

# Active Response Volunteers

## Training Manual



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## Introduction

Welcome to the new Active Response Volunteer role. This role has been created on the back of feedback from volunteer and clinicians. That experience has taught us that in order to get the volunteers to be in the right place at the right time to support patients and services, volunteers need to have the ability to be flexible. Flexible in their ability to get to where they are most needed.

So we wanted to create a programme that enables the volunteers to support the areas and patients in the hospitals who most need their help and ensure that volunteers are at the cut and thrust of the hospital making an impact with the help that they give.

In addition we wanted to ensure that volunteers enjoyed a meaningful and exciting role that maximised their experience of the hospital with a complementary training package.

This manual will help to ensure that you have all the training, support and knowledge to successfully perform your role.

## Who are Active Responders?

### Task Description

The core activities of your role will include the following:

- Picking up TTO's
- Support a patient at discharge
- Supporting Emergency Department during times of high pressure
- Volunteers helping during End of Life Care
- Volunteers can be called to attend patients who have delirium or dementia
- Helping and assisting at Mealtimes
- Being with isolated or anxious patients
- Providing activities on ward

This manual will help you to navigate your way around the different activities and support you to have all the necessary information you will need to be able to assist on request.

The manual will complement your training and placement induction and will help you if you have any queries.

Please note that the team are always here to support should you need any help and in addition your team leader will provide you with any necessary information in relation to your role.

**We ask that volunteers who apply for this role are 18 and above.**

## Training

Volunteers attending this role will build up their modular training and placement sessions according to which areas of the role they would like to participate in. For example: If you are not comfortable supporting ED then you will not take that modular but remain focussed on the other areas that you do want to do.

It is a bit like a pick and mix and down below will describe what each areas that we have outlined above might look like and the training that is involved.

**All** volunteers however will be trained in supporting medication pick up and supporting lonely and isolated patients including those with delirium as the core activities of the role

## Programme Introduction

### 3 hours classroom training

You will need to complete a 3 hour Active Response Training on top of your mandatory training. This is the basic module that all volunteers will be expected to do and will include the basic requirements of the role which include:

#### Training Session includes:

- About the programme
- Supporting anxious and isolated patients
- Assisting when patients might have delirium
- Helping patients at Discharge
- Understanding Delirium and dementia
- Helping with mealtime assistance
- Picking up TTO
- Using the bleep
- Team Leaders
- Evaluation
- FAQ

Please note that all volunteers will have to have completed their initial volunteer induction programme and 4 weeks meeting and greeting before they can join module 1.

## Using a bleep or mobile phone

Please pick up your bleep or mobile phone from the volunteers office on the day of volunteering.

When you pick up your bleep or mobile phone you will be expected to sign a form on taking out the bleep or mobile phone and on return you will sign it back in to the office.

**Please check to make sure the batteries are active and request new batteries if they are not from a member of the volunteer team or team leader.**

If you are using a bleep when you are being called your bleep will flash when you are receiving a call. The extension that is calling you will show up at the top of your bleep and you will need to find a phone to respond back as **the bleep has no call out or call back functions.**

You will see the extension number you need to call and just call back the 5 digit number indicated as below.

**This the extension number you need to ring  
See below instructions on how to respond**



**If you are dialling to a bleeper you will need to follow the instructions below:**

**Find the nearest phone ...**

**The Royal London and Barts Hospital:**

- Dial 81
- dial the bleep number then the extension number you are calling from

**Whipps Cross Hospital:**

- Dial 71
- Dial the bleep no and then the extension number you are calling from

**Newham Hospital:**

- Dial 66
- Dial the bleep number and then the extension number you are calling from

**Frequently Asked Questions:**

**Q** Where do I pick up my bleeper or mobile phone from?

**A** You will pick up you bleep or mobile phone from the volunteers office

**Q** What do I do if I get a bleep?

**A** Find the nearest phone and dial the extension number indicated on your bleeper



## Picking up TTO

What is a TTO or TTA? When a patient leaves to go home they might have some prescribed medications. These need to be picked up from the pharmacy and taken to the patient before they are able to be discharged.

