

### Volunteering Strategy 2014-2017 Progress Report

<b>Trust Board</b>	<b>Item: 17</b>
<b>Date: 13<sup>th</sup> October 2015</b>	<b>Enclosure: L</b>
<b>Purpose of the Report:</b> This document provides the Trust Board with a progress report on the outcomes and impact of the Volunteering Strategy at its half-way point. The report also details the key approaches being undertaken to secure ongoing investment to support the detailed improvements made as a result of implementation of the strategy and end of Nesta funding in February 2016.	
<b>For: Information</b> <input checked="" type="checkbox"/> <b>Assurance</b> <input type="checkbox"/> <b>Discussion and input</b> <input checked="" type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
<b>Sponsor (Executive Lead):</b>	Duncan Burton, Director of Nursing & Patient Experience
<b>Author:</b>	Laura Shalev Greene, Head of Volunteering
<b>Author Contact Details:</b>	Ext 2959 Laura.shalevgreene@kingstonhospital.nhs.uk
<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	Volunteering Policy is due for ratification by 1 <sup>st</sup> November 2015.
<b>Legal / Regulatory / Reputation Implications:</b>	The Trust has asked the CQC to review volunteering as service during January 2016 inspection Volunteer mandatory training is a requirement of the NHSLA Trust Public Liability Insurance.
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input checked="" type="checkbox"/> <b>Effective</b> <input checked="" type="checkbox"/> <b>Caring</b> <input checked="" type="checkbox"/> <b>Responsive</b> <input checked="" type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Corporate Objective:</b>	<b>Objective 3:</b> <i>to successfully develop and embed the involvement of the community in the running of the hospital. We will develop and increase the engagement of Members through volunteering and fundraising initiatives</i>
<b>Document Previously Considered By:</b>	Executive Management Team – 5 <sup>th</sup> October 2015
<b>Recommendations:</b>  <b>The Trust Board are asked to:</b> <ul style="list-style-type: none"> <li><b>Note and discuss</b> the progress with the Trusts Volunteering Strategy 2014-2017 and <b>advise</b> on any further areas for specific focus over the remaining 18 months of the strategy</li> </ul>	

## Volunteering Strategy 2014-2017 Progress Report Trust Board – October 2015

### 1. Introduction

- 1.1 The Trust Board approved its first Volunteering Strategy 2014-2017 in January 2014, and receives bi-annual reports of progress. This document therefore presents the outcomes and impact of the Volunteering Strategy at its half-way point.
- 1.2 In August 2014, the Trust received an investment of £100,000 to support the exponential growth of the Volunteering programme. As part of the funding requirements the Trust adopted a Theory of Change methodology to generate an evidence base of outcomes and impact of the Trust's unique approach to volunteering. A baseline was taken in November-December 2014 and the first six months' data has been reported to the Patient Experience Committee.
- 1.3 The report also discusses key challenges that have influenced the pace or approach originally anticipated. It also touches on the implications for the Volunteering Strategy once Nesta's investment of £100,000 ends in February 2016.
- 1.4 In light of the progress that has been made with volunteering the Trust has asked that Volunteering be considered a service for review by the Care Quality Commission during their planned inspection in January 2016.

### 2. What impact has the Volunteering Strategy delivered to date?

- 2.1 The outcome measures and evaluation methodology has generated strong evidence that links volunteering activities and hospital outcomes. The following results present the evidence of the Volunteer Strategy's performance and impact at the half-way point<sup>1</sup>:
- 2.1.1 *Coverage*: Between 18% and 24% adult hospital in-patients currently report<sup>2</sup> they had access to help and support from volunteers.
- 2.1.2 *Readmissions*: Early data is showing that patients who received Hospital 2 Home (H2H) services are 58% less likely to be readmitted within 30 days of discharge<sup>3</sup>.
- 2.1.3 *Anxiety at Discharge*: Patients who access H2H experience an average 49% improvement in their levels of reported anxiety about going home from hospital.
- 2.1.4 *Voluntary sector provision*: More than half (52%) patients who accessed H2H are still in touch with a voluntary sector service after six weeks, transitioning non-acute health and support needs closer to home.

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<sup>1</sup> Data reflects Q4 January - April 2015, and Q1 May – July 2015 as complete data sets at time of reporting.

<sup>2</sup> Data collected through a filter question on the Adult Inpatient Friends & Family Survey, AAU and A&E Patient Surveys since June 2014

<sup>3</sup> The report notes that this represents only a single quarter of data and small sample size of 31 patients, April – June 2015 compared against the control group of all patients who did not receive H2H services within the same age group and wards.

