



Healthcare
Improvement
Scotland

Community
Engagement

Impact of volunteer involvement in flu vaccination clinics

Volunteering in NHSScotland Programme Evaluation

February 2021

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1. Executive summary

Volunteers play a hugely important role in NHS Scotland, giving their time and energy to help others. They are playing a valuable part in the response to the COVID-19 pandemic and in normal times there are around 6000 directly engaged volunteers across all 22 health boards. We are hugely grateful for their support of patients and NHS staff alike.

Volunteering brings enormous benefits and enjoyment, not only to beneficiaries, but to communities, staff and to volunteers themselves. We know that – among other things – volunteering increases social and civil participation, empowers communities, and reduces loneliness and isolation. It can also improve mental and physical health, support the development of job and life skills, and foster a greater sense of belonging.

One of the key remits of the Volunteering in NHSScotland programme is to support safe, effective, person-centred and sustainable volunteering across NHSScotland. This includes the spread of innovative volunteering roles and best practice. As part of our work, we carried out an evaluation with the aim of reviewing the roles volunteers can play in flu vaccination clinics and consider the impact on volunteers, clinical staff, patients and volunteer managers.

Thank you to all those staff and volunteers who participated in the evaluation during times of such pressure.

Key findings

Volunteers added significant value to the delivery of the flu vaccination programmes of those who participated in the evaluation. Contributing to safety, smooth operation of clinics and the flow, and positive experiences of patients.

The experience of staff, volunteers and patients was so positive that all reported that they would involve volunteers in future vaccination programmes, including the COVID-19 vaccination programme.

Partnership working, within NHSScotland and with the Third Sector, played a key part in the well-managed mobilisation of volunteers. Of particular note was when staff with specialist skills in volunteering and volunteer management were involved in the planning and delivery of volunteering to support clinics.

Consistency in good practice in volunteer management, clear processes and communication plans were identified as some areas which would benefit from improvement, as outlined in the recommendations set out below.

2. Recommendations

1. A strategic approach to formulating plans for volunteering in large-scale vaccination programmes, providing a framework for NHS Boards and Health & Social Care Partnerships would be of benefit.
2. The Volunteering in NHSScotland programme should develop guidance and resources for NHS boards and Health & Social Care Partnerships on involving volunteers in large-scale vaccination programmes.
3. Modelling for volunteer numbers based on location, venue size, patient numbers, appropriate shift length and roles (e.g outside for lengthy periods) should be considered in advance of involving volunteers.
4. Regardless of delivery model, the staff member responsible for the supervision of volunteers should have a clear understanding of volunteering best practice, and on the role and boundaries of the volunteer. It is best practice to provide orientation and daily support to volunteers and, where the supervisor is not an experienced volunteering professional, should have access to a local volunteering contact (NHS or Third Sector Interface) to provide support as necessary.
5. NHS boards and Health & Social Care Partnerships should consider working in partnership with the Third Sector to support the delivery of volunteering in large-scale vaccination programmes.
6. Volunteers in patient facing roles in vaccination programmes should be offered the COVID-19 vaccination as outlined in the Scottish Governments [COVID-19 vaccine deployment plan 2021](#).

3. Methodology

The evaluation took place during December 2020 and January 2021. We invited NHS boards who had involved volunteers in their flu vaccination programme in 2020 to participate in the evaluation, those who came forward were NHS Dumfries & Galloway, NHS Tayside and NHS Greater Glasgow & Clyde.

We identified key stakeholders within each NHS board, including volunteers, volunteer managers, clinical staff (strategic & operational) and third sector partners.

Semi-structured interview questions were developed, along with an interview guide and participants information sheets to support staff carrying out the evaluation.

Stakeholder category	Number interviewed
Volunteers	16
Clinical staff (strategic & operational)	13
NHS Volunteer Managers	5
Third sector partners	4

4. Findings

4.1 Volunteer Involvement

Overall, volunteer involvement worked at its best when strategic decisions were taken to support the delivery of the flu vaccination programme through volunteering, and the correct stakeholders identified and brought together to work in partnership. This ensured that best practice in volunteer management was followed, safety of volunteers was fully considered and risk assessments for both venue and volunteer roles were carried out. Generally, the stakeholders consisted of:

- Clinical /Programme Lead for Flu Vaccinations (strategic)
- Operational delivery lead
- NHS Volunteer Manager(s)
- Third Sector partner(s)

The need for volunteer support was identified in a variety of ways:

- New centralised delivery models in 2020, large vaccination centres in community venues such as town halls
- To support compliance with Scottish Government guidance for safety during COVID-19
- Introduction of one way systems, to manage the flow of patients safely due to COVID-19

The experience of staff supporting volunteer involvement varied considerably:

- Involved volunteers in the past but are not employed as volunteer managers
- Experienced volunteer managers
- Had never involved volunteers to support services.

Recruitment of volunteers into flu clinic roles was through a mix of:

- existing NHS volunteers and Patient Participation Group members, although in many cases the age and health of volunteers meant that although willing, they were not able to volunteer for safety reasons
- Recruitment to roles through working in partnership with the local Third Sector Interface (TSi) and the local British Red Cross emergency response team who were able to provide added support in managing recruitment, creation of role descriptions, vetting, induction/training, scheduling.

Staff whose role was in planning and organising clinics reported that working in partnership with experienced volunteering professionals contributed significantly to their, and those staff delivering the vaccines', confidence levels in involving volunteers in their work.

The experience of patients attending for a flu vaccination, was positive. Many had been shielding for many months and were able to be reassured by the volunteer explaining how the clinic would work and the safety measures that were in place. Staff and volunteers interviewed as part of the evaluation reported patients commenting on how well organised the clinic was and how safe they felt in attending for their vaccination.

