

Imperial Health Charity and Imperial College Healthcare NHS Trust

Volunteering Policy



Added below

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CONTENTS

Introduction 2

Who Is This Policy for? 3

What Is a Volunteer?..... 4

Team Structure..... 6

Our Volunteer Agreement..... 7

The Volunteer Journey..... 9

Key Processes and Policies..... 16

 1. Health and Safety: Introduction..... 16

 2. Health and Safety: Infection Control 16

 3. Health and Safety: Fire 19

 4. Health and Safety: Manual Handling 20

 5. Equal Opportunities and Diversity 20

 6. Insurance..... 21

 7. Boundaries..... 21

 8. Safeguarding..... 23

 9. Lone Working 25

 10. Incident Reporting and Whistleblowing 26

 11. Problem Solving..... 27

 12. Compliments, Complaints and Suggestions..... 31

 13. Managing and Protecting Data..... 32

 14. Communications and Social Media..... 37

 15. Expenses..... 38

 16. Gifts..... 39

 17. Providing References for Volunteers..... 40

Volunteering with Imperial Health Charity 41

Appendix 1: Imperial College Healthcare Nhs Trust Policies Relevant to
Volunteering or Which Reference Volunteers 50

Appendix 2: Refugees and Asylum Seekers Volunteering Process..... 51

INTRODUCTION

At Imperial Health Charity, volunteers are a valued part of our NHS family and play an essential role in helping us provide extra support to patients and staff at our hospitals.

We believe that hospital volunteers can make a positive impact by supporting and enhancing the work of paid healthcare professionals – not by replacing essential jobs or covering gaps in the service.

We want our volunteers to feel valued, supported and appreciated, and to understand and respect our four key values – Kind, Collaborative, Aspirational and Expert. We also want NHS staff who work alongside our volunteers to feel confident and well-informed so they can support volunteers effectively.

This policy sets out our commitment to providing a high-quality volunteering programme that follows best practice standards. It also explains how we will deliver the programme to make a significant positive impact for patients and staff at our hospitals, as well as ensuring that everyone who gives their time to support our work has an excellent experience while volunteering with us.

WHO IS THIS POLICY FOR?

Our Volunteering Policy is for:

1 Volunteers

Anyone who volunteers with us or who may be interested in becoming a volunteer.

2 Staff at Imperial College Healthcare NHS Trust

Any member of NHS staff who works alongside volunteers or may be considering creating a new volunteer role for their service.

3 Staff at Imperial Health Charity

Any member of staff at Imperial Health Charity who manages, supports or works alongside volunteers.

4 Representatives from Other Organisations

Any representatives from other partner organisations who may work alongside volunteers at our hospitals or any of the Trust's services.

WHAT IS A VOLUNTEER?

We define a volunteer as someone who has a volunteer role with clear tasks and responsibilities, and which is:

- unpaid
- beneficial to patients, visitors and/or NHS staff at our hospitals
- beneficial to the charitable objectives of Imperial Health Charity
- beneficial to the values and aims of Imperial College Healthcare NHS Trust
- more substantial than providing feedback or service user input
- adding value and benefit to the experience of patients, NHS staff and visitors.

For the purposes of this policy, our definition of volunteering does not include the following activities:

- attending consultation or patient and public involvement events
- completing mandated 'voluntary service' as part of academic studies
- attending work experience or professional shadowing
- attending patient support groups
- trustees and volunteers of other charities operating within the hospitals, unless they are also a properly appointed volunteer carrying out a volunteer role with a weekly commitment
- staging fundraising or awareness stands in public areas of the hospitals, including supporting other charities with fundraising events either in our hospitals or in the community
- taking part in medical or drugs trials.

1 Other Definitions

'We' / 'Us' – refers to Imperial Health Charity.

'The Trust' – refers to Imperial College Healthcare NHS Trust.

'Volunteer Supervisor' – refers to a named member of NHS staff providing day-to-day support to volunteers.

'Hospital volunteering team' – refers to members of staff at Imperial Health Charity who manage and support volunteers at our hospitals.

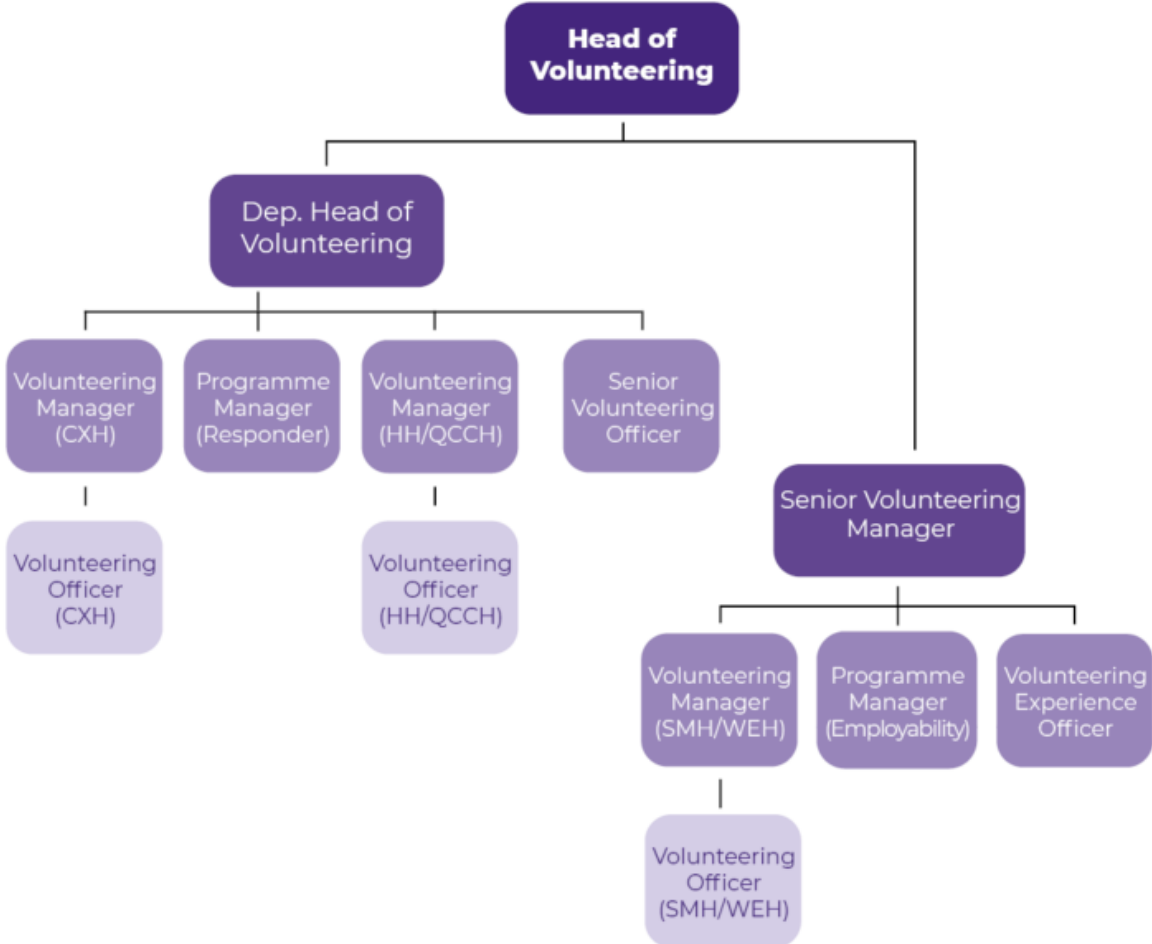
'Volunteering Manager' – refers to a specific member of staff at Imperial Health Charity who manages and supports volunteers at our hospitals.

This policy applies to all volunteers in all roles unless otherwise stated. Different arrangements may apply to some volunteers in certain roles. For example, volunteers who provide support at our fundraising events or who volunteer in roles

based outside the hospitals. Exceptions may also apply in situations where we work in partnership with other organisations and charities. Where different processes and procedures apply, this will be stated clearly in the policy.

This policy has been produced by Imperial Health Charity, following consultation with volunteers and staff at Imperial College Healthcare NHS Trust. The policy has been approved by our Board of Trustees and will be reviewed annually. This is a joint policy between Imperial Health Charity and Imperial College Healthcare NHS Trust.

TEAM STRUCTURE



OUR VOLUNTEER AGREEMENT

What volunteers can expect from us:

- A named member of staff as a main point of contact who will support you, manage your tasks and answer questions
- Regular contact and support from our hospital volunteering team based at your main hospital site
- A volunteer uniform
- A core training session to prepare you for your volunteer role and ongoing guidance and support
- Refresher training courses, additional learning opportunities and insurance cover
- Opportunities to feed back about your experiences volunteering with us
- To be treated equally and without discrimination
- For any issues, problems or concerns you face whilst volunteering to be addressed and resolved fairly
- Acknowledgement and recognition for your contribution as a volunteer
- Reimbursement of out-of-pocket expenses, in accordance with our volunteer expenses policy
- Opportunities to socialise and meet other volunteers and staff.

What we expect from volunteers:

- Follow our Code of Behaviour, as set out in the Green Card, at all times
- Carry out your volunteer role to the best of your ability
- Complete a core training session and any other training including regular updates as requested
- Complete any necessary vetting checks (including DBS disclosure where required) and inform us if your circumstances changes in a way that might affect your DBS disclosure
- Contribute to and share in the success of the team you volunteer with as well as the wider team of Imperial Health Charity volunteers
- Provide excellent customer service and strive to ensure that every patient or visitor has the best possible experience during their time in hospital
- Recognise the importance of our patients, donors, and NHS staff in supporting the work of the charity
- Wear your volunteer uniform and ID whilst volunteering and ensure you are presentable, following any specific dress code that may be required for your volunteer role

- Sign in and out each time you volunteer and keep us informed if you are unable to attend a volunteer shift
- Follow our health and safety procedures by:
 - being aware of your own and others' health and safety, reporting any incidents including safeguarding observations and concerns
 - respecting others and treating everyone equally, including patients, staff, visitors, supporters and other volunteers
 - keeping information, about our activities, patients and staff members confidential
- Meet time commitments and standards agreed, and where possible give reasonable notice when unavailable, so other arrangements can be made

