Remote Check-in and Chat Volunteers.	Flexible Digital	Young people (aged 16 to 25). Marginalised and underserved ethnic groups. Individuals who live in deprived areas.
5	East and North Hertfordshire Hospitals Charity	Hertfordshire	What Matters to You Youth Programme	To proactively recruit a pool of young volunteers from areas with socio-economic disadvantage to provide them with opportunities to work in the Lister hospital, Stevenage in a variety of volunteer-led services, including helping with digital connections between families, end of life companionship, activities with dementia patients, and helping with administrative tasks.	Informal Flexible	Young people (aged 16 to 25). Individuals who live in deprived areas. Individuals with any long-standing illness, disability or infirmity. Those experiencing isolation.

6	Great Western Hospitals NHS Foundation Trust Charitable Fund - Brighter Futures	Wiltshire	Broadening the reach of the Youth Volunteering Programme at Great Western Hospitals NHS Foundation Trust	To develop new volunteering opportunities for 16-18 years to overcome barriers that prevents them accessing volunteering roles. Test micro and flexible volunteering models, better support young people through mentoring, involve young people in the co-design of new volunteer roles which will benefit patients and staff at Great Western Hospitals NHS Foundation Trust.	Micro Flexible	Young people (aged 16 to 25). Individuals with any long-standing illness, disability or infirmity.
7	King's College Hospital Charity	London	Breaking barriers – youth volunteering at King's College Hospital NHS Foundation Trust.	Breaking Barriers will deliver a programme to recruit new volunteers through outreach with local schools and colleges to attract young people who do not typically volunteer, provide tailored support and week-long work experience placements and opportunities within the hospital in London. This will involve digital inclusion activities to support patients to access a new online system installed in the hospital, befriending patients without visitors, delivering social activities and offering mealtime support.	Formal Micro Flexible Digital	Young people (aged 16 to 25). Individuals with any long-standing illness, disability or infirmity.
8	Manchester University NHS Foundation Trust Charity (MFT Charity)	Greater Manchester	Volunteer Futures programme	The Volunteer Futures Programme will deliver this project to grow the organisation's current youth volunteering work and diversify roles, specifically engaging with harder to reach communities. Project activities will focus on the following three roles: Welcoming Volunteer, Patient Experience Virtual Visitor Volunteer and Adult Ward Volunteer. The project will involve mainly informal, flexible and digital volunteering.	Informal Flexible Digital	Young people (aged 16 to 25). Marginalised and underserved ethnic groups. Individuals who live in deprived areas. Individuals with any long-standing illness, disability or infirmity.

9	Moorfields Eye Charity	London	Utilising digital innovation to reduce barriers for youth volunteering	This Project will include the co-creation with young people of digital workshops for 11 – 18-year-olds, development, testing and implementation. The content and format of the workshops will be decided with young people and is likely to include information to understand the anatomy of the eye, video information and advice from nurses, technicians and other health professionals. The grant will also support two existing volunteering groups, a Young People’s Advisory Group and Young People’s Forum which act as consultation bodies and ensure that young people’s views are represented in service development and project activities. A third aspect of the work will involve young people sharing digital skills with older patients at Moorfields.	Micro Flexible Digital	Young people (aged 16 to 25). Marginalised and underserved ethnic groups. Individuals who live in deprived areas. Individuals with any long-standing illness, disability or infirmity.
10	Robert Jones and Agnes Hunt Orthopaedic Hospital Charity	Shropshire	Youth Volunteer Programme	This Youth Volunteer Programme will deliver first-hand experience in a healthcare setting with particular interest in supporting people with specific needs. This is an extension to existing volunteer services that will increase opportunity in Shropshire. Project activities will include digital support, gardening, coffee shop assistance, Covid-19 Screening desk support, Vaccination centre assistance, ward friends and retail assistance.	Formal	Young people (aged 16 to 25). Individuals who live in deprived areas. Individuals with any long-standing illness, disability or infirmity.
11	Royal Marsden Cancer Charity	London	Digital volunteering	Digital volunteers will help patients access important information about their care, perform a befriending role for isolated patients, support other volunteers with e-learning requirements and deliver projects aimed at improving the use of digital technology throughout the Trust. In doing so, these young people will develop their skills, confidence and employability.	Formal Flexible	Young people (aged 16 to 25). Marginalised and underserved ethnic groups. Individuals who live in deprived areas. Individuals with any long-standing illness, disability or infirmity.

