

Volunteering Strategy Update

Trust Board	Item: 8.2
Date: 24th September 2014	Enclosure G
<p>Purpose of the Report: The purpose of this report is to inform members of the Trust Board of the Volunteering activities within Kingston Hospital during the period to September 2014, since approval of the Volunteering Strategy in January 2014.</p>	
<p>FOR: Information <input type="checkbox"/> Assurance <input checked="" type="checkbox"/> Discussion and input <input type="checkbox"/> Decision/approval <input type="checkbox"/></p>	
Sponsor (Executive Lead):	Duncan Burton, Director of Nursing and Patient Experience
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	Failure to maintain and improve quality of care
Link to Relevant Corporate Objective:	Objective 1
Document Previously Considered By:	Executive Management Team, 8 th September 2014
<p>Recommendation & Action required by the EMC : The Trust Board are asked to note the progress against the Volunteering Strategy 2014 –17 and endorse the continued direction of the Strategy implementation.</p>	



Kingston Hospital Volunteering Strategy 2014 – 2017 Progress Update, January – September 2014

Executive Summary

1. This paper reports on the progress of the Volunteering Strategy to date, results achieved and emerging priorities.
2. As of August 2014, there are 546 active volunteers active across twenty-four volunteering roles. The Trust has received funding following a competitive application process from Nesta and the Cabinet Office to support further recruitment, training and engagement of over 500 new volunteers. This will bring the Trust's total number of volunteers to 1,100 by February 2016.
3. The Trust exceeded its target to recruit over forty dementia volunteers by August 2014. The Trust has recruited 140 dining companions' volunteers since January 2014 in response to the Trust's quality improvement focus on patient experience of food and support at mealtimes. In June, the Trust welcomed John Lewis plc as the first corporate partner for dining companions. New roles including healthy lifestyles volunteers and patient experience research volunteers have delivered strong results for improving patient experiences in their pilot phases. The Trust has encouraged volunteer recruitment from diverse and hard to reach audiences. A new relationship with Kingston Learning Disability Parliament has generated three new volunteering roles that empower people with mild and moderate learning disabilities to participate.
4. In June 2014, the Trust adopted a new data management system that tracks volunteering activity across the Trust. The system, Slivers of Time (SoT) is funded jointly by the Department of Health and Royal Voluntary Service. On a Trust level, SoT has enabled accurate key performance indicator monitoring for volunteering. It has generated the operational data required to target recruitment and align volunteering where the need is greatest across the Trust. There is further work to be undertaken to realise the full potential of the software in the coming months.
5. The Trust has launched a new volunteering induction programme aimed at all volunteers. The programme combines interactive workshops with home-study to provide mandatory content. Feedback from the first programme indicated that 100% volunteers had "more" or "significantly more" confidence to volunteer as a result of attending.
6. The Volunteering Strategy has established formal governance arrangements that monitor and support implementation. For specialist roles e.g. dining companions and dementia volunteers, regular group supervision and secure online feedback has been established as an integral part of the volunteering role and commitment.

7. In June 2014, the Trust introduced questions to the Friends & Family Test that measure the coverage and quality of volunteering. This has demonstrated that almost a quarter of inpatients receive help and support from volunteers. Of these, 98% rated the help they received as either '*Good*' or '*Excellent*' (2% '*don't know*') indicating strong satisfaction. The Trust can build on this baseline to set targets for increased coverage.
8. Volunteers are reporting that the improved framework for volunteering is attracting them to the Trust, when many local and national causes are competing for their time and commitment.
9. Volunteers are bridging the gap between hospital services and non-statutory services in the community. The Trust has developed a successful Link Volunteer model for dementia (Stay Well, Kingston) and visual impairment (Thomas Pocklington Trust) to raise awareness and commence referrals for eligible patients into local services.

Conclusion

10. The Volunteering Strategy has begun to improve the quality framework that underpins good practice for hospital-based volunteering. Volunteers are attracted to the Trust's offer of a rewarding experience and high impact roles. The Trust's success as one of six NHS Trusts to participate in Helping in Hospitals will enable new projects, targeted recruitment and a rigorous evaluation of the difference that volunteers make to the Trust, patients and local community. The implementation of the Volunteering Strategy will continue with the priority to recruit and retain new audiences, implement new high impact roles, further invest in volunteers' training and expand volunteering to other sites managed by Kingston Hospital.
11. The **Trust Board** are asked to **note** the progress against the Volunteering Strategy 2014–17 and **endorse** the continued direction of the strategy implementation.

