NHS

Sussex Community
NHS Foundation Trust

Voluntary and Community Development Strategy 2018-2022

The Value of our Volunteers

Excellent care at the heart of the community

Reader Box	
Description	Voluntary and Community Development Strategy
Date published	
Date due for review	
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Contact details	Amanda.cleaver@nhs.net
Primary audience	All Staff
Secondary audience(s)	External Stakeholders
Notes	

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Introduction

Within Sussex Community NHS Foundation Trust (SCFT), volunteers are widely recognised as a powerful tool in helping to promote healthier communities as well as aiding delivery in innovation of healthcare services. They continue to play an increasing role in helping to deliver more personal and community based care as described in the Five Year Forward View and SCFT Clinical Care Strategy.

This strategy sets out our priorities on how we will embed and grow our volunteer workforce to deliver our trusts vision of 'excellent care at the heart of the community.'

The volunteer workforce and the needs of our patients are changing. The general population is increasing, people are living for longer, social isolation and loneliness is a growing issue and there is a shortage of clinical staff. Older people now and in the future are likely to face increasing demands on their time; they will be working for longer, retiring later and may have caring responsibilities for a spouse and perhaps grandchildren. There is also a need to engage more young people by offering volunteering that fits in with peoples lifestyles and demands on their time.

As an organisation we value our volunteer workforce and their impact of enhancing patient experience. The evidence is increasingly clear that it is not a "*nice-to-have,*" it is core business. Therefore this strategy builds upon our already strong foundations as a service and looks to the future where as an organisation we will aim to attract individuals, businesses, community and voluntary organisation's to invest their time, talent and commitment in helping to realise our vision of 'Excellent care at the heart of the community'.

External Drivers

- Department of Health Strategic Vision for Volunteering 2011 - a call to action to all health and social care organisations to promote volunteering as an opportunity to enhance quality, reduce inequalities and improve health outcomes in health and social care

- Kings Fund Volunteering in Health and Social Care- Securing a Sustainable Future 2013- NHS providers should see the creation of volunteering opportunities as an essential part of their relationship with the local community, as well as being a means of improving patient or service user experience

- NHS Five Year Forward View 2014 – volunteers are crucial in the delivery of health and social care, with the need to encourage community volunteering The NHS can go further, accrediting volunteers and devising ways to help them become part of the extended NHS family – not as substitutes for, but as partners with, our skilled employed staff.

- Volunteering Strategy Consultation Document Health Education England 2017- volunteering is one of the biggest keys to opening the door to our future workforce. If we treat our volunteers well, and ensure they feel part of the NHS family, we can grow our talented workforce, support our communities to be confident in looking after each other and ensure we have empowered and self-assured citizens.

Internal Drivers

- Clinical Care Strategy 2014/19- we will develop innovative supportive roles that can be delivered by our volunteers - Making Every Contact Count initiative and patient activation.

- Patient and Carer Experience and Involvement Strategy 2017/20- we will extend our volunteer programme.

- Workforce Strategy 2017/20 - utilise the volunteer workforce by encouraging apprenticeships.

- Dementia Strategy 2016 - Become a dementia friendly organisation, delivering person centered care; develop partnerships to improve care and outcomes.

- End of Life Strategy 2017/20 - each community is prepared to help.

- Quality Improvement Plan 2014/19 - working with partners to personalise care by expanding volunteer roles and opportunities across the Trust.

Where we are now

At present we have 22 different volunteer roles within 87 departments or services which are carried out by 414 volunteers across SCFT. This equates to an added time value of 3242 hours and an added monetary value of £26,903 per month. The team recruits on average 25 volunteers a month, has statutory training compliance of 98%, 28% of the volunteers are from a BAME background, 13% are male and 7% have a disability.

We work alongside Macmillan Specialist Care Service, Expert Patient Programme and the Snowdrop Trust within our Volunteer Steering Group with an additional 114 volunteers in direct patient contact roles. Our charities which staff our shops, cafes, fundraise and deliver children's equipment for our patients brings the total to 775 volunteers.

