**Camden and Islington Trust**

**Volunteer Restraint Debrief Service**

**Recruitment, Onboarding and Training**

The Restraint Debrief Volunteer Project is about having the right volunteers who can deliver a high quality and high impact intervention to our patients and not about having high numbers of volunteers.

**Volunteer recruitment  approach:**

We mainly advertise and recruit our volunteers via our Trust Vacancies page on C & I website.  We recruit more or less continuously, as we have a rolling system with a new advert put out as one closes.

Adverts are normally out for approximately 4 weeks and during this time we shortlist, interview, and undertake recruitment and ID checks of previous applicants.  All of these actions are undertaken solely by the Voluntary Services Manager within our Trust rather than our Human Resources department, which has led to some application processes for volunteers being lengthier than we would like.  With the additional funding we’ve had from Helpforce we have been able to recruit some administrative support to speed up this process and which will help us also have extra resource to support volunteers with lived experience through the recruitment process.  We will be continuing this support to the project going forward as its vital.

As it is recognised that patients really value being able to speak to someone who has had similar experiences to themselves.   We have attended as many service user groups as possible to inform them about the Restraint Debrief Project and volunteering opportunities within the trust.  This has had some success but not as much as expected.  The volunteer application is more or less the same as staff recruitment.  It is quite a lengthy and daunting process for some service users who can sometimes require substantial support to complete it.

Our Project Manager and Volunteers also take our volunteering information leaflet to the wards when they are attending community meetings to inform patients about the project. In addition the Voluntary Services Manager has attended Community Links meetings hosted by our Occupational Therapy Team for patients nearing discharge to tell them about our volunteering opportunities and encouraged them to join us.  Many patients recovering from mental ill health have lost confidence in themselves and so having volunteers with lived experience to talk to them and give patients a first-hand experience about how volunteering has helped them and the enjoyment they get from being involved, makes it more impactful.

The Voluntary Services Manager has also attended local volunteer recruitment fairs hosted by boroughs Volunteer Centres, but these haven’t proved successful.

The Restraint Debrief Volunteer role is not open to all volunteers.  Volunteers must have lived experience of mental health ill or substance misuse, or have experience of volunteering in a mental health inpatient setting.  Lived experience allows volunteers to empathise in a way that those without it cannot.  Having experience of volunteering on wards will help volunteers to gain an understanding of what the setting is like, how patients can present and how it works.  They will have been able to develop their communication skills in such roles and an induction with the Voluntary Services Manager in these settings allows their interactions with patients to be assessed and the manager to become more familiar with the volunteers.  Ideally we would see this for all volunteers coming in to this role.

Volunteers who are not confident and empathetic in their approach, or who cannot demonstrate the necessary boundaries, are unsuited for the role.  For example, when some volunteers first start they will never have set foot in a psychiatric hospital or come into contact with someone who suffers with severe mental health before and as a result may look scared or intimidated in their interactions whilst they settle in.  Therefore they wouldn’t yet have the confidence or skills to talk to a patient about such sensitive issues such as restraint.  In other instances volunteers have not been at a stage in their own recovery where they can maintain appropriate boundaries or maintain a neutral position on the use of restraint.

**Volunteer recruitment successes:**

A number of volunteers recruited to other volunteer roles with in the trust once settled and educated about the project have agreed to take the Restraint Debrief Volunteer role on as an additional role.  This demonstrates that our induction and encouragement of volunteers means they gain confidence and recognise that with the right support then can progress and help patients in new ways.  We understand that many volunteers come to us to gain new skills, knowledge and experience and only once they have accumulated these do they feel ready to take on a role as sensitive as that of the Restraint Debrief role.

Retention for the Restraint Debrief role is high and since receiving the Helpforce funding only two Volunteers have left, one of whom has gone on to secure full time employment with the Trust as a Peer Support Worker.  The other volunteer is still volunteering with the trust but in a different role, they struggle with reading and writing so found the role challenging and wanted something more suited to their strengths. Three Volunteers have undertaken the role for nearly three years.

We believe that our high retention of Restraint Debrief Volunteers is aided by Volunteers being able to see the difference they make to patients following a debrief and their time spent listening to patients and giving them a voice. This is demonstrated in the number of Volunteers, hours, and sessions since the assistance of the Helpforce grant.  Patients often thank Volunteers for attending and tell them it’s made a difference to them.  Volunteers also often report that they can see a physical difference in the patients with them looking lighter and happier after a Debrief session has been undertaken.

Volunteers are made aware that if they become unwell for any reason we’ll offer any support we can and they can take a break and come back to volunteering when they are feeling better without going all the way back to the beginning.  Although being unwell is obviously a terrible and upsetting time for them, it’s these is the experiences that allows them to understand and connect with patients in a way that staff can’t.  The learning they can bring will allow us to grow our service in a more patient focused and centred way for the better.

