

COMMUNITY TRANSITION VOLUNTEER (CTV) STANDARD PROCESS

Inpatient

Community

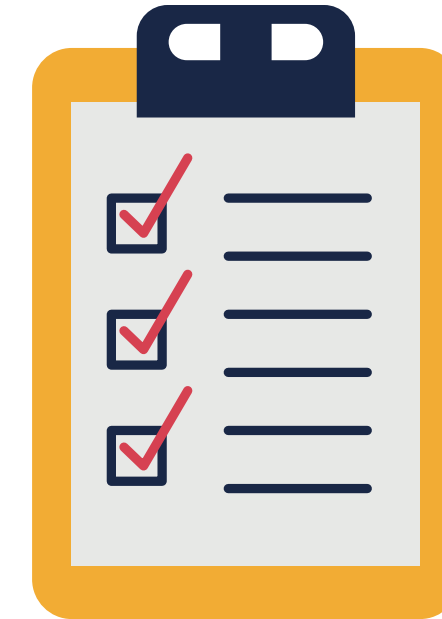
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IN-PATIENT

NOTE

In the event of readmission within a month of discharge the volunteer and service user would no longer participate in this support offer. Any unused community sessions can be re-offered once the service user is discharged.

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1 OT / AC selects appropriate service user for volunteer support & provides them with introduction leaflet

- Service user must be of low risk with planned discharge to a Croydon community team
- OT / AC confirms interest of service user and supports completion of questions 1-4 of their preference form. Flag that a volunteer may not be available yet

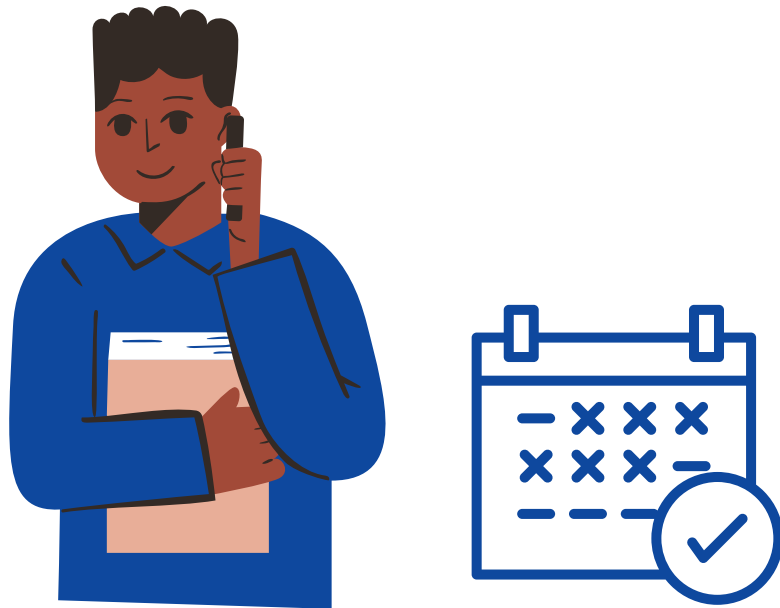
Key document: Inclusion / exclusion criteria, Introduction leaflet, preference form, activity timetable

2 Volunteer manager assigns volunteer

- OT / AC shares the preference form with volunteer manager who assigns an appropriate volunteer where available and gives the volunteer their introduction pack
- Volunteer manager gives the the OT / AC some dates the volunteer is available to meet the service user on the ward