SERV

League of Friends Organisations

Age UK

Snowdrop

Macmillan

Expert Patient Programme
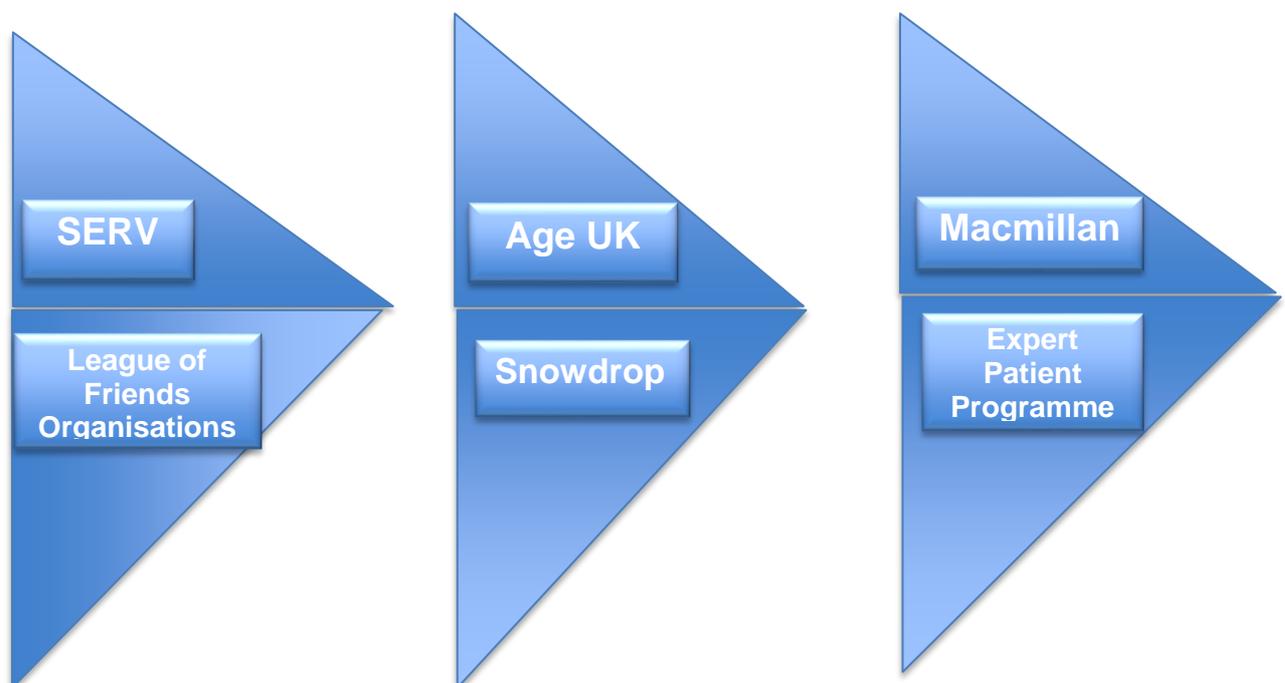
The 22 different volunteer roles are placed within services and shows the many ways in which volunteers make a difference. 77% have direct patient/service user contact which demonstrates the popularity of face to face contact. There is an urgent need however for more roles out in our communities to respond to the Government's challenge to tackle the issue of social isolation and loneliness. 91% of the care that the Trust provides is in the patient home in comparison to the 10 community hospitals with 272 beds where the majority of our volunteers are based.

