



Policy:

MD004- Volunteer Policy

Executive Director Lead	Director of Nursing Professions and Quality
Policy Owner	Engagement/Volunteer Manager
Policy Author	Engagement/Volunteer Manager

Document Type	Policy
Document Version Number	Version 9.0
Date of Approval By PGG	02/10/2023
Date of Ratification	02/10/2023
Ratified By	Quality Assurance Group
Date of Issue	TBC
Date for Review	02/10/2023

Summary of policy

This policy outlines the details of the processes, and the principles that are involved in becoming a volunteer, recruiting and preparation, training, placement, expenses, support and supervision of volunteers.

It also covers insurance, health and safety, confidentiality, ending of a volunteer placement, volunteer conduct and problem-solving procedures.

Target audience	All SHSC Staff (including seconded into or working in SHSC services), the Board of Directors and Volunteers
------------------------	---

Keywords	Policy, protocol, procedure, standard, definition, volunteers
-----------------	---

Storage & Version Control This is version 9.0 of this policy and replaces 8.0 (May 2020). This version has been updated to reflect some of the changes within volunteering, and it incorporates advice on the recommended number of hours volunteers will be volunteering.

This policy will be available to all staff via the Sheffield Health and Social Care Intranet and the Trust’s website. The previous version will be removed from the intranet and the Trust website and archived. Any copies of the previous policy held separately should be destroyed and replaced with this version.

Any printed copies of the previous version (V8.0) should be destroyed and if a hard copy is required replaced with this version.

Version Control and Amendment Log

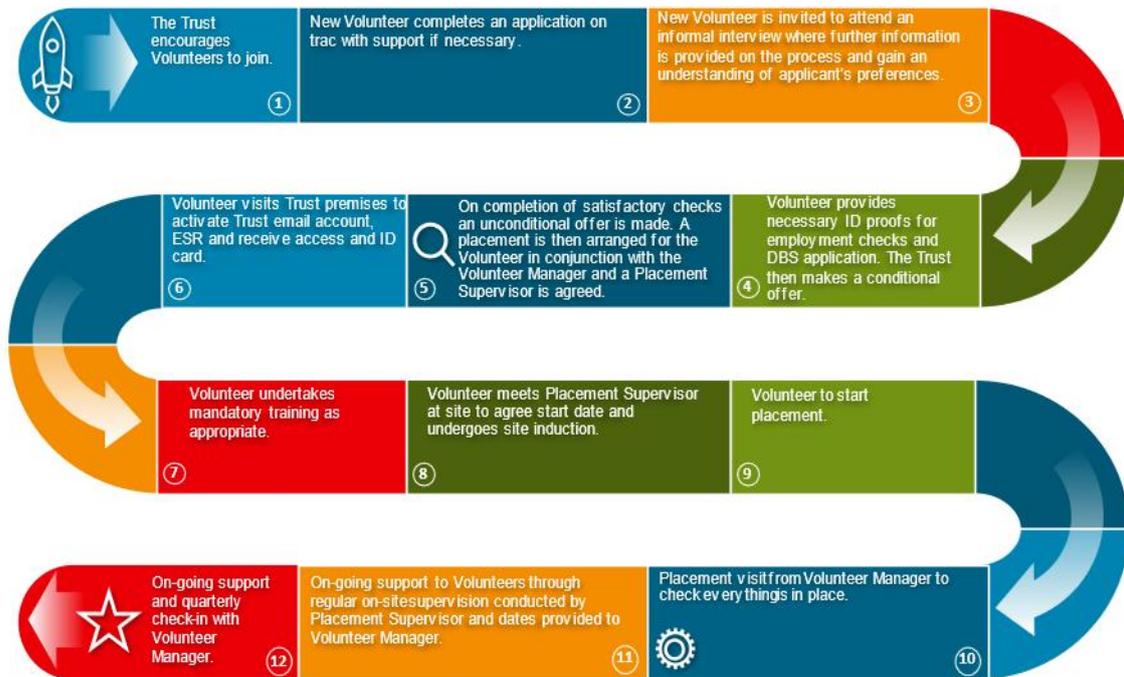
Version No.	Type of Change	Date	Description of change(s)
1.0	Draft policy creation	Feb 2012	Creation of policy
1.1	Review/ratification	Feb 2012	Amendments made during consultation, prior to ratification
2.0	Review	Sept 2015	Full review following new NHSLA standards being published
2.1	Review on expiry of policy		Committee structure updated
3.0	Review	Oct 2015	New draft policy created
4.0	Review	Nov 2015	Revision of draft policy following consultation to task and finish group
5.0	Review	Nov 2015	Further revision of draft policy following further internal and external consultation
6.0	Review	Oct 2016	No changes in content other than updates for new template, role titles and contact details
6.0	Review on expiry of policy (no amendments made)	Oct 2017	Policy review, date extended from September 2017 to February 2018
6.1	Review	Jan 2018	Slight amendment of content, update for new template, role titles and contact details.
6.2	Review	Jan 2018	Further revision of policy following consultation and discussion at SUSEG
7.0	Revised policy	Feb 2018	Review by PGG and approval by EDG
8.0	Review	August 2019	Slight amendment of content, contact details & Appendix H
8.0	Review	Oct 2019	Further reviews of expenses claim form.
8.0	Revised policy	March 2020	Review by PGG and approval by QAC
9.0	Revised policy	October 2023	Several amendments have been made to ensure volunteers are kept well. There are suggestions to the hours and commitments that volunteers and Managers are advised to follow.

