

#### Present

Tom Steele	Chair, Scottish Ambulance Service [Chair]
Alan Bigham	Programme Manager, Healthcare Improvement Scotland
Sandie Dickson	Person Centred Improvement Lead, The State Hospital
Elaine Kettings	Head of Person Centred Care, NHS Forth Valley
Marion Findlay	Director of Services, Volunteer Edinburgh
Diane Lockhart	Voluntary Services Manager, NHS Lothian
Louise MacLennan	Head of Equality and Engagement, NHS National Services Scotland
Lisa Taylor	Project Officer, Healthcare Improvement Scotland
Lee Shennan	Person-Centred Care Policy Officer, Scottish Government

#### Present via teleconference

Geraldine Lawrie	Head of Workforce and Development, NHS Grampian
Tracey Passway	Clinical Governance and Risk Management Team Lead, NHS Tayside

#### In attendance

Rosemary Hampson	Public Partnership Co-ordinator, Healthcare Improvement Scotland	
Stuart Waugh	Administrative Officer, Healthcare Improvement Scotland	

#### Apologies

Rob Coward	Educational Projects Manager, NHS Education for Scotland
Jolanta Lisicka	Participation Policy Manager, Scottish Government
Tony McGowan	Review & Implementation Lead, Scottish Health Council
Claire Stevens	Chief Officer, Voluntary Health Scotland
Tom Wilson	Staff-side rep, NHS Lanarkshire and Royal College of Nursing
Margaret Young	Strategic Lead for Volunteering, NHS Greater Glasgow & Clyde

#### 1. Welcome and apologies

Tom welcomed everyone to the meeting; introductions were made around the table and apologies were noted.

#### 2. Minutes of meeting held on 13 August 2019

The minutes were agreed as being accurate. Actions had been either completed, addressed on agenda or continued as noted in action log.

#### 3. Matters arising

#### Human Resources representative

The group welcomed Geraldine Lawrie to the group, Geraldine will be the NHSScotland HR Directors representative replacing Tony McGowan. Geraldine is Head of Workforce Development with NHS Grampian. The group expressed thanks for her commitment.

#### Clear Pathway Evaluation

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Claire Stevens was due to update on this, but was unable to attend the meeting. Alan reported that he has agreed to sit on the Clear Pathway evaluation group and the first meeting took place on 26 September 2019. An update to be requested for the next National Group meeting in December, when Claire will be in attendance.

### > National staff uniform and volunteer uniforms in use

Alan and Lisa requested feedback from Boards in relation to uniforms for volunteers. In general some Boards are using uniforms, but the colour of these varies as there is no uniformity in approach, in some cases a polo shirt of a colour decided upon by the individual NHS Board. Other Boards use lanyards to identify volunteers. There are no plans for Scottish Government to bring in a standard uniform and certainly where Boards already have uniforms in place, it would be difficult to change these in line with a national standard. It is for NHS Boards to decide whether an agreement on a common uniform should be reached.

### Consultation on Sexual Harassment in the Workplace – volunteers

Marion was due to collect responses on behalf of the group, but she gave apologies for not having picked this up in time for the meeting. Alan provided an update from Healthcare Improvement Scotland, thanking Rosemary Hampson and Stuart Waugh of the Healthcare Improvement Scotland Public Involvement Unit for collecting volunteer feedback. Alan submitted summarised feedback to the corporate office of Healthcare Improvement Scotland who provided a response to the consultation. **Alan to share response with the Group**.

# Social Prescribing of Physical Activity and Sport

Alan highlighted the recent call for evidence by the Health and Sport Committee, noting the comment by the minister Joe Fitzpatrick at the Voluntary Health Scotland conference earlier this year that sport plays an important role in health and volunteering outcomes. Alan brought the call for evidence to the attention of the National Group on the basis that social prescribing, volunteering and health outcomes may be something that NHS Boards, particularly health improvement teams may wish to consider.

#### The submissions can be accessed at

<u>https://www.parliament.scot/parliamentarybusiness/CurrentCommittees/112415.aspx</u>. Any relevant outputs will be shared with the National Group in due course by the Programme Team.

#### 4. Emotional Touchpoints

Sandie gave a presentation on showing how Emotional Touchpoints are used within The State Hospital. Emotional Touchpoints are used to tell a story at the beginning of meetings at the State Hospital, these stories can be about staff, volunteer or patients. Emotional Touchpoints are used to enable others to understand experiences and their impact on the person telling their story.

The presentation provided the Group with the story of a volunteer and her experience within her role at the State Hospital. Sandie stated that the experience the volunteer had gained helped her to be shortlisted for a university place on a Forensic Psychology course. Sandie went onto say

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that where often the State Hospital struggle to recruit Forensic Phychologists, these volunteering roles can go a long way to encourage a career pathway back into the Board. Volunteers are very much valued and seen as part of the team.

Gerry commented that volunteering can be a great way to make a positive career choice and a good stepping stone, to better understand what is or is not for a person. This can help people refocus. Diane commented that volunteers had commented that volunteering helps to enhance CVs.

Marion noted that in line with a growing workforce, it was good to have Gerry on the group. She spoke about the review of forensic services and gaps in medium secure areas, and the group discussed what volunteers were doing in these areas and what is being learned.

Gerry commented that a number of professions are struggling for a workforce supply, and that to make a positive career choice, regardless of age, volunteering could be a good way to do this.

The group gave positive feedback, stating it was a thought provoking story and thanked Sandie for the presentation.

# 5. Volunteering in NHSScotland Programme update

Alan gave a verbal overview of the paper he had produced.

There was a discussion around the update around instances of support the programme give to Boards, evidenced in the table provided.

Tracey Passway commented that in some cases requests for support are held back as the board is aware of the pressure that the Programme Team is under.

# 6. Volunteer and public involvement in the National Group

Rosemary Hampson, Public Partnership Co-ordinator, presented a paper putting forward the case for having volunteer representation at the National Group for Volunteering.

The group discussed the ways in which volunteers could be involved in the group, there was discussion around what the function of and where these volunteers would be recruited from. It was agreed that a role within the group would need to be very clear and that there remained a risk of tokenistic engagement.

Sandie thought that a good plan would be for a sub-group to be in place so that volunteers could give feedback on agenda items.

Sandie reported that she already sends out the National Group agenda to her volunteers for feedback. Tracey agreed that this would be a good opportunity to take on board volunteer opinions and that the Group members could be more purposeful about engaging with their volunteer base on agenda items prior to meetings.

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Rosemary commented that the Public Involvement Unit have no capacity to start a new group for this purpose, but commented that she wanted to provide the options. She stated that group members should be more aware in terms of their accountability for volunteer input.

It was agreed that a volunteer sitting on the group was not necessarily the best option, but that everyone should certainly reflect on how they can involve volunteers more in the future. It must be indicated that members of the group are engaging with volunteers.

Sandie suggested that a matrix of how the Group engages with volunteers would inform a decision in addition to the options within the discussion paper. Alan agreed to draft a document to that end.

Tom thanked Rosemary for the production of the paper. This agenda item will be tabled again in December for further feedback and a final decision.

### 7. Volunteer Charter

Alan introduced the Volunteer Charter, produced by Volunteer Scotland. This new version of the charter was published in April 2019. Alan asked for feedback from the group.

Alan stated he was minded to put seek Group feedback following approaches he had received on a documentary shown on the BBC recently, showing volunteers in health settings in England where the boundaries to volunteering were blurred.

Gerry stated she will take the charter to the NHSScotland HR Directors Group so they can provide feedback.

Tom noted that the Group's membership contains union representation and that in light of Tom Wilson's apologies today the agenda item should be carried forward to the next meeting.

Marion commented that for NHS it's straightforward more than other types of volunteering and that in terms of third sector charities funding is difficult, and there may be more grey areas with regards to where volunteers are engaged. Marion went on to say that language used within the charter is not that that would be used in health, and she was not aware of any volunteers involved in times of an industrial dispute.

Elaine spoke about a discussion around mealtime volunteers in NHS Forth Valley and the difficulties around what is classed as job substitution and around who is supporting patients in this capacity.

Tom commented the Group would agree in principle with the charter but wouldn't endorse it.

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Sandie stated that if the charter had come through the National Group it likely would not have been passed. Marion felt the charter was targeted more towards the private sector and that there should be a response from health around this

Tom commented that the group needs to give a measured response to this.

### 8. Volunteering Information System 2018/19 Annual Report

Alan gave a verbal overview of the report. The group thanked him for what is an in-depth and interesting collation of statistics.

Tracey asked if a future report could include benchmarking of NHS Board recruitment number and processes. Alan agreed this would be helpful in identifying examples of good and efficient practice and in contextualising the data. **Alan to draft for next meeting**.

### 9. Any Other Competent Business

Lee spoke to the group about the work the Scottish Government have been doing on the revised patient charter

They will be promoting this working with an NHS Inform toolkit and will be sharing all information around this with stakeholders and communications leads within NHS Boards

The group agreed that share this with their stakeholders, and Lee will forward the information with Lisa, to pass on.

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# Action log

Agenda item	Action	Responsibility	Timescale
3	Update to the National Group on the Clear Pathway Evaluation	Claire Stevens	3 December meeting
3	Share the Healthcare Improvement Scotland response to the UK Government's Consultation on Sexual Harassment in the Workplace – volunteers	Alan Bigham	1 month
3	Share an update from the Scottish Government Health and Sport Committee inquiry into Social Prescribing of Physical Activity and Sport	Alan Bigham	When available
6	Draft a document to detail how the National Group engages with volunteers	Alan Bigham	3 December meeting
6	Item to remain on agenda for next meeting	Lisa Taylor	3 December meeting
7	Volunteer Charter to remain on National Group agenda for next meeting	Lisa Taylor	3 December meeting
7	Share the Volunteer Charter with HRD for comment	Geraldine Lawrie	1 month
8	Prepare a report listing NHS Boards volunteer numbers and recruitment timescales for next meeting	Alan Bigham	3 December meeting
AOCB	Lee to forward details of new patient charter to Lisa for sharing with Group members. Group to share with stakeholders.	Lee Shennan / Lisa Taylor / All	1 month

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