Sometimes patients can be waiting for up to 4 hours as there is no one available to pick up these medications.

As part of your role you will be messaged/called or bleeped to attend the pharmacy to pick up the medication and take to the relevant ward.

On arrival at Pharmacy you will tell them you are here to pick up medication and they will give you the medication which you will sign for. You will then take it to the relevant ward and hand it over to ward Manager who will sign that you have taken it to them.

You will then return the signed paper to the Pharmacy and inform your team leader that you have completed your task.

**NB remember to keep a note of your task so that you can add them to Better Impact and inform your team leader so that they add it to the dash board**

## Supporting a patient who is anxious or needs help

One of the most important elements of a volunteers' role is to support patients who are very anxious and/or bored. Many of our patients do not have any visitors and for those that are in hospital for a long time, it can be very isolating and lonely.

If you do get called to a patient as part of your **Active Response** role, please attend the ward and introduce yourself to the Nurse in Charge or requestor. This is your opportunity to find out more about the patient who you are coming to see and to ask any questions you might have. Below are some of the suggested questions:

- Is there anything you can suggest the patient much like to do such as an activity?
- Am I able to give them a drink?
- Can I walk them anywhere?
- Anything you can suggest the patient might enjoy?

Some of the suggested activities that you can do with a patient include the following:

- Brush hair – ask the patient for their brush (there are toiletries with combs available in the volunteers office)
- Play games (there are activity drawers in some wards)
- Paint nails (there are nail varnishes available in the volunteer office – please note that the bottles of nail varnish are small and are **one** use only and must not be shared amongst patients. This is for infection control purposes. You must not share

brushes or combs or any toiletry products between patients and anything that you use must stay with the patient

- Read a book or a newspaper
- Hold their hand
- Talk to them about anything but particularly about their history
- If you have Namaste training you could give them a hand massage
- If you have completed your Moving and Assisting you could ask them if they would like to go to the day room (Please note always seek permission first from the nursing staff)
- Newspapers are always very welcomed and you can find the Metro or the Standard in most of our hospital. The RLH however does not have the Metro so if you are coming from the station, it is a good idea to bring a few with you

## Supporting Discharges

One of the most difficult times of a hospital stay can be the discharge process. This is for a number of reasons including:

- Discharge time delay due to transport
- Discharge time delay due to TTO's
- Patients are anxious or worried about how they will readjust and cope at home

There are many things you can do to help the discharge process including:

- Collecting the TTO
- Helping a patients to pack and collect personal belongings
- Having a reassuring chat with a cup of tea whilst they are waiting for transport
- Complete a **FFT (Friends and Family Test evaluation card)**
- Get a newspaper

## Mealtimes

### 2 hour Masterclass ward-based

You will have already received training on the importance and relevance of mealtimes and nutrition and hydration for patients recovery.

It is important to support patients as much as we can during mealtimes and wards will be contacting the Active Response Volunteers team to provide help during mealtimes.

However it is important that you have the knowledge and support to do this effectively and as part of your training package you will complete a Masterclass placement induction with a member of staff in situ on the ward.



**Frequently Asked Questions:**

**Q** - What do I do when I am waiting for a call

**A** - Meet and Greet until you receive your first bleep. Alternatively if you have received ward

As part of your modular 1 training package you will receive a comprehensive placement induction which will help you adapt easily to the new role. Below you will see what you will cover and this will support your learning achievements on the day.