Contents

Section		Page
	Frontispiece	1-2
	Version Control and Amendment Log	3
	Flowchart	4
1	Introduction	5
2	Scope	6
3	Purpose	7
4	Definitions	8
5	Details of the Policy	9
6	Duties	9
7	Procedure	10
	7.1 Principles behind the procedure	10
	7.2 Recruitment and selection of volunteers	10
	7.3 Preparation and Training	10-11
	7.4 Placement of volunteers	12
	7.5 Recording Information	12
	7.6 Support and supervision	12
	7.7 Expenses	13
	7.8 Volunteers using own cars	13
	7.9 Insurance	13
	7.10 Health and Safety	13
	7.11 Confidentiality	14
	7.12 Ending of Volunteer Placement	14
	7.13 Volunteer Conduct	14
	7.14 Problem Solving Procedures	15
8	Development, Consultation and Approval	16
9	Audit, Monitoring and Review	17
10	Implementation Plan	17-18
11	Dissemination, Storage and Archiving (Control)	19
12	Training and Other Resource Implications	19
13	Links to Other Policies, Standards, References, Legislation and National Guidance	19
14	Contact details	20
	APPENDICES	21
	Appendix A – Equality Impact Assessment Process and Record for Written Policies	21-22
	Appendix B – New/Reviewed Policy Checklist	23
	Appendix C- Version Control	24-25
	Appendix D- Development, consultation, and verification-	26
	Appendix E- Supervision Contract	27
	Appendix F- Supervision Template	28
	Appendix G- Individual Agreement	29

Flowchart

Flowchart



Volunteer Policy V.1 April 2023

1. Introduction

A volunteer is any participant who supports SHSC services in an unpaid capacity by the Trust. They are individuals who give valuable time to help the Trust deliver its quality service and enhance user experience in roles where they are not remunerated for the service they offer.

Sheffield Health and Social Care NHS Foundation Trust (SHSC) recognises the important role that voluntary activity plays in complementing the work of its staff and welcomes the varied and unique contribution that volunteers make. By giving their time, volunteers can make a unique contribution and they can bring their own credibility to their volunteer role. SHSC is committed to fair, clearly stated, supportive relationships between the organisation and its volunteers and staff. We aim to live our values; not only in the way we work, but also in the way we treat everyone who works for and with us.

We believe that it is important to expand the role of volunteers in health and social care, to ensure that volunteers, service users and carers are put at the heart of SHSC. Expanding the role of volunteers allows individuals to collaborate with each other and create people centred services. There is also a growing body of evidence that shows volunteering to have a positive impact on wellbeing.

Volunteers contribute to improving patient experience and building closer relationships with services and communities. Additional benefits are brought to the sector from the part volunteers play in tackling health inequalities and promoting health in hard-to-reach groups, and supporting integrated care for people in those hard-to-reach groups, and those with multiple needs (Volunteering in health and care; securing a sustainable future).

The Kate Lampard Report (The themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile 2015) states that “the scale of volunteer presence and extent and nature of the work they do means that the arrangements for managing volunteers, and risks associated with their presence in hospitals, need to be robust and command public confidence”. The findings from the themes and lessons learnt from the NHS Investigation in matters relating to Jimmy Savile (DH:2015) set out clear recommendations on safe recruitment that should include DBS checks and safeguarding training that should both be renewed three yearly.

Anyone over the age of 18 years can volunteer, who successfully completes the selection process (see pages 5 - 9). Service users and carers, as well as interested members of the public, are welcomed, and encouraged to bring their experience when volunteering. SHSC staff are also invited to volunteer, should they wish to develop their skills and contribute voluntary hours. This must be done in conjunction and consultation with their line manager.