The pie chart below demonstrates the extent of our volunteer roles.
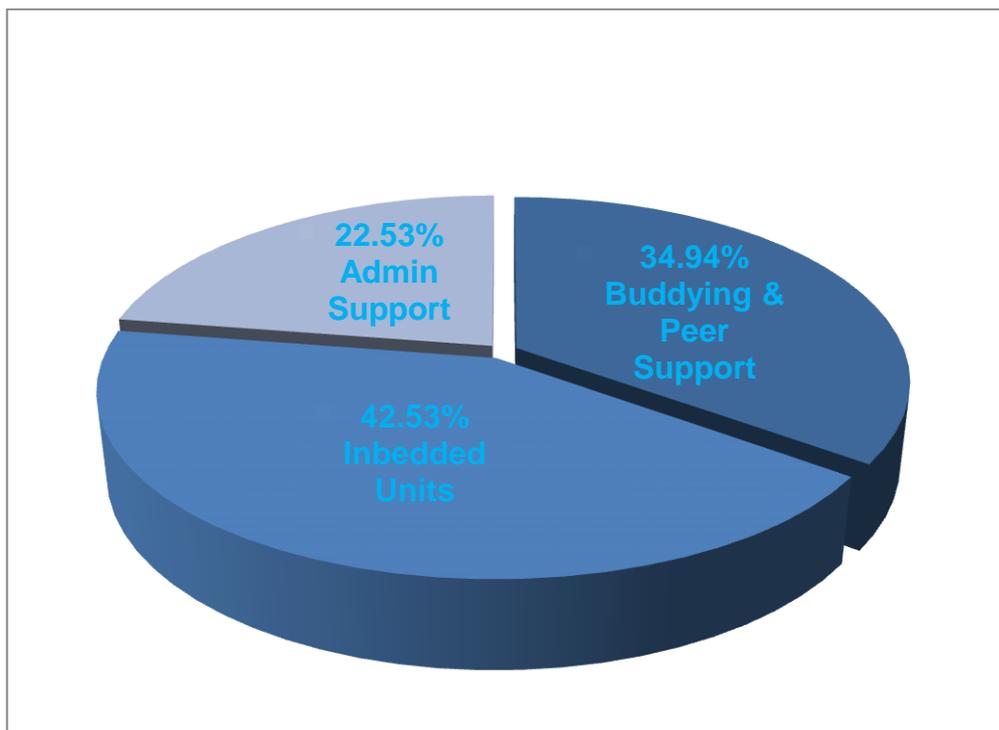
Vision

This mirrors the Trusts vision of 'Excellent care at the heart of the community' by establishing a centre of excellence for volunteering and to grow and develop a Voluntary and Community Development Service that offers a range of benefits and opportunities for our patients, communities and our staff. The new operating model of Communities of Practice gives us an opportunity to engage with the third sector to identify partnership working for the benefit of our patients and for our communities to be involved and help influence our delivery of healthcare services.

We will achieve our vision through a set of five sustainable and innovative aims and objectives over the next five years, which are imbedded within the trusts values of achieving ambitions, delivering excellence, compassionate care and working together. (Appendix1). This will be delivered through a yearly action plan and monitored and reported through the Clinical Quality Division.

Achieving Ambitions	1. **Progress an organisational culture that encourages promotes and supports volunteering and increases volunteer satisfaction**
	2. **Increase the number and diversity of our volunteers by 10% yearly.**
Compassionate Care	3. **Identify key clinical priorities across the organisation to maximise patient experience and staff support**
Working Together	4. **Build innovative partnerships across the Trust and within our community.**
Delivering Excellence	5. **Develop a firm framework around the volunteer process and governance**

1. An organisational culture that encourages, promotes and supports volunteering and increases volunteer satisfaction

- Engage across the organisation with services not currently reached.
- Provide a clear definition of volunteering and its role within the organisation.
- Provide a clear definition of the role of placement supervisor and expectations around this versus staff capacity.
- Promote the benefits of volunteering to staff at all levels to enhance service delivery and patient experience.
- Celebrate and communicate the successes, achievements and learning that volunteers can bring to services.
- Look at further identifying volunteer needs and support to increase retention and satisfaction.
- Promote Employer Supported Volunteering (ESV) Policy.

2. Identify continued key clinical priorities across the organisation to maximise patient experience and staff support

- Engage with leaders and managers who develop and deliver services.
- Heighten awareness amongst staff on the ground regarding opportunities for volunteers and enhancing patients' experience.
- Work creatively with staff to consider new and innovative roles that will maximise impact within our communities of practice model
- Evidence within key Trust strategies and service models how volunteers can make a difference.
- Identify key healthcare and social issues within the community and engage/work with the third sector to combat these

3. Build innovative partnerships across the Trust and within our community

- Identify further third sector partners to assist in delivery of volunteer services and roles.
- Engage with local businesses and education providers as a source for corporate volunteering and youth social action which will enhance our patients experience and health and wellbeing for our staff
- Identify fundraising opportunities as part of corporate social responsibility to increase our charitable funds.

4. Develop a firm framework around our volunteer processes for assurance and governance

- Review the capacity of the service and ensure it is matched to meet demand.
- Implement a monitoring and reporting process to enable Executive understanding of scope, function and activity.
- Undertake National Accreditation which publicly demonstrates the organisation's commitment to volunteering and effective volunteer management.
- Assess the role of volunteers as part of workforce planning processes, systematically mapping the ways in which volunteers could add value in each department or service.

5. Increase the number and diversity of our volunteers

- Target recruitment to match specific roles**.**
- Improve our engagement with hard to reach groups ensuring that the people in our community are able to fully participate in the communities in which they live through volunteering.
- Review our branding and recruitment process to ensure the service is attractive and accessible to all.

Benefits

Volunteers will support an increased number of services

All staff will have an increase awareness of the difference that volunteers can make within services

Volunteer champions will be imbedded within staff

Supervision of volunteers will have a 95% compliance rate

Patient experience and health outcomes are enhanced through success of volunteer workforce

The SCFT profile is enhanced and valued through our volunteering program

There is an established volunteer voice through forums that can help influence improvements within services

Employers Supported Volunteering Policy will be embedded as part of our Health and Wellbeing Strategy.

Our volunteer workforce represents SCFT needs.

The service is able to respond to unplanned requests that will have a significant impact on delivery and health and wellbeing of staff.

All staff will be able to articulate the value of volunteers.

All staff actively welcome, support and encourage volunteers in their areas.

All volunteers will have Dementia training as highlighted within SCFT Dementia Strategy.

All volunteers where appropriate will be given Health Champion Training to enhance and support patient activation.

The service will have established befriending and carer support services within SCFT Communities of Practise.

A volunteer led driver scheme service will be able to aid effective and responsive discharge from our community hospitals.

Evidence based practice will be the norm.

Volunteers will be in Services business plans as part of yearly planning.

We will be strong partners within the third sector community with established shared working, recognition and collaboration.

Local voluntary, community and social enterprise sector partners are positive about their relationship with us and the ability to add value.

Identified corporate partners within our communities with a recognised pathway of commitment to social responsibility.

Established charity and fundraising for SCFT within the Voluntary and Community Development Service.

Roles are filled through targeted recruitment to reach members of the community.

Implementation and Monitoring of the Voluntary and Community Development Strategy

An annual work plan will be in place, which will be developed from yearly objectives. This will be focused on current needs and priorities within the Trust underpinned by the service's five strategic aims. The work plan will be supported by the Clinical Quality Division.

References

Loneliness in old age: The UK Perspective. Safeguarding the Convoy: A call to action from the Campaign to End Loneliness. Age UK Oxfordshire 2011

Loneliness and Isolation Evidence Review age UK 2014

Care Quality Account 2015/16

The Giving Machine- A Guide to Corporate Social Responsibility 2006-2017

Volunteering Strategy - Health Education England 2017

Five Year Forward View 2014

Kings Fund Volunteering in Health and Social Care- Securing a sustainable Future 2013