Kingston Hospital Volunteering Strategy 2014 – 2017

Progress Update, January – September 2014

Introduction:

1. The Volunteering Strategy was approved by the Trust Board on 29th January 2014. This decision represents a significant expansion of the scale, quality and impact of volunteering at Kingston Hospital.
2. This paper reports on the progress of the Volunteering Strategy to date, the results achieved and emerging priorities for this programme of work. All data reflects the status of Trust volunteering in August 2014.

Scale of Volunteering:

3. There are 546 active volunteers in the Trust. These volunteers have fulfilled the required stages of the Trust's volunteering procedures, from prospective to active volunteer.
4. Between January and June 2014, the number of volunteers reached a height of 683 volunteers on our database. However, after conducting an in-depth cleanse of all existing volunteering data, 137 of these records were re-categorised as 'lapsed' volunteers (volunteers who 'suspend' their activity due to personal reasons or withdraw from volunteering). The next phase of the strategy will target lapsed volunteers in a variety of ways to re-engage with the Trust at a lower level of commitment, such ad-hoc volunteering or community fundraising.
5. Accurate at 13th August 2014, in addition to the 546 active volunteers there were:
 - 40 volunteers awaiting approval (awaiting references, occupational health clearance or Disclosure & Barring Service Certificates)
 - 78 volunteers had suspended their volunteering activity (i.e. due to holiday/ school breaks)
6. The current average age of Kingston Hospital Volunteers is 40 years. The percentage of volunteers that fall into each age band can be seen in Appendix 1.

Range of Volunteering Opportunities:

7. Since the publication of the Volunteering Strategy, the Trust has increased its portfolio of roles by 5 roles to 24 in August 2014. In February 2014, in partnership with ISS Mediclean Ltd, the Trust developed 3 new roles with Kingston Learning Disability Parliament. These roles offer personal and professional development opportunities for young adults with mild to moderate learning disabilities in the following roles:
 - Gardening Volunteers
 - Catering Volunteers
 - Wheel Chair Buddies
8. The Trust has established a further 2 new roles in the last quarter, patient experience research volunteers (May 2014) and healthy lifestyles volunteers (June 2014).

The patient experience research volunteers have two core functions. They collect patient experience feedback in areas where the Friends & Family Test response rates are below national and locally set targets. They are also a resource to the Quality Improvement Team, Clinical Audit Team to inform and participate in plans for patient and public involvement. This group have been instrumental in achieving targets for patient and public involvement in service improvement. In July 2014, volunteers conducted over eighty surveys about patient experiences of hospital food to support the food quality improvement programme.

Healthy lifestyles volunteers support public health promotion and referrals to Royal Borough of Kingston Healthy Lifestyles Services. They are present in targeted clinics¹ across the Trust. Since its launch in June 2014, volunteers and generated significant new healthy lifestyles activity in the Trust with 206 interactions recorded in the first six weeks of the project. Of the staff, patients and visitors accessing Healthy Lifestyles Services through the scheme, almost a quarter (23%) took literature to increase awareness and self-referrals to Healthy Lifestyles Services. A further 2% new referrals were generated by healthy lifestyles volunteers. The scheme represents a new model for joint working between Local Authority Public Health Teams, clinical leadership and the Volunteering Service.

9. Since the launch of the Dementia Strategy, dementia volunteering has been reviewed and integrated with the Therapeutic Activities programme. The role re-launched in July 2014 increasing the cohort from nine to over fifty trained volunteers. We expect to see a sharp increase in the number of dementia volunteering hours fulfilled across the Trust from September 2014 (a change from fifty-nine hours per month to over two hundred hours) to reflect both an increased cohort and renewed commitment following the summer break.
10. The volunteer dining companion role is a response to the Trust's quality improvement focus on patient experience of food and support at mealtimes. There has been an intensive recruitment and training of 140 volunteers since January 2014. There are now 273 active dining companions and approximately 50 staff volunteers. This has resulted in increased fulfilment of volunteers supporting lunch and dinner across participating wards. Appendix 2 demonstrates the coverage of mealtimes by dining companions. Whilst all trends are heading in the right direction, the coverage of dining companions remains incomplete. High volunteer attrition and "did not attend" rates remain at the heart of these issues. The Volunteering Strategy needs to implement a response to high attrition rates. This will involve continued intensive recruitment and changes to way volunteers are supported to fulfil their agreed volunteering commitments.