Furthermore, volunteers who are interested in pursuing jobs are offered advice and support with their application and are sent links to the Trust job vacancies.  References are provided as required.  Even after securing jobs, some of our Volunteers continue volunteering in the Trust. Volunteers are also signposted to various relevant training to support their development.

Volunteers are invited to give us feedback regularly, also it is hoped they can see suggestions come to fruition where possible.  There is also an option of a variety of volunteer roles. Our Volunteers have an opportunity to switch roles if they chose to.

All our volunteers complete our mandatory training but in addition to this Restraint Debrief Volunteers also complete our Breakaway Training and Positive and Caring Environments Training.  This adds to the development of these volunteers.

There is a volunteer award as part of our annual C&I Star Awards which highlights the value of volunteering within the Trust and we hold a yearly thank you party for volunteers as part of National Volunteers Week, with a Certificate of thanks.

Applicants are told about these benefits at interview which we hope supports their decisions to see through their application and start volunteering with us.

Recruitment challenges include:

* the length of time taken to process applications
* the additional time and support that some applicants with lived experience require for completing the process
* the sensitivity of the role subject matter, which can be too upsetting for some people to cope with.

As previously mentioned we have employed a temporary administrator to support volunteer recruitment, which we anticipate will speed up the process.  This should also enable the Volunteer Service to be able to offer more support to any applicants that require it.

The sensitivity of the subject matter is not something that we can change, but the Helpforce Funding has allowed us to set up support sessions for volunteers with our Acute Psychology Lead.  This is an additional support that we can ensure potential new volunteers are aware of.  We also have a range of other volunteering options that we can offer if someone decides that the Restraint Debrief role isn’t for them.

When recruiting people with lived experience it’s important to be able to give them time and support throughout their application.  Some support with applications and hand holding to see different services such as Occupational Health, HR etc may be required, so having the capacity for this from the beginning if possible is important.

It needs to be recognised that this is a sensitive role and will require volunteers with resilience, so ensuring new applicants have a clear understanding of what the roles entails is important.  Inform them in advance of the support available to them as well as letting them know that if they need to drop out that that’s okay and other alternative roles are still open to them.

Consider using volunteers who are already established, known and trusted.  They will have experience of the inpatient settings built up; how patients present, how wards work and may have already developed relationships with patients.

**Volunteering induction process**

Once Volunteers have completed their recruitment checks they complete a role specific induction with the Project Manager or Voluntary Services Manager.  One of the managers will do a session with new volunteers to go over the process and paperwork and answer any queries.  The first two debrief sessions the new Debrief Volunteer undertakes will be accompanied by one of the managers as well as pairing them an experienced Debrief Volunteer.   During these sessions it is explained to patients that the new Volunteer is being inducted and that managers employed by the Trust are present to support them, we then seek the patient agreement to proceed.   As part of these  induction sessions  new Volunteers will observe the first Debrief and in the second one they will assume a role in either leading the Debrief discussion or writing it up.  A follow up session is offered to the Debrief Volunteers if they would like it, but so far all have been happy to go ahead when paired with a more experienced volunteer.  One of the managers checks in with Debrief Volunteers after sessions to ensure all went well and so they can raise any concerns or issues.

**Reflective space**

 Reflective practice sessions have been set up for Volunteers and this is led by the acute Lead Clinical Psychologist.  This space was created to enhance the mental health and wellbeing of our Debrief Volunteers for the following reasons:

* the complexity of Volunteers lived experiences
* patient experiences that are shared during the debrief process  may evoke negative emotions for the  Debrief Volunteers
* enabling sharing of the volunteering experiences.

Reflective space is a space for the Debrief Volunteers to talk about their experiences freely, in a safe and confidential place.  Attendance for this group is optional for Volunteers.  Volunteers are sent reminders of the groups date and time.

We hope our thorough induction process and support mechanisms for the Debrief Volunteers have assisted in their retention within the project.

**Volunteer Management and Support**

The Voluntary Services Manager manages all the volunteer recruitment to the Debrief. The VSM also developed the volunteer role description and liaised with our then Lead for Reducing Violence & Aggression on the most appropriate trainings for volunteers to complete prior to starting which includes: Positive and Caring Environments Training and Breakaway Training as described earlier.

At the beginning of the project the VSM also did all the day to day running of the Debrief Offer, managed the volunteers and provided their supervision and support.  The Project Manager now does this with the VSM picking up to provide cover for any leave.  This is not something we were able to do previously and so if the VSM was on leave the Debrief offer just stopped, or if volunteers were planned in advance then the support mechanisms for volunteers weren’t in place.

**Volunteer Expenses**

Volunteers are encouraged to claim any out of expenses occurred for travel to, from and between our sites. If they do more than 5 hours in a day volunteers can claim £3 toward lunch costs.  But doing Debriefs for this amount of time is generally discouraged as it’s a very intense role and we don’t want it to negatively impact on our volunteers’ wellbeing.  This cost of these expenses comes from our Director of Nursing’s budget.  Evidence needs to be provided for any expense claims, for example, food receipts or TfL travel statements.