THE VOLUNTEER JOURNEY

1 Recruitment

- 1.1 Creating opportunities for people to volunteer is a collaborative process. We will work together with NHS staff to identify ways in which volunteers can provide effective and impactful support, advising whether certain roles or tasks are suitable for volunteers. To ensure that it meets our core principle that volunteers should only be engaged to add value to the work of paid staff, not replace or substitute paid staff jobs or tasks. We will work in partnership with NHS staff to ensure volunteer roles make a meaningful contribution to the Trust and we will provide volunteers with enjoyment, opportunity to learn or use skills, meet new people or feel they are meaningfully contributing, or all the above. NHS staff wishing to explore involving volunteers are encouraged to seek advice from the Volunteering Department. We work to an annual plan in line with our strategic priorities for the year and will agree volunteer roles and NHS teams to work with in advance. See [21. Volunteer Roles](#). In some circumstances we will also work with non-clinical teams at the Trust or partner organisations to create volunteer roles for groups of staff. These may be closed roles that will not be advertised. Any necessary vetting and training must be completed before these volunteers can enter clinical areas without a member of our staff.
- 1.2 We welcome volunteer applications from all areas of the community. People volunteer for a range of different reasons, bringing their experience, skills and motivation to the role. All prospective volunteers must complete an online volunteer application form, on our website. All individuals applying to volunteer must have a unique personal email address for the purposes of applying and becoming a volunteer with us. For those who have limited access to the internet or specific digital/literacy needs, reasonable adjustments will be made, including support from staff to complete an application form. The recruitment of volunteers is driven by organisational needs. We therefore encourage prospective volunteers to apply for roles that we advertise on our website. These will be clearly defined opportunities and activities that add value to the work of both Imperial Health Charity and Imperial College Healthcare NHS Trust. We will work collaboratively with NHS staff at our hospitals to ensure that our volunteer roles focus on improving patient experience. We will not accept applications after the advertised deadline.
- 1.3 We will advertise and promote our volunteer roles in several ways to help us attract a wide range of applicants from across our community. Applications are particularly welcome from those that live in and around the areas of our hospitals, including current and former

patients, carers and family members. We may use any of the following methods to promote our volunteer roles:

- Online, through websites such as Do It and Team London.
- In our hospitals, on noticeboards, and within wards and public areas.
- Within the local community, for example GP surgeries, pharmacies, libraries and community noticeboards in shops.
- At volunteer centres, universities and colleges.

1.4 For any roles which require specific skills or experience, any special requirements will be explained clearly within the role description. Unless otherwise indicated on the role description or through bespoke programmes such as the Youth Volunteering Programme (designed for 16–21-year-olds), roles are only open to applicants aged 18 and over.

1.5 We will take all reasonable steps to ensure volunteering opportunities are accessible to everyone. Adaptations to volunteer roles will be considered on a case-by-case basis and while there is no upper age limit for volunteers' consideration will be given to an applicant's physical and mental ability to carry out the role.

1.6 Where a volunteer role is being advertised for a limited period with a specific deadline, we will endeavour to advertise for a minimum of three weeks.

2 Selection and Vetting Process

2.1 We will carry out a selection process for each volunteer role to ensure volunteers match the skills and experience required to perform key tasks as outlined in the role description. Any relevant vetting procedures must be completed at this stage. This may include a standard or enhanced Disclosure and Barring Service check (DBS) and receipt of satisfactory references. The requirements will vary depending on the nature of the role. When volunteer roles are created, we will refer to the latest guidance from NHS Employers, and uCheck, a Registered Umbrella Body for DBS checks to determine a role's eligibility to have a DBS check and to which level.

2.2 All applications we receive will be shortlisted against the advertised criteria for the role, based on the skills/experience section outlined in the role description. Applicants are encouraged to complete the application form with as much detail as they can provide to give us a full picture of their experience and motivations to volunteer. Applicants who do not demonstrate the standards required may be encouraged to re-submit their application. Unsuccessful applicants will be informed as soon as possible after the closing date. Due to the volume of applications and general enquiries that we receive, we may not be able to provide feedback to applicants. Applications from current or

previous volunteers or previously unsuccessful applicants will be considered, except for any individuals who we have had to end a volunteer relationship with us or where previous criminal behaviour deems them unsuitable for the role.

- 2.3** We welcome applications from across our community and will not discriminate on the basis of any of the nine protected characteristics detailed in the Equality Act, including (but not limited to) age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation. We will ensure our recruitment and selection procedures are consistent, that they provide equality of opportunity and are seen to be fair to all. Selection decisions are based on an individual's ability to carry out the requirements of the role for which they have applied. Equal opportunities data is captured for monitoring purposes as an optional element of the application form and is not made available to staff involved in our selection process.
- 2.4** Unless indicated otherwise, anyone applying for a volunteer role will be required to attend a selection activity. Selection activities will consist of a face to face interview and/or a selection event involving group activities and an interview. Group activities are designed to give applicants the opportunity to demonstrate teamwork and communication skills, as well as any specific skills required for the role. Where applicants are unable to attend in person, we will try to arrange an interview over the phone or via video call. Where possible we will invite our staff and NHS colleagues to be involved in the selection activities and advise as to suitability of individuals to carry out the role. Where an individual is deemed to be unsuitable, we will endeavour to give feedback, if requested, or signpost to other volunteering opportunities both with us and other similar organisations.
- 2.5** After applicants have attended a selection activity, we will carry out the vetting process to the required level for the role. All applicants will be asked to provide two satisfactory character references. Referees should be known to the applicant in a leadership capacity, either as a current or previous employer, volunteer manager, community leader, teacher/tutor, client or healthcare professional. At least one referee must have known the applicant for at least six months. Where an applicant, owing to personal circumstances, is not able to provide two referees known in a leadership capacity, someone of local standing within the applicant's community, such as a long-term friend, may be used. However, family members (including partners) will not be accepted as valid referees. Where a volunteer role includes interacting with patients and carrying out regulated activity, we will also apply for a DBS check at either standard or enhanced level. Where a role requires a DBS disclosure, a repeat application must be completed every three years. A new DBS disclosure check will be submitted if a volunteer has not volunteered with us in the past 6 months as well as each time a

check is required (usually every 3 years), even if an applicant or volunteer has subscribed to the DBS update service.

- 2.6** Successful applicants must complete all elements of the vetting process satisfactorily before they can complete their Volunteer Core Training, either by attending a face-to-face session, by completing our e-learning modules or in the case of event volunteers, receive a welcome pack ahead of events they are supporting. Once applicants have completed their Core Training, they will be able to start their volunteer role. Where either a reference or a DBS disclosure reveals information that may be relevant to the applicant's ability to carry out the role, decisions as to their suitability will be taken on a case-by-case basis via a vetting assessment. Where an existing volunteer wishes to apply for additional roles or change a role, they will need to complete any required vetting procedures for the new role as outlined in section [25. Changing Roles](#). This may include requesting references where we have no previous references on record.
- 2.7** Employees of Imperial College Healthcare NHS Trust or Imperial Health Charity who wish to volunteer with us may apply for any of our advertised roles. However, as an alternative to requesting two references, employees will be asked to provide the details of their direct line manager. Employees should seek the approval of their line manager before applying for a volunteer role. Where applicable, employees will also need to complete a DBS check. Employees applying to volunteer are welcome to attend a Volunteer Core Training session and/or complete our e-learning modules. Alternatively, they may submit evidence of their Core Skills Training and complete a briefing with us before starting in their role.

3 Induction and Training

- 3.1** All new volunteers must complete an induction journey to ensure they receive training and initial guidance necessary for their role. The induction journey also helps us check that volunteers are placed in a suitable role.
- 3.2** For standard hospital-based roles, the induction journey consists of:
- a** Volunteer Core Training
 - b** Role-specific training (as required, some of which may be 'on the job')
 - c** Induction checklist during first volunteer shift
 - d** Three-month review meeting

Elements of the induction journey may be different for volunteers carrying out certain roles, such as the Events Volunteer role, the summer element of our Youth Volunteering Programme or where NHS

staff members take on a volunteer role alongside their paid employment. These variations are described below.

- 3.3** With the exception of event volunteers, all volunteers are required to complete our Core Training session, either via our e-learning platform or at a face-to-face session. This training covers all essential information that volunteers should be aware of before they start in their role. Volunteers are not permitted to start volunteering until they have completed their Core Training. Core Training covers all the safety topics required for volunteers as agreed between Imperial Health Charity and Imperial College Healthcare NHS Trust. Core Training is also designed to welcome new volunteers, ensure they are aware of the support available to them, and communicate our expectations of volunteers. It also provides volunteers with an opportunity to review our Volunteer Agreement and volunteers are asked to acknowledge that they have read and are willing to commit to its expectations.
- 3.4** In addition to Volunteer Core Training, volunteers may be required to complete role-specific training, which covers important information regarding the specific environment and activities relevant to their role. This may be an add-on to a Core Training session, a separate one-off training session or as part of site orientation on a volunteer's first shift. Additional training may be offered after this session if deemed appropriate and valuable.
- 3.5** The first three months is a key part of the induction process. We provide volunteers with an induction checklist. Volunteers will be required able to work through this checklist during their first three months with support from their Volunteer Supervisor and the appropriate hospital volunteering team.
- 3.6** At the end of a volunteer's first three months, the appropriate hospital volunteering team will organise a review meeting with the volunteer to discuss how they are getting on in the role, review the induction checklist, recognise and thank them for their contribution, and relay any comments or feedback from their Volunteer Supervisor. Where concerns are raised, either by the volunteer or their Volunteer Supervisor, these can be discussed, and appropriate actions agreed to reach a resolution. For more information regarding serious issues please see section [14. Problem Solving](#).
- 3.7** Event volunteers, new to volunteering with us, will be required to complete a condensed version of Core Training. If an existing volunteer wishes to give time to an event, they will not need to complete core training provided their core training is still in-date. All events volunteers, whether new or not, will be provided with a Welcome Pack prior to the event. The welcome pack contains all the relevant information to ensure they can volunteer safely and support our events and activities effectively

- 3.8 Employees of Imperial College Healthcare NHS Trust and Imperial Health Charity who choose to volunteer alongside their paid role must:
- complete Volunteer Core Training, either face-to-face or via our eLearning platform or;
 - provide evidence, by way of valid certificates, that they have completed the relevant Core Skills e-learning courses, and attend a two-hour briefing with the relevant Hospital Volunteering Team
- 3.9 Participants in our Summer Youth Volunteering Programme are not usually required to complete a minimum of six months. Most will complete a minimum requirement of 30 hours within two months. In this instance, volunteers may not be offered the three-month review meeting as their induction journey will be completed in a shorter period. Volunteers on this programme will still complete all other elements of the standard induction journey.