Volunteers must receive training, support, and supervision to ensure good quality experience for the volunteer, and the staff and service users they work alongside. Volunteers can expect to feel safe, valued, be kept informed and to enjoy their time with the Trust.

2 Scope

This policy applies to prospective and current volunteers. It will be applied to assist all staff working with volunteers as part of their role.

All tasks carried out by volunteers will be clearly defined in a role descriptor so that both volunteers and staff are sure about their respective roles and responsibilities.

Whilst all volunteers and staff must adhere to this policy, the policy is not intended to create a legally binding contract or employment relationship as it is important to recognise the relationship with volunteers is based on mutually agreed expectations around the role.

3 Purpose

This policy sets the minimum standards for the way SHSC recruits, works with, and supports volunteers.

The purpose of this policy is to set the standards and define the guidelines for the way SHSC recruits, involves, and engages volunteers in SHSC.

The policy aims to:

- Ensure a fair and consistent approach to the recruitment of volunteers.
- Promote good practice and a consistent approach to volunteer management.
- Clarify the role of volunteers and the relationship between volunteers and paid members of staff within SHSC.
- Acknowledge the value of the contribution made by volunteers and champion their development.
- Confirm the commitment of SHSC in involving volunteers in its work and promote best practice.

SHSC acknowledges that the involvement of volunteers:

- Supports social inclusion and vocational development for our service users
Supports individuals to live fulfilled lives, linking in with our vision, offering opportunities within SHSC to help people find volunteering opportunities in the local community.
- Supports the commitment of SHSC to help place service users and carers at the centre of decision making through collaborative working.
Volunteering brings fresh expertise, new skills, additional time and different perspectives.
- Raises awareness of a range of disabilities including mental health, learning disabilities and long-term conditions, and to break down stigma by offering volunteering opportunities to the general public to “reach” into our service.

- Supports the most interested and active engagement of our membership, supporting us to be accountable to our local population.
- Keeps the organisation in touch with grassroots feelings and perspectives and it is hugely beneficial to involve volunteers from every part of the community that SHSC works with. This includes young people and adults from a range of backgrounds and with a range of abilities or experiences.

This includes people:

- with a disability or a physical impairment
- from black minority and ethnic groups
- with learning disabilities
- who are refugees and asylum seekers
- who are ex-offenders and people with a criminal record
- from low incomes or from economically disadvantaged backgrounds.

A diverse team of volunteers can:

Improve patient/service user experience by providing opportunities for patients/service users to be supported by people who have had similar experiences or are from similar backgrounds, this all helps to:

- reduce health inequalities and evidence suggests that those who experience health inequalities often have the most to gain from volunteering.
- promote trust by having volunteers that are representative of all parts of the communities that SHSC serves, and it improves services by bringing different perspectives and helping to deliver more flexible services to meet everyone's needs.
- provide a diverse range of skills and experiences and helps to develop skills across communities.

All staff within SHSC have a role to play in recruiting volunteers who reflect the diversity of the local community and in providing volunteers with a safe, supportive, and welcoming environment, free from discrimination.

4 Definitions

A **volunteer** is an individual who gives their time willingly and takes part in agreed activities under the direction of SHSC, usually for a specified time. The relationship is binding in honour, trust, and mutual understanding. No enforceable obligation, contractual or otherwise can be imposed on volunteers to attend.

Supervisor/Mentor - is usually a person with whom the volunteer has day to day contact as part of their placement within the working environment. Mentors can also provide supervision for volunteers. volunteer's mentor. If an individual is volunteering in more than work area/team/service, a lead supervisor will be identified by the Engagement Manager who will provide supervision to the volunteer.

5 Details of the policy

This policy explains how volunteering should take place within the Trust to ensure a good quality experience for individuals who wish to give their time freely to the Trust to enhance the patient experience, and to help to improve services.

6 Duties

The Chief Executive- is responsible for ensuring the Trust has policies in place and complies with its legal, statutory, and regulatory obligations.

Service and Clinical Directors are responsible for ensuring that their services comply with the requirements set out in this policy.

Managers throughout the Trust must follow the processes set out in this policy about the recruitment, support and development of volunteers within the Trust.

Line managers must ensure all volunteers within their service have a designated mentor and that volunteers are appropriately supervised throughout their time with the Trust.

The Engagement/Volunteer Manager is responsible for managing the recruitment, selection and development of all volunteers covered by the terms of this policy. This individual must ensure that appropriate handovers have taken place with the placement manager and that appropriate mentoring/supervision arrangements have been established.

The Engagement/ Volunteer Manager also has day to day responsibility for the administration and co-ordination of volunteer recruitment, selection, and development of all SHSC's volunteers and for ensuring that all volunteer placements, as part of this policy, are appropriately allocated, recorded and monitored.