# Placement Induction Checklist

## Active Response Volunteer (Mealtimes)

**Volunteer Name:**  
**Inducted by:**

**Contact Person on Ward**  
Name  
Job Title  
Contact Number

Date of Induction:  
Site:  
Ward:  
Shift pattern:  
Start date:

		TICK
<b>Infection Control</b>	Ensure demonstration of <b>hand washing</b> or use of <b>alcohol gel</b> and <b>bare below elbow</b> policy	
<b>Coats, bags, staff room</b>	Locate <b>staff room</b> for coat explain disclaimer on personal belongings (no valuables)	
<b>Volunteer Attendance</b>	Volunteer <b>sign in folder</b> is usually by FFT box on front reception (Red folder) Please use <b>online time clock</b> (contact vol team for login)	
<b>Feedback Cards</b>	Show where the <b>FFT cards</b> and box is kept Volunteers to encourage filling in cards before discharge	
<b>Contact Person on Ward</b>	Ensure they know who is the <b>link ward contact person</b> for volunteers (Ward Manager, Nurse in Charge, Clerk)	
<b>Isolation Rooms</b>	Explain about <b>PPE</b> location (apron, gloves, bare below elbows) Isolation beds – read sign on doors before entering Unsure? Ask staff!	
<b>Mealtimes</b>	<ul style="list-style-type: none"> <li>• Introduce to ward hostess</li> <li>• Pink apron</li> <li>• Red trays</li> <li>• how to support a patient to access their food if available or who to ask</li> <li>• Show boards with instructions on behind bed e.g. <b>NBM</b></li> <li>• <b>Nutrition and hydration board</b></li> <li>• Prepare patients for meal times</li> <li>• Encouraging patients to eat</li> <li>• Taking tops of food packaging</li> <li>• Who to ask if the patients wants more or doesn't get the right food</li> <li>• Showing the patients the menu</li> <li>• Ensuring you dispose of old food pots including yoghurts that have been out for too long</li> <li>• Pantry and teas and coffees</li> </ul>	
<b>Drinks and Refreshments</b>	<ul style="list-style-type: none"> <li>• Volunteers to understand where the tea and coffee facilities are kept</li> <li>• checking <b>patient boards</b> to ensure there are no drinking or eating restrictions before offering</li> </ul>	
<b>TTA</b>	<ul style="list-style-type: none"> <li>• Can you help to pick up medications for discharge</li> </ul>	

	<ul style="list-style-type: none"> <li>Tell the nurses about what you can do</li> </ul>	
<b>Day Rooms and Activities</b>	<ul style="list-style-type: none"> <li>To know where there are activities books, magazines, and board games are in <b>day rooms</b></li> <li><b>How to</b></li> <li>Where to access patient entertainment cards if requested</li> </ul>	
<b>Newspapers</b>	Know where the papers are and should take up <b>newspapers</b> to the wards, hand out or leave at reception.	
<b>Discharge</b>	Look at where the FFT cards are located. Show where the green bags are kept for personal belongings. Identify ward staff for TTO's and assist as necessary to ensure patient is kept hydrated, and reassured whilst waiting to be discharged	
<b>Using your Better Impact account to log in</b>	Volunteer to be shown how to log in and record hours and complete questions.	
<b>Complaints</b>	Please refer all patient complaints to Ward Manager Show volunteers where <b>PALS</b> details are on ward. If you have a complaint please inform your site volunteer coordinator.	
<b>Volunteer Completed</b> Signed: Date:		

## Additional Training Packages

The following training packages are **optional** and **not mandatory**

### Attending ED during high pressures

#### Training 2 hours on the ward 2 shadowing sessions

##### Role:

- To facilitate the hydration and nutrition trolley service ensuring that patients and their carers get access to hot drinks and sandwiches
- To support the flow of patients through the reception area
- To help tidy cubicles ready for next patients
- To sit with patients who are lonely isolated and talk to them
- To sit with patients who might have significant anxiety and are distracting staff
- To offer information about delirium to visitors/carers attending with the patient
- To take away the linen
- To give out blankets if patients are cold
- To provide patients with newspapers and other activities as distraction
- To attend pathology with samples(?)