4 Support

Support for Volunteers

- 4.1 The first port of call for volunteers will be a named member of NHS staff identified as the Volunteer Supervisor. The Supervisor for each role will be made clear through the appointment and induction process. The Volunteer Supervisor is responsible for providing role-specific training and compiling any rotas for volunteers. They can also answer any queries the volunteer may have in relation to the department or role. During the induction journey, the Volunteer Supervisor should also introduce other members of the team that can be called upon for day-to-day enquiries. Any issues or incidents that arise while volunteering should be escalated to the Volunteer Supervisor in the first instance.
- 4.2 Each hospital site has a dedicated hospital volunteering team. Their role is to oversee and develop volunteering activities at their specified hospital site. This includes the recording of volunteers' hours, monitoring non-attendance, listening to and acting on volunteer feedback (where possible), recognising and rewarding volunteers, and working with NHS staff to create roles and recruit volunteers. The names and contact details of the hospital volunteering team at each hospital site are available on our website.
- 4.3 The hospital volunteering team can assist volunteers with any problems they may have, including any issues the volunteer feels they are unable to discuss with their Volunteer Supervisor. The hospital volunteering team may also assist in situations where the Volunteer Supervisor has left their role, or where the volunteer has witnessed events which may have caused distress. Volunteers may also use the Trust's confidential counselling, stress management and mediation service, CONTACT:

- To book at Charing Cross or Hammersmith hospitals, call 020 3313 2747
 - To book at St Mary's Hospital, call 020 3312 1519.
- 4.4 The hospital volunteering team may also give advice to volunteers who wish to take a break from volunteering or change their role, as outlined in section [25. *Changing Roles*](#) and [26. *Taking a Break*](#)

Support for Staff

- 4.5 We will work in partnership with NHS staff to create volunteer roles, and recruit, train and support volunteers within their team. Resources and online training are available to help NHS staff identify appropriate tasks and roles with which volunteers could provide support. Our core principle when creating volunteer roles is that volunteers must only be engaged to add value to the work of paid NHS staff and should never be used as a means to reduce costs, replace paid jobs, or cover gaps in staffing.
- 4.6 Volunteer Supervisors will be required to complete a 'Working with Volunteers' e-learning module as standard before involving volunteers in their team. The training promotes best practice in the support and management of volunteers, and it is strongly recommended that any member of staff in regular contact with volunteers completes the training. As an extension of the training, the hospital volunteering team at each hospital site may hold 'Working with Volunteers' briefing sessions for NHS staff to include promoting/sign-posting staff to the e-learning module.
- 4.7 Volunteer Supervisors may seek advice and support from the hospital volunteering team when wishing to start problem-solving procedures with a volunteer or if faced with a challenging situation. Please see section [14. *Problem Solving*](#)

KEY PROCESSES AND POLICIES

1. Health and Safety: Introduction

- 1.1. Health and safety in a hospital environment is relevant to everyone, including volunteers. Volunteers must take care of their own safety, and the safety of others, at all times. Volunteers must report all hazards, risks and incidents in the appropriate way, as outlined in section 13. [Incident Reporting](#). The Health and Safety section of this policy is split into three key areas: infection control, fire and manual handling. Relevant NHS policies have also been reviewed and taken into consideration throughout this section. A full list of relevant NHS policies that have been consulted can be found in [Appendix 1](#) at the end of this document.

2. Health and Safety: Infection Control

- 2.1. Reducing the risk of infection is a key priority. All staff, volunteers, patients and visitors have a role to play in effective infection prevention and control.

Hand-Washing

- 2.2. We have adapted the World Health Organisation's 'Five Moments of Hand Hygiene' guidance to help volunteers identify when they should wash their hands. The 'Five Moments of Handwashing' is published in the Volunteer Handbook and is discussed in Core Training.
- 2.3. Volunteers should be aware of the importance of hand hygiene. Regular handwashing is strongly recommended, especially after eating or using the toilet.

Preparing for Hand Hygiene in Clinical Environments

- 2.4. When entering a clinical area, volunteers should ensure they have:
- removed any coats/jackets/ties
 - removed any wrist and/or hand jewellery (except for plain wedding bands)
 - removed any wrist watches
 - rolled up their shirt sleeves so they are bare below the elbow
 - covered any cuts, abrasions or scratches with a waterproof dressing

What to Clean Your Hands With

- 2.5. Volunteers are instructed that alcohol hand rub is an effective method of hand hygiene. Hand gel dispensers can be found:
- on each inpatient bed/trolley
 - outside each single room and bay
 - by the entrance to the hospital
 - by the entrance to the department or ward
 - on the walls in public areas of the hospital.
- 2.6. If these dispensers are empty, volunteers are asked to inform a member of NHS staff who will escalate this to the appropriate team for re-fill or replacement.
- 2.7. There may be times when volunteers need to use soap and water to wash their hands. Soap and water should be used when:
- hands are visibly dirty or soiled
 - volunteers are interacting with patients that have symptoms such as diarrhoea and/or vomiting.
- 2.8. Infection control and hand-washing technique is covered as part of the Core Training session (see section 3. [Induction and Training](#)) and instructions on how to do so can be found in the Volunteer Handbook.
- 2.9. Where necessary, cleaning products will be provided for any equipment used as part of volunteer roles such as the Library Trolley service.

Exposure to Bodily Fluids

- 2.10. Volunteers should never be placed in a situation where they become exposed to blood and other bodily fluids, unless specifically risk assessed and managed as part of a volunteer role (Volunteer Responder) In the unlikely event that this situation should arise, volunteers must:
- immediately follow the appropriate hygiene protocols under guidance from NHS staff
 - inform the ward manager as soon as possible
 - inform their hospital volunteering team as soon as possible.

Personal Protective Equipment

- 2.11. Personal Protective Equipment (PPE) is any equipment used to protect the individual from harm or damage.
- 2.12. PPE for volunteers may include a disposable apron, face mask, high visibility vest, jackets, or gloves. Where PPE is required for a volunteer

role, the Risk Assessment for that role will highlight this need and give details of what will be provided.

Safe Handling of Waste

- 2.13.** Waste from a healthcare setting has the potential to be toxic, hazardous or infectious. Waste bags in hospitals are colour coded. Volunteers should only come into contact with waste which is suitable to be placed in clear or green bags. Clear bags are for general waste and green bags are for recycling. Volunteers must never be placed in a situation where they become exposed to or involved in the disposal of hazardous waste.
- 2.14.** Should volunteers encounter waste that has been improperly disposed of, such as fluids on the floor, they should inform their Volunteer Supervisor immediately.

Sharps

- 2.15.** 'Sharps' refers to any used needles or medical equipment. Sharps have the potential to be toxic, hazardous, or infectious and must never be touched by a volunteer. Volunteers must never be placed in a situation where they become exposed to any sharps. Should volunteers encounter sharps waste that has been improperly discarded, such as an overfilled sharps container, they should inform their Volunteer Supervisor immediately.
- 2.16.** Should a volunteer receive an injury relating to sharps waste, they should contact their Volunteer Supervisor immediately. Their supervisor will immediately complete a DATIX incident reporting form and will follow the appropriate procedures. Volunteers should also contact their Hospital Volunteering Team as soon as possible.

Treatment in Isolation

- 2.17.** Volunteers must never be exposed to patients who are being treated in isolation. Volunteers are asked to double check any notices displayed as well as speaking with the Nurse in Charge before opening a closed door to a patient area and follow all instructions that are displayed. Guidance on isolation rooms is also covered in the Core Training and Volunteer Handbook.

Personal Illness

- 2.18.** Volunteers should be aware of the risks around bringing illnesses into a clinical environment. Volunteers are instructed that they must not attend their shift if they have symptoms related to:
- a cold

- flu
 - diarrhoea
 - Vomiting
 - Covid 19 Symptoms
 - anything their GP says is infectious.
- 2.19.** If a volunteer is ill, they should contact their Volunteer Supervisor and hospital volunteering team and inform them that they will be unable to attend their shift due to illness. This process is outlined in the Core Training and Volunteer Handbook.
- 2.20.** We also advise volunteers to inform their GP that they volunteer in a hospital environment and seek advice to help them assess the level of risk, if any, this might pose.
- 2.21.** Volunteers may not be referred for occupational health assessments. Fitness to carry out a volunteer role is assessed through self-declaration at the point of application and monitored informally on an ongoing basis.

3. Health and Safety: Fire

- 3.1.** We will provide all volunteers with up-to-date training in fire safety as part of their Core Training. Volunteer Supervisors should brief volunteers in the fire evacuation procedures relevant to the area in which they will be volunteering.
- 3.2.** The relevant duties as stated in the Trust's Fire Safety policy require volunteers to:
- comply with all safety and operational procedures relating to their role and workplace
 - attend relevant training
 - inform their hospital volunteering team if they have not received any training
 - report any unsafe conditions or activities to their Volunteer Supervisor and hospital volunteering team
 - use any fire safety measures or devices provided in line with the training they have received
 - not to interfere with or misuse any item that relates to fire safety.
- 3.3.** Volunteers are instructed at Core Training and in the Volunteer Handbook that they are not required to provide assistance in the event of a fire or evacuation. In the event of evacuation due to fire, volunteers should be treated as visitors and follow normal evacuation procedures.

4. Health and Safety: Manual Handling

- 4.1. Manual handling is as any activity that involves lifting, lowering, carrying, pushing, pulling or supporting -either by hand or bodily force - and is a common part of working in hospitals.
- 4.2. Volunteers must never be in a position where they are involved in moving patients unless specifically risk assessed and managed as part of a volunteer role and specific training has been completed. This includes pushing patients in wheelchairs.
- 4.3. All volunteers receive basic instruction in the safe lifting and moving of boxes as part of their Core Training. The core principles of safe lifting are to test the weight of the item before lifting or moving it and keeping a straight back and bent knees to avoid injury. Volunteers are encouraged to conduct a dynamic risk assessment of their own abilities and factors within the environment before taking on any manual handling tasks.
- 4.4. Volunteers should refuse to participate in manual handling activities if they feel they are uncomfortable or unable to do so.

5. Equal Opportunities and Diversity

- 5.1. We are committed to providing equality of opportunity. All volunteers are valued and celebrated for their diverse and unique identity, background, and contributions. Where possible local communities will be involved in the development of volunteer roles and recruitment processes.
- 5.2. Volunteers should reflect the diversity of the communities they represent, and they have the right to volunteer in an environment which is free from discrimination. Types of discrimination include direct and indirect discrimination, disability discrimination and harassment.
- 5.3. If volunteers experience any form of discrimination or harassment while volunteering, they have the right to raise a complaint and will be advised of the appropriate procedure. All complaints will be dealt with seriously, promptly and confidentially.
- 5.4. Volunteers should support our commitment to equality, treating others with dignity and respect and never acting in a discriminatory way.
- 5.5. Volunteers are expected to uphold the policy that discriminatory behaviour is unacceptable, and concerns should be reported to a member of NHS staff.
- 5.6. We will make every effort to ensure that discrimination does not occur. Where volunteers have additional needs, we will make all reasonable adjustments to ensure inclusivity for all.

6. Insurance

- 6.1. We have a comprehensive insurance policy in place, including Public Liability insurance cover. The cover provided by the Public Liability Policy can be found in the latest policy document, upon request.
- 6.2. Volunteers are covered under the Group Personal Accident section of our policy, in case a volunteer should experience 'accidental bodily injury' that 'results in death or disablement'. This covers any injury sustained while volunteering (defined in the policy as 'any unpaid activity organised by The Policyholder') or travelling to one of our hospital sites. Details of the benefits available can be found in the latest policy document, upon request.
- 6.3. If a volunteer makes a claim in relation to an accident that occurs while volunteering with us, we expect there to be evidence that they signed in for their shift using the Assemble app or attendance register and recorded the accident according to the appropriate accident reporting process.