Dementia Strategy 2016

Clinical Care Strategy 2014-2019

Strategic Aims	Strategic Objectives	Delivery Year 1	Delivery Year 2	Delivery Year 3	Delivery Year 4	Benefits & Outcomes Year 5
1.Progress an organisational culture that encourages, promotes and supports volunteering and increases volunteer satisfaction	1. Engage across the organisation with services not currently reached. Provide a clear definition of volunteering and its role within the organization. Provide a clear definition of the role of placement supervisor and expectations around this versus staff capacity. Promote the benefits of volunteering to staff at all levels to enhance service delivery and patient experience. Celebrate and communicate the successes, achievements and learning that volunteers can bring to services. Look at further identifying volunteer needs and support to increase retention and satisfaction Promote Employer Supported Volunteering (ESV) Policy	1. Identify services not reached through survey Monkey and target key staff. Identify all services in areas and approach with a view to having volunteer input. Refine internal pulse pages promoting value and evidence. Continue to promote policy and identify straplines for increased visibility. Communicate success through internal and external channels through social media. Twitter account @sct_volunteers Create case studies such as volunteer focus to enable influencing to take place. Create clear messages for staff and include key benefits.	1.Yearly reporting to the board to demonstrate impact Link in with local partners to raise profile-potential for Queens award Implement monthly communication plan for existing volunteers Roll out visible lanyards/uniform to increase identity and visibility of all volunteers Consistent communication through Volunteer Steering Group across all volunteer led services Ratification and promotion of ESV policy for staff Celebration of National Volunteers week	1. Deliver Trust wide thank you event. Presentation to public governors Establish a volunteer voice through a volunteer forum Measure impact of ESV policy Celebration of National Volunteers week Re engage with existing volunteer to review contribution of volunteer role	1. Review of services reached and retarget. Collate audit of best practice of use of volunteers. Review and audit of volunteer retention and satisfaction Celebration of National Volunteers week	1. Volunteers will support an increased number of services. All staff will have an increase awareness of the difference that volunteers can make within services Volunteer champions will be imbedded within staff. Supervision of volunteers will have a 95% compliance rate Patient experience and health outcomes are enhanced through success of volunteer workforce The SCFT profile is enhanced and valued through our volunteering program There is an established volunteer voice through forums that can help influence improvements within services

		Define supervision within placement documentation. Undertake audit of supervision.				Employers supported Volunteering Policy will be embedded as part of our Health and Wellbeing Strategy. Evidence will demonstrate personal benefits. Our volunteer workforce represents our SCFT needs.
		Apply for National Accreditation Award to demonstrate innovation and impact.				
		Celebration of National Volunteers week				Volunteering is targeted in areas that achieve maximum benefit for patient experience and health outcomes.
		Roll out of volunteer supervisor role to improve retention and satisfaction				The service is able to respond to unplanned requests that will have a significant impact on delivery and health and wellbeing of staff.
						Established volunteer champions within the SCFT. All staff will be able to articulate the value of volunteers.
					2. Evaluate and	

2. Increase the number and diversity of our volunteers	2. Target recruitment and need to match specific roles. Improve our engagement with hard to reach groups ensuring that the people in our community are able to fully participate in the communities in which they live through volunteering. Review our branding and recruitment process to ensure the service is attractive and accessible to all.	2. Engage with Youth Governor And identify improved methods of engaging with schools, colleges around social action/National Campaign of Step up to Serve SCFT committed to Disability Charter through the Disability Action Alliance	2. Identify criteria and role specifications for volunteer roles and target key groups in the community. Engage with community partners to increase recruitment amongst underrepresented groups e.g. YMCA, Outset Youth Action, Change, Grow, Live and hard to reach groups. Link in with BAME, Disability and LGBT networks	2. Engage with the SCFT Public Governors to raise profile and ability to influence	review number and diversity , re engage as appropriate	2.High Profile roles are filled through targeted recruitment at hard to reach members of our community Our volunteers' diversity is reflective of the communities that we serve. Our volunteer workforce has increased by 25%. Youth Social Action will be an integral part of our volunteer programme
3.Identify key clinical priorities within SCFT and Communities of Practice	3. Engage with leaders and managers who develop and deliver services. Heighten awareness amongst staff on the ground regarding opportunities for volunteers and enhancing patients' experience. Work creatively with staff to consider new and innovative roles that will maximize impact. Evidence within Key Trust strategies and service models how volunteers can make a difference. Identify key healthcare and social issues within the community and engage/work with the third sector to help combat these.	3. Attend Area Management meetings 6 monthly and Communities of Practice, Local Community Networks. Implement Volunteer Focus, Market place, New literature for staff in staff rooms/ notice boards. Developments of Staff Volunteer Champions within services. Continued roll out of Connect with Dementia. Liaise with	3. Potential new volunteer roles for patient experience for patient feedback Encourage strategic annual planning within services looking at innovative roles to match clinical priorities Criteria established to prioritize roles outside of planned service provision Assess the role of volunteers within workforce planning	3.Scoping and potential delivery of Trust wide/service for Volunteer Drivers Target areas of social isolation for befriending schemes/carer support in the community through Communities of Practice and relevant strategies. Develop supportive volunteer roles within Long Term	3 Trial a lunch and learn session for staff. Reevaluate strategic planning within services and volunteer contribution	3. All staff actively welcome, support and encourage volunteers in their areas. All volunteers will have Dementia training as highlighted within SCFT Dementia Strategy. All volunteers where appropriate will be given Health Champion Training to enhance and support patient activation. The service will have