Due to urgency and short timelines, fast track applications, informal telephone interviews, self-declaration (criminal and occupational health check), and references through smart survey were adopted. The majority of volunteers were risk assessed in accordance to [COVID-19 volunteering guidance](#) for NHS boards published by Healthcare Improvement Scotland – Community Engagement. Some, but not all of those interviewed used the [COVID-19 age tool](#) as a part of their risk assessment process.

The role that volunteers played was broadly similar, regardless of delivery location. Volunteers were involved in hospital clinics, large community vaccination centres, health centres and GP practices, and were engaged by NHS boards and Health & Social Care Partnerships. Roles generally comprised of:

- Queue marshalling and ensuring two metre distance was being adhered to
- Meet and greet
- Providing information on how the clinic operated, and in some cases asking patients if they had any covid-19 symptoms before they entered the building
- Providing reassurance to patients
- Ensuring that patients had masks and utilized hand sanitizer (1 location reported that volunteers did not do this as it was viewed as a staff role)
- In one location volunteers sanitised the vaccination station after each patient
- Sanitising seating areas regularly

Volunteers did not:

- Play a role in car park marshalling
- Carry out administrative functions
- Carry out clinical roles

All staff that we spoke to indicated that they felt that these were roles that would either place too much risk on the volunteer (in the case of car park marshalling) or they were paid staff roles. It was clear that much consideration was given to not substituting paid staff roles with volunteers.

Volunteers were provided with basic training for the role that they were carrying out. Most volunteers were provided with an information pack prior to volunteering and were provided

with orientation in the clinic/venue by the staff member responsible for their supervision on arrival.

'They (Dundee Volunteer and Voluntary Action) developed all the role descriptions, guidance, paperwork, managed recruitment, scheduled volunteers, ensured all safety measures were considered and in place, they were open to responding to the challenges.' **Nicola Stevens, Dundee HSCP**

4.2 Safety / smooth running of clinics

NHS boards are used to providing flu vaccination clinics, however this year with COVID-19, clinics had to adapt to ensure safety and support for patients attending. Understandably, for many patients attending the clinics, there could have been feelings of anxiety and uncertainty.

It is clear that clinics would have been delivered safely in the absence of volunteer involvement, however, involving volunteers demonstrated 'added value' to the operational delivery of flu clinics as outlined below:

- Volunteers supported the flow of patients through the clinic, often stationed at various points from the outside of the building, through the clinic itself and directing patients to the exit following their vaccination
- Supporting compliance with Scottish Government guidance for COVID-19. Safety measures, implemented by staff, were carried out by volunteers whose main focus was on maintaining safe distances, use of masks and hand sanitiser

Other areas highlighted:

- Flexibility of volunteers contributed to smooth running of clinics. Volunteers would take initiative within the boundaries of their role and carry out tasks without direction from staff. Where more than one volunteer was present they self-organised and managed tasks between them with very little intervention from already busy staff
- Volunteers reported feeling safe in carrying out the role, and that all necessary safety measure were in place

'I would like to take this opportunity to thank you and your team for supporting the Immunisation Team to deliver the largest Flu campaign that we have ever delivered. Your volunteers have ensured that we have had good patient flow and have been able to deliver this campaign in a safe and efficient way. I hope that they have all enjoyed working with us as we have navigated through this new venture. Please can you pass on my appreciation to everyone and to advise they have been invaluable to the success of the campaign. I hope that we can work together in the future.' **Gemma Stewart, Lead Immunisation Nurse, NHS Dumfries & Galloway**

4.3 What could have been improved

While the overall experience for staff, volunteers and patients was extremely positive, there are improvements that could be made in two specific areas:

Managing volunteers:

- Shortening the length of volunteering shifts, in line with best practice guidance for managing volunteers, as they should not generally be expected to volunteer for similar lengths of time as staff are at work
- Ensuring all potential volunteers are asked about any access support needs at recruitment stage, to identify any reasonable adjustments that might be required to support people with disabilities to volunteer
- All staff in the site are welcoming and supportive of volunteers. A small number of volunteers in one venue reported that they did not feel wanted by some staff, which impacted on their experience of volunteering
- Formal processes for the staff member who is responsible for supervising volunteers to follow. Highlighted by volunteer managers as an improvement to support those staff whose primary role is not volunteer management
- Provision of practical information for volunteers. Information on the environment of the centres, for example, advising them to arrive prepared with warm clothes if required to be outside or near doorways

Process and communication:

- In some cases there was a lack of understanding of the numbers of volunteers required, with some reporting too few volunteers and others reporting too many
- Consider how volunteers prefer to be communicated with, many volunteers reported email as the only method of communication and that this lacks the 'personal touch' that they value
- Daily communication opportunity between staff and volunteers, ensuring the flow of communication does not break down

4.4 Positive Impact

All NHS Boards involved in the evaluation told us that 2020 was the largest and most successful flu vaccination programme that they have ever run, they believed that this was in part due to the involvement of volunteers, as outlined below:

- Clinical and administrative staff were able to focus on their role, as a result more clinics were delivered than would have been without volunteers
- High levels of satisfaction and feeling safe to enter a clinical environment was reported amongst patients. Staff and volunteers reported that patients shared verbally with them and via social media just how well organised the clinic was and that they felt much safer than they expected to