7. Boundaries

- 7.1. Setting boundaries is important to ensure that staff and volunteers carry out their duties in line with agreed expectations. Setting boundaries also ensures that everyone enjoys the same quality of service or experience while volunteering or working with us. Boundaries set the parameters of acceptable behaviour within our hospitals, wider hospital estate and the wider community. Understanding boundaries creates a positive working environment based on trust and respect.
- 7.2. For each of our volunteer roles, the role description sets out any boundaries that may be important for volunteers to be aware of. Volunteers are not expected to go beyond these boundaries when carrying out their roles. Where this is the case, the Volunteer Supervisor and Volunteering Manager should discuss revising the role description. Occasionally patients and visitors may ask volunteers to carry out a role or action that goes beyond the boundaries set out in the role description. Where this is the case, volunteers should politely decline and seek assistance from a member of NHS staff or their hospital volunteering team.
- 7.3. Volunteers are expected to respect the boundaries of NHS staff and refrain from interfering with, or offering advice on, the duties of paid staff. A professional relationship should be upheld at all times.
- 7.4. Boundaries also include actions and behaviours outside the physical environment of the hospitals, and we expect volunteers to be mindful that they are representatives of Imperial Health Charity and Imperial College Healthcare NHS Trust.

7.5. We define boundaries in three different ways:

Physical boundaries	Interpersonal boundaries	Property boundaries
1. Physical contact 2. Personal space 3. Your physical state	1. Self-disclosure 2. Personal opinions 3. Casual conversations	1. Personal property

Physical Boundaries

- 7.6. Volunteers should avoid inappropriate physical contact with patients, visitors, staff and other volunteers. Some roles will require volunteers to provide a level of physical support to a patient. Where this is the case, volunteers should refer to section [7. Health and Safety: Manual Handling](#) as well as any role-specific guidance, training and/or risk assessments for further information and advice.
- 7.7. Volunteers should inform their hospital volunteering team or a member of NHS staff if they feel they have been touched inappropriately while volunteering with us.
- 7.8. It is generally considered that half a metre is an appropriate amount of space to keep from another person. Anything within this distance can make people feel uncomfortable.
- 7.9. We expect volunteers and staff to be respectful of other people's at all times.
- 7.10. If volunteers feel their personal space is not being respected by others, they should inform their hospital volunteering team or a member of NHS staff
- 7.11. Volunteers should never be under the influence of alcohol or illegal substances while volunteering with us. Volunteers should inform their Volunteer Supervisor and hospital volunteering team if they are taking prescription medication that could affect the ability to carry out their volunteer role safely. Volunteers should not attend if they are ill as this may put themselves and others at risk. Volunteers may be asked to leave if it is felt their ability to carry out their role safely has been significantly affected for any of these reasons.

Interpersonal Boundaries

- 7.12. Volunteers should not share any personal information about themselves with patients. We also advise volunteers to limit the amount of personal information they share with others. Volunteers can show empathy through listening and acknowledging without necessarily disclosing their personal feelings or experiences.
- 7.13. When in uniform or on shift, staff and volunteers are representatives of Imperial Health Charity and Imperial College Healthcare NHS Trust. The

Trust's values should be followed at all times. This includes when travelling to and from volunteering shifts and during breaks.

- 7.14. Volunteers should take care to uphold patient confidentiality at all times. Volunteers should only discuss patient information with their hospital volunteering team or their Volunteer Supervisor. This includes conversations about patients, visitors, staff and other volunteers, whether in the hospital, travelling to or from a shift or with friends or family members.
- 7.15. Confidential information is defined as anything regarded as 'personal', including any information that is not for public knowledge. Please refer to section 16. [Confidentiality and Managing Data](#).
- 7.16. Volunteers may witness something upsetting or hear information, which is upsetting, and they may wish to discuss this with a member of staff. Where this is the case, they should refer to section 4. [Support](#)

Property Boundaries

- 7.17. Volunteers should limit the amount of personal property they carry with them while volunteering. The safety and security of personal belongings is the volunteer's individual responsibility. There may be facilities available to securely store belongings in the hospital volunteering team office, but items are left at the owner's risk.
- 7.18. Volunteers should respect other people's property. Items belonging to patients, visitors, staff and other volunteers should not be touched or handled without permission. Volunteers should not handle cash unless it is specified as part of the role description.

8. Safeguarding

- 8.1. We are committed to the safeguarding and protection of children and adults at risk in our work. and recognise Imperial College Healthcare NHS Trust's commitment to a duty of care for children, young people and adults. The Trust's vision for safeguarding is:

"to achieve the best possible outcomes for unborns, children and adults at risk through ensuring that their voices are heard, and that early intervention ensures their safety and wellbeing. This will be achieved through effective, united multi agency team working and regular supervision."

- 8.2. Volunteers should have the information, knowledge and awareness to recognise signs of abuse or neglect and how to report any concerns appropriately.
- 8.3. For the purpose of this policy, safeguarding is defined as measures and structures to respond to an act, or failure to act, which may cause harm to an individual. Harm includes violence, abuse, exploitation and

neglect. If a volunteer suspects someone with care and support needs is at risk of abuse or neglect, they should follow the processes outlined in this policy to report it.

- 8.4. Safeguarding also includes following good and safe practices while volunteering. It is each volunteer's individual responsibility to ensure they protect themselves by assessing the environment around them while they are volunteering with us. We will provide additional support and guidance for volunteer, including information in the volunteer role description and risk assessments. Volunteers should always be aware of the environment they are in While appropriate documentation is put in place, safeguarding yourself is always the individual's responsibility.
- 8.5. Volunteers should be aware of and know how to access our Safeguarding Policy, which applies to staff, volunteers, trustees and all other personnel associated with our work.
- 8.6. Volunteers are expected to observe the following safeguarding guidelines:
- Follow our Code of Behaviour, which is provided for volunteers in the 'Green Card' document
 - Always wear their ID pass with volunteer lanyard and name badge during their shift –
 - Always ensure the main responsibilities of their volunteer role take place in a public place, such as hospital entrances, thoroughfares, shops, waiting areas or in open ward areas. If a volunteer's role requires them to be in a private room with a patient, we advise them to leave the door open or go in accompanied by another volunteer or a member of staff.
 - Never make physical contact with a patient if it can be avoided. (Some volunteer roles require a degree of physical patient contact and where this is the case we will provide appropriate training.
 - Never share any personal information with a patient or visitor. (For more information, please refer to section 10. [Boundaries](#).)

Please see the following section, 12. [Lone Working](#), for further guidance on ensuring personal safety and wellbeing.

Reporting Concerns

- 8.7. Abuse and neglect can take many forms. The view of what constitutes neglect should not be limited to personal opinions and should always consider the circumstances of the individual case.
- 8.8. Volunteers are encouraged to report any safeguarding concerns.

- 8.9. If a volunteer suspects that an incident of abuse or neglect has taken place, they should:
- immediately report these concerns to a member of hospital staff.
 - remember that safeguarding is everyone's responsibility and not assume someone else will report it.
 - keep in mind that a written account of their observations may be required so try to keep the details accurate and precise.
 - Speak to their Volunteering Manager about what has happened, as the experience may have been unsettling, uncomfortable or upsetting. This would not constitute a breach of confidentiality.

All flowcharts to manage a volunteering safeguarding allegation are available at www.imperialcharity.org.uk/safeguarding

9. Lone Working

- 9.1. Lone working applies to volunteers who are alone when they carry out their volunteer role. It also includes any activity volunteers may be involved in that takes place outside the Trust's hospital sites and renal facilities.
- 9.2. A lone worker is therefore defined as any volunteer involved in an approved volunteering activity with a clear role description who is without direct supervision in a hospital building or in the community.
- 9.3. We recognise there are some additional risks associated with volunteers carrying out tasks by themselves. With this in mind, lone working is avoided where possible and we risk assessments are put in place to identify hazards, assess risks and put in place appropriate control measures, such as enhanced training.
- 9.4. Volunteers are advised to review the risk assessment for their role, but the following guidelines should also be followed to minimise any risks involved in lone working:
- Check in with their Volunteer Supervisor or event contact when they arrive, and again when they have finished volunteering
 - Have regular debrief meetings with staff to record their hours via the Assemble app or sign in sheets and report any incidents and concerns.

Working Alone Away from the Office or from Home

- 9.5. Instructions and guidance to manage the risks associated with lone working are provided to volunteers by their Volunteering Manager.
- 9.6. Volunteers are also advised to consider the section 11. [Safeguarding](#) (paragraph 11.5) to ensure they have a good knowledge and

understanding of personal safety when volunteering alongside children, young people or vulnerable adults.

10. Incident Reporting and Whistleblowing

- 10.1. Volunteers should feel confident reporting incidents if they occur. All reported incidents will be taken seriously and investigated fully.
- 10.2. If a volunteer wishes to raise a concern, they should speak to their Volunteer Supervisor or another member of hospital staff as soon as possible. It is the staff member's responsibility to respond appropriately. If a volunteer feels unable to approach a member of hospital staff, they should seek guidance from the hospital volunteering team at their hospital site.
- 10.3. Volunteers should never be subjected to abusive behaviour or language from patients, visitors' hospital staff or other volunteers while volunteering with us. The hospital's on-site security team will be on hand to intervene if required.
- 10.4. Examples of incidents and concerns that should be reported include:
 - witnessing or suffering slips, trips and falls
 - near misses
 - abusive behaviour or language from patients, visitors' hospital staff or volunteers
 - anything that poses a danger to health and safety
 - criminal offences
 - breaches of legal obligation
 - miscarriages of justice
 - damage to the hospital environment
 - data protection breaches
 - deliberate attempts to conceal any of the above.
- 10.5. Incidents involving volunteers will be investigated fully by the Volunteering Manager and the Volunteer Supervisor, in line with Imperial College Healthcare NHS Trust's reporting process. Should volunteers be injured as a result of an incident that occurred while they were volunteering, they may be able to make an insurance claim. Further details can be found in section 9. [Insurance](#) of this policy.

Whistleblowing

- 10.6. If a volunteer wishes to raise concerns relating to any of the following incidents, they should follow the Trust's whistleblowing policy as described in 10.7.

- A danger to the health and safety of any individual, or group of individuals, whether employees, patient or any other person on Trust premises, including mistreatment of other workers
- A criminal offence
- The breach of a legal obligation
- A miscarriage of justice
- Damage to the environment
- A deliberate attempt to conceal any of the above.

10.7. Wherever possible volunteers should discuss concerns with their Volunteer Supervisor or their hospital volunteering team. Where this is not appropriate, confidential advice is available from the Trust's Freedom To Speak Up Guardians: imperial.ftsu@nhs.net or 07500225733.