Volunteering Partnerships:

11. Many sections of our local community are excluded from traditional forms of volunteering. However, the voluntary sector has responded with the development of new and flexible approaches e.g. e-campaigning, social media action, time-banking and micro volunteering. By becoming more flexible and innovative in the design of volunteering

methods, the Trust can attract a new demographic who may previously have been excluded from traditional hospital based volunteering. A funding bid has been submitted to the South London Innovation Network to create a 'Quality Improvement Volunteers Group built on these principles with the outcome expected in September 2014.

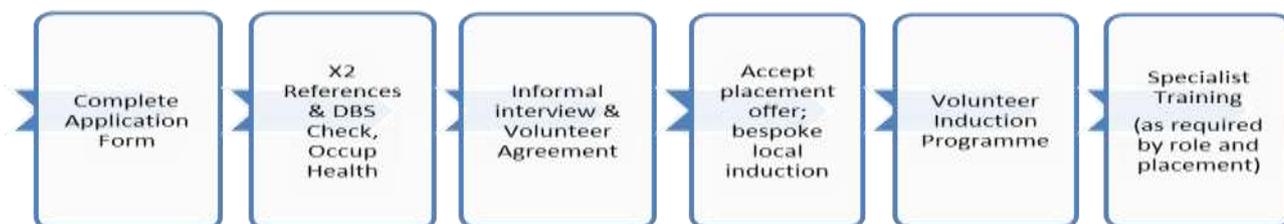
12. In the meantime the Volunteering Service has been actively developing new relationships with the local community:

- A volunteer recruitment partnership with local disability charities including Kingston Centre for Independent Living and Kingston Learning Disabilities Parliament.
- Outreach with local young people through partnerships with The Challenge, Kingston College and Kingston University with clear project outputs e.g. National Nurses Day Photography Project (May 2014) and recruitment follow-up.
- A visible presence at faith and age related community events, e.g. Kingston Festival of Older Life, Baitul Faituh Mosque women's volunteering events.
- The Trust established its first corporate volunteering partnership with John Lewis Partners. Twenty-nine Partners have trained and started in impact roles (Dementia Volunteers, Dining companions) since July 2014.

13. Kingston Hospital has joined forces with Kingston First and Kingston Voluntary Service to define a borough-wide quality standard for volunteering. The partnership will create 'Team Kingston' modelled on the post- Olympics 2012 Games-Makers legacy, Team London. Team Kingston provides unique opportunities for volunteers to transfer their skills through wider participation including food banks, emergency response volunteering, civic events and sporting events.

Volunteer Induction and Training:

14. The Trust has implemented a clear pathway for the recruitment and induction of all new volunteers, illustrated below. This has created clarity about the process, steps and mutual expectations between the Trust and Volunteers from prospective to active volunteering status and enhanced data capture.



15. The Trust is the first NHS Trust to receive Alzheimer's Society Dementia Friends accreditation for our in-house volunteer training. Our volunteers are therefore part of a wider social movement that is responding to the Prime Ministers' Dementia Challenge (2012) to create dementia-friendly communities. Dementia awareness is embedded throughout the volunteer recruitment process. This has been achieved through new measures:

- All new volunteers sign a statement of commitment to dementia-friendly volunteering in the Volunteering Agreement
 - All new volunteers sign the dementia champion role profile as part of the Volunteering Induction Programme
 - All new volunteers receive accredited dementia awareness training via the Volunteering Induction Programme
16. In July 2014, the Trust launched a new Volunteering Induction Programme aimed at all volunteers. In its first year, the programme is targeted at new volunteers and those who have started volunteering in the last six months. The programme is designed to equip volunteers with an applied knowledge of Trust policies e.g. Health & Safety, Safeguarding, Data Protection as relevant to them. It also welcomes new volunteers to the hospital and builds their confidence with an orientation to the values, corporate strategy and hospital environment. Feedback from the first programme was positive. 100% volunteer reported that they had “*more*” or “*significantly more*” confidence to volunteer at Kingston Hospital as a result of attending. From this starting point, the programme will be developed to integrate e-learning and new approaches to staff mandatory training.
17. In addition, a programme of bespoke training for specialist and high impact volunteering roles has been implemented. This includes:
- Dining companions Level 1 (1.5hr workshop)
 - Dining companions Level 2 (2hr workshop)
 - Dementia Activities Volunteer (3.5hr workshop)
 - Healthy Lifestyles Volunteer (1 day)
 - Patient Experience Research Volunteering (3.5hr workshop)
 - REU Service Support Volunteers (REU) 2 days
18. This provision is valued by volunteers and is increasing their confidence to volunteer and the outcomes for each role. 233 volunteers who have attended since the programme started in February 2014, with 97% reporting increased confidence as a result.
19. Supervision of volunteers is integral to safe and appropriate volunteering practices. All volunteers now have a named supervisor to provide day-to-day guidance and support to volunteers. Volunteer supervisors play a key role to optimise the volunteer roles that support their teams and departments whilst maintaining clear boundaries between volunteers and staff.