- 2.1.5 *Dementia patient experience*: Dementia Activities Volunteers are maintaining an average 18% improvement in mood and wellbeing when compared with the base-line figure.
- 2.1.6 *Nutrition*: The Friends & Family Test (FFT) is demonstrating a small but consistent 5% average improvement on patient reported satisfaction at mealtimes when supported by Dining Companion volunteer, compared to patients who do not have access to volunteers.
- 2.1.7 *Getting volunteers where they are needed most*: There has been a 15% increase over the past year in volunteers' time focused on patients aged 81+. This evidence suggests that as intended by the Strategy, volunteers are increasingly mobilised to deliver support where the need is greatest.
- 2.1.8 *Scale*: The scale of the volunteering-force at Kingston Hospital has increased by 33% over the duration of the Strategy; there are 866 active volunteers and the Trust remains on track to recruit 1,000 by April 2016.

2.2 In March 2015 the Trust ran an inaugural Volunteering Conference and Impact Summit, bringing together over 200 volunteers, local stakeholders and national decision-makers to celebrate the Volunteering Strategy and showcase progress and results so far. The first set of Kingston Hospital Volunteer 'Living the Values' Awards were also given at this event.

2.3 The Impact Summit acted as a national platform to influence a new national approach for NHS hospital based volunteering and directly informed NHS England's Community Voluntary and Social Enterprise Review (2014). In September 2015, the Trust has accepted a position as the only NHS Trust represented on the NHS England steering group for Volunteering & Social Action in the NHS Five Year Forward View. The Trust is therefore becoming a key influencer in the future policy and strategy that will maximise the impact and rewarding experience for over 3 million volunteers across health and social care in the current Government.

### 3. How far has the Trust's vision for Volunteering been achieved?

The Volunteering Strategy is oriented around a single vision that made four distinct commitments:

**Volunteers will enhance the experiences of people using Kingston Hospital and their unique perspectives on hospital life will shape the care provided.**

**Our volunteers will have a personally rewarding experience and know that their role has made a difference.**

**Our approach to volunteering will strengthen our contribution to the life of our local community<sup>4</sup>**

<sup>4</sup> Kingston Hospital Volunteering Strategy Vision 2014 - 2017, pg 3 2014 - 2017

### **3.1 ‘Volunteering will enhance the experiences of people using Kingston Hospital’**

3.1.1 In December 2014, 89% volunteers and 77% staff<sup>5</sup> reported that they agreed that the volunteering programme has led to improvements for patient experience at Kingston Hospital.

3.1.2 As presented earlier however, the value of volunteers’ support cannot be defined in such black and white terms. A letter from a patient<sup>6</sup> to his H2H Volunteer exemplifies the role and impact of volunteers who provide skilled and compassionate support to alleviate the anxiety of returning home from hospital

### **3.2 ‘and their unique perspectives on hospital life will shape the services we provide’**

The Volunteering Strategy has delivered a range of different forums that listen and act upon volunteers’ feedback as part of the Trust-wide commitment to quality improvement.

3.2.1 *Quality Improvement Volunteers:* The Patient Assembly has transitioned into a new volunteering function known as Quality Improvement Volunteers. The new model connects skilled volunteers to a Service Line and act collectively as a Forum to champion the Quality Strategy.

3.2.2 *Patient Hydration:* A grass-roots NHS Change Day 2015 Campaign led by Dining Companions #KHFTHydrate involved over 40 Dining Companions and ISS partners to disseminate Dietetics’ Team hydration strategies for patients at risk of de-hydration through a volunteering response.

3.2.3 *End of Life Care:* A new Chaplaincy-led service matches Chaplaincy Volunteers with the End of Life Care Clinical Nurse Specialist Team to provide spiritual and pastoral support for patients who are alone at the end of life.

3.2.4 *Welcomers:* Enhanced use of the Welcomers’ during the Outpatient re-development and transition to new parking system has supported efforts to reduce the disruption to patient experience at a key risk point.

3.2.5 *Volunteering Conference:* featured a prominent volunteer listening event in March 2015 centred on improving carers’ experiences. A resulting action plan includes enhancing service provision through the Kingston Carers’ Network.

The impact of such platforms are amplified by visible senior leadership and formal governance to respond where there is clear evidence of benefit for patients and carers, staff, community or hospital environment.

### **3.3 Volunteers will have a personally rewarding experience of volunteering and know their volunteering has made a difference.**

3.3.1 *What our volunteers tell us:* 91% volunteers<sup>7</sup> have reported that they are proud to volunteer as an indicator of a positive experience of volunteering. Insight into the drivers of volunteers’

<sup>5</sup> The final percentage 23% felt they could neither ‘agree nor disagree’.

<sup>6</sup> Appendix 2

<sup>7</sup> Source: Volunteer Satisfaction Survey, November 2014

experience<sup>8</sup> for the Trust's unique and diverse volunteer demographic has influenced the volunteer journey and design of the Volunteering Programme.