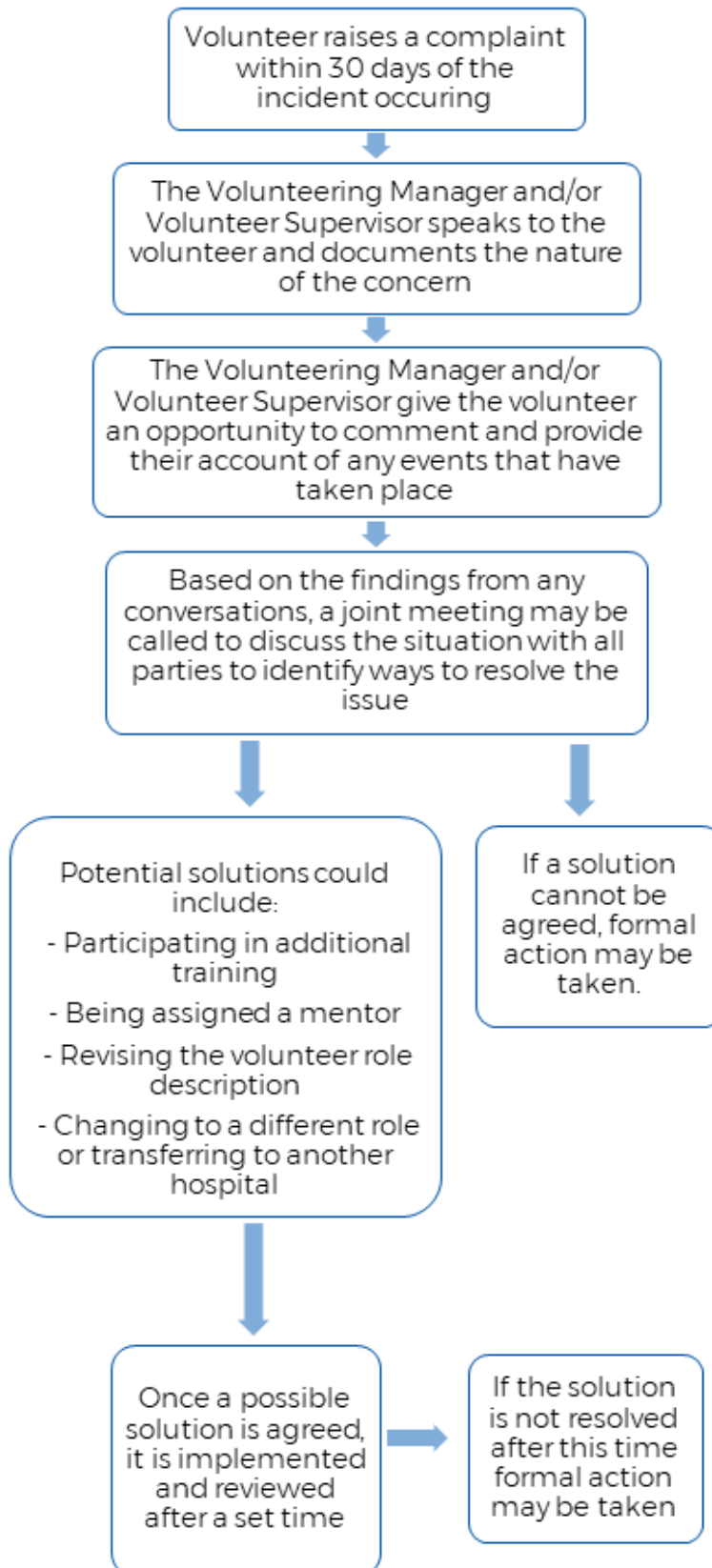
11. Problem Solving

11.1. We want everyone who volunteers with us to enjoy their role and feel supported to discuss and resolve any day-to-day problems as they arise. Where possible, our Volunteering Managers will use informal procedures to address any concerns. However, on some occasions a more formal approach to solving the issue may be required.

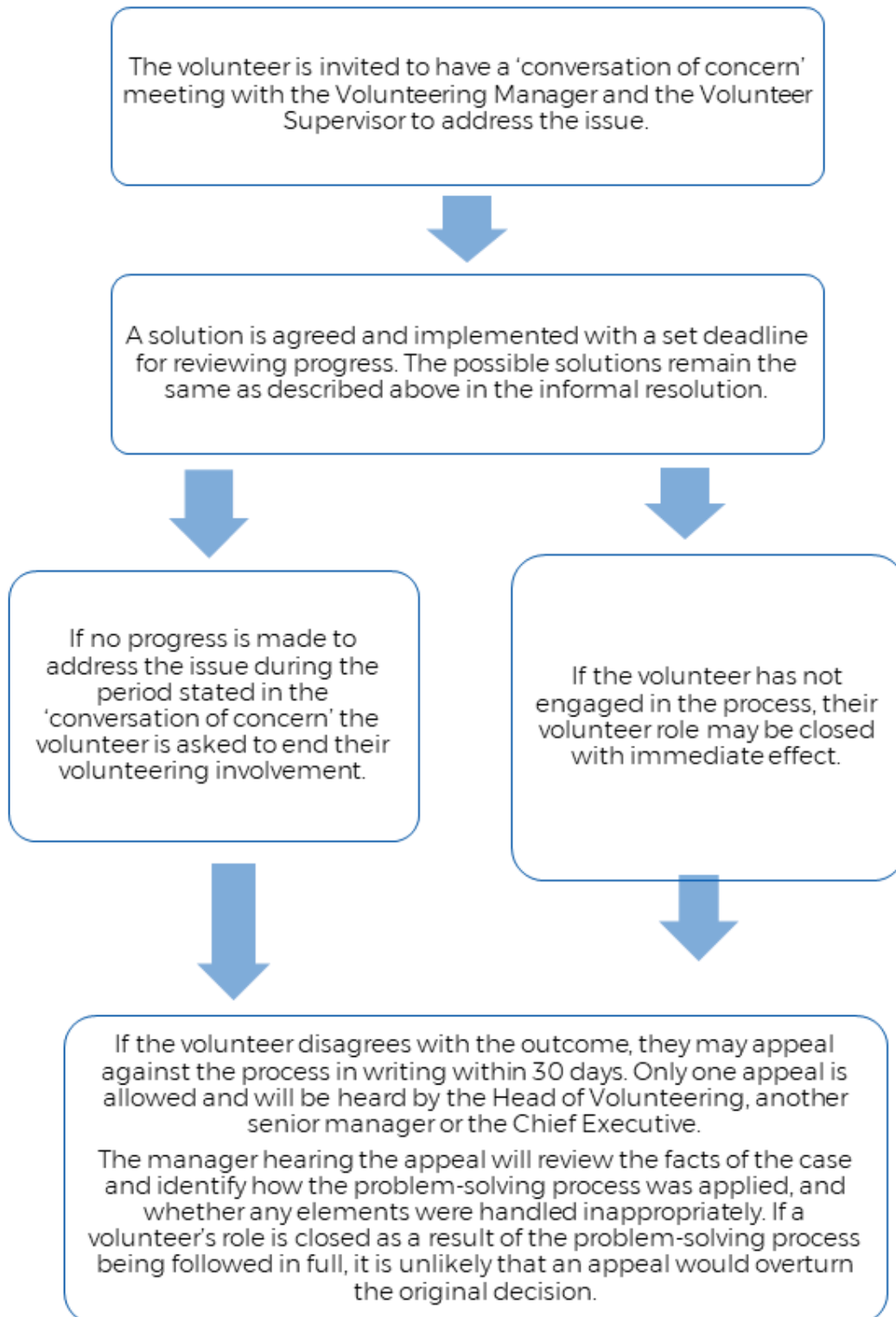
11.2. There are three areas where this problem-solving process may be applied:

- Capability (relating to a volunteer's ability to carry out their role).
- Performance (relating to how well a volunteer is performing in their role).
- Conduct (relating to a volunteer's behaviour when volunteering).

Stage 1 – Informal Resolution



Stage 2 – Formal Action



Police Investigation

- 11.3. If an allegation is made that a volunteer has committed a serious criminal act, the volunteer will be immediately suspended pending the outcome of the police investigation. If convicted and the nature of the offence would affect their suitability to carry out their role, the volunteer's role will be closed immediately (see section 2. [Selection and Vetting](#)).

Right to Appeal

- 11.4. If a volunteer's role is closed following the problem-solving process, they may appeal in writing within 14 days. Only one appeal is allowed and will be heard by the Head of Volunteering, another senior manager within the charity or the Chief Executive.
- 11.5. The manager hearing the appeal will review the facts of the case and identify how the problem-solving process was managed, and whether any elements were handled inappropriately. If a volunteer's role is closed as a result of the problem-solving process being followed in full, it is unlikely that an appeal would overturn the original decision.
- 11.6. Unless there are genuine mitigating circumstances, any of the following behaviours would normally lead to an automatic closure of a volunteer's role and an end to their involvement as a volunteer:
- Wilful misconduct or deliberate failure to comply with our policies, procedures, regulations or practices such that the safety of the volunteer, patients, members of staff, visitors or other volunteers is put at risk
 - Theft, fraud, deliberate falsification of records, deceit, or other dishonesty equivalent to theft
 - Demanding, accepting or offering financial or other inducements from/to other volunteers or any patient, visitor or staff member
 - Possession of firearms or any other weapons
 - Actual or threatened assault upon any patient, visitor staff member or volunteer
 - Wilful disclosure of any confidential information relating to patients, other volunteers or member of staff
 - Wilful damage to and/or misuse of hospital property or premises, or gross negligence resulting in damage or loss of property
 - Serious incapability through alcohol use or being under the influence of illegal drugs
 - Serious negligence which causes unacceptable loss, damage or injury.

- 11.7. If a volunteer is accused of an act of gross misconduct, the Volunteering Manager or Volunteer Supervisor may suspend the volunteer whilst an investigation takes place. During any investigations, the volunteer will be asked to return their ID card and uniform, and may only visit the hospital for a medical appointment. The volunteer should also inform the Volunteering Manager if they do need to attend the hospital. A breach of this may interfere with a pending investigation. If, after the investigation, the Volunteering Manager concludes that gross misconduct has occurred, the volunteer will be asked to leave with immediate effect and informed by letter. If it is concluded that gross misconduct has not taken place, then the Volunteering Manager will use the problem-solving procedure to manage the next steps with the volunteer.
- 11.8. On being asked to end their volunteer involvement, volunteers must immediately return their ID card, name badge and any items of uniform.