Mentors/Lead Supervisors must ensure that appropriate support, supervision, and development is provided to volunteers.

All staff are required to welcome volunteers into their service/team and ensure that mentors and volunteers are supported in their volunteer placement. Staff working with volunteers should ensure that they do not ask the volunteer to do tasks that are outside of their agreed remit. All staff must comply with the requirements set out within this policy. All prospective and current volunteers must comply with the requirements set out within this policy.

7 Procedure

7.1 Principles behind the procedure

- The role of the volunteer is complementary, not supplementary to the role of paid staff. Volunteers will not do the work of paid members of staff, nor will they fill temporary, vacant, or discontinued positions.
- The selection process for volunteers follows guidelines for best practice, avoids unfair discrimination and is welcoming to all prospective volunteers. It ensures that all volunteers are subject to a systematic process of recruitment.
- The Trust will ensure that volunteers are treated fairly and equally in accordance with the Trust's Equal Opportunities and Dignity at Work Policy.
- Volunteers are properly integrated into the organisational structure and mechanisms are in place for them to contribute to the Trust's work.
- SHSC expects that staff at all levels will work positively with volunteers and, where appropriate, will actively seek to involve them in their work.
- Volunteers are provided with a clear explanation of what is expected of them.
- Volunteers are provided with the necessary training and support to carry out their assigned role and responsibilities. This will take place prior to prospective volunteers volunteering.
- SHSC recognises that volunteers require satisfying work and personal development and will seek to help volunteers meet these needs.
- Volunteers will have regular supervision sessions with a named member of staff. Supervision sessions will be recorded and held centrally within individuals' personal records.
- Provide regular (4 to 6 weekly, a minimum of 8 per year) supervision sessions and keep a record of these sessions as per the Trust's Supervision Policy.
- Supervision will follow the Trust's Supervision Policy (Appendix F and G provides a Supervision Contract and sample Supervision Template).

7.2 Recruitment and Selection of Volunteers

Prior to recruiting volunteers, wherever possible, consultation and discussion should take place with staff requesting volunteers to ensure there is a genuine need for volunteers and to develop a clear description of their role. Once a volunteer is placed, each department should have an identified lead for supporting them.

The prospective volunteer must be able to meet the demands of the role without risk to clients or their own physical or mental well-being.

All prospective volunteers are required to complete an application form and complete the volunteering process below:

- Received medical clearance by Occupational Health; Satisfactory Disclosure and Barring (DBS) check.
- 1 reference from whom they have known for at least 3 years in a professional capacity, they cannot be a friend or family member.

- Signed a confidentiality form, and code of conduct form and acceptance to the voluntary role offered.

All the above must be in place and received by the Engagement/ Volunteer Manager prior to any placement commencing. Former staff members who move to volunteer status within six months of the termination of their employment are not required to adhere to this process.

7.3 Preparation and Training

The volunteer will not work with clients until they have received adequate training and have been fully prepared for the role they will be undertaking. As part of the Trust induction, they will be required to undertake training within the following areas: basic manual handling, infection control, health and safety awareness, fire regulations, risk management, safeguarding, information governance and confidentiality.

Volunteers will be expected to undergo formal update training in safeguarding at the appropriate level at least every three years. The Engagement Manager/Facilitator will contact volunteers to advise them of training requirements.

Through volunteering the volunteers will have an opportunity to enhance their existing skills, learn new skills, enhance their C.V., and gain experience within a health and social care setting.

Volunteers will receive a local induction to every work placement this will include an orientation of the workplace and will be carried out by the named supervisor.

The Trust recognises that there will be on occasions some individuals who will only take part in ad hoc involvement for the occasional time. In these circumstances these individuals will need to have read and fully understood 'The Individual Agreement'. This will be signed prior to any involvement with the Trust and will be kept by the Manager of the meeting that is being attended. **(Appendix H provides a sample Individual agreement sign off form)**

The supervisor will:

- outline the requirements to the volunteer and provide information on the capabilities of the client / group and how to cope with any likely problems.
- Will discuss the hours that the volunteer will be required to complete, it is suggested that this will be from 3 hours per week to no more than 14 hours per week.
- ensure volunteer familiarisation with the layout of the building or the area in which the volunteer will be working.
- ensure the volunteer understands the Health and Safety policies and procedures, and fire regulations and manual handling requirements.
- ensure the volunteer is aware of how to report safeguarding concerns.
- arrange for any specific training the volunteer may require to carry out the role safely and effectively.
- complete the appropriate application forms (in line with Trust Information Governance Policies) if it is essential for the volunteer role to have IT access. This

does not include access to Rio, System One, or any other electronic patient administration system as none of these are appropriate for volunteering roles.

- advise the Engagement/ Volunteer Manager of any changes in volunteers i.e., resignations, change of address details etc.

7.4 Placement of volunteers

Volunteers will be placed in accordance with the following principles.

- Volunteers will not be used as a substitute for paid staff.
- Volunteers provide an extra service to clients and their relatives; they will not be involved in clinical care or administration.
- Proposed voluntary activities should provide a meaningful experience for both the client and the volunteer.
- Volunteers will be allocated to a named supervisor/mentor. The precise frequency and duration will be for determination by the Supervision Lead (or delegated manager)
- For each individual volunteer a record of training/experience will be made, ensuring that if volunteers move from one site to another there is an adequate record of the activities captured.
- Volunteers may support service users on a 1:1 basis, providing adequate risk assessments have been undertaken in advance, and any relevant training has been undertaken, i.e., RESPECT level 1 Training.

When a new role for volunteers is being developed, a role descriptor will be drawn up and agreed between the volunteer, staff with whom the volunteer will be working and the Engagement/ Volunteer Manager.

Volunteers will be placed initially for a trial period of one month. This will be reviewed by the volunteer's supervisor. Should the volunteer be deemed to be unsuited to the placement, every attempt will be made to find an alternative placement.

Placement opportunities for service user volunteers will be given priority as part of promoting recovery.

7.5 Recording Information

A log of all placements and activity will be monitored and managed by the Engagement Manager / Facilitator.

7.6 Support and Supervision

All volunteers must work under the guidance of staff and are responsible to the local management within their working environment. All volunteers will have a named supervisor, or mentor. The mentor will be properly supervised by their Line Manager, who will act as a support for any issues or problems that may arise.

Volunteers will have regular supervision sessions with a named member of staff (this could be a mentor / buddy in the volunteer's area of work). Supervision sessions will be recorded and held centrally within individuals' personal records. Supervision will

follow the practice outlined in the Trust's Supervision Policy (Appendix F and G provides a sample Supervision Contract and Supervision Record Template)

7.7 Expenses

The Trust will reimburse all reasonable expenses incurred by volunteers in relation to their work for SHSC. Reasonable expenses will normally include local travel costs. Travel to and from the volunteer's base will be reimbursed up to the value of a bus service one-day saver pass. The volunteer must provide receipts to have their travel costs reimbursed. The monies will come from the service within which they are volunteering. (See Appendix I for the Travel Expenses Claim Form).

All volunteers who wish to claim their travel expenses will need to keep a record of their travel and bus receipts (if applicable). A Travel Expenses Claim Form (Appendix I) will need to be completed and given to their supervisor who will then send the expenses claims to finance. There is no central pot of monies for volunteering and all travel claims will be paid by the service the volunteer is volunteering into.

7.8 Volunteers Using Their Cars

Volunteers may offer, or on occasions be required, to use their cars as part of their volunteer role. This could involve moving between different sites and/or transporting service users.

Volunteers must ensure that they are insured for this purpose through their own car insurance policy and provide evidence of this before using their cars as a volunteer. A copy of this evidence will be held on file by the Engagement Manager/Facilitator. Volunteer supervisors or Team/Service Managers must have seen this evidence before a volunteer can use their car for volunteering purposes.

7.9 Insurance

All volunteers are covered by the Trust's insurance policies against personal injury during their activities for the Trust. This does not include injuries occurring outside of authorised Trust activities. Volunteers are required to only engage in agreed activities in accordance with their agreed remit(s) and must seek advice if they are concerned about any tasks that may fall outside of this agreed remit(s).

7.10 Health and Safety

Volunteers will be asked to comply with the Trust's Health and Safety and Fire Policies whilst carrying out their volunteering roles and whilst on Trust premises. They must ensure that they make themselves aware of these requirements and comply with Trust policies on incident reporting.

7.11 Confidentiality

Volunteers are bound by the same requirements for confidentiality as paid staff members. A copy of the Confidentiality Policy is included as part of volunteer induction and a completed signed confidentiality agreement must be in place prior to any placement being offered.

7.12 Ending of Volunteer Placement

If volunteers wish to leave their role at the Trust, they should inform their mentor/supervisor or work placement manager, giving as much notice as possible, is always helpful. The placement manager must then inform the Engagement / Volunteer Manager of the volunteers leaving date.

The placement manager or volunteer supervisor must also inform IT if the volunteer has had IT access. When volunteers leave the Trust, they will be offered an exit interview with the Engagement / Volunteer Manager.

References may also be provided upon request.

Volunteers will be required to return their ID badges at the time of giving notice.

