



The Right Honourable Jacqui Smith

Volunteering in the NHS

Speech to the National Association of Voluntary Services Managers Annual Seminar in Birmingham on 25th September 2015

Many thanks for inviting me to your conference.

I want to start by sharing a very vivid memory from 2012. I got tickets for the 2012 Olympics and attended with my family, in particular my Dad who had also attended the 1948 London Olympics. So it was a very special family occasion, but he is not as young as he was. The day was always going to be special, but it was made so much more enjoyable – and in fact, manageable – by the help and guidance we received from the Olympics 2012 gamesmakers, the volunteers who were everywhere and added a real joy and vibrancy to the event.

Getting to and around the Olympic Park was a bit nerve-wracking, but nothing like the anxiety that people obviously feel when they arrive at hospital for an appointment – or even to visit a loved one. If you've been lucky enough to visit or to see our hospital at the QE, you will know that it is a stunning and imposing building. It's a fantastic place to work – a real monument to the NHS – but it's also a big, scary place to arrive at. When you do, some of the first people who will greet you are our blue-shirted volunteer greeters. I have witnessed people visibly relaxing as they are greeted, reassured and pointed in the right direction by those volunteers. They may then be going on to receive some of the most advanced care in the country, from some of the most skilled doctors with the latest techniques and technology, but that first impression of being met and supported is invaluable in setting the scene for our aim to provide the best in care to all who come to the QE.

In a target driven, cash strapped, enormously busy NHS it is wrong, but not surprising, if staff sometimes struggle to think of patients as the anxious people they often are. Patient experience can feel like a secondary task if it isn't made an absolute priority by the leadership of the organisation.

We certainly aim to make it a central part of our work at the QE – we prioritise it on the Board and in the way we deliver our services, but we are helped enormously in doing this by our 600 volunteers. They really do play a crucial role in enhancing a patient's experience of their time and treatment at Queen Elizabeth Hospital Birmingham.

I've mentioned the role they play in meeting and guiding patients, but, of course, their roles go so much further than this – as I'm sure they do in your organisations.

Volunteers are currently placed in approximately 75 departments throughout QEHB. The number of volunteers continuously grows as more roles and ways of helping patients and staff are identified.

A small sample of areas worked and roles held by volunteers at QEHB is listed below:

- Ward helpers

- Outpatients department
- Cardiac rehabilitation classes
- Patient and Carer Council
- Peer support groups
- Chaplaincy
- Patients' library
- Buggy drivers

So in almost every part of the hospital, there are volunteers supporting patients, their families and the staff in their work. As the Chair of the Trust, I have no doubt that this is enormously important for enabling us to achieve our objective to provide the Best in Care. However, unlike in our achievement of our targets or in our financial planning, it has sometimes proved difficult to quantify the impact of volunteering. You will know as managers of volunteers, that there are a whole range of competing priorities in hospitals – it is important that volunteering maintains the profile and support of senior managers. I don't know if there are clever ways to quantify the impact of volunteering on patient outcomes, but I certainly hope it's an issue that people are considering.

When research has been done, it has shown a clear financial benefit from volunteering – The King's Fund in their research into NHS volunteering in 2013 suggested that the NHS gets £11 of value for every £1 invested in volunteering. Adding this together with the impact on patient experience convinces me that volunteering has a crucial role to play – we must all ensure that the case is made in our own trusts and to those at the most senior levels of the NHS.

The other fallacy which often needs to be challenged by those managing and promoting volunteers and volunteering is that because volunteers are unpaid, they are, therefore, cost-free. This is wrong – and a real threat to the development and most effective use of our volunteers.

Just thinking about the range of areas where volunteers are working in our hospital demonstrates the enormous management and administrative task involved in allocating those volunteers. This is without considering the issues of recruitment, ongoing supervision and working with staff to ensure that volunteers are used as effectively as possible and that new opportunities for volunteering are identified. You have a big job to do.

And, of course, if volunteers are to be used to best effect, they also need to be managed by the staff they work with. I have tried to support our excellent volunteer managers at the QE by making the case to ward staff and others that they need to incorporate the volunteers fully into their teams. We expect a proper role description for volunteers so that everybody understands how they are to work and what they are to contribute. However, it is not surprising that staff sometimes worry about whether volunteers are there to take their jobs, especially when money is tight. We must be clear that volunteers add value to the work of our permanent paid staff – they do not substitute for them. Wherever possible we need to support staff to manage volunteers and engage them in designing the roles we offer to volunteers and evaluating their impact.

Of course, managing volunteers is also an added pressure for very busy ward managers – and I'm sure it's something which it is easy for them to let slip, but it is a mistake in the long term. The contribution that volunteers can play directly supports those running the wards to deliver their objectives. A volunteer who can encourage and challenge visitors and others to wash their hands plays a vital role in infection control. A volunteer who acts as a dining companion to a patient helps to ensure that nutrition and hydration standards are upheld. This is not about replacing mainstream staff, but it is about delivering mainstream targets. That is worth investing management time and effort into.

As well as thinking about the volunteering that takes place directly in our organisations, we should also consider whether we can help to support volunteering more widely in other organisations and the community. This can also bring benefits for our patients.

At UHB, we have memorandums of understanding with volunteer providers such as the hospital radio provider and Home from Hospital. We support the organisations with their employment

checks to ensure that the volunteers meet NHS standards. This can open the way to some even more innovative services for patients – we have developed a project proposal with Home from Hospital to support patients on discharge giving some continuity to patients, enabling HFH volunteers to meet them before discharge or UHB volunteers to visit the patient after discharge. This has real potential to reduce readmissions for patients – good for the patient, good for the trust.