12. Compliments, Complaints and Suggestions

- 12.1. If a volunteer or member of hospital staff would like to share feedback or make a complaint, they should contact our volunteering team. All complaints will be taken seriously and handled professionally. Where possible, we will work with hospital teams to implement their suggestions where a genuine need for change has been identified.
- 12.2. If a volunteer receives feedback or complaints from a patient or visitor, about a member of hospital staff, they should direct them to the following information and support :
<https://www.imperial.nhs.uk/patients-and-visitors/feedback-compliments-and-complaints>
- Patient Advice and Liaison Service (PALS)
 - Friends and Family Test
 - NHS choices
 - Healthwatch Central West <http://healthwatchcwl.co.uk/>
 - Trust complaints department (formal complaints)
- 12.3. Informal complaints will be directed to the Trust's PALS service. Formal complaints will be handled by the complaints departments by email or post: ichc-tr.complaints@nhs.net

Complaints department
4th floor
Salton House
St Mary's Hospital
Praed Street
London W2 1NY

- 12.4. If a volunteer wishes to make a complaint about a member of hospital staff or another volunteer, they should contact their Volunteering Manager.
- 12.5. If a volunteer, patient, or visitor wishes to make a complaint about a member of our staff, they should contact the Head or Deputy Head of Volunteering.
- 12.6. For volunteers that have shown outstanding contributions, please see the 27. [Recognition Awards and Thank You Events](#) section.

13. Managing and Protecting Data

What Is Personal Data?

- 13.1. Personal data is information that identifies an individual, such as their date of birth or address. It can also be information that reveals something about a person. For example, their contact preferences. We will always handle people's personal information with respect and privacy and we will only process and store this data when there is a legitimate reason.
- 13.2. Volunteers should respect the privacy of patients and staff they interact with in the hospitals, as well as our donors and supporters. Personal data should not be shared either directly or indirectly, including conversations that may be overheard.

How Volunteers' Information Is Used

- 13.3. We will gather and store personal information about a volunteer when they submit their application. The information we request will be relevant to the volunteer roles, so that we can make sure the opportunity is suited to the applicant (including meeting any mobility and disability requirements and addressing any conflicts of interest). We may ask for further information if there are gaps or inaccuracies in the application.
- 13.4. We may ask applicants to provide references, details of their dietary requirements and any other information about their health and wellbeing that may be relevant to the volunteer role. As most volunteer roles take place within a hospital, this information ensures volunteers will not be put at any unnecessary risk.
- 13.5. Depending on the role, we may need to request a DBS disclosure. If this is the case, it will be clearly stated in the volunteer role description. We will only request a DBS disclosure if this is a legal requirement based on the requirements of the role.

Providing an Excellent Volunteering Experience

- 13.6. When volunteers start their role, the personal information they have provided will be used to help us provide them with a high-quality experience while volunteering with us. For example, this may include putting in place additional safety measures or providing relevant learning opportunities.
- 13.7. We will communicate regularly with volunteers by email and/or post.
- 13.8. If it is suspected that a data breach has occurred, this should be reported immediately to the relevant Volunteering Manager.

Celebrating the Impact Made by Volunteers

- 13.9. As a charity it is important that we use our funds and resources effectively and efficiently. Information provided by volunteers helps us understand why people are motivated to take part and what support we may need to put in place.
- 13.10. We may use anonymised demographic information about volunteers to report on our progress to funders and other stakeholders.
- 13.11. Volunteers may also be invited to share feedback on their experiences while volunteering with us. This helps us monitor, review and evaluate our volunteering programme, so that we might make changes to improve the overall experience for volunteers in the future.

Promoting Our Work

- 13.12. To help promote volunteer roles, we may create a range of promotional content and marketing materials, including photos and videos. Volunteers will be invited to participate and can choose not to be included in photographs and videos. Where volunteers do participate, the purpose of the marketing will be stated clearly in our media consent form. This may include display on our website, social media platforms and newsletters. Images and footage where volunteers are identifiable will not be used for any other purpose without prior consent. Volunteers can update their preferences regarding filming and photography at any time.
- 13.13. We may share anonymised statistics about volunteer participation with our partners to highlight the scope, impact and growth of the programme.

Sending Information about Other Ways to Get Involved

- 13.14. We will keep volunteers up to date with the wider work, as well as providing information about ways in which volunteers can do more to help with fundraising and events.

13.15. Volunteers will be asked to share their communication preferences as part of the application process. These preferences can be updated at any time.

Sharing Volunteers' Information

13.16. We will never sell volunteers' personal information to other organisations.

13.17. Where a volunteer's role is based within a hospital team, we may share certain details, such as contact information, with Imperial College Healthcare NHS Trust, so that NHS staff can keep in touch and support volunteers to carry out their roles.

13.18. Where a volunteer's role is based within one of our partner organisations, or another charity, we may share certain details, such as contact information, with that partner so they can keep in touch and support volunteers to carry out their role.

13.19. Our expectations around information sharing with our agreed partners is set out in our Volunteer Agreement.

13.20. Occasionally, we may use external suppliers to provide services that help us provide a fulfilling volunteer experience. For example, we may work with a mailing house to send out our Volunteering Newsletter. We will carry out standard due diligence checks on these organisations to make sure they have robust, safe and secure data protection and processing policies in place.

13.21. We will not share personal information with any other organisation without consent from the individual other than:

- with organisers of events (as long as sharing this information is justified and lawful)
- if required by law (for example if requested by the police and it is essential in the prevention or detection of a crime)
- if it is in the vital interest of a volunteer or another person, for example in a medical emergency.

Receiving Information from Third Parties

13.22. We will only receive information from third parties if:

- someone has expressed an interest in volunteering with us through another organisation (for example, volunteer centres, websites or an employer)
- as a result of seeking references through information provided by applicants of nominated referees
- in response to a criminal records check.

13.23. When this is the case, or in any unique circumstance not covered above, volunteers will be informed about the information that has been provided.

Storing Personal Information

13.24. We will only keep volunteers' personal information for as long as it is needed. It will then be removed and disposed of securely. The length of time that information is held may depend on the purpose for which it was collected and used.

13.25. We will only keep personal information relating too unsuccessful applicants for 12 months. We will keep personal information relating to volunteers for up to six years after ending their involvement with us, except where a volunteer has been asked to end a volunteer role as a part of the 14. [Problem Solving](#) procedure. In this instance, we will keep basic data indefinitely so that any future application to volunteer can be assessed appropriately.

13.26. We store volunteers' personal information securely using a CRM database, which meets international security standards. We may keep paper records of some information but where possible this will be transferred to an electronic record and the paper record will be disposed of securely.

13.27. Volunteers who have access to the internet may access their personal record securely online to update their details and communication preferences. Volunteers who do not have access to their record may request changes via their hospital volunteering team. Volunteers are responsible for updating their personal details, such as their name, address, email address, phone number and emergency contact information, either directly on the database or by informing their hospital volunteering team.

Security and Confidentiality

13.28. Confidentiality is of vital importance, and we will always take care to make sure data is used and stored securely. Personal information is only accessed by people that have been verified and authorised to do so. Anyone who has access to a volunteer's personal information is obliged to respect that it is kept confidential, and appropriate training is provided.

Further Rights

13.29. Individuals can contact us at any time to:

- ask what information we hold about them
- request a portable copy of the information we hold about them

- ask for corrections to be made
- ask for their data to stop being used in any way, other than for the purposes of communicating with volunteers about their volunteering.

How to Contact Us

13.30. For any questions regarding how we use personal information, please contact us::

- by phone on 020 3005 6391
- by writing to Volunteering Department, Imperial Health Charity, 5 Merchant Square, London, W2 1AY
- by email to volunteering@imperialcharity.org.uk

Complaints

13.31. If volunteers are unhappy with how their personal information is used, they may contact us using the details above. If volunteers are still unhappy after receiving a response, concerns can be raised with the Information Commissioner's Office: <https://ico.org.uk/>

Information Governance and Patient Confidentiality

13.32. Volunteers are expected to always uphold patient confidentiality at all times. This includes when in the hospital buildings, grounds, and offices, as well as outside of the hospital. Volunteers must not share information about patients or details of their health conditions or treatments.

13.33. The Trust's policy states that "Information Governance is a term that encompasses information security, patient and staff confidentiality, information sharing, clinical and organisational records management, data quality, and freedom of access to public information. Good information management is the organisational ability to protect sensitive personal information and use this information effectively and ethically for the purposes the information was collected. Information Governance helps ensure staff compliance with the law (e.g. Data Protection Act 1998 / Freedom of Information Act 2000) and Department of Health Guidelines and professional best practice when handling personal and patient information. It also allows staff to ensure that personal information is dealt with legally, securely, efficiently, and effectively in order to deliver the best possible care. The Trust holds and protects sensitive personal identifiable information in accordance with the Caldicott principles and the Data Protection Act (1998)".

13.34. Volunteer who have access to patient information or sensitive personal data via the Trust's IT systems is required to complete Information

Governance training during their three-month induction journey and annually thereafter.

- 13.35. Volunteers must be compliant with Information Governance principles to uphold patient confidentiality and to help prevent data leakage and inappropriate sharing of data. These principles are covered in Core Training and the Volunteer Handbook.
- 13.36. If it is suspected that a data breach has occurred, this should be reported immediately to the relevant Volunteering Manager.

14. Communications and Social Media

- 14.1. Volunteer Supervisors should communicate regularly with volunteers, informing them of any updates or changes that are relevant to their role. We will consult with volunteers to gather their feedback and actively seek to involve them in their work.
- 14.2. We will communicate regularly with volunteers in order to provide general updates and information about the charity and its wider work. Volunteers can update their communication preferences at any time.

Responsible Use of Social Media

- 14.3. The following section provides guidelines and recommendations for volunteers when using social media.
- 14.4. Volunteers are personally responsible for what they communicate using social media. Volunteers should avoid social media communications that might be misconstrued in a way that could damage the reputation of Imperial Health Charity or Imperial College Healthcare NHS Trust, even indirectly. Volunteers should not post anything offensive, including discriminatory comments, insults or obscenity. Any posts that relate to staff or other volunteers should not be posted without their written permission.
- 14.5. If a volunteer shares that they are a volunteer with us, they must state that any views they express are personal and do not represent those of the organisation.
- 14.6. If volunteers are uncertain or concerned about the appropriateness of any statement or post, they should refrain from making the communication until it has been discussed with their Volunteering Manager. Any breach of these guidelines may be deemed gross misconduct and may lead to problem-solving procedures.

Copyright, Intellectual Property and Photography

- 14.7. If a volunteer produces any original works for Imperial Health Charity while they are volunteering with us, they will be asked to sign over the

intellectual property rights. Examples of this include photography, artwork and written work, including the results of research.

- 14.8. Photographs of volunteers carrying out their roles may be used for promotional purposes, for example in a leaflet or online. If a volunteer does not want their image to be used, they should let their Hospital Volunteering team/Volunteer Supervisor or event photographer know at the time. Consent to take and use photography of volunteers is obtained as part of the application process, volunteers should let the Volunteering Department know if this preference changes during the course of their volunteering.

Patient Confidentiality

- 14.9. Under normal circumstances, volunteers should not share confidential or identifying information about patients with the media. Doing so is a breach of both patient confidentiality and the Data Protection Act 1998. Such a disclosure could have implications for the Trust, and a criminal prosecution of the offending person.
- 14.10. Volunteers are not permitted to take photographs or videos of patients. Any breach of this will be considered gross misconduct and problem-solving procedures will be started.

