

# Policy for Involving Volunteers in our Work

## August 2021

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Name of originator/author:	Engagement Manager
Name of Sponsor:	Director of Commissioning Development
Name of responsible committee	Governance Sub committee
Date issued:	September 2021
Review date:	1 October 2022
Target audience:	All staff working within or on behalf of NHS Sheffield CCG

To ensure you have the most current version of this policy please access via the NHS Sheffield CCG Intranet Site by following the link below:

<http://www.intranet.sheffieldccg.nhs.uk/policies-procedure-forms-templates.htm>

## Policy Audit Tool

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

<b>Please give status of Policy:          New</b>		
<b>1.</b>	<b>Details of Policy/Procedural Document</b>	
1.1		C019/10/2022
1.2	Title of Policy:	Policy for involving volunteers in our work
1.3	Sponsor	Director of Commissioning Development
1.4	Author:	Engagement Team
1.5	Lead Committee	Governance Sub-committee
1.5	Reason for policy:	This policy and procedure sets out how the CCG involves volunteers in line with our values and behaviours to ensure that staff recruit, train, support and acknowledge the contribution of volunteers appropriately.
1.6	Who does the policy affect?	CCG staff and volunteers
1.7	Are the National Guidelines/Codes of Practice etc issued?	This policy is in line with NHS England's Patient and Public Voice policies and the local Voluntary Action Sheffield policy
1.8	Has an Equality Impact Assessment been carried out?	Yes and attached
<b>2.</b>	<b>Information Collation</b>	
2.1	Where was Policy information obtained from?	National and local best practice, NHS England, Voluntary Action Sheffield, current staff and volunteers.
<b>3.</b>	<b>Policy Management</b>	
3.1	Is there a requirement for a new or revised management structure for the implementation of the Policy?	No
3.2	If YES attach a copy to this form.	
3.3	If NO explain why.	This policy supports current work by CCG staff and volunteers and puts in place an appropriate framework to provide a consistent and proportionate approach
<b>4.</b>	<b>Consultation Process</b>	
4.1	Was there external/internal consultation?	Yes.
4.2	List groups	CCG volunteers CCG and LA staff who manage volunteers Strategic Patient Engagement, Experience and Equality Committee CCG Engagement Team CCG HR Team CCG Health and Safety Team Anti-Crime Specialist Team CCG Information Governance Team CCG Finance team Voluntary Action Sheffield

		Integrated Care System Team
4.3	Have external/internal comments been included?	Yes. All draft versions have been shaped by comments from internal / external sources.
4.4	If external/internal comments have not been included, state why.	
<b>5.</b>	<b>Implementation</b>	
5.1	How and to whom will the policy be distributed?	CCG staff via the intranet, internal training for staff currently managing volunteers, new staff as part of induction, ongoing peer to peer support.
5.2	If there are implementation requirements such as training please detail.	<ul style="list-style-type: none"> <li>• Training to ensure staff are aware of the new policies and procedures</li> <li>• Ongoing peer to peer support</li> </ul>
5.3	What is the cost of implementation and how will this be funded	Overarching implementation of policy to be absorbed in to the Engagement Team role, staff time for training and peer to peer support to be absorbed into individual roles. Cost of reimbursement of volunteer expenses likely to increase (currently happening but likely to increase when this is encouraged).
<b>6.</b>	<b>Monitoring</b>	
6.1	How will this be monitored	Report to the Strategic Patient Engagement, Experience and Equality Committee about the number of volunteers, their roles and their feedback about volunteering in the CCG. To be accompanied alongside feedback from staff about impact, challenges and support requirements.
6.2	Frequency of Monitoring	Every 6 months – May and November

## Version Control

VERSION CONTROL				
Version	Date	Author	Status	Comment
V1	20 Nov 2018	Helen Mulholland	New	This policy and procedure describes an overarching approach to supporting volunteers in our work and incorporates the previous 'Reimbursement Of Expenses For Volunteers And Citizens Policy And Procedure'.
				GSc agreed on 4 February 2020 that the review date should be changed from November 2019 to November 2020
	31 August 2021			GSc agreed that the review date should be changed from November 2020 to 1 April 2022

# Contents

<b>Policy</b>		<b>Page</b>
<b>1</b>	Introduction, Purpose and Scope	4
<b>2</b>	Context	4
<b>3</b>	Involvement in developing this policy	5
<b>4</b>	Why do we involve local people?	5
<b>5</b>	Principles of volunteering in NHS Sheffield CCG	6
<b>6</b>	Embedding this approach in NHS Sheffield CCG	6
<b>7</b>	Monitoring effectiveness of this policy and procedure	6
<b>8</b>	Inclusive involvement	7
<b>9</b>	Reimbursement of expenses	7
<b>10</b>	Resolving issues as they arise	8
<b>11</b>	Exit interview	8
<b>12</b>	Review of this policy and procedure	9

<b>Procedure</b>		<b>Page</b>
<b>13</b>	Developing role descriptions	10
<b>14</b>	Recruiting volunteers	11
<b>15</b>	Volunteer induction and training	11
<b>16</b>	Ongoing support	12
<b>17</b>	Expenses reimbursement	13
<b>18</b>	Data protection	15
<b>19</b>	Insurance	15
<b>20</b>	Problem solving procedure	15

<b>Appendix</b>			<b>Page</b>
<b>21</b>	<b>A</b>	Volunteer and citizen expenses claim form	18
<b>22</b>	<b>B</b>	Confidentiality agreement	19
<b>23</b>	<b>C</b>	Volunteer partnership agreement	20
<b>24</b>	<b>D</b>	Equality Impact Assessment	24
<b>25</b>	<b>E</b>	Examples of volunteering activity, from a volunteers perspective	28
<b>26</b>	<b>F</b>	Programme Management Office action plan for implementation	29