- Non-volunteering NHS staff have a greater understanding and confidence in the benefits that volunteering can bring to services
- Building stronger relationships between teams in NHS Boards, Health & Social Care Partnerships and Third Sector, and identifying opportunities to work together in future
- Volunteers reported increased confidence, feelings of satisfaction and achievement at contributing to something important, and also benefited from interacting with others in a safe manner during times of restriction
- Volunteers reported that they would like to volunteer again in future and would recommend it to others
- Working in partnership with TSI's and British Red Cross to meet the demand for numbers of volunteers
- In some cases volunteers were offered the flu vaccination when they started at the flu clinic, adding to safety measures
- A communication book was implemented in one location, the head nurse and volunteers could communicate with each other via the book
- Clinical leads for the vaccination programme were happy to take suggestions from volunteers on how to improve the flow, creating an atmosphere where the volunteer felt valued and part of the team

Staff feedback collated by Dundee Volunteer & Voluntary Action:

'The volunteers have been invaluable. They have taken pressure off clinical staff and have offered patients coming into the clinic reassurance and a very happy and pleasant welcome'

'They (volunteers) listened and supported us and all of the patients who came for their vaccine and were compassionate and understood what was required and gave us 100% commitment'

'I'd just like to say that for me the volunteers made my job easier. All the volunteers I met, albeit briefly contributed to the very smooth running of the clinics. Their friendliness and welcome to patients was calming and reassuring'

4.5 Future involvement of volunteers in vaccination programmes

All staff interviewed reported that they planned to involve volunteers in future flu vaccination programmes, in the COVID-19 vaccination programme and in some cases in child immunisation clinics.

We would recommend that the COVID-19 vaccine should be offered to volunteers in patient facing roles as outlined in the Scottish Governments [COVID-19 vaccine deployment plan 2021](#) in order to maximise the safety of volunteers and also to recognise the importance of volunteering in the delivery of NHS services.

I did regular clinics (two days per week), and got to know the staff and it was great to feel part of the wider team. Best aspect is being able to help and at a time when life is restricted to

being mainly at home. I really enjoyed meeting new people – both the staff and the general public. Volunteer, Glasgow HSCP

5. Appendix

Semi-Structured interview guide for Evaluation of Volunteer involvement in Flu Clinics

Stakeholder	Question topics
Volunteer Manager	<p>1 - Can you tell me what made your Board or HSCP consider using volunteers for the flu vaccination programme in the first place?</p> <ul style="list-style-type: none"> • Were there any specific objectives or outcomes you were trying to achieve by involving volunteers? <p>2 - Can you give us a brief background of how you involved volunteers in the Flu Vaccination Programme?</p> <ul style="list-style-type: none"> • How did you select your volunteers? • Was there a set criteria, a volunteer profile? If so what was this in terms of age, skills, volunteer time commitment etc • Did you recruit Volunteers specifically for this project or did you use existing volunteers? Why did you do this? • Did you access volunteers from other sources? Where did you source the volunteers? What arrangements did you put in place to allow this to happen? • Was there a volunteer role descriptor or an advert for recruitment? If so would it be possible to share this with us? <p>3 - Once recruited were the volunteers given any specific training?</p> <ul style="list-style-type: none"> • What did this consist of? • Was there anything specific related to volunteer safety that took place with volunteers, if so can you describe this? <p>4 - Generally what worked well by involving volunteers in Flu Vaccination programme?</p> <p>5 - Was there anything that could have been done better, were there any challenges or things to avoid for next time?</p> <p>6 - Would you say that the objectives and outcomes you mentioned at the start were achieved? Why do you say this?</p> <p>7 – Would you consider a similar volunteer role for next year’s flu vaccination?</p>

	<p>8 – Do you think a similar volunteering role would be useful for the roll out of a COVID vaccine?</p> <ul style="list-style-type: none"> • Why do you say this? • Would anything have to be done differently, or would things be very similar? <p>9 – Is there anything else you would like to say about volunteer involvement in the flu vaccination programme</p>
Volunteers	<p>1 - Can you explain briefly what your volunteer role was?</p> <p>2 - Can you tell me what motivated you to volunteer for the Flu Vaccination Programme? (Check for comments relating to adverts, role descriptions being specifically asked etc).</p> <p>3 - What sort of skills do you think are needed to do this volunteer role?</p> <p>4 - Did you receive any relevant training? If so, what was this? (If not was there guidance given?</p> <p>5 - Has undertaking this volunteer position helped you develop any new skills or enhance any existing skills?</p> <p>6 - When undertaking your volunteer position did you feel safe generally and did you feel safe in relation to COVID? Why do you say this?</p> <p>7 - Apart from the skills mentioned above, what benefit did you get from volunteering in this role?</p> <p>8 - What went particularly well or would you say was the best aspect of your volunteering experience in the Flu Vaccination Programme?</p> <p>9 - Could anything have been improved in any way, were there any challenges with this role?</p> <p>10 – Would you do this again and would you recommend to other people to participate?</p> <p>11 – Is there anything else you’d like to say about your participation as a volunteer in the flu vaccination programme?</p>
Clinicians or Flu Vaccination Lead	<p>1 - From a clinical perspective what ways did the volunteers support the overall objectives of the flu vaccination programme?</p> <ul style="list-style-type: none"> • Would you say it supported the vaccination programme in a positive way? Why do you say this? • Were there any challenges with volunteers involved?

	<p>2 - Can you say what value volunteers brought to the clinic in terms of:</p> <ul style="list-style-type: none"> a) safety b) supporting the administration and running of the clinics c) In terms of patient experience <p>3 – Do you think a similar volunteer role for next year’s flu vaccination would be worth considering? Why do you say that?</p> <p>4 – Do you think a similar volunteering role would be useful for the roll out of a COVID vaccine?</p> <ul style="list-style-type: none"> • Why do you say this? • Would anything have to be done differently, or would things be very similar? <p>5 - Is there anything else you would like to say about volunteer involvement in the flu vaccination programme?</p>
Patients	<p>1 - When you came to the clinic did you receive any support, guidance or help before you received the flu jab?</p> <ul style="list-style-type: none"> • What was that and how did you find that support? <p>2 - Did you receive any support, guidance or help after you received the flu jab?</p> <ul style="list-style-type: none"> • What was that and how did you find that support? <p>3 - Generally, how was your experience of the flu vaccination clinic you attended? (note if it was positive, neutral, negative)</p> <ul style="list-style-type: none"> • Why do you say this?

Guidance for participants

The Evaluation

Volunteers have played an important part in the delivery of this year's flu vaccination programme. We are undertaking an evaluation of the role of volunteers in this work in order to share the learning and good practice with all NHS boards in Scotland, and to help us to develop guidance which will support NHS boards in considering how they might involve volunteers in the COVID-19 vaccination programme.

What's involved?

You are invited to take part in a conversation with a member of staff from the Community Engagement Team at Healthcare Improvement Scotland as part of the evaluation of volunteering in flu clinics. During the conversation, we would like to explore with you your experiences of volunteering in the clinics.

You will be contacted by a member of the community engagement team to arrange suitable date and time for the conversation which can be held either via video call (on MS Teams) or by phone call. The call will take no more than 1 hour.

Topics for discussion

- Your volunteer role at the flu clinic
- The skills and training needed
- Safety aspects of the role
- What worked well and what could have been better?
- What did you get out of volunteering and would you do it again?

What happens next?

After the meeting, your conversation will be written up passed back to the volunteering programme team who will analyse the results and write an evaluation report.

You will be sent a copy of this report when it is available.

Thank you very much for your participation.

Useful contacts

INSERT DETAILS OF ENGAGEMENT OFFICERS

You can contact the Volunteering in NHSScotland Programme Team on his.volunteering@nhs.scot

Risk Assessment Form				
Generic - Volunteering				
				
Department	Patient Services - Volunteering			
Manager Responsible				
Risk Assessor(s)				
<p>Subject of Assessment: E.g.: hazard, task, equipment, location, people</p> <p>1) This Generic Risk Assessment includes volunteer Welcome Guides and Ward Volunteers based in the main atrium of the Dumfries and Galloway Royal Infirmary, Mountainhall and various community settings during Flu Vaccination Programme.</p> <p>2) In addition to this Volunteers are supporting the NHS during COVID19 and beyond. The volunteers will help signpost patients/visitors to the correct area encouraging them to make use of face coverings, hand sanitiser ensure social distancing.</p> <p>All activities are currently undertaken under general supervision/support of the Volunteer Co-ordinator. Volunteers can also access support from the Reception desk staff and Ward staff.</p>				
What are the hazards	Who might be harmed and how	Risk	Current Controls	Residual risk
Potential for Slips, trips and falls during course of volunteering role causing Sprains, fractures or bruising	Volunteer	Likelihood 3 x Severity 2 = 6 • Amber	<ul style="list-style-type: none"> Instruction at Induction advising appropriate footwear Good housekeeping. 	Likelihood 2 x Severity 2 = 4 Green
In the course of moving patients and volunteers throughout DGRI there is a risk of harm to patients, volunteers and visitors	Volunteer, out-patient or visitor	Likelihood 3 x Severity 2 = 6 • Amber	<ul style="list-style-type: none"> Wheel chair assistance training is provided for volunteers to provide this service to out-patients or visitors only. Volunteers must wear their Wheelchair Assistance ID badge. 	Likelihood 2 x Severity 2 = 4 Green
Volunteer/ visitors not following infection control protocols leading to possible harm for the volunteer or patient, particularly in Covid 19 pandemic	Volunteers, patients	<ul style="list-style-type: none"> Likelihood 5 x Severity 4 = 20 Red 	<ul style="list-style-type: none"> All volunteers receive Mandatory Induction Training and participate in Volunteering in NHS Scotland e-learning units, which includes Infection Control. Volunteers have been informed that they should ask any 	Likelihood 2 x Severity 4 = 8 Amber

	<p>Visitors not observing social distancing</p> <p>Members of the public coming into atrium looking for Covid testing centres</p>		<p>trained staff member for help and assistance in the event of people becoming unwell in the reception area.</p> <ul style="list-style-type: none"> • At Mandatory Induction Training and volunteer e-news volunteers are made aware of the most up to date infection control measures as well as PPE requirements and social distancing. All are asked to apply these in their volunteering role. • PPE is available for all volunteers 	
<p>Stress / Emotional</p> <p>Stress caused to volunteers due to</p> <p>Information can be disclosed to volunteers, which can be of an emotional and potentially distressing nature.</p> <p>Volunteers witness hospital activities during an emergency situation for the duration of the Covid-19 outbreak, including stressed members of staff, very sick patients and upset members of the public.</p>	<p>Volunteer</p>	<p>Likelihood 1 x Severity 2= 2</p> <p>Green</p>	<ul style="list-style-type: none"> • There is a clearly defined role description, which is agreed with volunteers prior to commencement in the role. • All volunteers receive Mandatory Induction Training and participate in Volunteering in NHS Scotland e-learning units, which includes training in Roles, Boundaries and Confidentiality. • Support available from Volunteer Co-ordinator, Peer Support Team and Nurse in Charge if on ward. 	<p>Likelihood 1 x Severity 2= 2</p> <p>Green</p>