Concerns raised about the behaviour/activity of a volunteer should be dealt with in the same way as a paid member of staff.

7.13 Volunteer Conduct

SHSC expects volunteers to:

- maintain and uphold the good name and reputation of the Trust.
- aim for high standards of efficiency, reliability, and quality in all aspects of their contribution.
- work within the ethos and guidelines of the Trust, always respecting the Trust Values.
- encourage two-way communication with other volunteers and paid staff, fostering a pleasant and friendly atmosphere.
- work collaboratively with paid members of staff, to listen and learn from what they have to say to achieve the aims of the Trust.
- communicate where possible if you are unable to fulfil the role by contacting your supervisor.
- monitor own health and wellbeing, as a volunteer, seeking medical advice when needed.
- adhere to all Trust policies and procedures, including Confidentiality, Equality and Diversity, general behaviour, Health & Safety, Relationships, Code of Conduct, Incident Report in accordance with this Volunteer Policy.
- communicate any planned changes to volunteer placement with the placement manager, supervisor, Engagement/Volunteer Manager.
- maintain a professional relationship and boundaries with service users, in accordance with the Trust's Relationships with Service users Policy.

Volunteers should expect the Trust to:

- recognise that successful volunteer involvement incorporates the individual's motivations, aspirations, and choices.
- ensure volunteers receive appropriate training, support, and regular supervision to help them deliver in their roles and to demonstrate the Trusts' appreciation of their expertise.
- celebrate the success and achievement of volunteers and volunteering.
- respect volunteers, listen and learn from what they have to say, consistently encouraging two-way communication.
- make financial and other provisions in management plans for the needs of volunteers.
This may include reimbursement for expenses, as agreed.
- foster a friendly and supportive atmosphere - aiming to make volunteering both fun and an enjoyable experience.
- provide an accessible problem-solving procedure and endeavour to resolve fairly, and timely any complaints or grievances.
- provide references, where requested, and support with job search skills where appropriate.

7.14 Problem Solving Procedures

Discipline

Most disciplinary matters will be dealt with informally by the placement manager, or volunteer's supervisor. If necessary, formal matters will be handled in line with Trust disciplinary policies and procedures.

Grievance

A grievance or complaint raised by a volunteer will be examined quickly and effectively in line with Trust policy.

- fairly, and timely any complaints or grievances.
- provide references, where requested, and support with job search skills where appropriate.

8. Dissemination, storage, and archiving (Control)

Within 5 working days of ratification of this policy, an 'ALL SHSC 'staff email alert will be sent to all staff informing them of the new/revised policy and attaching the link showing where the policy can be accessed via the intranet and internet.

Local managers are responsible for implementing this policy within their own teams.

This policy will be available to all staff via the Sheffield Health & Social Care NHS Foundation Trust Intranet and on the Trust's website. The previous version will be removed from the Intranet and Trust website and archived. Word and pdf copies of

the current and the previous version of this policy are available via the Medical Director.

Any printed copies of the previous version should be destroyed and if a hard copy is required, it should be replaced with this version.

In addition, the Assistant Medical Director and Clinical Directors will be instructed to ensure that all relevant medical staff are informed of the policy and associated documentation.

Training and other resource implications

All staff newly appointed to the Trust will receive information about the Volunteer Policy at Trust induction. In addition, the Engagement Manager and Facilitators will be available to work with staff on any training needs relevant to this policy.

All volunteers will complete a Trust induction prior to completing any volunteer activity this will include the Volunteer Induction and Comprehensive Safeguarding Training.

9 Audit, monitoring and review

The implementation of the policy will be audited by the Engagement/ Volunteer Manager and The Director of Nursing. Director of Human on an annual basis.

Monitoring Compliance Template						
Minimum Requirement	Process for Monitoring	Responsible Individual/group/committee	Frequency of Monitoring	Review of Results process (e.g. who does this?)	Responsible Individual/group/committee for action plan development	Responsible Individual/group/committee for action plan monitoring and implementation
Annual Review of compliance to Policy	Report to demonstrate, Managers and volunteers are satisfied with policy.	Lived Experience and Coproduction Assurance Group (LECAG)	Annual	Engagement/Volunteer Manager	Engagement team	LECAG

This policy will be reviewed by Policy Lead- *Policy documents should be reviewed every three years or earlier where legislation dictates or practices change.*

Review date: March 2026

10. Implementation plan

Action / Task	Responsible Person	Deadline	Progress update
<i>Engagement team to share the new policy and requirements with teams on visits</i>	Mia Bajin		

