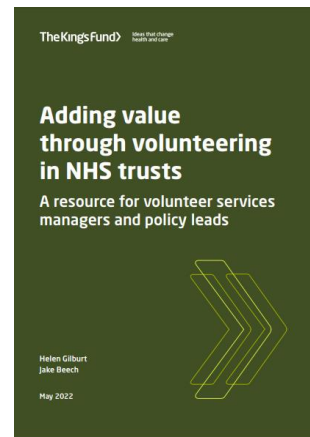
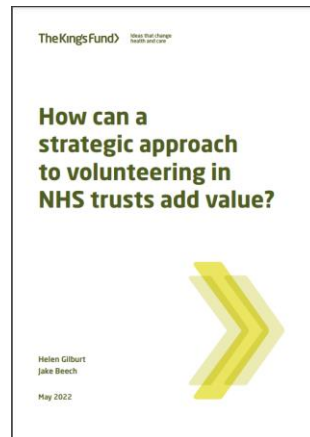


A strategic approach to volunteering in NHS trusts

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Background and aims of the work

- NHSE/I and Pears Foundation (#iWill) – both supporting volunteering in different ways, opportunity to review and think strategically about what to do next
- To develop an understanding of what the current state of volunteering in NHS trusts is and where the opportunities for development are

A brief word on Covid-19

- Huge uptake of volunteering more widely – including shift in who volunteers
- Change in format of volunteering – more responsive e.g. NHS volunteer responders
- Widespread suspension of volunteering in NHS services
- Development of new roles and opportunities in NHS trusts
- Changes in volunteer management – including adaption of some processes

Reflections from the work

Literature review	Volunteer support	Volunteer roles
Most people in Britain volunteer – occasionally	Volunteer services are often highly selective	Opportunities to standardise roles
Role of social networks / capital	Going beyond a good experience	Systematic deployment of roles across different functions
Motivation	Missing opportunities?	Cross-pollination between different types of trusts
Barriers – personal resources		

Maximising impact by adding value



Ways of thinking about roles

- Functions fulfilled by volunteers
- Defined by location
 - e.g. pharmacy volunteers
- Defined by responsibilities/title
 - e.g. wayfinding, art or music volunteers

Table 3 High-level functions fulfilled by volunteer roles in NHS trusts

High-level function	Description	Examples
Enhancing patient experience	Tasks geared towards improving the experience of patients/visitors/relatives/carers and creating a better interface with the hospital and the clinical care it provides	Meet and greet, befriending, and musicians dedicated to playing for patients
Operational support	Volunteers undertaking tasks to enable the organisation to work more efficiently or effectively	Runners taking notes and medication to and from wards and pharmacy, patient transport, administration and clerical tasks, and supporting with hospital stock and logistics
Service delivery	Volunteers either supporting professionals in therapeutic interventions or leading it themselves (where appropriate)	Peer support, assisting with physiotherapy/occupational therapy (OT)/exercise/rehabilitation work, and supporting art therapy
Involvement and improvement	Volunteers using their lived experience, skills or time to help improve services, patient experience, or inclusion and diversity at the trust	Patient-led assessments of the care environment, service user feedback panels, reader panels (to review the trust's written materials for accessibility) and research opportunities

Inclusive volunteering

Those who are marginalised in society benefit disproportionately from volunteering

BUT

People who potentially have the most to gain from volunteering are least likely to participate

Q: Is volunteering representative of the communities you serve?

Addressing barriers to volunteering

Changes to recruitment processes

Support for youth volunteering

Supporting volunteers from marginalised groups

Developing a strategic approach

1. Volunteer management capacity and capability
2. Organisational leadership to develop volunteering
3. A plan for developing scope and scale of volunteering
4. A way of developing and embedding new projects
5. Funding and resources for delivery & development
6. Building a relationship with the wider community



Thank you

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