<p>Volunteers are exposed to Violence or Threatening Behaviour</p> <p>Exposed to incidents of verbal abuse and aggression and potentially to violence</p> <p>Exposed to challenging behaviours when they are approached by people under the influence of drugs and/or alcohol</p>	<p>Volunteer</p>	<p>Likelihood 2 x Severity 3 = 6</p> <ul style="list-style-type: none"> Amber 	<ul style="list-style-type: none"> Volunteers participate in Conflict Management Training Volunteers are informed as to when/how to seek support from trained staff, when they feel there is any threat of verbal abuse and/or aggression and/or violence. 	<p>Likelihood 1 x Severity 3 = 3</p> <p>Green</p>
<p>Volunteer is asked to carry out tasks out with the scope of their role where they are not trained and thus operating out of insurance . Risks are financial or reputational. Risk also that patient could come to harm</p>	<p>Volunteer, Patient, Staff and Board</p>	<p>Likelihood 4 x Severity 4 = 16</p> <p>Red</p>	<ul style="list-style-type: none"> There is a clearly defined role description, which is agreed with volunteers prior to commencement in the role. All volunteers receive Mandatory Induction Training and participate in Volunteering in NHS Scotland e-learning units, which includes training in Roles, Boundaries and Confidentiality. Support available from Volunteer Co-ordinator, Peer Support Team and Nurse in Charge if on ward. Dos and don'ts provided to charge nurses 	<p>Likelihood 2 x Severity 4 = 8</p> <p>Amber</p>
<p>Risk that Volunteer is injured due to a fire on NHS Premises</p>	<p>Volunteer</p>	<p>Likelihood 1 x Severity 4 =4</p> <ul style="list-style-type: none"> Green 	<ul style="list-style-type: none"> All volunteers receive Mandatory Induction Training and participate in Volunteering in NHS Scotland e-learning units, which include module on Fire Safety. Follow Fire Safety procedures in location. 	<p>Likelihood 1 x Severity 4 = 4</p> <p>Green</p>

Potential risk that volunteer discloses confidential patient information leading to financial consequences and reputational harm	Board	Likelihood 4 x Severity 5= 20 • Red	• All volunteers receive Mandatory Induction Training and participate in Volunteering in NHS Scotland e-learning units, which include Roles, Boundaries and Confidentiality • Follow guidance in the Volunteer Corporate Induction Manual, Volunteer Handbook, Policy and Procedures and the Respect of Code of Positive Behaviour leaflet.	Likelihood 2 x Severity 5 = 10 Amber

Risk Matrix

Severity Likelihood		Negligible		Minor		Moderate		Major		Catastrophic	
		1	2	3	4	5	6	7	8	9	10
Certain	5	Amber	5	Amber	10	Red	15	Red	20	Red	25
Probable	4	Green	4	Amber	8	Red	12	Red	16	Red	20
Possible	3	Green	3	Amber	6	Amber	9	Red	12	Red	15
Unusual	2	Green	2	Green	4	Amber	6	Amber	8	Amber	10
Remote	1	Green	1	Green	2	Green	3	Green	4	Amber	5

What Further Action is Necessary? Record your findings and implement them				
<i>Actions required</i>	<i>Person responsible</i>	<i>Action date</i>	<i>Action Taken</i>	<i>Completed date</i>
Once approved a copy of the Generic Risk Assessment to be distributed: <ul style="list-style-type: none"> • To all active volunteers • To new volunteers as part of the induction process. • At 3 year Refresher Training 	Volunteer Co-ordinator	November, 2020		

Has the risk assessment been agreed with your line manager?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Managers Signature	Date	

Have the findings of the risk been communicated to all relevant people?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Method(s) of communication – verbally, email, post		

Risk assessment completed by	
<i>Print name</i>	<i>Designation</i>
<i>Date</i>	

Review your record of assessment initially in 6 months thereafter annually	
Review carried out by (print name and designation)	
Signature	Date

This assessment should be reviewed immediately following an incident or if there have been significant changes in work activity.



Volunteering Service

COVID – 19 Response Volunteer – Role



Location: Inpatient Facilities

Purpose of the role: To support hospital staff, patients and family during COVID-19

Key tasks: To respond to requests as directed by the Volunteer Co-ordinator for example:

- Provide direction and assistance, meeting and greeting out-patients
- Encouraging social distancing and the use of hand sanitiser, assisting with patient flow
- Reducing isolation and loneliness for non Covid patients
 - including supporting vulnerable older patients with Dementia, children/babies.
- Running errands e.g. Prescriptions from Pharmacy/Meals for staff
- Deliveries of non-perishable goods/equipment/resources
- Delivery bags of clothing and items to and from wards
- Support with basic admin. duties /reception

Details of any specific skills/attributes required by volunteer: This role is evolving as new requests emerge. The volunteer is asked to be flexible with regard to the duties needing to be undertaken.

- Computer literate and have access to computer & smart phone for e-learning training
- Good communication skills
- Ability to relate well to people on a one to one basis and be sympathetic to others' situations
- Patience, empathy and non-judgemental approach
- Reliable
- Respect confidentiality
- Positive outlook and enthusiastic approach
- Willingness to work without direct supervision

Benefit to the volunteer, what can you gain from the role?:

- Working within a committed team to provide support to staff, patients and families in this time of national crisis
- Knowledge that volunteering is enhancing the patient's experience by releasing staff to provide patient care
- Supervision and support from a named member of staff
- Providing help in a time of need.

The safety of our volunteers is paramount, volunteers will not be asked to carry out tasks they have not been trained to do or do not feel comfortable doing. Volunteers will be carrying out roles within low risk areas and will not duplicate the role of staff.

Support will be provided to volunteers via the Volunteer Co-ordinator and named staffed person in your placement.

Health & Wellbeing: We understand during this time that your ability to carry out your volunteering role might change due to your health and wellbeing or that of your family. It is your responsibility to inform the Volunteer Co-ordinator of any changes or concerns you have.

Disclosure Scotland: Standard Disclosure is required for this role.

Jan 2021

Example risk assessment form – Glasgow

RECORD OF GENERAL RISK ASSESSMENT (Based on HSE's Five steps to risk assessment)			
Department :		Voluntary Services – COVID-19 Response	
Manager Responsible :			
Risk Assessor(s):			
<p>Step 1(a)- Description of Task/ Environment/ Objectives Way finding volunteers are based in the reception area of the health centres at Drumchapel, Maryhill, Possilpark and Woodside.</p> <p>Volunteers are to support the flu vaccine clinics. This includes interaction with staff, visitors and patients at entrances.</p> <p>All activities are currently undertaken under general supervision of the reception staff.</p> <p>This risk assessment is specific to the COVID-19 role.</p>			
Step 1(b) What are the hazards	Step 2- Who might be harmed & how	Step 3(a)- Current Controls	Step 3(b) Evaluate the risks
1.Contracting and Exposure to COVID 19	Volunteer, patients, visitors.	Volunteers sign a self Health Declaration prior to commencing in their role. Volunteers are made aware of the most up to date infection control measures as well as PPE requirements and asked to apply these as required for their tasks. Use of one way system, social distancing, appropriate use face coverings and hand sanitisation stations available. Follow the protocol for infection control for the duration of the Covid-19 outbreak and keep up to date with the latest NHS guidance regarding Covid-19;	Likelihood 3 x Severity 4 = 12
2. While engaging with and guiding patients/visitors/families, information can be disclosed to volunteers, which can be of an emotional and potentially distressing nature. Volunteers may encounter sick patients from their own family or social circle, which is likely to	Volunteer	Support from volunteering services Volunteers always have an identified member of staff on site to provide advice and support.	Likelihood 1 x Severity 2 =4

have a strong emotional impact.			
3. Due to the nature of the volunteer role, patients may disclose information about their health/circumstances and there is potential for volunteers to breach confidentiality. 4. During the Covid-19 pandemic, volunteering service resources may not always permit distribution NHSGGC volunteer uniforms, NHS ID badges and name badges before commencing volunteering.	Volunteer Volunteer	All volunteers receive on line Mandatory Training and Induction, which includes training in Confidentiality, Boundaries and Infection Control. Volunteers sign up to our Code of Conduct in their Mandatory Training/Induction. All volunteers wear NHSGGC volunteer uniforms and have NHS ID badges and also name badges, which identifies them as volunteers	Likelihood 1 x Severity 2 = 2 Likelihood 1 x Severity 1 = 1
5. Due to the Covid-19 outbreak quick changes within health centre environment are likely, leading to quick changes in hazards and risks	Volunteer, staff	Volunteers and staff need to be vigilant, keep up to date on latest guidance regarding infection control and communicate any changes they encounter in their roles to enable updates to the Risk Assessment. Changing needs within the health centre environment require a quick change of volunteer roles (e.g. as part of the Covid-19 emergency response) with timeline making communication of clear role descriptions and training.	Likelihood 3 x Severity 3 = 9

Likelihood / Severity		Negligible 1		Minor 2		Moderate 3		Major 4		Catastrophic 5	
Certain	5	Amber	5	Amber	10	Red	15	Red	20	Red	25
Probable	4	Green	4	Amber	8	Red	12	Red	16	Red	20
Possible	3	Green	3	Amber	6	Amber	9	Red	12	Red	15
Unusual	2	Green	2	Green	4	Amber	6	Amber	8	Amber	10
Remote	1	Green	1	Green	2	Green	3	Green	4	Amber	5

Step 3(c)- What Further Action is Necessary? Step 4- Record Your Findings and Implement Them				
Action Required	Person Responsible	Action Date	Action Taken	Completed Date
Named contact staff in health centres			As soon as identified.	

COVID-19 Response Risk Assessment Created 18th September 2020 Review date 8th October 2020 Version 1

Has the risk assessment been agreed with your line manager?	Yes	
Manager's Signature & Date		
Have the findings of this risk assessment been communicated to all relevant people?	Yes	
Method(s) of communication – emails		

Risk assessment completed by (print name & designation)	
Signature:	Date
How soon should this assessment be reviewed and how regularly afterwards? Initial review 2 weeks. Review date will be reviewed at that point.	
Step 5- Review your assessment and update if necessary	
Review carried out by (print name & designation)	
Signature	Date

This assessment should be reviewed immediately following an incident or if there have been significant changes in work activity

Volunteering during COVID-19 Outbreak 2020 Flu Vaccination Programme

What a volunteer can expect from Dundee Volunteer and Voluntary Action (DVVA):

General and Health guidelines

- We will provide safety guidelines and an induction for all volunteers. During this emergency period, the induction will happen remotely. Please note that the familiarisation and induction session for Flu Vaccine support volunteers will be conducted by the designated responsible person within the clinic or community-based venue and will centre around your dedicated venue procedures.

Support and induction

- Support will be available from a named DVVA member of staff prior to your start date and from the designated responsible person during your time volunteering
- Induction will be done on the day.

Recognition

- We value the contribution that volunteers make to the city and its people and we will recognise the time and contribution they make to show our appreciation. We will do our best to ensure that you feel valued for your contribution, although this will happen remotely in these challenging times.
- Our young volunteers (12-25) can register for the Saltire Award Scheme and will receive Saltire Award Certificates for 10, 25, 50, 100, 200 and 500 hrs and group activities. This scheme is endorsed by the Scottish Government. Volunteers however must be 18 for this Flu Vaccination Programme.

Good practice

Volunteer Insurance

- DVVA has Public Liability and Employer's Liability insurance that covers volunteers.
- Volunteer Policy – Please ensure that you read this prior to starting your volunteering.
- Volunteer Agreement - signed by the volunteer and relevant contact person and outlines the role of the volunteer and agreed work areas.

Expenses

- Volunteers will be reimbursed for their travel and out of pocket expenses, please see Volunteer Policy for further information.
- A Volunteer Expenses form should be completed and receipts kept, your named DVVA contact will advise you how to do this.

Your opinion counts

You may be asked for feedback from time to time – this will help us to improve the quality of practice and the volunteering experience.

What DVVA expects from our volunteers

Organisation Expectations

- Volunteers work within agreed guidelines as set out in their volunteer agreement.
- Undertake their volunteering role at the agreed time, place etc.
- Participate in mandatory induction / training as required.
- Communicate with your named DVVA contact person – this will be agreed at the beginning of your volunteering with us.
- Inform named DVVA contact if you are unable to attend and, where possible, in advance.
- Agree to work with people in a non-judgemental way, treating them with respect and dignity.
- Adhere to confidentiality policy but where necessary raise any concerns you may have about an individual's health and wellbeing.
- Comply with all DVVA's policies and procedures.

(Policy documents can be obtained from your named DVVA contact person)

Note: If you are unhappy in your volunteering role please let us know as there may be other opportunities.



Flu Vaccination Programme Volunteer Guidelines

Thank you for taking the time to support the smooth delivery of the Flu Vaccination Programme as a volunteer with Dundee Volunteer and Voluntary Action (DVVA). We hope that volunteering with us will be both an enjoyable and rewarding experience for you. There are some simple guidelines that we would ask you to adhere to for your own safety and for the safety of the people you are helping. This will complement the specific guidelines that you will receive from the designated person for the venue that you will be assigned to.

General guidelines

Respect social distancing by maintaining a distance of 2m with others, or as far as practicable.

Make sure that you wash your hands frequently or use hand sanitiser.

Follow [hand washing guidelines](#).

Wear the PPE provided by your designated person within the clinic at all times

When you cough or sneeze, put used tissues in the bin immediately and wash your hands afterwards.

Walking or cycling is encouraged as the first choice to travel from and to your place of volunteering. Avoid car sharing and if using public transport, face coverings are compulsory.

Follow [guidance on travelling within Scotland](#).

In recognition of the incubation period, you will engage on a fortnightly basis where possible.

You will do a 3 hour shift a day in order to minimise contact with people.

Do not commit to longer-term support of an individual on a one-to-one basis.

Do not accept tips or other gifts.

Health

When to self-isolate

As volunteers during the COVID-19 response you will be helping the most vulnerable in society and as such must take great care not to put anyone at unnecessary risk. Therefore, you must inform your named DVVA person immediately if:

Anyone in your household starts to display symptoms of the virus (see NHS guidance below). You will be required to self-isolate for 14 days. If you remain symptom free you may return after 14 days. If you develop symptoms you must keep self-isolating and get a done test as soon as practicably possible.

You are made aware that someone in your support bubble has developed symptoms or tested positive. You will be required to self-isolate for at least 14 days. If you remain symptom free you may return after 14 days. If you develop symptoms you must continue self-isolating and get a test.

If you develop symptoms of the virus yourself, however mild. You will be required to self-isolate for at least 10 days from when your symptoms started. If after 10 days, you still have a temperature, you should continue to self-isolate and seek medical advice.

Once contracted, the virus may linger in your system for 5 – 10 days before you notice any symptoms. This is why we ask you to self-isolate if you have or possibly have, been exposed to someone else with the virus for 14 days and at least 10 days if you, yourself are now displaying symptoms. You are urged to seek medical advice if you develop difficulties breathing.

You will be therefore be not be permitted to carry out any volunteering during a time where self-isolation is required. We understand how frustrating this may be but it is imperative that you are fit and well and also for the safety of those who need our services. Please keep in touch with your named DVVA person to get you back volunteering once you are out of self-isolation.

[NHS Advice - Covid-19 Symptoms](#)

Do not leave your home and have a test if you have either:

- a **high temperature** – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- a **new, continuous cough** – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- a **loss or change to your sense of smell or taste** – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

To protect others, stay at home and get a test as soon as possible.

Use the 111 online coronavirus service to find out what to do. You may also telephone your GP surgery if you have other medical concerns as they will likely be doing telephone consultations.

Guidance for volunteers

Before volunteering

You will complete a COVID-19 Occupational Risk Assessment and inform DVVA of your score, which must fall in the moderate or low risk category.

You will complete and return the self-assessment within the 48 hours prior to your volunteering shift.

During your volunteering:

- Adhere to social distancing rules as far as practicable.
- Wear PPE outside the clinic, when entering and moving around the building.
- Sanitise your hands regularly.
- Follow the safety protocols given by the designated responsible person within your place of volunteering.

If you develop symptoms of COVID-19 as per most recent national clinical guidance, leave immediately, self-isolate and follow [Stay at Home](#) advice. Inform your named DVVA person.

Please note that [Test and Protect](#) protocols will be followed if you develop symptoms or an outbreak occurs within your place of volunteering.

Reimbursement of expenses

We encourage you to walk or cycle to your place of volunteering but if this is not feasible, please ask for reimbursement of your expenses by using the expense claim form provided as part of your Induction Pack.

You can claim mileage from your home to the place of volunteering and back. The current rate is 45p per mile. Please take a note of the number of miles you travel and add them to your expense claim form, along with your starting and destination post code.

If you're using public transport, please take a photo of your ticket and send it back with your form.

How often should I claim? It depends on how often you are volunteering. Please send in your expense claim at least once a month to your DVVA named contact.



Volunteer Agreement for Community Response Volunteers

As a Volunteer with DVVA I agree to:

- Adhere to guidelines as given by DVVA and be aware that, whilst doing volunteer duties, I am representing DVVA
- Respect the community person that I am supporting
- Not make arrangements to provide support out with that requested through DVVA
- Contact DVVA if there are any issues arising from the volunteer request
- Take reasonable steps, using the guidelines given to me, to protect the health and well-being of both myself and the community person I am supporting
- Keep the personal information I am given private and confidential, adhering to rules around GDPR
- Let the named DVVA contact know if there are changes in my personal circumstances that may affect my volunteering (especially if I develop symptoms of COVID-19 or have close contact with someone who has or develops symptoms).
- Allow my details to be shared with Test and Protect should I develop symptoms or in the event of an outbreak within the venue I volunteer

DVVA agrees to:

- Reimburse reasonable out of pocket expenses e.g. mileage costs.
- Give you, the volunteer, the support required to carry out your volunteering
- Recognise you as a valuable member of our team.

Privacy Notice – DVVA Volunteer’s Information

Dundee Volunteer and Voluntary Action (DVVA) needs to collect and use certain types of information about individuals who come into contact with DVVA in order to carry out our work. Dundee Volunteer and Voluntary Action is what’s known as the ‘Controller’ of the personal data you provide to us. You can contact the Data Protection Officer at communications@dvva.scot.

What personal data will we collect from volunteers?

We collect the following personal data about you:

Name, address, personal contact information, date of birth, emergency contact details, information about medical conditions that you wish to share with us, information about your volunteering role and when and where you will carry it out, and (if relevant to your role) driving licence number, car insurance policy details, information about the roadworthiness of your car (MOT).

What are the purposes of processing the data?

DVVA collects and processes this data to ensure that we are able to match volunteers to a suitable role, maintain contact with them and contact relevant people in event of an emergency.

Lawful processing of personal data

DVVA can process and retain volunteer data because it is in the legitimate interests of the organisation. Processing is necessary *to ensure that volunteers are recruited, matched and supported.*

What we do with your data

Dundee Volunteer and Voluntary Action regards the lawful and correct treatment of personal information as very important to successful working, and to maintaining your confidence.

Dundee Volunteer and Voluntary Action will ensure that your personal information is treated lawfully and correctly.

Information and records will be stored securely and will only be accessible to authorised staff and volunteers.

Information will be stored for only as long as it is needed or required statute and will be disposed of appropriately.

Your personal details will not be given to anyone outside Dundee Volunteer and Voluntary Action without your consent unless it is necessary for us to do so, i.e. in

order to comply with the law, with police investigations or it is determined that there is risk of significant harm to either yourself or another person.

There are circumstances where the law allows Dundee Volunteer and Voluntary Action to disclose data (including sensitive data) without the data subject's consent.

These are:

- Carrying out a legal duty or as authorised by the Secretary of State
- Protecting vital interests of an Individual/Service User or other person
- The Individual/Service User has already made the information public
- Conducting any legal proceedings, obtaining legal advice or defending any legal rights
- Monitoring for equal opportunities purposes – i.e. race, disability or religion (in the form of statistics and not in any way that identifies you.)

Dundee Volunteer and Voluntary Action may share data with other agencies such as the local authority, Health organisations, funding bodies and other voluntary agencies (in the form of statistics and not in any way that identifies you.) You will be made aware how and with whom the information will be shared.

How long do we keep your data?

Information will be retained for the duration of your volunteering, or until you provide DVVA with an updated form, and will then be securely disposed of.

What are your rights?

All Data Subjects have the right to access the information DVVA holds about them. Individuals may exercise the right by making a written 'subject access request' (SAR). However, subject access goes further than this and an individual is entitled to be:

- told whether any personal data is being processed;
- given a description of the personal data, the reasons it is being processed, and whether it will be given to any other organisations or people;
- given a copy of the personal data; and
- given details of the source of the data (where this is available).

You have the right to receive a copy of the personal information that DVVA holds about you, and to demand that any inaccurate data be corrected or removed.

You have the right to withdraw consent at any time, **where relevant**.

If you wish to access a copy of any personal data being held about you, you must make a written request for this. To make a request, please complete a **Personal Data Subject Access Request Form** which can be obtained from the Data Protection Officer. If a SAR is received DVVA will respond within one month.

*If you wish to raise a complaint on how we have handled your personal data, you can contact us to have the matter investigated. **Contact** communications@dvva.scot*

If you are not satisfied with our response or believe we are processing your personal data not in accordance with the law you can complain to the Information Commissioner's Office <https://ico.org.uk/>

Flu vaccine Programme Volunteer Self-Assessment Form

Please fill in the form below with the 48 hours prior to your volunteering shift and return it to the named person within DVVA

Name:	
Clinic allocated to:	
Day and time of volunteering:	Date: From: To:
Covid Age:	
Risk category:	<input type="checkbox"/> Low (below 50) <input type="checkbox"/> Moderate (50 to 70)

I can confirm that within the last 14 days:		
1. I have not been infected or shown symptoms of COVID-19	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. I have not been exposed to anyone with symptoms	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. No one in my household has been infected or shown symptoms of COVID-19	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. No one in my household is in the vulnerable or extremely vulnerable categories as defined in the current UK Government COVID-19 advice	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. I have not returned to Scotland from a country non-exempt from quarantine	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Assumption of risk
I acknowledge and understand the following:
<input type="checkbox"/> Volunteering includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist.
<input type="checkbox"/> I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties.

Typed signature:	
Date:	

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We are happy to consider requests for other languages or formats.
Please contact our Equality and Diversity Advisor on 0141 225 6999
or email his.contactpublicinvolvement@nhs.scot

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