Media Relations

- 14.11. Volunteers should not give comments directly to the media unless a volunteer role specifically includes talking to the press or other local media. Any media requests should be directed to our communications team.
- 14.12. Any comment made by a volunteer which directly or indirectly brings the Trust or Charity into disrepute will be deemed gross misconduct and will result in problem solving procedures being started.

15. Expenses

- 15.1. Volunteers are entitled to claim genuine out of pocket expenses, incurred in their volunteer role. We reimburse out of pocket expenses for travel and refreshments for volunteers, as part of our commitment to providing equal opportunities.

What Can Be Claimed?

- 15.2. Volunteers can claim for the cost of their travel to and from the hospitals, or events that we run. Travel claims are limited to £11.70 per day, only on days when volunteering has occurred. Where possible this should be by the cheapest or most efficient mode of transport, ideally public transport. We will review the maximum amount that can be

claimed in line with any increase in prices. The current allowance is based on daily price caps when travelling within Transport for London zones 1-4.

- 15.3.** Claims can also be submitted for refreshments purchased whilst volunteering. Refreshments may include hot or cold drinks, snacks and sandwiches up to the value of £5 per day.
- 15.4.** Expenses will not be reimbursed:
- Without production of a valid receipt
 - In advance
 - Where a volunteer hasn't signed in for their shift on the date claimed for
 - For travel where a concessionary pass is used for free travel
 - For travel where a season ticket/pass is used, and therefore the volunteer has not incurred any additional cost
 - Cycling or any other self-propelled mode of transport
 - For any fines incurred, including traffic and parking violations
 - For claims older than one month
- 15.5.** Subject to agreement and in circumstances where public transport isn't available or suitable the following will be reimbursed, up to a maximum of £11.70 per day:
- Vehicle mileage of 45p per mile
 - Car parking
 - Taxi fees, in exceptional circumstances

Submitting a Claim

- 15.6.** To make a claim, volunteers must be able to produce the valid receipts for each item and journey, and must have signed in using the Assemble app at their hospital site (or event starting point). For Oyster Card and contactless payment card use, a printed statement from an online account is required. Volunteers must then complete a Volunteer Expenses Form and submit both the form and the receipts, to the volunteering office at their hospital site or to the central office address below, within one month of incurring the expenses. Payment will be made via BACS to the specified account, usually within two weeks. Once we have authorised a claim, payments can also be collected in cash from the cashiers within the hospital, on presentation of the signed, authorised expenses form (at Charing Cross, Hammersmith, Queen Charlottes and Chelsea and St Mary's Hospitals only).

16. Gifts

- 16.1. If a volunteer is offered a high value or extravagant gift from a patient or visitor, we recommended that they politely refuse. Gifts that can be shared with the NHS staff team, such as chocolates, may be accepted but it is advised that this is checked with NHS Trust or Charity staff.
- 16.2. Where appropriate, volunteers can suggest that patients and visitors consider making a donation to Imperial Health Charity, specifying a ward or department at their discretion.
- 16.3. NHS staff who wish to give a gift to a volunteer should speak with us first to discuss suitable ways to reward and recognise volunteers.
- 16.4. Volunteers should not give gifts to patients under any circumstances.

17. Providing References for Volunteers

- 17.1. When volunteers leave (providing they have completed the minimum commitment agreed when starting), we will provide them with a standard reference detailing their volunteer role(s) and the dates they volunteered along with a brief explanation of any training they have received. We are unable to respond to requests for references after they have finished volunteering.
- 17.2. Volunteer Supervisors may provide more detailed references relating to the specific tasks and contributions made by volunteers or act as referees for career/educational applications. However, this is entirely at their discretion and volunteers must agree this with them before listing them as a referee. With the agreement of the Volunteer Supervisor, this can be done after the volunteer has left a role.
- 17.3. If a reference is required while an individual is still volunteering with us, we can provide a standard reference detailing the volunteer's role and time spent with us. We are unable to respond to requests for references where we have been provided as a referee on an application.

VOLUNTEERING WITH IMPERIAL HEALTH CHARITY

1 Volunteer Roles

- 1.1 Each volunteer role must have a role description in place before a volunteer can be appointed to the role. A volunteer role description should describe the purpose of the role along with the key tasks and responsibilities, including any boundaries or limitations of the role. When producing role descriptions for recruitment purposes the main skills, experience and qualities required for the role will also be outlined. Role descriptions will also include the required times and minimum length of commitment for the role.
- 1.2 Volunteers are recruited on a needs-based approach. Anyone who wishes to volunteer will be directed to our latest volunteering opportunities. Bespoke requests cannot be accommodated for roles that either do not exist or are not currently being advertised.
- 1.3 Volunteer roles are created in partnership with the relevant teams. NHS staff are encouraged to direct individuals who may be interested in volunteering to our latest volunteering opportunities, which are available to view on our website. NHS staff should not offer or create a volunteer role if approached. All requests to volunteer from individuals should be directed through the Volunteering Department, and in the first instance via our website at: www.imperialcharity.org.uk/volunteer
- 1.4 As part of the Volunteer Agreement, our expectation is that volunteers will carry out their role to the best of their ability, at the times agreed when they are appointed. Volunteers should not carry out any tasks that are not included in their role description and which conflict with the boundaries for volunteers, as outlined in the 10. [Boundaries](#) section of this policy. Where a volunteer is no longer able to meet the required time commitment, they should speak to us to discuss their options.
- 1.5 We will review our volunteer roles and risk assessments annually with NHS staff to ensure the tasks are still relevant and appropriate, and that volunteers are still carrying out the tasks and responsibilities of the role .
- 1.6 We may develop new volunteering initiatives in partnership with Imperial College Healthcare NHS Trust. As with all other volunteering opportunities, each programme of work will be developed collaboratively with the relevant hospital teams and will follow the volunteer journey, including role description and risk assessments.

Volunteering Initiatives include:

- The Volunteer Employability Programme (VEP) is a 10-week programme focussed on empowering participants with employability skills and awareness of the various pathways to employment and/or apprenticeships within the NHS. Programme participants are placed in

volunteering roles at St Mary's Hospital while attending 1:1 employability coaching sessions and NHS-led workshops.

- The responder scheme enables us to quickly and effectively provide volunteer support directly to hospital departments needing support on the day. Volunteers are recruited, trained and supported by the Programme Manager to respond to asks for support from the hospital, including (but not limited to) collecting medication from inpatient pharmacy on behalf of the wards, transporting blood and urine samples from the wards to the labs, purchasing items from the shops on behalf of patients, wheeling patients in wheelchairs and accompanying patients off the ward. Responder volunteers will also support the core volunteering programme by filling in empty shifts at front of house, main outpatients and mealtimes.

2 Dress Code and Uniform

2.1 Volunteers will be issued with uniform items so they can be easily identified by patients, visitors and NHS staff in and around the hospitals. Volunteers are required to wear their uniform at all times when volunteering within the hospitals.

2.2 Uniform for hospital-based volunteers consists of:

- a purple short-sleeved top, with a choice of either a shirt/blouse or polo shirt
- a green volunteer lanyard to carry their Trust ID card
- a name badge
- for roles in main entranceways/colder parts of the hospital, a purple or grey long-sleeved jacket may also be provided

Volunteers may also be issued with identifying badges and/or language prompt badges to assist

patients, visitors and NHS staff to interact with them.

Volunteers must not wear any other branded items such as lanyards or badges, unless this has

been agreed with us in advance. Volunteers may wear any length of service or Make A Difference Awards badges where earned.

Uniform issued to events volunteers on the day of an event may consist of:

- Green volunteer t-shirt
- Volunteer lanyard with name tag
- A purple high-visibility vest, if necessary

- Foam finger, where useful
- 2.3** Volunteers are expected to wash and take care of their uniform, following the care instructions provided. We will not reimburse the cost of cleaning any uniform garments, except where excessive soiling occurs during a volunteer's role. Events volunteers are asked to return any additional items on the day.
- 2.4** Where a volunteer attends more than one shift per week, multiple items of uniform may be issued to ensure cleanliness and hygiene. Replacement items of uniform are available where clothing has been worn out through normal wear.
- 2.5** All uniform items and any other equipment provided to volunteers must be returned when they leave their volunteering role.
- 2.6** At our hospitals, we operate a 'bare below the elbow' policy which volunteers must follow at all times in clinical areas, including wards and clinics. This means that when volunteering, volunteers must wear short-sleeved items of clothing.
- 2.7** The volunteer uniform is short-sleeved. However if there is a need to wear an additional layer underneath this should be short-sleeved, or the sleeves must be rolled up above the elbows when in clinical areas, including wards, clinics and waiting rooms.
- 2.8** The following directions also apply as part of the NHS Trust's 'bare below the elbow' policy and must be adhered to in clinical areas:
- No wrist watches
 - No ties
 - No dangly earrings or jewellery (stud earrings are fine)
 - No long nails or nail varnish/artificial nails
 - No rings except plain wedding bands
 - Long hair must be tied back
- 2.9** Volunteers with roles in clinical areas, including wards, clinics and waiting rooms must wear trousers or conservative length skirts with their uniform, preferably dark in colour. Trousers or jeans with rips must not be worn when volunteering. All volunteers should wear comfortable and close-toed footwear. Shoes with high heels must not be worn in clinical areas. Items of clothing that could be perceived as revealing must not be worn, e.g. bra straps and underwear must not be visible, blouses or shirts must not be low cut or open.
- 2.10** Decisions regarding appropriate dress and uniform can be made at the discretion of the appropriate Volunteering Manager or Volunteer Supervisor.

3 Attendance

- 3.1 Volunteers are asked to sign in and out using the Assemble app and the volunteer attendance registers. This enables us to monitor which volunteers are active at any given time. As part of the [Volunteer Agreement](#), volunteers will be asked to commit to a number of hours and shifts, and therefore to attend at agreed times. We will work on the assumption that if a volunteer hasn't signed in, they haven't attended.
- 3.2 If a volunteer is unable to attend, for whatever reason, they should contact their Volunteer Supervisor and their hospital volunteering team.
- 3.3 If a volunteer hasn't attended for one calendar month with no prior notice, we will make attempts to contact them by phone. If we are unable to contact the volunteer by phone, we will send an email. . If a response is not received, a final letter will be sent to the volunteer's last known address to inform them that their role will be closed and thank them for their contribution.
- 3.4
- 3.5 Event volunteers must report to the Volunteer Supervisor supporting the event when they arrive at the meeting point to be registered. Event volunteers should wait until the Volunteer Supervisor has dismissed them either during or at the end of the event.
- 3.6 Volunteers in community-based roles should check in with their Volunteer Supervisor when they arrive safely and begin volunteering. They must also remember to confirm when they have finished volunteering and are heading home. Please see section [12. Lone Working](#).