12	Sandwell and West Birmingham Hospitals NHS Trust Charities (Your Trust Charity)	West Midlands	Youth Volunteering Champions (YVC)	The Youth Volunteering Champions (YVC) project will dovetail with SCORE, an existing youth volunteering and sports leadership programme in collaboration with Aston Villa Football Club Foundation. Project activities will include volunteer support for beneficiaries in health and social care for 16 hours per week within existing volunteering projects run by the Charity and its delivery partner organisation, including formal and digital volunteering within the NHS.	Formal Digital	Young people (aged 16 to 25). Marginalised and underserved ethnic groups. Individuals who live in deprived areas.
13	Shrewsbury and Telford Hospital NHS Trust Charity (SaTH)	Shropshire	Volunteering for your future	Volunteering for your future will deliver an extension of a current young volunteer scheme. Project activities will include virtual visiting volunteering, visiting buddy volunteers, response volunteers on wards or in departments, a gardening club for maintenance outside improving the external environment and provide opportunities to attend training and career events.	Formal Informal Flexible Digital	Young people (aged 16 to 25). Marginalised and underserved ethnic groups. Individuals who live in deprived areas. Individuals with any long-standing illness, disability or infirmity.
14	University College London Hospitals Charity (UCLH Charity)	London	UCLH Youth Volunteering Project	This project will fund a youth volunteering coordinator to provide flexible volunteering opportunities in a hospital setting that are designed around building skills and bringing people together. This will include after school opportunities, a weekend volunteering club, summer programme and intensive employability programme.	Formal Micro Flexible	Young people (aged 16 to 25).

Appendix B - New volunteers recruited - by OGR and age group

OGR	Total number of new volunteers recruited	Age group			
		11 to 15	16 to 18	19 to 25	Age unknown
Alder Hey Children's Charity	70	11	40	1	18
Birmingham Community Healthcare NHS Foundation Trust General Charity	158	25	123	7	3
CW+ Charity (Chelsea and Westminster)	18	0	0	10	8
Dudley Group NHS Foundation Trust Charity	210	0	206	4	0
East and North Hertfordshire Hospitals Charity	120	0	120	0	0
Great Western Hospitals NHS Foundation Trust Charitable Fund	223	0	179	44	0
King's College Hospital Charity	187	0	146	40	1
Manchester University NHS Foundation Trust Charity (MFT Charity)	81	0	80	1	0
Moorfields Eye Charity	83	0	83	0	0
Robert Jones and Agnes Hunt Orthopaedic Hospital Charity	23	0	17	5	1
Royal Marsden Cancer Charity	97	7	78	12	0
Sandwell and West Birmingham Hospitals NHS Trust Charities	174	0	94	51	29
Shrewsbury and Telford Hospital NHS Trust Charity (SaTH)	440	124	272	44	0
University College London Hospitals Charity (UCLH)	125	0	124	1	0
Totals	2,009	167	1,562	220	60