--	--	--	--

Action / Task	Responsible Person	Deadline	Progress update
New policy to be uploaded onto the Intranet and Trust Website.	Head of Communications	Within 5 working days of ratification	
A communication will be issued to all staff via the Communications Digest immediately following publication	Head of Communications	Within 5 working days of issue	
A Communication will be sent to Education, Training and Development to review training provision.	Head of Communications	Within 5 working days of issue	

11 Dissemination, Storage and Archiving (Control)

Version	Date added to intranet	Date added to internet	Date of inclusion in Connect	Any other promotion/ dissemination (include dates)
9.0	TBC			N/A

13 Links to other policies, standards, and legislation (associated documents)

- Health and Safety Policy
- Induction Policy
- Dress Code policy
- Mandatory Training Policy
- Individual Agreement Sign Off Form
- Volunteering in the Public Services: Health and Social Care, Baroness Neuberger's review as the Government's Volunteering Champion March 2008
- You cannot be serious by Sherry Clark, published by Volunteering England
- Volunteers and the Law, by Mark Restall, published by Volunteering England
- Volunteering in health and social care: securing a sustainable future, by C Naylor
- Jimmy Savile Investigation: Broadmoor Hospital, DoH 2014
- Themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile, Independent report for the Secretary of State for Health, February 2015, authors Kate Lampard, Ed Marsden.

- DBS Policy
- Relationships with Service Users Policy
- Safeguarding Adult policy
- Safeguarding Children policy

References

Jimmy Savile Investigation: Broadmoor Hospital, DoH 2014

Themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile, Independent report for the Secretary of State for Health, February 2015, authors Kate Lampard, Ed Marsden.

14. Contact details

<i>Title</i>	<i>Name</i>	<i>Phone</i>	<i>Email</i>
Director of Nursing Professions and Quality	Salli Midgley	0114 2711136	salli.midgley@shsc.nhs.uk
Head of Service User Engagement, Experience and Coproduction	Teresa Clayton	01142716743	Teresa.clayton@shsc.nhs.uk
Engagement/Volunteer Manager	Mia Bajin	01142263367	Mia.Bajin@shsc.nhs.uk

Appendix A

Equality Impact Assessment Process and Record for Written Policies

Stage 1 – Relevance - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

NO – No further action is required – please sign and date the following statement.
I confirm that this policy does not impact on staff, patients or the public.

I confirm that this policy does not impact on staff, patients or the public.

Name/Date: Mia Bajin

YES, Go to Stage 2

Stage 2 Policy Screening and Drafting Policy - Public authorities are legally required to have 'due regard' to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain 'protected characteristics' and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don't know and note reasons). Please see the SHSC Guidance and Flow Chart.

Stage 3 – Policy Revision - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	No		
Disability	No		
Gender Reassignment	No		
Pregnancy and Maternity	No		

Race	No		
Religion or Belief	No		
Sex	No		
Sexual Orientation	No		
Marriage or Civil Partnership	No		

Please delete as appropriate: - Policy Amended / Action Identified (see Implementation Plan) / no changes made.

Impact Assessment Completed by: Mia Bajin Name /Date

Appendix B

Review/New Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
Engagement		
1.	Is the Executive Lead sighted on the development/review of the policy?	Yes
2.	Is the local Policy Champion member sighted on the development/review of the policy?	Yes
Development and Consultation		
3.	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	Not applicable
4.	Is there evidence of consultation with all relevant services, partners, and other relevant bodies?	Yes
5.	Has the policy been discussed and agreed by the local governance groups?	Yes
6.	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	Yes
Template Compliance		
7.	Has the version control/storage section been updated?	Yes
8.	Is the policy title clear and unambiguous?	Yes
9.	Is the policy in Arial font 12?	Yes
10.	Have page numbers been inserted?	Yes
11.	Has the policy been quality checked for spelling errors, links, accuracy?	Yes
Policy Content		
12.	Is the purpose of the policy clear?	Yes
13.	Does the policy comply with requirements of the CQC or other relevant bodies? (Where appropriate)	Yes
14.	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	Yes
15.	Where appropriate, does the policy contain a list of definitions of terms used?	Yes
16.	Does the policy include any references to other associated policies and key documents?	Yes
17.	Has the EIA Form been completed (Appendix 1)?	Yes
Dissemination, Implementation, Review and Audit Compliance		
18.	Does the dissemination plan identify how the policy will be implemented?	Yes
19.	Does the dissemination plan include the necessary training/support to ensure compliance?	Yes
20.	Is there a plan to i. review ii. audit compliance with the document?	Yes
21.	Is the review date identified, and is it appropriate and justifiable?	Yes