		Dementia Lead. Evaluate and learn by experience. Continued roll out of Health Champion Role-patient activation. Evaluation and measure impact	and take up of apprenticeships. Engage with Health Education England	conditions Impact measurement for newly rolled out volunteer roles		established befriending and carer support services within SCFT areas. A volunteer led driver scheme service will be able to aid effective and responsive discharge from our community hospitals. Evidence based practice will be the norm Volunteers will be in Services business plans as part of yearly planning
4. Build innovative partnerships across the Trust and within our community.	4. Identify further third sector partners to assist in delivery of volunteer services and roles. Engage with local businesses and education providers as a source for corporate volunteering which will enhance our patients experience and health and wellbeing for our staff. Identify fundraising opportunities to increase our charitable funds	4. Establish relationships within the third sector to include League of Friends Organisations, Age UK and charities within Communities of Practice.	4. Work with identified charities and identify shared working, learning and engagement for new volunteer roles in patient's homes.	4.Opportunities established internally and externally to contribute to charitable funds and potential fundraising strategy in the form of a recognized fundraiser	4. Explore potential for Charitable Forum with relevant third sector and voluntary and community development	4.We will be strong partners within the third sector community with established shared working, recognition and collaboration Local voluntary, community and social enterprise sector partners are positive about their relationship with us and their ability to add value. Identified partners within our communities with a recognised pathway

| 5. Develop a firm framework around our Volunteer Processes for assurance and Governance. | 5. Review the capacity of the service and ensure it is matched to meet demand. Implement a monitoring and reporting process to enable Executive understanding of Scope, function and activity.

Undertake National Accreditation which publicly demonstrates the organisation's commitment to volunteering and effective volunteer management | 5. Monitoring of Activity- establish business case for expansion of service.

Achieve National Accreditation linked to CQC Standards.

Evaluate statutory training program for volunteers and redesign training package | 5. Established process of support and assurance regarding safeguarding

Established framework around volunteering in the home. | 5. Established process of assurance within Memorandum of Understanding and Service Level Agreements | 5.Review capacity/demand of service | of a commitment to social responsibility.

Established charity and fundraising for SCFT within the Volunteer Service

5. Team is able to match demand with capacity and potential growth of the service.

The value of volunteers is recognized am celebrated

National accreditation supports CQC expectations and demands.

Volunteers are safe and well supported. |

All staff are required by the Equality Act 2010 to assess whether a policy, practice or function has any relevance to equality i.e. could affect people differently according to 1) Age, 2) Disability, 3) Gender reassignment, 4) Marriage and Civil Partnership, 5) Race, 6) Religion or Belief, 7) Sex, 8) Sexual Orientation or access to human rights.

1 Name of Policy or Service	Volunteer Policy	
2 Service and Directorate	Clinical Quality Division	
3 Objectives What is the purpose of this policy or service?	To ensure best practice, equity, consistency and governance across the organisation	
4 Analysis completed by (Author? Equality Lead? Other?)	a) Name	b) Job Title
Author	Mandy Cleaver	Voluntary and Community Development Lead

5 Does the policy or service have an effect on Staff and/or the Public? (please ✓)

Staff	Yes		No	
Public	Yes		No	

Equality law protects people on the following grounds:	Has your policy or service given due regard to this area of equality or human rights?		If yes, is the effect positive or negative		Evidence of the effect(e.g. statistics, research, surveys, results of engagement, etc.)	Is further action required?	
	Yes	If No, why not?	Positive effect	Negative effect		*Yes	No
Age	√						
Disability	√						
Gender Reassignment	√						
Marriage and Civil Partnership	√						
Race and Ethnicity	√						
Religion and Belief	√						
Sex	√						
Sexual Orientation	√						
Access to Human Rights	√						

Equality Analysis:			
Signed		**Dated**	

Equality and Human Rights Analysis (EHRA)

The appendix contains guidance. Select the 'Help' links for more …

Title(s): Voluntary and Community Development Strategy

Aims: To identify the services aims and objectives for the next five years

1. Evidence

Please summarise any evidence about how the work may impact people either positively or negatively specifically linked to their **characteristics**.