The emergency department is as really busy area with over 600 patients coming in to the Emergency Department at each of 3 main hospitals (WXH, SBH, NUH)

##### It is broken down in to 4 core areas including:

1. Majors – for patients who have been brought by ambulance and are non-ambulatory
2. Resus – Patients who's life is threatened and they need stabilising
3. Urgent Care Centres – for urgent out of hours care e.g. infections
4. Minors – easily treatable minor injuries or ailments

If called to attend the Emergency Department you should attend the nursing desk for the Senior Nurse in charge and introduce yourself.

If they have asked for help with the Hydration and Nutrition Trolley you must take a list of the cubicles number you can assist and get instruction about who is **NBM** (Nill by Mouth). You will be provided with a small notebook so that you can jot down the requests

Instructions will be given to you about how to access the refreshments on each site during your placement session but if you have any problems, please speak to you link contact on the ward or your team leader who will be able to assist.

You might need to help tidy up cubicles. That means Clinell wiping down a bed and putting a sheet over the trolley bed. **Please note that you should not be expected to clear up any bodily fluids.** You will be shown during your ward training where the linen cupboard and Clinell wipes are kept.

Patients might need someone to sit with them because they are anxious distressed and disorientated. During your placement you will be shown the specialist room for distressed patients and some of the activities that might be available.

**Newspapers** are a great distraction and can really help the staff and patients in ED. The patients have something to read when they are waiting and this can take away pressure from staff.



Remember to pick up papers from the station – Metro. The Evening Standard is delivered and available from 4pm from the reception areas.

### **Evaluation and Monitoring**

On completion of your task please could you complete the evaluation tools given to you by your team leader or volunteer staff.

**Go to page 19 for more information.**



# Placement Induction Checklist

## Patient Champion

### Emergency Department

Volunteer Name:

Inducted by:

Date of Induction: ED  
Ward/Site: RLH/WXH/NUH

Shift pattern:

Start date:

	Checklist	Tick
<b>Show around ward</b>	Ensure demonstration of hand washing or use of alcohol gel and bare below wrist policy Volunteers to understand the layout of ED including when patients come in via ambulance. Resus area Who has been checked by medical staff. The bays where volunteers can be of most support	
<b>Show the staff room Volunteer attendance sheet is kept</b>	Locate staff room for coat explain disclaimer on personal belongings Volunteer attendance forms or smart phone use	
<b>Show around the Majors ED department</b>	Volunteer to be clear about the bay structure and where things are in majors. Who they can ask for help and what is the extent of their role including boundaries	
<b>Introduce to members of staff and nurse in charge of bed management</b>	Ensure they know who is the link ward staff for volunteers	
<b>Show examples of isolation wards and reiterate importance of infection control</b>	Explain about PPE location	
<b>Tea and coffee making facilities</b>	Volunteers to understand where the tea and coffee facilities are clear about checking patient boards to ensure there are no drinking or eating restrictions before offering	
<b>ED entrances and GP/nursing triage</b>	Volunteers to be clear about the entrances and how they can help patients	
<b>Evening Standards Metro</b>	All patient Champions going to wards to help take up papers to the wards	
<b>Meal times</b>	Volunteer to check with Nurses who can have sandwiches. Where to get sandwiches and who to give them out to	
<b>Conversation and distraction including activities</b>	How to have a conversation with patients and where to pick up activities	
<b>Linen Cupboard</b>	Locate cupboard and key items	

### End of Life Care

**Please note that this modular is optional and it is up to you decide if it is something you feel you can do. You will receive comprehensive training and support and it is very rewarding to know that you have helped and supported someone at this very important life event.**

At Barts Health we have a commitment to ensure that our patient's End of Life Care is supported with compassion and integrity. End of life or dying completes the cycle of life and should be meaningful with patient wishes upheld as much as reasonably possibly in the individual circumstances.