# 1 Introduction, Purpose and Scope

1.1 This policy sets out how the CCG involves volunteers in line with our [values and behaviours](#) to ensure that staff can recruit, train, support and acknowledge the contribution of volunteers appropriately. It aims to ensure that volunteers are treated fairly and there is a clear policy for dealing with questions or issues as they arise. It focuses on the involvement of volunteers in our work on a one-off or ongoing basis to enhance the commissioning of services

1.2 This policy expands on section 18 of the CCG [Selection and Recruitment policy](#)

1.3 This policy is aimed at:

- CCG staff who support volunteers within their work
- CCG volunteers
- Senior Managers

## 2 Context

2.1 In June 2018, Voluntary Action Sheffield<sup>1</sup> launched its vision for the city:

“Sheffield is a city which values, promotes and engages volunteers and volunteering to make the city a better place to live and work”

And stated the following strategic goals for increasing volunteering in the city which:

- Is accessible to everyone
- Improves health and wellbeing
- Increases skills, personal development and employment
- Increases resilience, connections and cohesion in communities
- Enhances quality and capacity of services in Sheffield

One of the aims for this policy is to support those city-side strategic goals.

2.2 The term ‘volunteer’ and ‘volunteering’ is used to describe several different types of activity within NHS Sheffield CCG and it is therefore important to be clear what this policy and procedure relates to:

Term	Meaning	Relationship to this policy
‘CCG volunteers’	People who give their time on an ongoing basis to support the work of the CCG and have a role description that outlines their contribution	The main focus of this policy and procedure
‘Involvement of citizens in our work’	People who attend meetings in public e.g. Governing Body or those who attend a focus group about a particular area of our work	Included in this policy and procedure
‘Patient and Public Voice Partner’ (as	People who are part of a committee that demonstrates strategic and accountable leadership and decision-making ability and	Included in this policy and procedure

<sup>1</sup> <https://www.vas.org.uk/voice-influence/campaigns/>

defined by NHS England)	where the committee has delegated authority of the CCG Governing Body	
'Employee volunteering'	Staff who undertake volunteering activity as part of their employment at the CCG for another organisation or charity	Not part of this policy and procedure

2.3 NHS Sheffield is committed to working in partnership with public, private and voluntary and community sector organisations to make contributions through volunteering rewarding and worth-while.

### 3 Involvement in developing this policy

3.1 This policy is based on national best practice and local expertise to ensure that it meets the needs of the organisation. Volunteers and staff were involved in workshop sessions and draft versions were peer-reviewed, to ensure that expertise and experiences influenced its content. Expert advice was sought from Voluntary Action Sheffield and further changes were made as a result. In addition, this policy was reviewed by the Strategic Patient Engagement, Equality and Experience Committee.

### 4 Why do we involve local people?

4.1 There are many benefits to the CCG in involving volunteers and citizens in our work. These include:

- Local people can bring a different perspective to our work, often one that reflects the views of the local community
- They bring credibility to the CCG – giving time suggests that the work we do is of value to the local population
- Specific skills and knowledge that enhance the dialogue and widen the debate, that enables the CCG to develop commissioning responses based upon a clear understanding and appreciation of local need
- Increased accountability of commissioners in respect to improving patient outcomes
- Helping to create good quality, effective, cost effective services
- Meeting the CCG's statutory responsibility to involve, as outlined in the Health and Social Care Act 2012<sup>2</sup>

4.2 There are also proven benefits for volunteers and citizens:

- Volunteer opportunities can provide new challenges and enable people to learn new skills
- Volunteering can be a stepping stone into employment or training opportunities
- By donating their time, citizens can 'give something back' to healthcare in Sheffield
- Social isolation is as bad for health as some common health behaviours such as smoking. Stronger communities are therefore good for health and volunteering can provide opportunities to meet like-minded people
- Volunteering can provide an opportunity to be involved with something interesting and rewarding

<sup>2</sup> <http://www.legislation.gov.uk/ukpga/2012/7/section/26/enacted>

## **5 Principles of volunteering in NHS Sheffield CCG**

5.1 The CCG will ensure that all volunteers:

- Are treated with respect
- Are valued and that their contribution to the CCG is appreciated
- Should be able to contribute in a safe and healthy environment that is free from harassment, intimidation, bullying, violence and discrimination

5.2 Those people who volunteer over a period of time:

- Are recruited following a fair, open and transparent process
- Have satisfying and interesting volunteer roles, that are clearly defined
- Are welcomed and supported appropriately in the department or team where they are volunteering
- Receive support, supervision and training to help them fulfil their role where required
- Are encouraged to claim travel and other reasonable out of pocket expenses
- Do not replace paid staff but support the work of paid staff to enhance what the CCG delivers
- Have not been pressurised or forced into volunteering for the CCG

## **6 Embedding this approach in NHS Sheffield CCG**

6.1 Embedding the ethos of this approach, and the practical steps staff need to take to appropriately support volunteers, will require training and ongoing support. This training will be developed according to feedback from staff and volunteers

6.2 In addition to training, a peer support network for staff who manage volunteers will be established to provide a forum for discussing issues as they arise and to celebrate the contribution volunteers make to the organisation

6.3 The training and peer support opportunities will also be the forum where the numbers of volunteers contributing to the organisation will be evidenced and the resource required to appropriately support people will be assessed, particularly if individual staff members are managing a significant number of volunteers

6.4 As part of national Volunteers Week (1-7 June), an annual celebration to thank CCG volunteers will be established to acknowledge the contribution local people have made

## **7 Monitoring effectiveness of the policy and procedure**

7.1 The Strategic Patient Engagement, Experience and Equality Committee will receive a report every six months which gives details about:

- The impact of this policy and procedure, measured via feedback from staff and volunteers in the form of a bi-annual survey
- The number of volunteers involved with the CCG and their roles
- Feedback from volunteers about their experience of volunteering in the CCG, including information from exit interviews

- Feedback from staff about the challenges they have faced and any additional support requirements
- Suggested amendments to the policy and procedure at the review date

## 8 Inclusive involvement

8.1 NHS Sheffield CCG uses a variety of approaches and techniques to encourage the involvement of individuals and groups in its commissioning. These include targeted community engagement with seldom heard communities, regular involvement from Patient Participation Group members and extensive involvement in consultation processes

8.2 Our aim is not only to hear from all sectors of the population but to actively ensure that the services we commission meet the needs of the diverse population we serve. We therefore welcome volunteers from all backgrounds. We are committed to implementing our [Equality and Diversity Policy](#) and to employing, involving and working with the widest range of people

8.3 In order to reflect the views of the local community, we work proactively to involve different groups from the community as volunteers in our work

## 9 Reimbursement of expenses

9.1 Expenses will be paid to volunteers and citizens who:

- Have been recruited to a specific volunteer role (or those who attend for interviews or meetings relating to a specific role)
- Have been invited to contribute to a meeting, activity or event held by, or on behalf of NHS Sheffield CCG e.g. a focus group about a specific topic

9.1.1 For those people who receive benefits, claiming expenses for costs incurred whilst volunteering should not have a negative impact on benefit entitlement. If people are concerned about how volunteering activity might impact on their benefits, they should seek appropriate advice from the benefits agency or the Citizens Advice Bureau

9.1.2 If required, a letter detailing volunteering activity undertaken and out of pocket expenses incurred will be issued by the CCG, which can be shared with benefits agencies. For further information, please contact the Engagement Team via [SHECCG.EngagementActivity@nhs.net](mailto:SHECCG.EngagementActivity@nhs.net)

9.2 Reimbursement of expenses does not cover:

- Meetings that are held in public e.g. CCG Governing Body meetings where individuals are attending without specific or personal invitations
- Payment of expenses for people who are representing an external organisation and can therefore claim expenses through another source
- Meetings convened by other organisations, unless the volunteer is representing the CCG
- Reimbursement of expenses such as a computer, telephone or stationery, unless this

has been requested and agreed as part of the individuals support needs (see EIA screening in appendix D)

9.3 Potential out of pocket expenses should be identified beforehand where possible. Volunteers can claim for:

- Bus fares
- Taxi (to be organised via the CCG unless previously agreed)
- Private cars, motorcycles and bikes
- Rail and underground
- Subsistence costs – food and overnight accommodation
- Carers and childcare costs
- Other reasonable costs with prior agreement

9.4 There may be times when a role description is developed that fits into the NHS England category of 'level 4 Patient and Public Voice Partner'<sup>3</sup> which has greater responsibility than a volunteer role. This is defined as:

- Being part of a committee that demonstrates strategic and accountable leadership and decision-making ability
- Being a member of a group that makes recommendations to committees that have delegated authority of the CCG Governing Body

In this circumstance a sessional payment could be appropriate and advice should be sought from the Engagement Team via [SHECCG.EngagementActivity@nhs.net](mailto:SHECCG.EngagementActivity@nhs.net) about the appropriate process to follow. The team will then follow the processes outlined by NHS England<sup>4</sup> and follow the CCG procedures regarding appropriate payment.

9.5 Further Information about the procedure of claiming volunteer expenses is outlined in section 17

## 10 Resolving issues as they arise

10.1 The CCG is committed to resolving issues in an open, transparent and constructive manner at an early stage. The aim is that this will:

- Protect and show respect to our volunteers
- Minimise disruption to other citizens, other volunteers and staff within the organisation
- Protect the reputation of the organisation

10.2 The procedure for raising issues both by staff and volunteers is outlined in section 20 of this policy

## 11 Exit Interview

11.1 All volunteers will be offered an exit interview with their named staff member, or their manager, at the end of their placement

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<sup>3</sup> <https://www.england.nhs.uk/wp-content/uploads/2017/08/patient-and-public-voice-partners-policy-july-2017.pdf>

<sup>4</sup> <https://www.england.nhs.uk/wp-content/uploads/2017/08/patient-and-public-voice-partners-expenses-policy-oct-17.pdf>

11.2 This information will be used to inform future recruitment, support and training for staff and volunteers

## **12 Review of this policy and procedure**

12.1 This document may be reviewed at any time at the request of either staff side or management, but will automatically be reviewed after 12 months and thereafter on a bi-annual basis or when a change in legislation dictates.

## **Section 2 – Procedure**

### **13 Developing Volunteer Role Descriptions**

13.1 Volunteer role descriptions will be developed when a team identify an on-going project or programme where it is appropriate to involve a member of the public. For one-off involvement of citizens such as a focus group on a specific topic, a role description will not be developed but clear expectations of purpose and support / expenses reimbursement will be highlighted

13.2 Role descriptions are the foundation for appropriately involving volunteers over a period of time. By being clear what the CCG requires to fulfil its objectives, and the skills, experience and knowledge we want from a volunteer at the outset, we build a solid basis for the volunteering experience to be successful for both parties

13.3 The role description will ensure that the volunteer knows what is expected of them and that the staff member can objectively establish if the volunteer is suitable for the role during the recruitment process, with appropriate training and supervision

13.4 All on-going volunteers must have a clearly defined role description which sets out:

- Overview and purpose of the role
- Outline of the role including commitment, timeframe, trial period and responsibilities
- Skills, experience and knowledge required before they start the role
- Skills they can develop whilst volunteering
- Support that will be offered
- How long the role will last (maximum of two years) and any review dates
- Whether a proportionate description of the Nolan Principles of Public Life<sup>5</sup> are appropriate to the role

Examples of current volunteer role descriptions are available on the [Volunteering page of the intranet](#)

13.5 The CCG has a [Health and Safety Policy](#) that covers volunteers and volunteering. Any health and safety issues that are identified during the development of the volunteer role description should be accompanied by a thorough risk assessment, and mitigating factors should be agreed before the role is advertised

13.6 There may be times when a Role Description is developed that fits into the NHS England category of a 'Level 4 Patient and Public Voice Partner'<sup>6</sup> which has greater responsibility than a volunteer role. In this circumstance a sessional payment could be appropriate and advice should be sought from the Engagement Team about the appropriate process to follow, as outlined in section 9

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<sup>5</sup> <https://www.gov.uk/government/publications/the-7-principles-of-public-life>

<sup>6</sup> <https://www.england.nhs.uk/wp-content/uploads/2017/08/patient-and-public-voice-partners-policy-july-2017.pdf>

13.7 Support, advice and guidance in developing volunteer role descriptions should be sought from the Engagement Team and final versions should be submitted to [SHECCG.EngagementActivity@nhs.net](mailto:SHECCG.EngagementActivity@nhs.net)

## 14 Recruiting Volunteers

14.1 We welcome volunteers from diverse backgrounds and with a range of skills and experiences, therefore the recruitment processes will vary depending on the requirements of each role. This will be outlined in the role description

14.2 The process of recruitment should be carried out in a supportive and transparent manner that keeps potential volunteers informed at each stage

14.3 Advice and guidance should be sought from the Engagement Team via [SHECCG.EngagementActivity@nhs.net](mailto:SHECCG.EngagementActivity@nhs.net) and from the Human Resources team via [SHECCG.HumanResources@nhs.net](mailto:SHECCG.HumanResources@nhs.net) to shape a proportionate and appropriate process based on the role description

14.3.1 A proportionate and inclusive recruitment process could include:

- Advertising roles in specific places / to targeted groups
- Application form including previous employment / volunteering experience
- Proportionate shortlisting / interview / selection process
- Reference checks
- Disclosure Barring Service (DBS) checks
- Occupational Health Checks

14.4 Reasonable adjustments must be made to ensure potential volunteers are not at significant disadvantage, either from the process or any protected characteristics. The process should be implemented based on the broad framework outlined in the [CCG's Recruitment and Selection Policy](#)

14.5 Out of pocket expenses involved with interviews such as travel, childcare and carers costs should be reimbursed, in line with sections 9 and 17 of this policy

14.6 People who are not invited to volunteer should be signposted to other organisations e.g. the Volunteer Centre at Voluntary Action Sheffield

## 15 Volunteer Induction and training

15.1 Volunteers should be given an appropriate induction to their role and the organisation within the first month. This introduces the volunteer to how the CCG works and explains how their volunteer role fits into the wider organisation. The general induction should be proportionate but include:

- An introduction to volunteering – expectations of the volunteer and the organisation as laid out in the Volunteer Partnership Agreement (Appendix C)
- Guidance on how to complete an expenses claim and the relevant form (Section 17 and 21)

- Information about maintaining confidentiality (Appendix B)
- The [CCG values and behaviours](#)
- Information about the structure of the NHS and the role of CCGs
- Information about key staff within the organisation and team, including contact details
- An overview about [Governing Body](#) and [membership](#)
- Information about the building including signing in procedure, security, car parking, what to do in the event of a fire, building layout etc
- Identification of any specific training requirements that will enable the person to fulfil the role e.g. information governance, equality and diversity, moving and handling etc and then more role specific training on an ongoing basis
- How the volunteer wants to be contacted in the future and for what purposes e.g. only in relation to their volunteer role rather than via partner organisations (see section 18 on Data Protection)
- Joining the ['Involve Me'](#) public engagement group to receive regular updates about the CCG and its partners

In addition, the induction should be used as an opportunity to:

- Elaborate on any support requirements that were highlighted during the recruitment process and how these will be met
- Outline expectations in the form of regular catch-ups and the trial period
- Discuss the procedure for asking questions and highlighting issues, alongside the problem solving procedure, as highlighted in section 20. This should include sharing information about who to contact if issues require escalation i.e. the name and contact details of the Manager and Director
- Discuss training needs and ask questions

15.2 It is important that volunteers have a named contact who will be their link person to the CCG and who they can contact to ask questions, clarify issues and build a professional relationship with over time

15.3 Most volunteer roles will include a trial period where both the volunteer and the named contact evaluate if the match is suitable. If either party decides the match is not suitable, volunteering in that role will stop and the staff member will look at other options for the volunteer, including signposting to Voluntary Action Sheffield

## 16 Ongoing Support

16.1 On-going volunteer roles have a named contact who gives them guidance, support and supervision. Their role is to help make volunteering with the CCG a welcoming and rewarding experience

16.2 It is the role of the named contact to ensure that the needs of volunteers are met, including seeking support for any issues highlighted through occupational health, ensuring that meetings are conducted in an inclusive and supportive way and that volunteers are thanked for their contribution

16.3 The named contact should organise 'catch ups' or 'reviews' with the volunteer to hear feedback, track how the volunteering experience is going and resolve any issues as they arise. This should be arranged at a mutually convenient time and location. The [one to](#)

[one staff form](#) can be used as a prompt but the discussion should be proportionate to the volunteer role and should include:

- How are things going generally?
- How are you feeling about your volunteering role?
- What has gone well since we last met?
- Do you have any concerns about your volunteering role?
- What support or training do you require?
- Any questions or queries?

Notes from the 'catch-up' or 'review' meetings should be made during the session, typed up afterwards and agreed by both people before being finalised

## 17 Expenses Reimbursement

17.1 All volunteers and citizens invited to participate will be entitled to claim out of pocket expenses in accordance with the eligibility criteria set out in section 9. The budget for the expenses claims must be allocated within individual service areas and pre-arranged with the budget holder. All claims will need proof of purchase or some form of evidence of expenditure. Where possible, people will need to provide receipts (including parking costs) to attach to the expense claim form (see Appendix A). All sections of the form must be completed and signed

17.2 The following expenses will be offered to volunteers and citizens during the course of agreed involvement and participation

### 17.2.1 Rail and Underground

The cost of a standard class ticket and underground travel will be organised by the CCG to best meet individual needs

### 17.2.2 Bus

The cost of the fare can be claimed. The ticket should be kept and attached to the expense claim form unless the person requires their ticket for the return journey, in which instance a photocopy should be taken

If a 'CityWide 7 Day'<sup>7</sup> ticket is being used, the daily portion of the cost can be claimed e.g. Ticket costs £16.80, claim for use for one day of CCG activity = £2.40

### 17.2.3 Taxi

Taxis will only be booked for those who are unable to use other forms of transport. There will be no reimbursement of taxis or private hire vehicles unless prior agreement has been sought. In these circumstances, the standard CCG procedure will be followed

If the CCGs taxi provider is not able to accommodate the needs of the person e.g. due to their impairment or disability, then the person can arrange their own transport, and will be reimbursed, following prior agreement

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<sup>7</sup> <https://travelsouthyorkshire.com/citywide/>

#### 17.2.4 Private cars, motorcycles and bicycles

Volunteers and citizens using their own transport can make mileage claims using the appropriate expense claim form (Appendix A) for journeys in the area covered by NHS Sheffield CCG. The mileage rate will be paid according to current rates consistent with those suggested by HM Revenue and Customs<sup>8</sup>

The rates of payment for reimbursement of travel expenses have been agreed as follows:

Car: **45p** per mile  
Motorcycle: **24p** per mile  
Bicycle: **20p** per mile

If a private car or motorcycle is used, the person will be asked to confirm the following on their expenses claim form:

- That the motor insurance covers such activity;
- That the driver has a valid driving licence;
- That the car / motorcycle has valid road tax and;
- That the car or motorcycle has an MOT certificate.

Any loss or damage caused to a private car or motorcycle should be covered by the person's insurance and breakdown cover, and it is their responsibility to ensure this

The cost of car parking can be claimed by attaching the car parking ticket to the expenses claim form

#### 17.2.5 Subsistence Costs – food and overnight accommodation

Food and refreshment costs will be reimbursed in the following circumstances:

- Volunteers and citizens are involved for more than 4 consecutive hours
- Receipts are provided and attached to the claim form
- In meetings where food and refreshments are not provided or suitable e.g. halal

The maximum subsistence allowance is £7.50.

When an overnight stay is required this will be arranged and paid for beforehand by the CCG. This will be organised using the standard procedure and will take into account the specific requirements the person might have e.g. accessible room

#### 17.2.6 Carers and Personal Assistant costs

We welcome people who have caring responsibilities as part of our diverse volunteer network. Costs associated with looking after the 'cared for' person will be met, including childcare and 'sitter' service costs. Information about services available to carers in the city can be obtained from the Carers Centre<sup>9</sup>. The need for this service should be identified in advance so the CCG is aware of potential costs

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<sup>8</sup> <https://www.gov.uk/government/publications/rates-and-allowances-travel-mileage-and-fuel-allowances/travel-mileage-and-fuel-rates-and-allowances>

<sup>9</sup> <http://sheffieldcarers.org.uk/>

If a volunteer or citizen requires a paid personal assistant to enable them to volunteer, the cost of the personal assistant's hours while at the meeting and their travel time to and from the meeting can be claimed (travel time will be calculated as from service user's home to venue and back). We would expect personal assistants to travel with the service users and it is noted that time needs to be allowed at the start and end of journeys for the personal assistant to support the service user to and from vehicles. We cannot pay additional mileage where the personal assistant travels' independently of the service user

## **18 Data Protection**

- 18.1 It should be established with the volunteer how they want us to contact them and for what purpose in their induction. Volunteers must not be contacted for reasons other than they have expressed i.e. in relation to their volunteer role with NHS Sheffield CCG. This relates to the General Data Protection Regulation that was introduced in May 2018
- 18.2 Each team holds the contact details for their volunteers, as well as them being held centrally by the Engagement Team. In line with the CCG's Data Protection Policy, records will not be held for longer than necessary and will be stored and disposed of securely
- 18.3 Individuals who wish to access any personal information that the CCG holds about them are entitled to make a request - see the policy [Data Protection Requirement Policy](#)

## **19 Insurance**

- 19.1 Volunteers working on behalf of the organisation or working on CCG premises and forms part of their arrangements with the CCG are covered by the CCG's Liabilities to Third Parties Scheme (LTPS)

## **20 Problem Solving Procedure**

### **20.1 Situation: Volunteer raises an issue about a staff member**

- 20.1.1 Where any issues are raised regarding suspected fraud, bribery or corruption, the CCG's Counter Fraud Team should be contacted for advice – details are available on the intranet page <http://www.intranet.sheffieldccg.nhs.uk/counter-fraud.htm>
- 20.2 If a volunteer raises an issue about how they have been treated by an individual or the organisation, the aim should be to resolve the concern at the earliest opportunity. The following three step processes should be used:

### **20.3 Stage 1 – Discussion**

- 20.3.1 If a volunteer wants to discuss issues relating to a member of staff, another volunteer, or the organisation as a whole, the first step is for the volunteer to approach their named

contact. If the issue relates to their named staff member, their manager should be approached in the first instance

20.3.2 The member of staff arranges a meeting in private with the volunteer. The volunteer is welcome to bring somebody they know to support them at the meeting

20.3.3 All efforts should be made at this meeting to resolve the issues that the volunteer has raised. If this not possible, stage 2 should be implemented

#### 20.4. Stage 2 – Putting the complaint in writing

20.4.1 The volunteer has the right to make a more formal complaint by writing or emailing a letter to the responsible Director

20.4.2 This letter can be handed into reception at 722 Prince of Wales Road, Sheffield, S9 4EU, or sent by post. The letter or email should outline the issues raised and explain how these have not been satisfactorily resolved by the CCG

20.4.3 This letter or email should be submitted within 4 weeks of the stage 1 meeting. The organisation will respond within 4 weeks of receiving the letter

#### 20.5 Stage 3 - Opportunity to appeal

20.5.1 If the volunteer is not satisfied with the response they receive from the Director, they can appeal to the Accountable Officer

20.5.2 The Accountable Officer will contact the volunteer and arrange a private meeting with them at a mutually convenient time within six weeks. The volunteer can bring someone they know to support them at this meeting

20.5.3 After the meeting, the Accountable Officer will respond in writing within 2 weeks and their decision is final

#### **Situation: A staff member raises an issue about a volunteer**

20.6 Where any issues are raised regarding suspected fraud, bribery or corruption, the CCG's Counter Fraud Team should be contacted for advice – details are available on the intranet page <http://www.intranet.sheffieldccg.nhs.uk/counter-fraud.htm>

20.7 If issues arise within the organisation about a volunteer, it is best for both parties if any issues are resolved without any formal process – through the volunteer having regular contact with and supervision from the staff member who supports them. If this is not possible, the following three step process should be implemented:

#### 20.8 Stage 1 – Discussion

20.8.1 The first step is for the named member of staff to confirm with the volunteer that an issue has been raised about them and that this needs to be discussed outside the usual supervision process

- 20.8.2 The stage 1 discussion is an opportunity to explore with the volunteer what has led to the issue being raised, giving specific examples
- 20.8.3 The discussion should be conducted in a supportive manner and may include exploring why the volunteer may be struggling to carry out tasks, or to be reliable, or to behave in an appropriate way, including referring to the [CCG values and behaviours](#)
- 20.8.4 The staff member may identify goals that will help the volunteer to fulfil their role, and may offer extra support, supervision or training
- 20.8.5 The volunteer and the named staff member agree a time when they will review how the volunteering is going and if the issues raised have been resolved fully
- 20.8.6 If the issue has been raised by a someone else, the named member of staff will inform that person of what has been agreed with the volunteer and any actions agreed to resolve the issues raised

### 20.9 Stage 2 – Putting the complaint in writing

- 20.9.1 If the outcome of stage 1 is not satisfactory, the named member of staff who supervises the volunteer will write a letter or email outlining the issues raised, giving examples and referring to the CCG values and behaviours
- 20.9.2 After receiving this letter or email, the volunteer can ask for a meeting with the manager of the department or responsible Director to discuss the issues raised
- 20.9.3 The volunteer can bring somebody they know to support them at this meeting and the department manager or responsible Director will invite the member of staff who supervises the volunteer, if appropriate
- 20.9.4 As a result of this discussion, and depending on the nature of the complaint, further goals may be set and further support offered to the volunteer
- 20.9.5 The decision to ask a volunteer to leave is a last resort, but it may be that this is the appropriate outcome. If the volunteer is asked to leave, they can appeal the decision

### 20.10 Stage 3 – Appeal

- 20.10.1 If a volunteer has been asked to leave they can appeal in writing or via email to the Accountable Officer
- 20.10.2 The Accountable Officer will arrange a private meeting and the volunteer can bring someone they know to support them at this meeting
- 20.10.3 After the meeting, the Accountable Officer will respond in writing or via email within 2 weeks and their decision is final
- 20.11 In some circumstances a volunteer is suspended immediately, while an investigation is carried out. This decision will be communicated verbally and in writing. Such circumstances include, but are not limited to, acts that constitute 'gross misconduct' - theft, assault, act of violence, malicious damage, deliberate falsification of documents, harassment, abuse, or being under the influence of drugs or alcohol

## Section 21 - Appendix A

### Volunteers and Citizens Expenses Claim Form

<b>Name</b>
-------------

<b>Address</b>
----------------

<b>Phone number</b>
---------------------

<b>Email address</b>
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<b>What are you claiming for?</b> e.g. travel to and from CCG engagement meeting on 20/12/18, care of a dependent (please give contact details of the carer) etc
--

- My motor insurance includes cover for business use
- I have a valid driving licence;
- the car / motorcycle has valid road tax and;
- the car or motorcycle has an MOT certificate

<b>How much are you owed?</b> (e.g. 45p by car / 24p by motorbike / 20p by bike per mile, bus fare etc.)
--

<b>Is a receipt attached?</b> (e.g. parking ticket/ bus fare) Yes <input type="checkbox"/> No <input type="checkbox"/>
--

I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the expenses detailed.

I understand that if I knowingly provide false information this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings. I consent to the disclosure of information from this form to and by the CCG and the NHS Counter Fraud Authority for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud.

<b>Signed:</b>
----------------

<b>Date:</b>
--------------

<b>For office use only</b>	
<b>Date received:</b>	<b>Date paid:</b>
<b>Payment authorised by:</b>	<b>Financial code:</b>

## **Section 22 - Appendix B – Confidentiality Agreement**

Volunteer Name
Named staff member

During the course of your volunteering activity, you may see or hear information that is confidential. Information you receive prior to meetings and during discussions (other than those held in public) should not be shared externally. If you are in doubt, speak with your named staff member.

Disclosures of information relating to patients, members of staff, other volunteers or CCG business is likely to result in your volunteering role being terminated.

Moreover, the Data Protection Act 2018 also renders an individual liable for prosecution in the event of unauthorised disclosure of information, or action for civil damages under the same Act.

By signing this form, I agree to: <ul style="list-style-type: none"><li>• Maintain confidentiality during my time volunteering with NHS Sheffield CCG</li><li>• Maintain confidentiality after my role has ended</li><li>• Raise any concerns in relation to maintaining confidentiality with my named staff member</li></ul>
Signed
Date

Once you have signed this document, a copy will be given to you for future reference and a copy will be retained by your named staff member.

## **Section 23 - Appendix C - Volunteer Partnership Agreement**

This volunteer agreement describes the arrangement between NHS Sheffield CCG and you. We appreciate that you have chosen to volunteer with us and will do the best we can to make your volunteer experience with us enjoyable and rewarding. We will treat you with respect at all times.

- Part One outlines 'Our Commitment to You' and
- Part Two deals with 'Your Commitment to Us'.

Please read it carefully and ask any questions that you may have before you sign and return it.

Once you have signed this document, a copy will be given to you for future reference and a copy will be retained by your named staff member.

**Thank you again for your commitment to NHS Sheffield CCG. It is very much appreciated.**

## **Part One - Our Commitment to You**

### 1. Induction

We will organise for you to have an induction with your named staff member at a mutually convenient time. That meeting will include:

- An introduction to volunteering – expectations of the volunteer and the organisation as laid out in the Volunteer Partnership Agreement
- Guidance on how to complete an expenses claim
- Information about maintaining confidentiality
- Information about the CCG values and behaviours
- Information about the structure of the NHS and the role of CCGs
- Information about key staff within the organisation and team, including contact details
- An overview about Governing Body and member practices
- Information about the building, including signing in procedure, security, car parking, what to do in the event of a fire, building layout etc
- Joining the 'Involve Me' public engagement group to receive regular updates about the CCG and its partners
- What method you want us to communicate with you by e.g. email, post and for what reasons
- Discuss any support requirements that were highlighted during the recruitment process and how these will be met
- Outline expectations in the form of regular catch-ups and the trial period
- Discuss the procedure for asking questions and highlighting issues, alongside the problem solving procedure

### 2. Training

- If required for your role, we will provide training to help prepare for your volunteer role.
- We will provide on-going training as necessary to meet the responsibilities of your role.

### 3. Supervision, Monitoring and Support

- Your named staff member will arrange regular catch-ups with you, at a mutually convenient time and place.
- You will be offered an exit interview at the end of your volunteer opportunity.

#### 4. Expenses

Expenses will be reimbursed as agreed to include:

- Travel to and from home to the agreed venue for your volunteering activity at 45p per mile if you are travelling by car, 24p per mile for motorbikes and 20p per mile for bicycle journeys
- Car parking fees for the time of your volunteering activity
- Interpretation as required
- Food costs if your volunteering activity lasts more than 4 hours and refreshments are not provided
- Expenses for care of a dependant
- Other reasonable expenses based on individual circumstances

#### 5. Insurance

- We will provide insurance cover for you whilst you undertake your volunteering activity that is approved and authorised by NHS Sheffield CCG, in line with your role description

#### 6. Issues

- We aim to resolve any issues in accordance with the Volunteering Policy in an open and transparent manner.
  - Issues should initially be discussed with your named staff member or their manager.
  - If this not satisfactorily resolved, the issue should be escalated to the responsible Director in writing within 4 weeks. They will respond within 4 weeks.
  - If the issue persists, it should be referred to the Accountable Officer in writing and hand delivered to reception at 722 Prince of Wales Road or sent by post. They will contact you directly to discuss next steps that are mutually convenient.
  - If there is evidence that your behaviour constitutes 'gross misconduct' ie. Theft, assault, act of violence, malicious damage, deliberate falsification of documents, harassment, abuse or being under the influence of drugs or alcohol, you will be suspended from your role with immediate effect, pending an investigation.

#### 7. Termination of Agreement

- Your activities and progress will be reviewed on an ongoing basis. The organisation reserves the right to withdraw your volunteering opportunity in line with the Volunteering Policy

## **Part Two – Your Commitment to Us**

Your role as a Volunteer with NHS Sheffield CCG begins on

..... (date)

I, .....(Volunteer's name) agree:

- To work within the guidelines as set out in my Volunteer Role Description
- To work within the guidelines of this Partnership Agreement
- To conduct myself in line with the CCG values and behaviours
- To meet with my named staff member for catch-ups at a mutually convenient time and place
- To perform my volunteering role to the best of my ability
- To maintain confidentiality at all times
- To complete a form for reimbursement of expenses regularly and no more than 3 months after any event being claimed for
- To let my named contact know as soon as possible if I am unable to carry out my volunteer role

Signed (volunteer): .....

Date: .....

Signed: (staff).....

Date: .....

*This agreement is binding in honour only, is not intended to be a legally binding contract between us and may be cancelled at any time, at the discretion of either party. Neither of us intends any employment relationship in this agreement, either now or at any time in the future.*

## Equality Impact Assessment

<b>Title of policy or service:</b>	Volunteering Policy and Procedure	
<b>Name and role of officer/s completing the assessment:</b>	Helen Mulholland	
<b>Date of assessment:</b>	19 June 2018	
<b>Type of EIA completed:</b>	Initial EIA 'Screening' <input checked="" type="checkbox"/> or 'Full' EIA process <input type="checkbox"/>	<i>(select one option - see page 4 for guidance)</i>

1. Outline	
<p><b>Give a brief summary of your policy or service</b></p> <ul style="list-style-type: none"> <li>• Aims</li> <li>• Objectives</li> <li>• Links to other policies, including partners, national or regional</li> </ul>	<p>AIM: The aim of the policy and procedure is to provide a consistent approach for staff who support volunteers as part of their role at NHS Sheffield CCG.</p> <p>OBJECTIVES:</p> <ul style="list-style-type: none"> <li>• To set a tone for involvement of local people that is based on mutual respect and a partnership approach</li> <li>• To provide a framework for staff to use in a proportionate and appropriate way according to individual Volunteer Role Descriptions</li> <li>• To incorporate the previous Reimbursement of Expenses for Volunteers and Citizens Policy and Procedure</li> <li>• To provide an overarching document that includes the latest guidance from NHS England, ties into the recent launch of the Voluntary Action Sheffield Volunteering Strategy and updates information from local providers</li> </ul>

### Identifying impact:

- **Positive Impact:** will actively promote or improve equality of opportunity;
- **Neutral Impact:** where there are no notable consequences for any group;

- **Negative Impact:** negative or adverse impact causes disadvantage or exclusion. If such an impact is identified, the EIA should ensure, that as far as possible, it is either justified, eliminated, minimised or counter balanced by other measures. This may result in a 'full' EIA process.