- E.g. performance or survey data; focus groups; PALS; incident reviews; NICE guidance; research; good practice; demographic data
- Mark an 'X' in the columns for as many characteristics as are relevant

Mark 'X' relevant characteristics

	Age	Disability and Carers	Race	Religion or Belief	Sex	Pregnancy or Maternity	Gender Reassignment	Sexual Orientation	Other (e.g. Armed Forces)
Positive impacts: Not discriminatory in age. Committed to Disability Charter Increase in the diversity of volunteers and increased engagement with underrepresented groups BAME, Disability and LGBT networks	✓	✓	✓	✓	✓	✓	✓	✓	✓
Negative impacts: None									

2. Equality Analysis

Please evaluate how the work may impact people with protected characteristics to meet the three **aims (A-C)** below, referencing any evidence identified above. If an aim is not relevant to your work, please explain why.

Aim A Eliminate discrimination – Please evidence if the work could <u>unlawfully discriminate</u>:

- Include <u>who is discriminated</u> (e.g. disabled adults) and how. Include detailed reasons if it is lawful.

The Strategy sets out how the service is committed to increasing the diversity of our volunteers by engaging with relevant community partners.

Aim B Advance equality of opportunity – Please evidence if the work:

- Minimised disadvantage – Does the work address any poorer outcomes for particular protected groups?
- Meets different needs – Does the work meet different protected groups social, cultural or other needs?
- Encourages participation – Does the work target under-represented groups to increase involvement?

The Strategy demonstrates that we aim to meet different protected groups' needs through increased volunteering opportunities

Aim C Foster good relations – Please evidence if the work:

- Tackles prejudice – Does the work increase contact between groups to reduce negative attitudes?
- Promotes understanding – Does the work educate people about groups to change negative attitudes?

The Strategy demonstrates the strategic aim to progress an organisational culture that promotes volunteering for all and to establish a volunteer voice through a volunteer forum

3. Home Rights Analysis

Mark + against the relevant rights which are safeguarded (+) or breached (-) by the work:

	+	-

Article "2 Right to life (e.g. The Deteriorating Patient policy, DNACPR or Clinical competencies)

Article 3. Prohibition of torture, inhuman or degrading treatment (e.g. Consent or Safeguarding)

Article 5. Right to liberty and secuirty (e.g. Deprivation of Liberty or Restrictive Interventions

Article 8. Right to respect for private and family life, home and correspondence
(e.g. Confidentiality, health records, carer involvement, correspondence or staff leave)

+	

Article 9. Freedom of thought, conscience and religion (e.g. End of Life Care or Prescribing)

Article 10. Freedom of expression (e.g. Patient information or Raising Concerns Policy)

+	

Article 12. Right to marry and found a family (e.g. Pregnancy testing procedure)

4. Monitoring

Please describe how any impacts will be monitored: (e.g. annual policy review, audit, performance metric)

> Annual Strategy and policy review

5. Outcome

+	(a) Continue the work
☐	(b) Change the work
☐	(c) Justify and continue the work
☐	(d) Stop the work

Detailed reasons: This analysis demonstrates that the work shows no potential for discrimination and all relevant opportunities to advance equality and foster good relations between different people have been proportionately undertaken.

Please score any risks to equality or human rights below and update your risk register:

Consequence score: ☐   Likelihood score: ☐   = Equality and Human Rights Risk Score: ☐

Assurance Statement: I have reviewed the evidence with rigour and an open-mind and am satisfied there has been <u>due regard</u> to the need to eliminate discrimination, advance equality of opportunity and foster good relations, and there is compliance with Section 149 of the Equality Act 2010.

Analysis Lead(s) names: Amanda Cleaver		Date: 13.03.2018
Ratifying committee/body	Naomi Bonetti	Date: 19.03.2018
Reviewer (office use):	Decision:	Date:

6. Improvement Plan

Description of actions	Date	Person	How will this be delivered

Send this form along with your main paperwork for consultation to: sc-tr.equality@nhs.net