There are many circumstances where volunteers will be able to support patients and families during an End of Life situation including:

- Sometimes patients without relatives or a social network will die alone. We know that there are many things that as a volunteer you could do to help in this situation
- Families/carers and loved ones can often spend many hours with the patient and volunteers can be of great relief if they can take over just for a short time whilst they grab a coffee or food
- Families might not want to leave but would welcome some refreshments from the canteen
- You can also help loved ones when the patient has passed with the bereavement process and be a great source of comfort

#### How do I help?

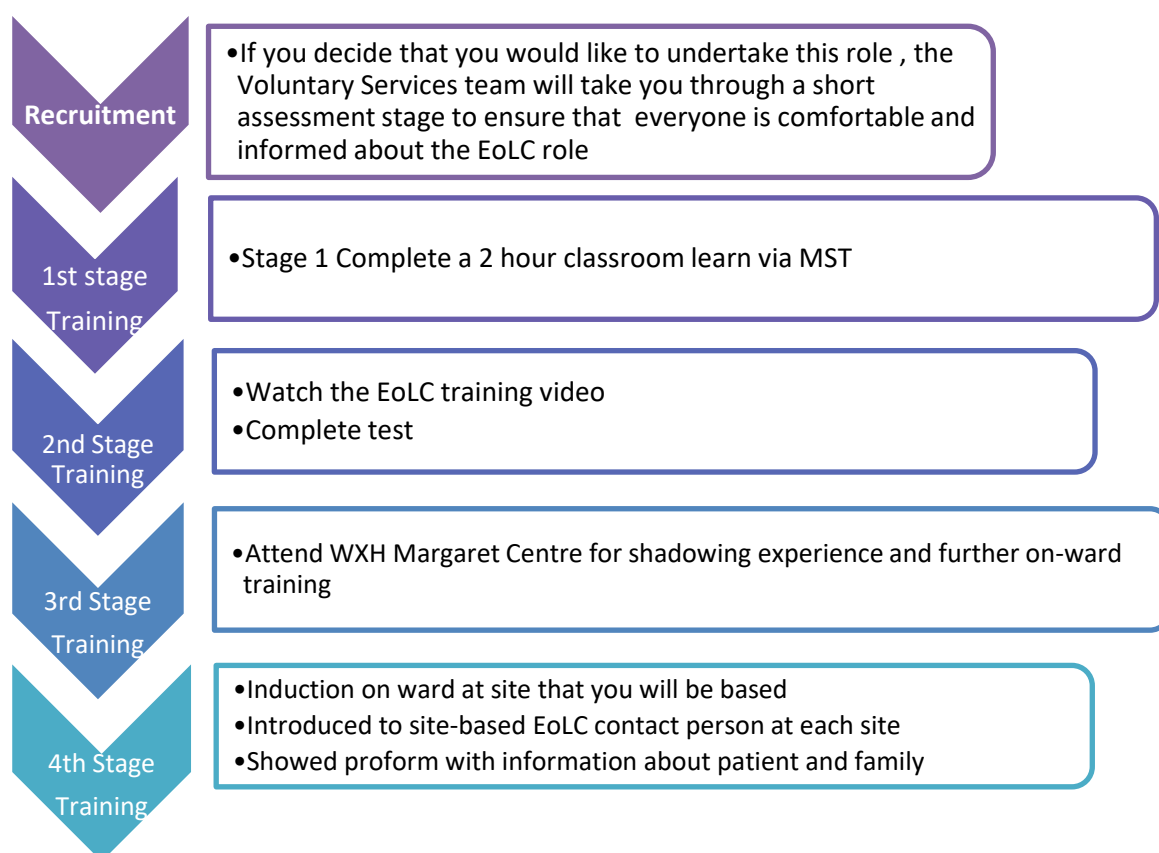
- You will know that you can help with gentle conversation and just sitting holding the hand of the patient
- Gently singing
- Offering chaplain or spiritual support
- Helping them to drink
- Or swabbing their mouth to prevent dry mouth
- Talking to the patients family or friends and asking if you can help in any way
- Listening to their needs
- Showing understanding and compassion appropriate to individual needs
- Maintaining patient confidentiality at all times
- Communicating concerns about the patient, family or carer to the ward nursing team
- Ensuring that families and carers have access to refreshments and are aware of the facilities available to them
- Exercising discretion when working in sensitive situations
- Demonstrating an awareness of the role within End of Life care and ensuring appropriate signposting to other members of the multidisciplinary team
- Working as part of a team and accepting supervision and direction from the ward nursing team, team leader and the Volunteer Manager