Key document: Volunteer introduction pack

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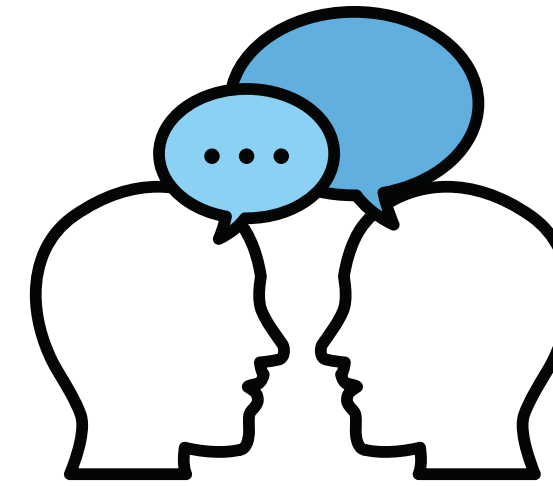
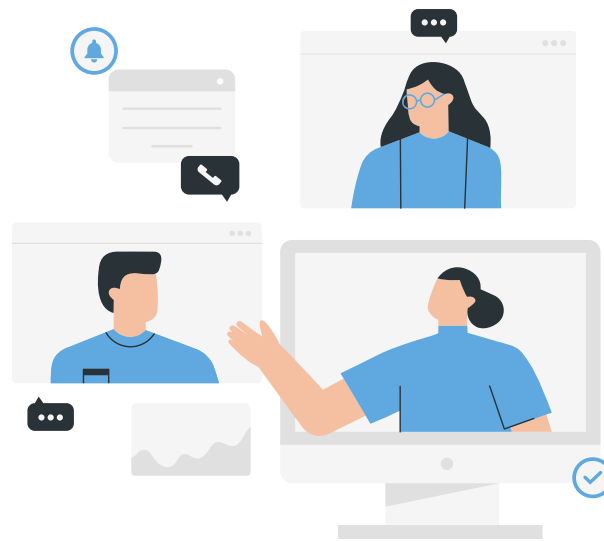
3 OT / AC confirms volunteer visit with service user

- Provide service user with volunteers name and agree date for them to meet
- Confirm where visit will happen (onsite or in quiet room on ward)

4 Volunteer has first meeting with service user

- Agree the activity to attend together and preferences around travel
- Agree date of next ward visit with service user
- Support service user with referrals to activities

Key documents: First conversation guide, activity timetable, preference form



5 OT / AC & volunteer discussion after 2nd visit

- Review service user plan together following the volunteers second ward visit and confirm next steps e.g. is everything planned for the first attendance to the the community activity, are more ward sessions needed)
- OT / AC complete handover form with input from the volunteer and service user

6 OT/AC handover to community OT & keep all updated on discharge

- Send completed handover form to community OT and add to epjs
- OT / AC email volunteer weekly with discharge update
- OT / AC emails volunteer and community OT on the day before discharge

Key documents: Preference form

COMMUNITY

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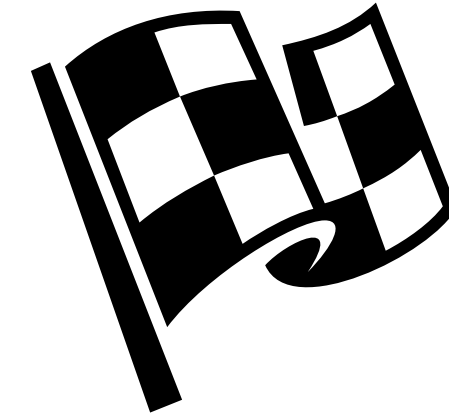
1 Community OT contacts volunteer around discharge date

- Check if the volunteer has any concerns and identify any potential barriers to service user participation in the group (e.g. travel/ public transport)
- Feedback concerns to the Care Coordinator (CC) and CMHT



2 Volunteer & service user attend chosen activity

- Volunteer and service user attend activity for 4 sessions in the community (ideally each week)



3 Review meetings with community OT & volunteer

- Community OT & Volunteer review service user progress after 2 & 4 sessions discussing next steps (e.g. discharge, additional week of activity, onward plan)
- Community OT updates ePJS with notes and next steps, and feedback to CMHT / CC

4 Community OT follow-up with service user 1 month after final session

- OT completes a follow-up call with service user 1 month after ending the volunteer support

Key document: Evaluation form