

Volunteering in NHSScotland

National volunteer application form recommendations

1. Introduction

This paper makes a final set of recommendations on a national application form for volunteer applicants to NHS Boards.

- 2. [DL \(2017\) 07](#) from Scottish Government to NHS Boards instructed them to review volunteer management arrangements and implement the recommendations from the Lampard Report.

Boards were asked to confirm with the Volunteering in NHSScotland Programme Manager what, if any, additional support they required in order to meet the recommendations.

Meetings were held with volunteer managers and other staff of NHS Boards to identify further areas of support or gaps in practice. One of the agreed areas to take forward was to recommend a standard volunteer application form in order to address a range of variation in practice.

3. Review of board application forms

Eight NHS Boards provided examples of volunteer application forms (Healthcare Improvement Scotland, NHS 24, NHS Ayrshire & Arran, NHS Fife, NHS Highland, NHS Lanarkshire, NHS Lothian and NHS Tayside).

The forms were reviewed and questions categorised, alongside the fields used in the Volunteering Information System (VIS). Note that this analysis was carried out on forms that pre-date the General Data Protection Regulation (GDPR) so some boards may have amended their forms since then.

The National Group for Volunteering reviewed a draft application form at the meeting on 30 October 2018. Amendments were accepted and further consultation took place with Healthcare Improvement Scotland with regards to the wording of the questions on conflict of interest. These amendments have been included in the current draft form.

4. Actions for National Group for Volunteering in NHSScotland

The Group is asked to review the amended draft form, noting any final amendments.

Once endorsed by the Group the form will be equality impact assessed and tested in pilot NHS Boards before being issued nationally.

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5. Draft application form

Personal and contact information			
Title:	First name:	Surname:	Known by/ preferred name:

Address:			
Postal town:		Post code:	
Home tel no:			
Mobile tel no:			
Work tel no:			
Date of birth:			
Preferred contact method:	<input checked="" type="checkbox"/> Home tel	<input type="checkbox"/> Mobile tel	<input type="checkbox"/> Work tel <input type="checkbox"/> E-mail
Date of birth: (if required)			

Role information								
Role applied for:								
Preferred hospital/area/ location:								
Availability:		Mon	Tue	Wed	Thu	Fri	Sat	Sun
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How did you hear about this role?	<input type="checkbox"/> Another NHS Board <input type="checkbox"/> Department of Work and Pensions/Job Centre <input type="checkbox"/> Faith group <input type="checkbox"/> Higher or further education <input type="checkbox"/> Local media <input type="checkbox"/> Member of staff <input type="checkbox"/> NHS Board website <input type="checkbox"/> Volunteer Centre/Third Sector Interface <input type="checkbox"/> volunteerscotloand.org.uk <input type="checkbox"/> Word of mouth <input type="checkbox"/> Other (please state below)							
Other:								

Reasons for applying

Why are you interested in volunteering?	
How long do you expect to volunteer for?	
What relevant experience do you have in relation to the role you have applied for? Feel free to refer to work, volunteering, education, and qualifications if relevant.	
What three things would you like to achieve through volunteering?	1.
	2.
	3.

Matching to roles

What interests do you have that might help us make an appropriate match to a volunteer role?	
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Support and considerations

Is there any support you would require in order to volunteer?	
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Conflicts of interest/membership of other organisations

Some roles require us to ensure that volunteers are completely impartial and that any conflicts of interest are declared. This does not mean that you would not be able to volunteer, but it is important that any interests are recorded.

What other paid or unpaid roles do you currently hold?	
Is there anything else that you are aware of that might impact on, or be perceived to impact on your independence and objectivity in the role you have applied for?	

Referees

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Referee 1	
Name	
Address	
Postal town	
Post code	
E-mail	
Telephone number	
Referee 2	
Name	
Address	
Postal town	
Post code	
E-mail	
Telephone number	

Consent (for NHS Boards utilising the Volunteering Information System, other NHS Boards should consult their Information Governance Lead for confirmed wording)

You are providing your personal details to **[INSERT NAME OF NHSS BOARD]** as part of your role as a volunteer within the health board. The information you provide is necessary to enable the board to manage and deliver high quality volunteering opportunities and placements as part of its public function.

Your information is added to a database, the Volunteering Information System, and is used to match volunteers with appropriate opportunities and to retain a record of volunteering activity for administration purposes. Anonymised reports will be created from the information and used to inform service developments at a local and national level.

The Volunteering Information System is administered by Healthcare Improvement Scotland, hosted in the National Waiting Times Centre and supported by a partner agency appointed on an annual basis. These agencies are data processors and must adhere to strict access controls. Your personal details will not be shared within the organisations or with other external organisations unless otherwise agreed or if the law says we should.

The details you provide will be stored in an online secure database within the NHS network accessible to only the volunteering management team and kept for six years from the point you cease volunteering.

You have the right to ask us for a copy of your information, or to delete or correct it if you think it is inaccurate. You can ask for data you have given us to be sent to you in electronic format, if processed by automatic means and on the basis of consent or contract. At any time you can ask us to stop or limit the processing of your personal data.

[INSERT NAME OF NHSS BOARD] employ a Data Protection Officer to check that we handle personal information in a way that meets data protection law. If you have any questions or are unhappy with the way in which we use your personal information please tell the Data Protection Officer using the contact details below.

You can find out more about how we process your personal in our full privacy notice available online at: www.

[INSERT NAME OF NHSS BOARD DATA PROTECTION OFFICER DETAILS]

You also have the right to complain about how your personal information is used to the Information Commissioner’s Office (ICO). Details about this are on their website at www.ico.org.uk.

I confirm that I have read and understood the above consent notice. All information I have provided is correct to the best of my knowledge and I understand that by providing the information in this form I am consenting to the processing of it as outlined in the above consent notice.

I understand that the provision of factually inaccurate information, and/or the wilful omission of information requested may result in the withdrawal of an offer to volunteer.

Signed:		Date:	
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