A graphic of the swabs used to prevent dry mouth in dying patients

- Participating in regular review meetings, debriefing sessions with other volunteers and the volunteer manager as directed
- Participating in ongoing education activities relevant to the role
- Offering the **Bereavement Bag** after the patient passed away for their personal belongings

## EoLC Recruitment and Training Pathway



## Additional Support for EoLC

- 6 weekly reflective feedback sessions for EoLC volunteers. This is an opportunity to share experiences and feedback any insights that you have that could help us to improve the service
- Direct access to psychological support as required
- Access to a Clinical Nurse Specialist in EoLC if you have any questions or need any further support with the role

# Placement Induction Checklist

Patient Champion

End of Life Care

Volunteer Name:

Inducted by:

Date of Induction: EoLC  
Ward/Site: RLH/WXH/NUH

Shift pattern:  
Start date:

<b>Show around ward</b>	Introduce to ward staff	Tick
<b>Show the staff room Volunteer attendance sheet is kept</b>	Locate staff room for coat explain disclaimer on personal belongings Volunteer attendance forms or smart phone use	
<b>Introduce to members of staff and nurse in charge of End of Life Care</b>	Ensure they know who is the contact ward staff member	
<b>Question sheet/proforma of understanding the patients' needs and requirements</b>	Volunteers should be fully briefed about the patient and family before entering in to ward to support patients	
<b>Tea and coffee making facilities</b>	Volunteers to understand where the tea and coffee facilities are kept	
<b>Show volunteers where they can locate the necessary resources to support the patient and family during End of Life Care</b>	Volunteer to be clear about the use of the bag, mouth swabs and other resources available including getting hold of special request items	
<b>Confidence</b>	Shadow an experienced volunteer or member of staff. Recognising your own reactions to the situation	
<b>Support mechanisms</b>	How to call for help or support	
<b>Reflective feedback opportunities</b>	Dates of sessions for talking and sharing feedback with other volunteers	

## Module 4

### Moving and Assisting

#### **2 hour classroom training**

In this session you will learn how you can get involved and help support patient to mobilise.

Learning objectives:

1. How, when and who you can help?
2. The importance of patient independence
3. Contacts in case of emergency
4. Risk rating and ensuring the appropriate patients you can help
5. Recognising and understanding any risks
6. How to safely operate a wheelchair
7. Communication techniques
8. When to ask for support
9. Helping or taking a patient for either walking or with a wheelchair
10. Understanding boundaries
11. FAQ

## Evaluating and Monitoring

Barts Health Trust is committed to ensuring a good practice volunteer programme which offers a great experience for our volunteers. We want you to have a role which gives you the opportunity to really get involved with your hospital and be at the front line helping patients and visitors.

In addition we want to ensure that you have the appropriate training and develop your learning particularly if you are interested in a career in the health sector.

As part of the improvement programme for Barts Health Volunteers, we will ask you for your feedback and also ask that you complete monitoring forms when you have completed actions and tasks as part of your Active Response role.

The forms you will be asked to complete include the following:

- Volunteer feedback form
- TTO
- Better Impact
- Case studies

These documents will be shared with you by members of the voluntary services team or volunteer team leaders.

All feedback is confidential and anonymous apart from your submission on Better Impact and of course, the case studies.

Your feedback is important to us and will be used to make improvements to the Barts Health Volunteers programme

## Conclusion

We think that this a fantastic opportunity for volunteers to get involved and play a really proactive role in supporting the hospitals, patients and staff. We hope that you really enjoy the role and please help us to improve by offering your insights and experiences.

On completion of each module, you will receive a certificate.

Thank you for your continued support.

**Nancy Whiskin**  
**Head of Volunteering**