3.3.2 *Personal impact:* In March 2015, the Trust held a successful inaugural Volunteering Conference and Summit on Impact Volunteering. A values-based Awards Scheme launched at this event incorporated a fifth award for Personal Impact – someone who had used their volunteering to grow in confidence, skill and knowledge to enhance opportunities in their personal or professional life. The winners' transcript is included in Appendix 1.

3.3.3 *Quality training provision:* The Volunteering Learning & Development Programme has also been extended this year resulting in an average of 98% increased confidence ratings<sup>9</sup> and core and specialist volunteer training pathways designated by role. A partnership approach with key clinical staff and subject matter experts ensures that volunteers are compliant with all statutory policies and mandatory knowledge relevant to their roles, environments and a volunteering audience.

3.3.4 *A culture of volunteering:* The Volunteering Strategy and its emerging evidence base have created a more positive reputation for volunteering within the Trust; as celebrated at the AGM in September 2014.

### **3.4 Our approach to Volunteering will strengthen our contribution to the life of our local community.**

3.4.1 The Trust has evolved the range and number of community volunteering partnerships. These mobilise expert volunteers from the community voluntary sector to deliver information and support earlier in the patient pathway.

3.4.2 A pilot public health volunteering role, Healthy Lifestyles Volunteers actively focused on services and patient populations where changes in health behaviours can improve clinical outcomes, e.g. stopping smoking before surgery. Following a successful pilot, funding options are being explored with Kingston Public Health Team.

3.4.3 Maternity – a new suite of four clinically focused volunteering placements has resulted in a new provision for 'Access to Midwifery' students to accrue the hours they need to meet eligibility criteria for Midwifery degrees.

3.4.4 The Trust is actively maintaining relationships with over twenty local and national charities to increase their contact and service provision with patients earlier in their patient pathways. The Thomas Pocklington Trust Service Support Volunteers have contacted over 400 patients and provided services to 5% of all presentations to the Royal Eye Unit (REU) between June – September 2015.

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<sup>8</sup> The top three things that motivate our volunteer community and its unique demographic are:

Role satisfaction (26%); Impact (23%); Acts of Service (15%). Source: Volunteering Satisfaction Survey Nov 2014

<sup>9</sup> Confidence as a result of training is monitored quarterly by the Patient Experience Committee for the Volunteering Strategy KPI Report Card

- 3.4.5 Kingston Carers' Network (KCN) has provided practical and emotional support to 700 carers over a nine-month provision across four inpatient wards. The Volunteering Strategy has defined the model for setting up effective reciprocal relationships that deliver strong outcomes for the Trust, targeted patient groups and community and voluntary sector providers. The Trust will submit a funding proposal to the Garfield Weston Foundation by December 2016 to the value of approximately £200K to build on the successful KCN provision and extend its reach across the Trust and post discharge. If successful, the funding will in part enable a dedicated Centre for Volunteering which welcomes and facilitates a larger programme of services in partnership with voluntary sector providers on site.
- 3.4.6 Partnerships with job centres, mandatory placement brokers, Kingston Learning Disability Parliament are starting to ensure marginalised and hard to reach groups are realising the benefits of volunteering across the Trust.

#### **4 Challenges that have impacted progress as set out in the Strategy**

##### *4.1 Paperless Volunteer Management*

In April 2014 the Trust became a first wave adopter of a new online platform to manage the data, time and reporting outcomes of volunteering across the acute hospital sector.

Despite its designation as provider of choice to NHS Volunteering Services by the Department of Health and Royal Voluntary Service the Trust experienced significant issues within the product, currently known as DePoel Communities and has undertaken a planned withdrawal from the contract.

##### *4.2 Two interim solutions are underway which maximise existing Trust resources.*

4.2.1 An immediate merging of volunteering and fundraising supporter records using Blackbaud E-Tapestry will deliver seamless supporter management journey between fundraising, volunteering and shared audiences.

4.2.2 A pilot to use the HealthRoster to book, monitor and interface with up to 40 new Maternity Volunteers will be piloted by January 2016 with a view to phased roll-out across all volunteering roles from April 2016.

##### *4.3 Increased national scrutiny and transparency of NHS volunteer management*

Following the Lampard Report<sup>10</sup> there has been a universal driver across NHS services to achieve 100% adherence the legislative requirements and volunteering best practice for recruitment, data and performance management. In December 2014, the Trust confirmed that all existing volunteers are 100% adherent to recruitment checks and new systems have been introduced to maintain compliance.

##### *4.4 The Volunteering Policy has been redeveloped to reflect the recommendations of the report, including a Celebrity & VIP Volunteering Policy. It also sets out an efficient recruitment process and protocol to ensure volunteers' mandatory and statutory induction*

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<sup>10</sup> Themes and lessons learned from NHS investigations into matters relating to Jimmy Saville. Independent report for the Secretary of State for Health. Kate Lampard, Ed Marsden. February 2015

remains current one year in placement or more. The Volunteering Policy is on-track for ratification by the Patient Experience Committee in November 2015.