Appendix C - Continuing volunteers - by OGR and age group

OGR	Total number of continuing volunteers recruited	Age group			
		11 to 15	16 to 18	19 to 25	Age unknown
Alder Hey Children's Charity	0	0	0	0	0
Birmingham Community Healthcare NHS Foundation Trust General Charity	0	0	0	0	0
CW+ Charity (Chelsea and Westminster)	7	0	0	6	1
Dudley Group NHS Foundation Trust Charity	16	0	16	0	0
East and North Hertfordshire Hospitals Charity	0	0	0	0	0
Great Western Hospitals NHS Foundation Trust Charitable Fund	70	0	54	16	0
King's College Hospital Charity	3	0	3	0	0
Manchester University NHS Foundation Trust Charity (MFT Charity)	10	0	6	2	2
Moorfields Eye Charity	0	0	0	0	0
Robert Jones and Agnes Hunt Orthopaedic Hospital Charity	10	1	9	0	0
Royal Marsden Cancer Charity	22	0	9	0	13
Sandwell and West Birmingham Hospitals NHS Trust Charities	31	0	18	13	0
Shrewsbury and Telford Hospital NHS Trust Charity (SaTH)	102	0	79	23	0
University College London Hospitals Charity (UCLH)	16	0	16	0	0
Totals	287	1	210	60	14

Appendix D - Data submissions by OGR

OGR	Number of monthly monitoring forms submitted	Number of volunteer pre-surveys completed	Number of volunteer post-surveys completed
Alder Hey Children's Charity	13	0	0
Birmingham Community Healthcare NHS Foundation Trust General Charity	13	63	14
CW+ Charity (Chelsea and Westminster)	13	7	2
Dudley Group NHS Foundation Trust Charity	13	10	25
East and North Hertfordshire Hospitals Charity	13	32	0
Great Western Hospitals NHS Foundation Trust Charitable Fund	13	14	17
King's College Hospital Charity	13	68	43
Manchester University NHS Foundation Trust Charity (MFT Charity)	13	6	7
Moorfields Eye Charity	13	1	1
Robert Jones and Agnes Hunt Orthopaedic Hospital Charity	13	2	3
Royal Marsden Cancer Charity	13	24	12
Sandwell and West Birmingham Hospitals NHS Trust Charities	13	191	31
Shrewsbury and Telford Hospital NHS Trust Charity (SaTH)	13	54	19
University College London Hospitals Charity (UCLH)	13	67	61
Totals	182	539	235

Please note: Volunteer surveys were not submitted by Alder Hey Children's Charity due to concerns regarding sensitivities for their volunteers.

Appendix E - Volunteer demographics - pre- and post-survey comparison

Gender	Number of responses		% of responses	
	Pre-survey	Post-survey	Pre-survey	Post-survey
Male	97	40	18%	17%
Female	433	193	80%	82%
Non-binary	4	0	1%	0%
Prefer not to say	4	2	1%	1%
Other	1	0	0%	0%

Ethnicity (grouped)	Number of responses		% of responses	
	Pre-survey	Post-survey	Pre-survey	Post-survey
Asian or Asian British	238	62	44%	26%
Black, Black British, Caribbean or African	85	27	16%	11%
Mixed or multiple ethnic groups	46	22	9%	9%
White	131	97	24%	41%
Other ethnic group	25	20	5%	9%
Prefer not to say	14	7	3%	3%

English indices of multiple deprivation – deciles Based on first half of postcode	Number of responses		% of responses	
	Pre-survey	Post-survey	Pre-survey	Post-survey
1 – most deprived	282	81	52%	34%
2	62	41	12%	17%
3	2	0	0%	0%
4	76	40	14%	17%
5	29	27	5%	11%
6	47	28	9%	12%
7	10	2	2%	1%
8	12	12	2%	5%
9	5	1	1%	0%
10 – least deprived	9	1	2%	0%
Outside of England	2	1	0%	0%
Prefer not to say	3	1	1%	0%

Long-standing illness, disability or infirmity	Number of responses		% of responses	
	Pre-survey	Post-survey	Pre-survey	Post-survey
Yes	37	16	7%	7%
No	483	209	90%	89%
Prefer not to say	19	10	4%	4%

Volunteer type	Number of responses		% of responses	
	Pre-survey	Post-survey	Pre-survey	Post-survey
New	482	225	89%	96%
Continuing	51	7	9%	3%
Other	6	3	1%	1%