The other commonly held misconception is that all volunteers come with the same motivation. Of course they don't. In any form of volunteering, there will be as many different motivations, skills and experiences as there are volunteers. I suspect one of the things which does bind many of them together is their commitment to the NHS. A recent IPSOS MORI poll asked people what made them most proud to be British. The NHS came top – even above the armed forces and the Royal Family. We are lucky to be working in an internationally unique system which, for many, forms part of what it means to be British.

This is stirring stuff, but for you, it doesn't solve the problems of how you manage the enormously varied range of people who come to offer their services as volunteers.

The first difficult challenge for some is the recognition that offering yourself as a volunteer cannot guarantee you a position. It is very important that people are clear about what they are being expected to do and what we will expect of them.

Of course we are enormously grateful for the time and effort dedicated by our volunteers, but that doesn't mean that everyone and anyone is acceptable. This is sometimes a difficult message to convey to people who want to volunteer, but it is crucial. We cannot argue that the role of the volunteer is vital to the hospital and our patients and then not put them through a rigorous recruitment and induction process.

At the QE, we hold an introductory session before we even allow volunteers to apply. It is important to make clear to people what is in store for them and what is expected. Hospitals can be very challenging environments. They are busy places that care for sick and critically ill patients and their families, which can be distressing.

To be a volunteer you need to be able to commit to the role fully and ensure you are the right type of person to volunteer in a hospital environment.

Volunteers need to be:

- approachable
- good listeners
- comfortable approaching people to offer help
- able to work independently and to show initiative
- emotionally mature and able to stay calm; adaptable
- and of course available enough to offer a regular commitment over a period of time

Once people become volunteers, it's important to ensure that they have a clear and defined role with a specific list of duties in addition to upholding the values of the trust and fulfilling basic requirements in terms of behaviour, appearance and duties.

These are the common responsibilities, but the strength of volunteering in the NHS partly rests in the range of roles available. Many will want to work directly with patients and their families, but others will be less keen, but nevertheless have important skills to offer. We need to encourage staff and managers to be imaginative in the way that they think about possible roles for volunteers – to go beyond the obvious.

At UHB, assuming the volunteer wants to go ahead with the application after the information session, they will be interviewed, asked for two referees and subject to a DBS check. I know that you are discussing the implications of the reviews into what went wrong with Jimmy Saville's access to hospitals and patients later in the conference. This is so important.

Whilst the vast majority of people will volunteer with the best of motives, the nature of those who wish to find opportunities to abuse is that they are often extremely clever and devious, and succeed in getting themselves into positions of trust with vulnerable people. We must take the necessary precautions to protect our patients, the reputation of volunteering and our organisations from such individuals.

The fact that someone is a volunteer does not relieve them of the responsibility to understand how the hospital works and what is expected of them. A good induction programme is really important for ensuring that volunteers can slot in in a way which makes the most of them and maximises their value added for the organisation.

Many people feel that the reward for volunteering is the experience of the volunteering itself. They don't necessarily expect reward or recognition. However, I am strongly of the view that they deserve it – and in fact that the organisation as a whole needs to know what is being contributed by those volunteering alongside them.

One of my favourite events as Chair at UHB is to attend our certificate awarding lunch with volunteers. Volunteers get certificates for time served as a volunteer – next year, I'm looking forward to presenting a certificate to someone who's been volunteering with us for 45 years. I'm accompanied by the Chief Executive and the Chief Nurse – I think it's important that the most senior people in the organisation recognise the contribution being made.

As I've suggested, there are many things which draw people to volunteer in the NHS and many people wanting to take on the role. That does not mean that we should rest on our laurels in attracting in new volunteers. Like many we are reducing our age to 16 for volunteers – as the mother of teenagers, I gulped at the thought of that, but in fact I know that there are many with the energy and enthusiasm to add a real sparkle to our work with patients. And giving them real experience of the NHS may well help to grow our workforce in the future. Most young people, luckily, have very little contact with hospitals as patients – giving them the chance to see the whole range of roles and work will at the least lead to a generation who understand the challenges and achievements of the NHS – and even provide us with the workforce of the future.

We also need to think about how we can offer a range of experiences to volunteers of all ages – we are looking to develop a joint programme with the Birmingham Women's and Birmingham Children's hospitals to widen our offer.

We must also ensure that we are opening more opportunities to volunteer to people with disabilities. Research suggests that one of the most important attributes of volunteers is that patients often feel that the volunteer will be better able to empathise and understand than staff will. Someone living successfully with a disability is both a source of information and of encouragement to those thinking about the impact of their illness on their future lives. We need to see these volunteers as an enormous asset to our volunteering force rather than focus on the issues involved in enabling them to access and play a full part. These can be overcome and the benefits will be significant.

In conclusion, thank you again for the invitation. And thank you for the enormously important work that you are doing for the NHS and for patients and their families. I hope my attendance has demonstrated the significance with which I know senior leaders in the NHS view your work. You are making our organisations more effective, you are supporting our hard-working staff and whilst you may not be making our services quite as enjoyable as the 2012 Olympics, in my experience you are making that trip to or stay in hospital a far better experience for anxious patients than it could be without you. That is vital work – thank you for leading it.

This speech was posted on Jacqui's blog page at: <http://uhbchair.blogspot.co.uk/>