Data Collection:

20. In June 2014, the Trust launched a new volunteering database called Slivers of Time (SoT). Funded jointly by the Department of Health and Royal Voluntary Service for a three year pilot involving forty-two NHS Trusts, the data warehouse has enabled the Trust to:

- Plan ahead for our volunteering needs, showing where the need is greatest by time, role or location.
 - Match volunteers with the right skills, and availability to new and existing roles.
 - Book volunteers at short notice when urgent needs arise, e.g. roles that operate a flexible schedule such as dining companions and dementia volunteers.
 - Store all volunteering data in one place. This enables accurate reporting for monitoring and evaluating the performance of our volunteers.
 - Celebrate volunteers' contribution in terms of both time and impact
21. As a funded pilot, new functionality will be released to Trust's as the system is developed. Commencing in September 2014, these will transform the Trust's ability to schedule large groups of volunteers and ensure optimum coverage where the role has multiple locations e.g. dining companions. It will also create a dashboard for immediate reporting against key performance indicators for volunteering.
22. The way that the Trust evaluates the impact of volunteering is an integral part of the funding contract with Nesta. With the support of Business Intelligence and a new Volunteering Projects & Evaluation Officer post, the Trust will mine existing sources of data about patient nutrition and hydration, falls, delayed transfers of care, estimated dates of discharge, emergency hospital re-admissions and patient experience measures to assess how volunteering affects patient experience and clinical outcomes measures.
23. The Trust is working closely with a second Nesta site, Barts Health NHS Foundation Trust to co-develop a new evaluation methodology for a consistent approach and scalable results. The aggregated results across all six sites over eighteen months will provide significant evidence to inform a new national standard for NHS hospital-based volunteering. The Trust will submit base-line data to The Social Innovation Partnership, the independent evaluator for Helping in Hospitals in November 2014.

Impact of Volunteering:

24. The reputation of the Trust as a sector leader in NHS volunteering ultimately rests on the benefits of volunteering for our patients and the communities we serve. The vision of the Volunteering Strategy defined these benefits and are discussed further:
- a) Volunteers will enhance the experiences of people using Kingston Hospital:

Since June 2014, the Trust has used the Friends & Family Test to measure patient experiences of volunteering. Early results suggest that almost a quarter (24%) of inpatients received help and support from a volunteer in July 2014.¹ Of these, almost two-thirds rated the quality of help received as 'Excellent' (63%)². This could suggest that patients were satisfied with the quality of the help and support they received from volunteers.

¹ Full results in Appendix 2.

² 35% rated help as 'Good' or 'Satisfactory', 2% rated 'Don't Know / Can't remember'.

b) Volunteering improving patient experience:

Early analysis from July 2014 suggests that receiving help from volunteers may influence patients' response to the question "How likely are you to recommend our ward to friends and family if they needed similar care or treatment?" From just one month of data available, 13% more patients responded "Likely" who had received help and support from volunteers, compared with patients who did not. Volunteering did not have a significant influence over the other points on the response scale. This suggests that volunteering may influence a better overall experience of a ward for patients. This warrants further investigation with the support of the Business Intelligence Team.

c) Their unique perspectives will shape the care we provide:

The combination of a well-structured supervision framework and governance for volunteering has enabled volunteering to become genuine driver of improvement for patient experience and the services we provide. For example, the volunteer welcomers make observations about small incremental changes that could make a significant difference to the hospital experience. As a result the volunteer welcomers complete a written handover after each volunteering session. This feedback is monitored and ratified so that quick wins and medium term changes can be communicated and acted upon. It has also resulted in a new monthly briefing to welcomers to ensure they are better equipped with Trust information to answer frequently asked questions. The governance that underpins the volunteering strategy ensures that longer-term and strategic needs are noted by the Patient Experience Committee.

d) A personally rewarding experience for volunteers

The Trust operates in an intensely crowded market place of charities, voluntary groups and good causes all vying for the same finite resources of time, energy and compassion. When interviewed about she chose Kingston Hospital, one volunteer cited the developments in good practice that the Volunteering Strategy as drivers for her decision.