## 2. Gathering of Information

This is the core of the analysis; what information do you have that might *impact on protected groups, with consideration of the General Equality Duty.*

(Please complete each area)	What key impact have you identified?			For impact identified (either positive and or negative) give details below:	
	Positive Impact	Neutral impact	Negative impact	How does this impact and what action, if any, do you need to take to address these issues?	What difference will this make?
<b>Human rights</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This policy and procedure will provide a consistent approach for all staff who support volunteers. Training and support for staff will need to be developed by the Engagement Team to allow this approach to be adopted and embedded.	It will empower staff to support volunteers based on individual needs and provide a framework of information to do so, whilst offering signposting information to expert staff in HR and the Engagement Team
<b>Age</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Carers</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The policy and procedure explicitly states that carers costs will be reimbursed whilst allowing flexibility for each volunteer, in terms of organising individual arrangements according to individual needs	It will enable carers (e.g. those with childcare responsibility, the sandwich generation and those caring for older family members) to utilise arrangements that best meet their individual and family needs
<b>Disability</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The policy and procedure encourages recruitment and support that is tailored and adaptable to the needs of the role. For example, this may mean that individuals require a signer or information to be printed in large print, or that meeting times need to be adapted to allow a volunteer to effectively contribute. This will be based on information highlighted during the	It will encourage the organisation to be inclusive, working on the principles of person centeredness and respect based on volunteers' diverse needs.

				recruitment phase and adaptations will be made based on referral and feedback from Occupational Health and from the volunteer themselves.	
<b>Sex</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Race</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This policy and procedure provides a framework for staff to adapt based on individual needs. This could include providing a translator to enable a person with English as a second language to contribute and providing written information in different languages.	It will enable people from diverse communities across the City to contribute to the work of NHYS Sheffield CCG
<b>Religion or belief</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	This policy and procedure empowers staff to adapt based on individual volunteer needs. This could include scheduling meetings around religious festivals and being sensitive to individual's beliefs and customs.	It will enable people from diverse communities across the City to contribute to the work of NHS Sheffield CCG
<b>Sexual orientation</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Gender reassignment</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Pregnancy and maternity</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Marriage and civil partnership</b> (only eliminating discrimination)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Other relevant groups:</b>  <b>Poverty</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are encouraged to meet the needs of individual volunteers. This could include communicating by post rather than email, printing documents and sending by post, supplying people with equipment that will enable them to contribute etc	It will ensure that an individual's ability to subsidise their volunteering activity is not a barrier

<b>HR Policies only: Part or Fixed term staff</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
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**IMPORTANT NOTE:** If any of the above results in '**negative**' impact, a 'full' EIA which covers a more in depth analysis on areas/groups impacted must be considered and may need to be carried out.

Having detailed the actions you need to take please transfer them to onto the action plan below.

<b>3. Action plan</b>				
<b>Issues/impact identified</b>	<b>Actions required</b>	<b>How will you measure impact/progress</b>	<b>Timescale</b>	<b>Officer responsible</b>
Develop training for staff who support volunteers to ensure this policy becomes embedded	<ul style="list-style-type: none"> <li>• Develop training package</li> <li>• Deliver training package</li> <li>• Offer ongoing support to staff on both an ad-hoc 1-2-1 basis and as a team</li> <li>• Annual 'thank you' to people who have volunteered during the previous year</li> </ul>	<ul style="list-style-type: none"> <li>• Feedback forms from staff training sessions</li> <li>• Ad-hoc feedback from staff</li> <li>• Analysis of volunteer feedback from 1-2-1 sessions with their named staff contact and their annual 'thank you' event</li> </ul>	<ul style="list-style-type: none"> <li>• Training session delivered within 3 months of policy and procedure being agreed</li> <li>• Annual 'thank you' to coincide with Volunteers Week (1<sup>st</sup> week of June)</li> </ul>	Engagement Manager

<b>4. Monitoring, Review and Publication</b>				
<b>When will the proposal be reviewed and by whom?</b>	<b>Lead / Reviewing Officer:</b>	Lucy Ettridge, Deputy Director for Communications, Engagement and Equality	<b>Date of next Review:</b>	November 2019

## Section 25 – Appendix E – Examples of volunteering activity, from a volunteers perspective

### Volunteer activity with the Person Centred Care Team

“The work I do for Locality Support Team is giving my thoughts and ideas on how we go forward into the future. Particularly, how GP’s and Surgeries will have to adapt and change to enable the NHS to go forward. During my time I have been on courses to learn about PAM and Person-Centred Care Planning. This has enabled me to understand what the team is working on.

You may think, that’s all very well, but what do I get out of it? May I tell you?

You have a feeling of ‘I am an expert patient in my condition’, and from that you can help others to become an expert. Nobody knows their condition better than the person themselves. This is what set me on the road to where I am now. I am in control of my condition, and this makes me feel I have accomplished a lot.”

### Volunteer activity with the Medicines Management Team

“As a volunteer on the Area Prescribing Group (which is a Panel of Clinicians who meet every month for three hours), we assess the medicines that NHS England and NICE recommend. I have learned a lot and it is really interesting and it is good that I am on the panel to give a patient viewpoint.

From that, I was approached by another colleague, who asked if I would also be interested in being on her panel looking at medicine wastage, as this is costing the NHS millions of pounds in unused drugs. I shared some experiences that I’d heard from family and friends and I helped set up the trial for the Prescription Order Line. We looked at feedback from patients, staff and clinicians and worked out how it could be improved, before lots more surgeries came on board. It’s been great to be involved with something that has made such a difference to the NHS and patients.”

### Volunteer activity with the Readers Panel

“I am a member of the Readers Panel and I am emailed documents when they are still being developed, to see if they make sense to a patient. I then make suggestions about words and phrases I don’t understand or that are in ‘NHS lingo’ so they can be changed before they go to print. I’ve looked at leaflets, letters, posters – all sorts of different things. It makes me feel like I’m giving something back to the NHS.”

## **Section 26 – Appendix F – Programme Management Office action plan for implementation**

The action plan for how this policy and procedure will be implemented is available using the following link:

<http://www.sheffieldccg.nhs.uk/Downloads/Involve%20Me/Engagement%20Activity/Action%20plan%20for%20implementation%20of%20volunteering%20policy%20and%20proceedure%2006112018%20v3.xlsm>