Appendix C – Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
1.0	Draft policy creation	Feb 2012	Creation of policy
1.1	Review/ratification	Feb 2012	Amendments made during consultation, prior to ratification
2.0	Review	Sept 2015	Full review following new NHSLA standards being published
2.1	Review on expiry of policy		Committee structure updated
3.0	Review	Oct 2015	New draft policy created
4.0	Review	Nov 2015	Revision of draft policy following consultation to task and finish group
5.0	Review	Nov 2015	Further revision of draft policy following further internal and external consultation
6.0	Review	Oct 2016	No changes in content other than updates for new template, role titles and contact details
6.0	Review on expiry of policy (no amendments made)	Oct 2017	Policy review, date extended from September 2017 to February 2018
6.1	Review	Jan 2018	Slight amendment of content, update for new template, role titles and contact details.
6.2	Review	Jan 2018	Further revision of policy following consultation and discussion at SUSEG
7.0	Revised policy	Feb 2018	Review by PGG and approval by EDG
8.0	Review	August 2019	Slight amendment of content, contact details & Appendix H
8.0	Review	Oct 2019	Further reviews of expenses claim form.
8.0	Revised policy	March 2020	Review by PGG and approval by QAC
9.0	Revised policy	October 2023	Review by PGG and approval by LECAG

Appendix D – Development, Consultation and Verification

Development:

This policy has been revised as part of the policy review and update process. There are minimal changes from version 8. These have included: Suggesting the number of hours a volunteer should commit to.

Consultation: The draft policy was sent to numerous teams who use volunteers, and their feedback was incorporated.

Verification: The policy was verified by the Service User Engagement Group on 23 July 2019, only minimum changes have been made and were discussed within Sun:Rise, with individual Managers, and Experts by Experience, and this policy has been to LECAG.

Appendix E - Supervision Contract

Supervisor:	Date:
Supervisee:	
1. Frequency	
2. Length of session	
3. Venue	
4. Scope (e.g., Operational Line Management / Professional / Clinical)	
5. Links to other forms of Supervision	
6. Details of other Supervision	
7. Arrangements requiring cover	
8. Confidentiality (confirm the arrangements to apply)	
9. Evidence of sessions (see template sheet attached)	
10. Organisation if cancelled	
11. Date of Review for this contract	

Signed – Supervisee	
Signed – Supervisor	
Signed – Line Manager	

Appendix F- Supervision Template

Sample Record of Supervision

This is the minimum requirement for record keeping and this document must be available for audit purposes which will examine the uptake of this type of supervision.

Directorates and teams may require additional guidance and recording requirements, and the supervisee should keep these forms.

Name of Supervisor		
Name of Supervisee		
Role of Supervisee		
Work Area of Supervisee		
Topics discussed	Actions	Comments

Supervisor Signature

Supervisee Signature

Date

Appendix G - Individual Agreement

Individual Agreement

I agree to the following whilst taking part in

.....

As a group, we aim to provide a positive and collective experience in which everyone can benefit from the knowledge, skills and contributions of others. You can help us achieve this by:

- I will ensure that I uphold the Trust values – in particular, respect, kindness. and compassion
- Challenging the views, not the person
- An understanding of the need to maintain confidentiality when required.
- Keeping to time and task (however, everybody is free to come and go as they wish)
- Listening to each other and letting people put forward their contributions.
- Acknowledging and respecting diversity within the group and refraining from using offensive language.
- Not using drugs or alcohol prior to the meeting
- To respect all other's viewpoints, and perspectives on a subject.
- Service users will be supported in contributing their views through the establishment of a transparent process, proper facilitation, and feedback mechanisms.

We want to work in a way that helps people to use their natural capabilities, experiences, strengths, and creativity – and not to support ways of coping that hamper that. So please get help when you need it ...and help us when you can!

Please sign the individual agreement

Signed:

Date:

I declare that the information I have given on this form is correct and complete. I understand that if I knowingly provide false information, I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the Trust and NHS Counter Fraud Authority for the purposes of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

Signed (Claimant).....
Date.....

OFFICE USE ONLY:

Authorised by (Name) Job Title
.....

Signature.....
Date.....

General Notes:

In accordance with the HMRC allowances, mileage will be paid for volunteer drivers using their own car at the following rates:

Volunteer Drivers:

On the first 10,000 miles in the tax year - 45p
On each mile over 10,000 miles in the tax year - 25p

Volunteers who commute to their voluntary role:

25p per mile plus an additional 5p per mile if there is one or more passenger. For example, if you provide a lift to another volunteer.

Sustenance:

Volunteers who have been asked to carry out their voluntary role for more than five hours in a day (in addition to a lunch break) are entitled to a lunch allowance of a maximum of **£5.00**. Receipts must be provided. Please see our expenses procedure for more detailed