"I liked the fact that in Kingston Hospital, there are many various volunteering roles for nearly everyone.... We are supported in every possible way... we are provided with inductions, training programmes and I know what to do to protect myself and the public when I'm there... there are monthly supervision sessions to feedback."

e) Matching volunteers to opportunities that reward them

The same volunteer joined the programme whilst completing A-levels in June 2014. By August 2014, she had applied for and won a Nursing Assistant post on Blyth Ward. She which she credits her career development to volunteering.

"It has equipped me with the necessary skills to start a career in healthcare. It has given me the most valuable experience, from understanding basic patient care to the importance of public health in general in the community."

- f) Our approach to volunteering will strengthen our contribution to the life of our local community

The Volunteering Strategy has taken Kingston Hospital into the local community to encourage local people to get involved. It is enabling the Trust to connect in new ways with target audiences. It has formed the basis for strategic partnerships with local corporate and voluntary sectors.

Priorities for the Volunteering Strategy

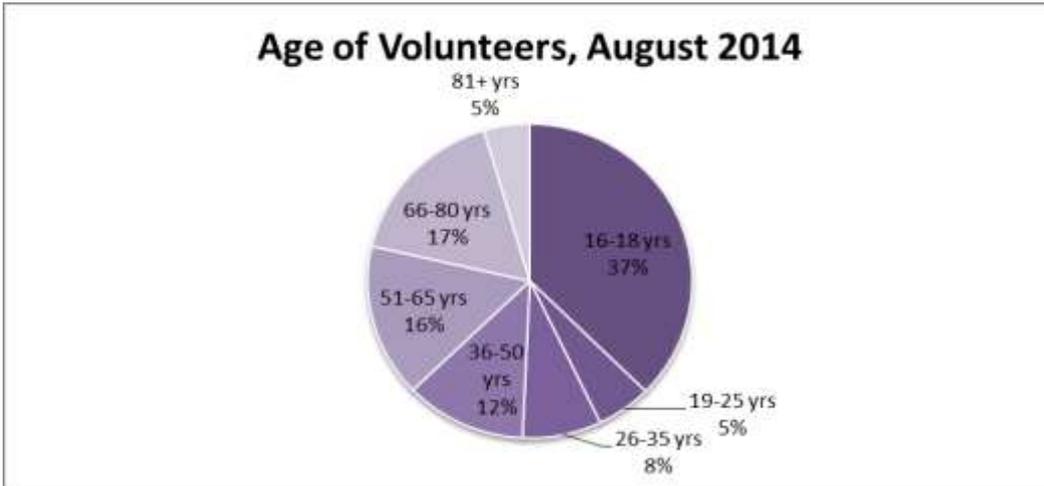
25. Broadly, the priorities for the next 12 – 18 months are as follows:

- To establish a new Volunteering Service team from the Nesta grant
- Further embed quality improvement systems for the management, mobilisation and tracking of volunteering activity
- Promoting staff engagement in the placement and supervision of volunteers
- Implementing a new evaluation framework with emphasis on volunteering impact for patient experience and clinical outcomes
- Implementing and expanding a suite of Nesta funded roles: Hospital-Home, Dementia Volunteers, Dining companions, Hospital Rangers
- Further investment in volunteer training, reward and recognition
- Harnessing new methods to increase the accessibility of volunteering
- Expanding volunteering to other sites managed by the Trust
- Supporting the Fundraising Strategy and Kingston Hospital associated charities to mobilise community fundraisers
- Planning and delivery of a major conference in early 2015
- Evaluating the experience of volunteers

Conclusion

26. In the first six months of delivering the Volunteering Strategy 2014 – 2017 excellent progress is being made in fulfilling the actions for the first year of implementation and is aligned with Trust priorities such as the Dementia Strategy, and work to fulfil improvements in food and the dining experience.
27. It is testimony to the progress achieved that the Trust has been awarded a Helping in Hospitals grant through Nesta and the Cabinet Office. Our priorities now turn to targeted recruitment to ensure we attract enough volunteers for optimum coverage across all roles and locations.
28. Implementation of the strategy will also focus on increased staff engagement to ensure good supervision of volunteers and feedback for improvement. It will also respond to new trends in volunteering that allow for flexible roles and more choice about when and where people volunteer.
29. The **Trust Board** are asked to **note** the progress against the Volunteering Strategy 2014–17 and **endorse** the continued direction of the strategy implementation.

Appendix 1: The age distribution of volunteers, August 2014



Appendix 2: Coverage of mealtimes, seven days a week by Dining companions, August 2014

Coverage by Dining companions is calculated simply by the percentage of mealtimes on participating wards that have volunteers allocated and attending on a regular basis, versus those with vacancies. The following pie charts depict the coverage for August 2014:

