

# Volunteer Policy

## Patient and public involvement

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## 1. Introduction

- 1.1. Herefordshire and Worcestershire Clinical Commissioning Group (CCG) recognises and values the role of volunteers and acknowledges that they can make a valuable contribution to the work of the CCG through their time, energy and skills. The contribution of volunteers is consistent with the principles of social inclusion and of community engagement. Equally, volunteering can also bring benefits to volunteers themselves by improving skills, confidence and wellbeing.
- 1.2. The purpose of this policy is:
  - To acknowledge the value of the contribution made by volunteers
  - To establish clear principles for the involvement of volunteers within the CCG
  - To clarify the role of volunteers and the relationship between volunteers and staff within the CCG
  - To confirm the commitment of the CCG in involving volunteers in its work
  - To establish a framework for recruitment and support of volunteers
- 1.3. The definition of volunteering used is: “as any activity that involves spending time, unpaid, doing something that aims to benefit the environment or someone (individuals or groups) other than, or in addition to, close relatives.” (NCVO, 2018)
- 1.4. The CCG is committed to involving patients, carers and members of the public in the planning, development and monitoring of our services. The CCG refers to this as ‘PPI volunteering’ because PPI stands for patient and public involvement.
- 1.5. The engagement team are responsible for the implementation of this policy and will ensure that volunteers are supported to undertake this role.

## 2. Principles

- 2.1. The CCG is committed to developing, encouraging and supporting volunteer involvement in our work wherever appropriate. In doing so, it is clearly recognised that the roles of volunteers will complement and not replace the roles of paid staff or cover formal health or social care roles.
- 2.2. The CCG believes that no volunteer should be ‘out-of-pocket’ as a result of voluntary activity carried out for the CCG and volunteers will be actively encouraged to have their expenses reimbursed. Expenses will be paid according to open and consistent criteria (**see Appendix 2**).
- 2.3. The tasks to be carried out by volunteers will be clearly defined so that both paid staff and volunteers are sure about their respective roles and responsibilities. The value of volunteers is in complementing the work of paid staff, not substituting for it.
- 2.4. Depending on the nature of the engagement activity, all volunteers will need to go through a vetting process and all satisfactory checks will need to be received before they can commence their volunteering role. The level of checks will be dependent

on the level of involvement and work with vulnerable groups and may include Disclosure and Barring Service (DBS) checks, signing a confidentiality agreement and/or supplying references.

- 2.5. Volunteers are expected to abide by the policies and procedures of the CCG, which are available to view on the CCG's website. Where necessary, volunteers may be required to sign a confidentiality agreement and declare any conflict of interest before undertaking a volunteer role.

### **3. Rights and Responsibilities of Volunteers**

- 3.1. The CCG recognise that volunteers should:

- Have a clear understanding of the role expected and receive relevant training in order to perform the tasks as required.
- Not to be used to undertake activity that is, or has been, undertaken by paid staff
- Have a clear understanding of who will be supervising them and who to contact if there are any problems or queries or if they wish to discuss any matters concerning their volunteering
- Carry out their activity in safe working conditions and in accordance with Health and Safety requirements
- Be insured under NHS arrangements
- Be reimbursed for expenses incurred whilst volunteering, as agreed in advance with their named contact and / or the engagement team
- Where appropriate, be given feedback on their performance as a volunteer
- Have the opportunity to give feedback to the CCG based on their experience of their voluntary activity
- Use the CCG as a referee
- Withdraw from volunteering at any time

- 3.2. The CCG expects that its volunteers will:

- Carry out specified tasks to the best of their ability, in ways which support the aims, values and standards of the CCG
- Do their best to volunteer at times as mutually agreed with the CCG and give reasonable notice if they are unable to achieve this
- Abide by the CCG Confidentiality Statement, if and when necessary
- Follow the CCG policies and procedures
- Wear appropriate forms of identification, if required
- Attend training where required to do so
- Ensure their own insurance company (car and personal) is advised of their volunteer role, where necessary

## 4. Equality, Diversity and Human Rights

- 4.1. The CCG is committed to equality of opportunity, diversity and human rights, this commitment also extends to our volunteers. We welcome everyone from our community as a volunteer and will not discriminate against our volunteers on the grounds of age, disability, race, nationality, ethnic or national origin, gender, religion, beliefs, sexual orientation, domestic circumstances, social and employment status, HIV status, gender reassignment, political affiliation or trade union membership. Furthermore, we value difference and recognise the value that the different cultures, skills, outlooks and experiences of our volunteers bring to the organisation.
- 4.2. Behaviour that contradicts the letter or spirit of our equality, diversity and human rights strategy will not be tolerated. Volunteers will be required to abide by the CCG's equality, diversity and human rights strategy. Volunteers will be required to leave the CCG if they refuse to do so, or if they breach the principles of the strategy.
- 4.3. Appendix 1 details the Equality Monitoring for this policy

## 5. Recruitment and Selection

- 5.1. Potential volunteers will be required to complete an online '**Involvement Network Registration Form**'. Where the online version is not accessible or suitable for the volunteer candidate, the form can be filled in verbally over the telephone or in person with a member of the engagement team.
- 5.2. All patients, carers and members of the public are welcome to join the Involvement Network. By registering, they will become a CCG volunteer and receive information and updates from the CCG, including opportunities to get involved.
- 5.3. There is an enhanced duty of care when involving volunteers under the age of 18 and such volunteers should be regarded as vulnerable and should not be left unattended. An individual risk assessment will enable a proper judgement to be made on whether placing a young person in a voluntary role would put them, the client group or staff at risk. There is no upper age limit for taking on volunteers, although an individual risk assessment should be considered if there is any vulnerability, for example poor health.
- 5.4. Volunteers are welcome to join the Involvement Network from 14 years old. The CCG will require signed parent/carer consent for anyone volunteering with them aged under 18 years old.
- 5.5. Where required, a Disclosure and Barring Service (DBS) form will be completed in accordance with current regulations, for which the volunteer will bear no cost. Offers of a placement are conditional on these requirements being met successfully and time must be allowed for these checks to be made before an individual can start volunteering.
- 5.6. Potentially volunteers may be invited to submit an expression of interest for specific roles on committees or projects. In this instance the volunteer may be

required to attend an interview, provide additional information, or undertake an application process with the engagement team and / or the project lead. This process should be informal and offer the chance to find out about the role and suitability of the volunteer for it. This process can be done over email, telephone or in person. An expression of interest does not automatically provide a volunteer with a volunteering role. The final decision will be made by the engagement team.

- 5.7. If a prospective volunteer is not suitable for volunteering with the CCG or in a particular service/project then they should be provided with feedback in a sensitive manner. A volunteer may be offered another role if it is felt to be more suitable.
- 5.8. Herefordshire and Worcestershire CCG have a positive approach to the recruitment of disabled persons and welcomes applications from people with disabilities. It is our policy to provide assistance to disabled persons to ensure that they are given the opportunity to obtain voluntary placements that make best use of their particular skills. If volunteers have a physical or mental health problem or disability which has lasted or is likely to last for at least a year, they are invited to declare this so that the CCG can make necessary arrangements to ensure they meet the volunteer's specific needs.

## 6. Induction and Training

- 6.1. All volunteers are encouraged to read the CCG websites as a general induction to the CCG
- 6.2. All volunteers are encouraged to participate in the CCG's volunteer induction online session, details are available on the CCG website
- 6.3. All volunteers are encouraged to read this policy, the volunteer expenses policy and procedure and the CCG's general policies (available on the CCG website)
- 6.4. All volunteers will have appropriate training to their level and area of involvement, this may be with the engagement team or with the service area within which they are volunteering
- 6.5. While the information given may vary according to the role, it could include:
  - a) Introduction to the activity and setting
  - b) General information about the client group
  - c) Introduction to relevant staff
  - d) Health and safety information, first aid, fire procedures (mandatory)
  - e) Relevant procedures, e.g. Health and Safety, Equality, Diversity and Human Rights, Code of Conduct, Smoke Free Policy.
  - f) Confidentiality/Information Governance
  - g) Arrangements for support and problem-solving
  - h) General information – where to make drinks etc.
  - i) Expenses procedures

## 7. Expenses

- 7.1. The underlying principles in regard to the payment of expenses are that volunteers:
  - Should not be financially disadvantaged through their voluntary involvement
  - Should always be offered and encouraged to accept reimbursement of their expenses
  - Are reimbursed according to open and consistent criteria, and will be aware of what expenses will be reimbursed
- 7.2. The expenses and costs of PPI volunteers will be met from the budget of the CCG. Details of the expenses that may be claimed by volunteers and how to claim expenses are detailed in Appendix 3 Expenses Policy and Procedure.

## 8. Support

- 8.1. In the event of any concerns regarding their role volunteers should speak to the engagement team.
- 8.2. In the event of any concerns regarding a volunteer the CCG staff member should speak to the Associate Director of Communications and Engagement.

## 9. Insurance

- 9.1. Any actions undertaken during the normal legitimate duties as a volunteer are covered by NHS Indemnity. This means that the CCG accept full financial liability for any negligent harm which has been caused as a result of such duties and will not seek to recover its cost arising therefore from volunteers. It should be noted that driving is the exception to this.
- 9.2. It is the volunteer's responsibility to ensure that his/her own insurance policy covers use of their own vehicle if this is being used as part of, or accessing his/her voluntary activity. Details of this are included in the Expenses Policy and Procedure (Appendix 2)
- 9.3. Volunteers are responsible at all times for ensuring their personal possessions are kept safely and securely and managers should provide facilities for this purpose. The CCG does not accept any liability for any personal items damaged or lost.

## 10. Health and Safety

- 10.1. The CCG are committed to the health and safety of our volunteers and will provide volunteers with any information, training or equipment they need to remain safe. Volunteers are expected to remember their duty of care towards the people, around them and not act in a way that might endanger those around them.

## 11. Problem Solving Procedures

- 11.1. Volunteers have a right to raise concerns or issues about any aspect of their volunteering. If volunteers wish to raise a concern or issue relating to Herefordshire and Worcestershire CCG or a member of staff, they should follow the Volunteer Problem Solving Procedure.
- 11.2. In the case of a concern or issue raised about a volunteer, this will be dealt with quickly and effectively in accordance with Herefordshire and Worcestershire CCG's Volunteer Problem Solving Procedure (Appendix 4)

## 12. Confidentiality

- 12.1. All appropriate volunteers must be aware of their own personal responsibilities with regards to data protection and confidentiality. Prior to commencing in some posts, volunteers must be made aware of the CCG confidentiality policy and agree and sign the CCG confidentiality Statement.- Appendix 3. This should only be undertaken if it is necessary for the volunteer role they will be undertaking.

## 13. Data Protection

- 13.1. Volunteers can be reassured that the CCG will only ask for information that it needs and that will keep the information securely, limit access to it and not pass their details on without consent unless legally obliged to do so.
- 13.2. Herefordshire and Worcestershire CCG fully abide by the General Data Protection Regulation (GDPR), which came into force on the 25 May 2018 and supersedes the Data Protection Act 1998.
- 13.3. The new law extends the rights of individuals and requires organisations holding personal data to comply with a new stricter set of rules. Further information can be found at [www.informationcommissioner.gov.uk](http://www.informationcommissioner.gov.uk)

## 14. Dissemination and Implementation of the Policy

- 14.1. The policy will be available on the CCG website.

## 15. Review Date

- 15.1. This policy will be reviewed regularly to incorporate any legislation and best practice changes.

## 16. Contact

- 16.1. The engagement team can be contacted by telephoning 01905 681978 or by emailing [hw.engage@nhs.net](mailto:hw.engage@nhs.net)
- 16.2. This document can be made available in large print, Braille, other languages or an audio copy please contact the engagement team.

## 17. Appendices

- Appendix 1 – Equality Monitoring
- Appendix 2 – Confidentiality Statement
- Appendix 3 - Expenses Policy and Procedures. Please see separate policy document. Available at:  
<https://herefordandworcestrshireccg.mlcsu.co.uk/index.php/policies>

## 18. Appendix 1: Equality Monitoring

<b>Title of Policy:</b>	Herefordshire and Worcestershire CCG policy for working with volunteers
<b>Short description of policy (example of aims and objectives):</b>	The purpose of this policy is: <ul style="list-style-type: none"> <li>• To acknowledge the value of the contribution made by volunteers</li> <li>• To establish clear principles for the involvement of volunteers within the CCG</li> <li>• To clarify the role of volunteers and the relationship between volunteers and staff within the CCG <ul style="list-style-type: none"> <li>• To confirm the commitment of the CCG in involving volunteers in its work</li> </ul> </li> <li>• To establish a framework for recruitment and support of volunteers</li> </ul>
<b>Directorate Lead:</b>	Associate Director of Communications and Engagement
<b>Is this a new or existing policy?</b>	New

<b>Equality Group</b>	Does this policy have a positive, neutral or negative impact on any of the equality groups? Please state which for each group.
<b>Age</b>	Neutral
<b>Disability</b>	Neutral
<b>Gender Reassignment</b>	Neutral
<b>Marriage And Civil Partnership</b>	Neutral
<b>Pregnancy and Maternity</b>	Neutral
<b>Race</b>	Neutral
<b>Religion and Belief</b>	Neutral
<b>Sex</b>	Neutral
<b>Sexual Orientation</b>	Neutral
<b>Carers</b>	Neutral

<b>Screening Completed By</b>	<b>Job Title</b>	<b>Organisation</b>	<b>Date</b>
Ruth Cooper-Jones	Engagement Manager	Herefordshire and Worcestershire CCG	10/03/2020
<b>Director's Name</b>	<b>Directors Signature</b>	<b>Organisation</b>	<b>Date</b>
Tom Grove	Associate Director of Communications and Engagement	Herefordshire and Worcestershire CCG	12/03/2020

## **19. Appendix 2: Confidentiality Agreement**

Please see overleaf.



**Herefordshire and  
Worcestershire**  
Clinical Commissioning Group

# **NHS Herefordshire and Worcestershire CCG**

**Volunteer - Conflicts of Interest and  
Declaration of Confidentiality**

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# 1. Definition of Conflicts of Interest

1.1 For the purposes of this document a conflict of interest is defined as “a set of circumstances by which a reasonable person would consider that an individual’s ability to apply judgement or act, in the context of delivering, commissioning, or assuring taxpayer funded health and care services is, or could be, impaired or influenced by another interest they hold”

1.2 A conflict of interest may be:

Actual	Potential
There is a material conflict between one or more interests.	There is the possibility of a material conflict between one or more interests in the future.

1.4 Staff or volunteers may hold interests for which they cannot see potential conflict. However, caution is always advisable because others may see it differently. It will be important to exercise judgement and to declare such interests where there is otherwise a risk of imputation of improper conduct. The perception of an interest can be as damaging as an actual conflict of interest.

1.5 Conflicts of interest can arise in many situations, environments and forms of commissioning, with an increased risk in primary care commissioning, out-of-hours commissioning and involvement with integrated care organisations and new care models, as CCG staff or volunteers may here find themselves in a position of being both commissioner / or supporting commissioning in a volunteer capacity and provider of services. Conflicts of interest can arise throughout the whole commissioning cycle from needs assessment, to procurement exercises, to contract monitoring. Where reference is made to ‘new care models’, it is referring to Multi-speciality Community Providers (MCP), Primary and Acute Care Systems (PACS) or other arrangements of a similar scale or scope.

Interests fall into the four categories outlined below. A benefit may arise from the making of a gain or the avoidance of a loss:

- i. **Financial interests:** This is where an individual may get direct financial benefits from the consequences of a commissioning decision. This could, for example, include being:
  - A director, including a non-executive director, or senior employee in a private company or public limited company or other organisation which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations. This includes involvement with a potential provider of a new care model;
  - A shareholder (or similar ownership interests), a partner or owner of a private or not-for-profit company, business, partnership or consultancy which is doing, or which is likely, or possibly seeking to do, business with health or social care organisations;
  - A management consultant for a provider; or
  - A provider of clinical private practice.
  - In employment outside of the CCG.
  - In receipt of secondary income;
  - In receipt of a grant from a provider;
  - In receipt of any payments (for example honoraria, one-off payments, day

- allowances or travel or subsistence) from a provider;
- In receipt of research funding, including grants that may be received by the individual or any organisation in which they have an interest or role; and
- Having a pension that is funded by a provider (where the value of this might be affected by the success or failure of the provider).

This could also include an individual being:

- ii. **Non-financial professional interests:** This is where an individual may obtain a non-financial professional benefit from the consequences of a commissioning decision, such as increasing their professional reputation or status or promoting their professional career. This may, for example, include situations where the individual is: An advocate for a particular group of patients;
- A GP with special interests e.g., in dermatology, acupuncture etc.;
  - An active member of a particular specialist professional body (although routine GP membership of the Royal College of General Practitioners (RCGP), British Medical Association (BMA) or a medical defence organisation would not usually by itself amount to an interest which needed to be declared);
  - An advisor for the Care Quality Commission (CQC) or the National Institute for Health and Care Excellence (NICE);
  - 1.6 • Engaged in a research role;
  - The development and holding of patents and other intellectual property rights which allow staff to protect something that they create, preventing unauthorised use of products or the copying of protected ideas; or
  - 1.7 • GPs and practice managers, who are members of the governing body or committees of the CCG, should declare details of their roles and responsibilities held within their GP practices.
- iii. **Non-financial personal interests:** This is where an individual may benefit personally in ways which are not directly linked to their professional career and do not give rise to a direct financial benefit. This could include, for example, where the individual is:
- 1.8 • A voluntary sector champion for a provider;
  - 1.9 • A volunteer for a provider;
  - A member of a voluntary sector board or has any other position of authority in or connection with a voluntary sector organisation;
  - Suffering from a particular condition requiring individually funded treatment;
  - A member of a lobby or pressure group with an interest in health and care.
- iv. **Indirect interests:** This is where an individual has a close association with an individual who has a financial interest, a non-financial professional interest or a non-financial personal interest in a commissioning decision (as those categories are described above) for example, a:
- Spouse / partner;
  - Close family member or relative e.g., parent, grandparent, child, grandchild or sibling;
  - Close friend or associate; or
  - Business partner.

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A declaration of interest for a “business partner” in a GP partnership should include all

relevant collective interests of the partnership, and all interests of their fellow GP partners (which could be done by cross referring to the separate declarations made by those GP partners, rather than by repeating the same information verbatim). Whether an interest held by another person gives rise to a conflict of interest will depend upon the nature of the relationship between that person and the individual, and the role of the individual within the CCG.

The above categories and examples are not exhaustive and a common sense approach should be adopted. The CCG will exercise discretion on a case by case basis, including in relation to new care model arrangements and deciding whether any other role, relationship or interest may impair or otherwise influence the individual's judgement or actions in their role in this procurement exercise. If so, this should be declared and appropriately managed.

## Declaration of Conflict of Interest

Please complete the table below:

Your Name	Substantive Role	Role on Engagement Exercise

- 1.9.1 Please list below organisations that you are employed directly and/or are part of as stated above, if any. Confirming whether there are any 'actual' or 'potential' conflicts of interest that may arise from your participation and involvement in this exercise.

Organisation (incl. address)	Role	Actual or potential COI (Yes / No)

- 1.9.2 If there are actual or potential conflicts, please provide full details including:
- A brief description of the nature of any connections creating actual or potential conflicts of interest
  - The full name of any organisation, people or bodies whose involvement gives rise to the actual or potential conflicts of interest
  - Mark with an \* any organisation people or bodies that are, or relate to, any NHS Body

### Details

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- 1.9.3 Whilst working on the project, while being involved in the role of volunteer for healthcare services, please demonstrate how you propose to deal with the actual or potential conflicts so that they do not prejudice a fair and competitive procurement process or the position of the CCG and how you would ensure this conflict of interest was avoided.

### Details

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## 2. Confidentiality Declaration

2.1 The CCG is required to ensure that any engagement exercise is undertaken in such a way that ensures:

- **Transparency** – Engagement activities should be fair and open.
- **Objectivity** – Any key decisions must be based on documented objective data and criteria as part of the agreed process.
- **Non-discrimination** – The process must not discriminate among participants or providers.

2.2 In view of the following definitions:

“Engagement Process / Activity” encompasses any formal and informal meetings, associated discussions, meeting preparation and follow up or any other related activity.

“Information” means all information, facts, data and other matters of which I acquire knowledge, either directly or indirectly, as a result of my activities as a **INSERT** service Project Board member/associated advisor/volunteer.

“Documents” means all draft, preparatory information, documents and any other material, together with any information contained therein, to which I have access, either directly or indirectly, as a result of my participation in the **INSERT** service engagement process. Furthermore, any records or notes made by me relating to information or documents shall be treated as Confidential Documents.

I understand that I have been invited to participate either directly or indirectly in the **INSERT** service engagement process and hereby undertake:

To treat all information and documents under conditions of strict confidentiality.  
Not to disclose, make any copies of, or discuss any received information with any person who is not directly involved in the engagement process / activity.

Not to use (or authorise any other person to use) information and documents other than for the purpose of my work in connection with **INSERT** service activities.

To dispose of documents as confidential material as soon as I have no further use of them.

2.3 This undertaking applies until the time when the engagement activity is complete and a contract signed with the chosen supplier (if required). This undertaking shall not apply to any document or information that becomes public knowledge otherwise than as a result of a breach of any of the above undertakings.

Signed	
Name	
Role	
Organisation	
Date	

## 2. Summary Assessment

This person's involvement in the project should cease/can continue [delete as appropriate].

Signed	
Name	
Role	
Organisation	
Date	

## 20. Appendix 3 Expenses Policy and Procedures

Please see separate document. Available online at:

<https://herefordandworcestrshireccg.mlcsu.co.uk/index.php/policies>

## 21. Appendix 4: Volunteer Problem Solving Procedure

### 1. Background

1.1. Volunteers make a unique and valuable contribution to the NHS and work undertaken by Herefordshire and Worcestershire CCG. It is recognised that volunteers are not only an essential resource in helping us to achieve the CCG organisations goals, but that by providing opportunities for, and supporting volunteering, it helps to promote active citizenship and social inclusion.

1.2. Whilst the involvement of volunteers is generally a positive experience for everyone involved, there are times when problems arise. A volunteer may wish to raise an issue or concern about something or someone, and similarly the volunteer may not be meeting the requirements of them or their role, or someone may wish to raise an issue or concern about a volunteer.

1.3. These are rare occurrences, but in an effort to ensure a fair, equitable, and consistent approach to dealing with them, it is essential to have a formal procedure. This document sets out the procedure.

1.4. When reading this procedure, it is important to note that volunteers have no legal employment rights and therefore are not subject to, or protected by, the usual employee policies and procedures.

### 2. Points to remember

2.1. All issues/concerns must be treated confidentially and should only be discussed amongst those who are directly involved in trying to resolve the issue.

2.2. An effort should be made to resolve the problem informally at a local level.

2.3. A written record of all incidents and issues/concerns should be maintained.

2.4. Allow enough time for all meetings and conduct them in a private place.

2.4. Keep all parties informed at every step of the procedure.

2.5. Volunteers have the right to be accompanied by a colleague or friend in any meetings that form part of the problem-solving process.

### 3. If a Volunteer wishes to raise an issue or concern

3.1. This part of the problem-solving procedure sets out the process for a volunteer to raise an issue or concern.

3.2. Volunteers may raise an issue or concern verbally, or in writing. If the issue is raised in writing, it should be acknowledged within 3 working days of receipt.

3.3. In the first instance, volunteers should discuss the issue with, or address the issue to, the CCG's senior engagement manager (unless the issue relates to that individual), and a local resolution sought if possible. If the complaint is about the senior engagement manager, then the matter should be referred to the relevant line manager.

3.4. The issue or concern will be dealt with quickly and confidentially, and the volunteer should receive a response promptly. The response should set out any actions taken and allow for the volunteer to comment on whether they feel the response (and any action) is appropriate and proportional.

3.5. If the issue cannot be resolved at this stage then the issue should be escalated to the CCG's Associate Director of Communications and Engagement or an appropriate senior manager, ideally in writing.

3.6. An investigation into the issue/concern will be then be undertaken, this will generally include a review of any written records and/or procedures, as well as interviews with the volunteer, the person(s) who the issue/concern is about and any witnesses (or statements from these people). At the conclusion, the results and subsequent actions will be discussed with the volunteer within 20 working days of the originally raising of the issue (if the investigation requires more time, the volunteer will be informed). During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish.

3.7. The actions or decision taken should be confirmed in writing to the volunteer.

3.8. If the volunteer is not satisfied with the outcome, then they can appeal in writing to a senior manager within the organisation within 20 working days of the decision meeting.

3.9. An investigation will be undertaken, the results and subsequent actions will be discussed with the volunteer within 10 working days of the appeal letter. During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish. The senior manager will confirm their decision in writing. Their decision is final.

## 4. If someone raises an issue relating to the volunteer

4.1. This part of the problem-solving procedure sets out what the volunteer can expect in relation to an issue or concern raised about them or their conduct.

4.2. Sometimes minor issues can arise during the course of volunteering, such as a volunteer not fitting into the team as well as was expected, not meeting the required standards when undertaking tasks, or being unreliable.

4.3. However, if a more serious issue occurs then immediate action may be necessary, and a volunteer may be asked to leave their placement pending an investigation.

4.4. Minor issues are usually detected during regular reviews and may be quite easy to resolve either by an engagement manager, without resorting to formal procedures.

4.5. This checklist suggests how some issues can be dealt with:

- Assessment of the volunteer's training needs and addressing them
- Providing the volunteer with support and supervision.
- Undertaking an initial check with a volunteer to deem suitability for the role/ task

However, if these do not address the issues then the following procedure should be instigated.

## 5. Verbal discussion – usually undertaken by the engagement manager:

5.1. The first step is to discuss the issue with the volunteer. There could be external factors influencing their ability to carry out tasks, their behaviour or their attitude.

5.2. Identify goals that will help the volunteer to fulfil their role, and offer extra support, supervision and training where necessary.

5.3. Document your discussion and the agreed actions. Set and agree a time for a review meeting.

5.4. Notes of the discussion, agreed actions and the date of the review meeting should be sent to the volunteer within 10 working days of the meeting.

5.5. If at the review meeting the issue remains then a more formal approach may be followed, and a written warning sent

## 6. Written warning

6.1. If the issue hasn't been resolved by the verbal discussion or the review, then an appropriate manager or senior manager will meet with the volunteer, in conjunction with the engagement manager where appropriate, to discuss the situation and to issue a written warning which clearly sets out the expectations of the volunteer (and of the CCG ) and sets a date for a review meeting.

6.2. An investigation into the issue/concern may then be undertaken, which would generally include a review of any written records and/or procedures, as well as interviews with the volunteer, the person(s) who has issued the written warning and any witnesses (or statements from these people).

6.3. At the conclusion, the results and subsequent actions will be discussed. During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish. The actions or decision taken should be confirmed in writing to the volunteer.

6.4. Depending on the nature of the issue raised:

- Further objectives could be set, and help offered to the volunteer.
- The volunteer may be moved to another placement.
- The volunteer may be dismissed.

6.5. A decision to dismiss a volunteer should be a last resort.

6.6. Whatever the decision, the volunteer has the right to appeal.

## 7. Stage 3 - Right to appeal

7.1. If the volunteer is not satisfied with the outcome, then they can appeal in writing to a Senior Manager\* within 20 working days of the decision meeting. (\*This could be the Associate Director of Communications and Engagement or another senior manager within Worcestershire CCG)

7.2. An investigation into the complaint should be undertaken, the results and subsequent actions should be discussed with the volunteer within 10 working days of the appeal letter. During this meeting the volunteer can be accompanied by a colleague or friend, not acting in a legal capacity, if they wish.

7.3. The senior manager will confirm their decision in writing. Their decision is final.

## 8. Conducting a dismissal meeting

- 8.1. If a decision is made to dismiss a volunteer, the following good practice guidelines should be adhered to:
- 8.2. The meeting should take place in a private setting.
- 8.3. Be quick and direct. The decision has been made, so ensure the volunteer is informed in a timely manner.
- 8.4. Inform the volunteer of their right to appeal.
- 8.5. A letter should be sent to the volunteer to re-iterate the decision to dismiss, as well as outlining the reasons why, and their right to appeal. A copy of the Problem-Solving Procedure should be included with the letter. Include any information relating to their departure e.g. return of CCG ID badge.

## 9.1 Exceptions

- 9.1. There are some occasions in which volunteers can be suspended immediately while an investigation is carried out. These include, but are not limited to, acts that constitute gross misconduct, e.g. theft, assault, act of violence, malicious damage, and deliberate falsification of documents, harassment or being under the influence of drugs or alcohol.
- 9.2. Illegal or criminal acts will be reported to the police and may result in prosecution.
- 9.3. The engagement team must be informed immediately.
- 9.4. The decision to suspend a volunteer must be confirmed in writing to the volunteer.
- 9.5. All issues/concerns relating to a volunteer should be recorded on the volunteer's profile on the CCG's Herefordshire and Worcestershire Involvement Network (HWIN) HWIN volunteering database.