## 5 Next steps – a sustainability plan for Volunteering

- 5.1 In 2014/15 the post of Head of Volunteering, which had been seed funded by the hospital charity, was made substantive, representing an increase in core staff budget to support volunteering and a reflection of the visibility and celebration of volunteering within the Trust's culture.
- 5.2 The advances in progress with implementing the strategy with the funding investment by Nesta, have demonstrated the impact that supportive infrastructure and focus can make in delivering advancements in impact volunteering.
- 5.3 As with many Trust services, the volunteering service is not immune to periods of staff change, and an increasing demand and potential for this work. A number of immediate solutions have been identified to ensure that the volunteering service is sufficiently resourced until the financial year-end once the funding from Nesta expires in February 2016. The core funding needs and solutions will be reviewed as part of budget setting for 2016/17 over the coming months. In addition the Trust is actively pursuing alternative sources of funding as outlined below to support its ambitions.

*5.3.1 Soft funding options:* Maximising the skill of the in-house bid-writer to source internal charitable funds and external grants to extend Hospital 2 Home by at least a further three months (until April 2016) and deliver a full-year of service delivery.

*5.3.2 Commissioning routes:* The Hospital 2 Home Service has been added to Commissioning Log 2015/16, with a view to obtain ongoing funding to support the service.

*5.3.3 Joint bids:* The Volunteering Strategy has influenced the focus of other major funding bids, including a £400K bid to Alzheimer's Society to extend the Therapeutic Activities Programme for Dementia submitted in August 2015, and a planned bid to the Garfield Weston Foundation as previously discussed.

*5.3.4 External partnerships:* Funding bids are in development to re-start the Healthy Lifestyles Volunteering partnership and extend provision of Hospital Carers' Surgeries through Kingston Carers' Network volunteers.

## 6 Conclusion & Recommendations

- 6.1 Volunteering is a currency that the NHS needs particularly in the current financial climate, and scale of demographic and health related changes. This report indicates the difference that can be made through empirical evidence and the human stories that powerfully illustrate the impact of volunteering at patient, Trust-wide and community level.
- 6.2 The Trust is actively pursuing external sources of funding to continue the outputs and impact as demonstrated by investment through Nesta.

6.3 We are confident that the Trust is continuing to take taking an active place as a sector lead for volunteering in hospitals; and that the ambition set out by the Volunteering Strategy will be achieved by 2017.

6.4 **The Trust Board are asked to:**

- **Note and discuss** the progress with the Trusts Volunteering Strategy 2014-2017 and **advise** on any further areas for specific focus over the remaining 18 months of the strategy

**Appendix 1: Personal Impact Award - (volunteers, staff or managers to nominate)**

A volunteer that:

- Puts patients and families at the heart of everything they do and makes a real difference.
- Has made significant progress in their personal and/or professional life as a result of their volunteering at Kingston Hospital.
- Has developed new skills and/or knowledge through their volunteering at Kingston Hospital
- Has completed all required training and applied their learning

**WINNER: PERSONAL IMPACT: Roxanne Barker**

Nominated by Jo Trout, Roxanne is a real asset to the Dementia Therapeutic Activities Programme. Jo said "*Roxanne's skill is to meet any patient with dementia, regardless of the severity of the disease, and find a meaningful way to connect with them and restore their sense self. She looks at each person as an individual and treats them as such*". Her experience as a Dementia Volunteer inspired her to do a NVQ in Health and Social Care and she is now learning about Dementia in this qualification. We wish her well in her studies into Dementia and journey to a professional career in health care.

Roxanne Barker commenced her new employed role on the Trust Bank as Therapeutic Activities Assistant in September 2015.

**Highly Commended: Michelle Harbulet**

Michelle's contribution to the Wolverton Centre the team really shone through. Has high level of trust and reliability. All 4 of her nominators cited her friendly approach and high level of initiative which are skills that she will use in her career. It's hard to believe it's the same shy person introduced to volunteering by her support worker She has blossomed through her volunteering and we're lucky to have her at this early stage in her career.

## Appendix 2: Scanned image of a patient's letter of thanks to a Hospital 2 Home Volunteer

15<sup>th</sup> July 2015

Dear Fiona

Just a line to thank you, for coming to see me, and the support you offered. When you are 83 and unwell, you cannot imagine how nice and comforting life could be, once the problems are cleared, and resolved.

My lovely grandma Helen, used to say, "Every problem has its solution, the difficulty is to FIND THE SOLUTION!!"

I look forward to hearing from you

Sincerely