4 Training

- 4.1 We are committed to ensuring that volunteers are properly equipped and feel confident to carry out their roles safely and to the best of their abilities. All volunteers are trained in a number of core skills to ensure patient, staff and volunteer safety. These topics are identified as part of a national framework as well as the Trust's specific policies.
- 4.2 As part of the volunteer induction journey, all new volunteers (with the exception of events volunteers) are required to complete a core training session before starting in their role. Core training sessions are either run as an online e-learning session or a whole day course at one of the three main hospital sites where volunteers will be based. Once new hospital-based volunteers have completed their core training they will be able to start volunteering and work through their induction checklist with their hospital team. For some volunteer roles the hospital team may also provide additional role-specific training within the first few weeks. Volunteer Supervisors are responsible for supporting new volunteers to

complete their induction journey checklist. Hospital volunteering teams will also review progress through the induction checklist, including any required role-specific training as part of three-month review meetings with new volunteers.

- 4.3 All volunteers are required to complete a refresher training course every three years in order to maintain and update their knowledge of the core skills topics. Volunteers will be contacted and sent reminders when they are required to attend a training course. Refresher training courses should be completed within three months of the due date.
- 4.4 Other training relating to specific topics intended to train and support volunteers in their role may be made available as part of our additional learning programme and will be offered to volunteers, as appropriate. For some volunteer roles additional training may be required to take on additional responsibility in the role.
- 4.5 As part of our commitment to providing a high-quality volunteering experience for both volunteers and NHS staff, training is also provided for Imperial College Healthcare NHS Trust staff to help them work effectively with volunteers in their team. This does not form part of any mandatory training programme; however, it is encouraged that all staff who supervise or work alongside volunteers take part in the training provided.

5 Changing Roles

- 5.1 Volunteers should speak to their hospital volunteering team if they are considering a change in role. Where the request to change is because a volunteer is not enjoying the role, the role is not what was expected or appropriate support from staff colleagues and/or the Volunteer Supervisor is lacking, extra consideration will be taken to re-place volunteers before the end of the agreed minimum commitment.
- 5.2 For some roles, group selection events may be held so that we can meet applicants who would like to volunteer and ensure they are well suited to the role. If an existing volunteer would like to change to a role where a selection event is being held, they may be invited to take part in the same process as applicants to ensure they fully meet the required standard for the role.
- 5.3 If a volunteer would like to take on an additional role, they should speak to their hospital volunteering team. Volunteers can be appointed to multiple roles at our discretion, taking into consideration the nature of the different roles, any conflict of interest and the volunteer's ability to carry out multiple roles effectively.
- 5.4 In all cases, existing volunteers will only be able to change roles or take on additional roles where there is a vacancy and they match the required criteria for the role. Volunteers may be asked to attend a short interview with the Volunteer Supervisor for the new role. Any change or additional role must be approved by the hospital volunteering team. Depending on

the roles, volunteers may be required to complete additional training, or a higher level of vetting. This may include a DBS disclosure. If a higher level of vetting is required for a change in role, this must be completed before the volunteer can start in the new role. We may also request references.

6 Taking a Break

- 6.1 We appreciate that volunteers freely give their time to support our work and they fit their volunteering time around other commitments. If circumstances change, it may be necessary for a volunteer to take a break from their role. If a volunteer wishes to take a break from their role, they should speak to their hospital volunteering team. Volunteers should then let their Volunteer Supervisor know that they will be away, so they know not to expect them. If a Volunteer Supervisor becomes aware of an absence – either planned or through ill health – they should inform the hospital volunteering team on behalf of the volunteer.
- 6.2 When a volunteer is ready to return to their role following a break, they should let their hospital volunteering team know via email or phone to confirm their anticipated return date. If the break has been for less than three months, the volunteer will be able to re-start in their role immediately. If the volunteer has been away from their role for between three and six months, they will need to complete a core training session before re-starting in their role. We will plan for the volunteer to complete this training as soon as possible so that the volunteer can resume their role. We will also conduct a 'Volunteer Return Meeting' for volunteers who have been away for longer than three months. If a volunteer takes a break which lasts for longer than six months, we will ask them to reapply for either their previous role or a role that is currently available and go through the volunteer appointment process for that role. This would include completing the required level of vetting for the role and the induction journey, including core training, appropriate to the role.
- 6.3 Where a long-term absence was the result of ill health, we will support the volunteer to ensure they are confident they can return to the role safely. Where the current role may no longer be suitable, we can also support the volunteer into a different role, along with the completion of any required vetting and training.
- 6.4 Where volunteers have been 'inactive' for longer than six months, we will contact the volunteer to discuss a potential return date. If the volunteer feels a return would not be possible within two months, we may end the volunteer's involvement. Volunteers are welcome and encouraged to contact us when they are ready to return to volunteering. Volunteers may be asked to reapply for the role, completing any necessary vetting requirements. If, after six months of having an 'inactive' status, we are unable to contact a volunteer by phone, email or letter within two further months, the volunteer's

involvement will be concluded (a total of eight months from being assigned an 'inactive' status).

7 Leaving a Volunteer Role

- 7.1 As and when volunteers are ready to finish their volunteering with us, they are advised to speak to their hospital volunteering team to discuss their plans. Ideally, all volunteers will complete the minimum commitment advertised for the role, which is usually six months. Volunteers who have completed the minimum commitment will be given a standard reference detailing their role, length of service and any training they have completed, which may be used with future employers or for volunteering with other organisations. We are unable to provide detailed character references or respond to reference requests after volunteers leave. If a volunteer requires a more detailed reference about their contribution while undertaking their role, we recommend that volunteers ask their Volunteer Supervisor to be a referee for them.
- 7.2 We would like to stay in touch with volunteers after they leave. If volunteers have opted in, we will continue to send our regular communications. Where a volunteer leaves within a few months of an upcoming social event for volunteers, then in most circumstances volunteers may still attend, should they wish to.
- 7.3 In most cases volunteers will leave due to changes in personal circumstances. However, in exceptional cases, volunteers may be asked to terminate their volunteering role. Volunteers will be asked to leave on the following grounds:
- at the conclusion of a problem-solving process whereby a volunteer is found to have acted contrary to the Volunteer Agreement or to have shown behaviours that are deemed to be gross misconduct
 - in the event of the volunteer being found guilty of a serious criminal offence, not appropriate for the role or for volunteering within a hospital
 - where a change in their health makes their involvement as a volunteer untenable.
- 7.4 If a volunteer is asked to leave in circumstances not relating to a change in their health, no reference will be issued, or responses given to any reference requests from potential employers or other volunteer-involving organisations.
- 7.5 When volunteers leave, they are kindly asked to return their ID pass, name badge and any items of uniform and equipment they were issued within two weeks of their final shift, or two weeks of the end date of volunteering. This can be returned to their hospital volunteering team or our main office, either in person or by post.

8 Recognition Awards and Thank You Events

8.1 We are incredibly grateful to volunteers for their contribution and we are committed to providing appropriate ways to recognise and thank volunteers for their efforts. We recognise and reward volunteers in three main ways:

- Awards recognising time spent volunteering
- Awards recognising special or outstanding achievements as a volunteer
- Social 'thank you' events

Awards Recognising Time Spent Volunteering

8.2 Awards are presented to volunteers to recognise key milestones they have achieved. These length of service awards include a pin badge and card, which will be presented to volunteers on or near their anniversary date, or at a thank you event if there is one taking place close to their anniversary date.

Make a Difference Volunteering Awards – Recognising Special or Outstanding Achievements as a Volunteer

8.3 Staff and volunteers are able to nominate volunteers for awards as part of the Make A Difference Volunteering Awards scheme, where they feel an individual should be recognised for special or outstanding achievements. There are four categories for these awards, linked to the Trust's values: Kind, Expert, Aspirational and Collaborative. We will review these nominations and present awards to recipients either within their team or at a volunteer thank you event. These volunteering awards have set criteria as well as a few conditions to ensure that we are able to recognise volunteers consistently, regardless of length of service or location. There is no limit to the number of volunteers who can be presented with these awards at any one time. Awards will be agreed based on the quality of the nomination provided, against the criteria required.

Social 'Thank You' Events

8.4 We host a number of events during the year to bring volunteers together to celebrate and thank them for their contribution. Invitations are sent to those 'active' volunteers who have signed in at least once during the 30 days prior to invitations being sent or those on a known absence of less than three months. Where space at the venue permits, we may also extend invitations to Volunteer Supervisors. These events are usually provided free of charge or very heavily subsidised, and

require volunteers and NHS staff to book tickets by a set deadline to secure their place.

Appendix 1: Imperial College Healthcare Nhs Trust Policies Relevant to Volunteering or Which Reference Volunteers

The following policies in operation at Imperial College Healthcare NHS Trust have been consulted and, where appropriate, elements referred to or incorporated into this policy:

- Alcohol & Substance Misuse Policy, Version 3.0 (review due 29.03.2025)
- Anti-Bullying and Harassment Policy 1.0 26.03.2027
- Chaperoning Policy version 7.0 (review due 28.05.2026)
- Concerns & Complaints Policy, Version 7.2 (review due 29.03.2025)
- Control of Substances Hazardous to Health (CoSHH), version 3.0 (review due 28.06.2025)
- Core Skills Policy, Version 6 (review due 24.09.2027)
- Dementia Policy, Version 5.0 (review due 23.08.2025)
- Equality, Diversity and Inclusion Policy, Version 2.0 (review due 24.10.2026)
- Fire Safety Policy, Version 7.0 (review due 23.07.2027)
- Health and Safety Policy, Version 11 (review due 28.06.2025)
- Immunisation policy, Version 6.0 (review due 26.09.2026)
- Incident Reporting Policy, Version 3.2 (review due 29.11.2025)
- Induction and Corporate Welcome Policy, version 4.1 (review due 31.03.2025)
- Lone Working Policy and Procedure, Version 5.0 (review due 27.02.2027)
- Manual Handling Policy, Version 6.0 (review due 31.05.2025)
- Patient Visitor Policy version 8.2 (review due 31.01.2025)
- Freedom to Speak Up – Raising Concerns and Whistleblowing Policy, version 7.0 (review due 15.01.2025)
- Recruitment and Selection Policy and Procedure, version 4.0 (review due 08.08.2025)
- Safeguarding Adults Policy and Procedure, version 15.0 (review due 28.03.2026)
- Safeguarding Children, Young People * Unborn Operational Policy v28.0 (review due 28.03.2026)
- Stress at Work Policy, version 5.0 (review due 26.07.2025)
- Uniform and Appearance Policy, version 4.1 (review due 26.04.2025)
- Social Media Policy, version 3.0 (review due 27.08.2027)

Appendix 2: Refugees and Asylum Seekers Volunteering Process

1 Introduction

This document aims to outline the process for recruiting and onboarding Asylum Seekers and Refugees, as well as providing useful information on definitions and language used. Asylum seekers can volunteer whilst their claim is considered without being granted permission to work. It is Home Office policy to support asylum seekers volunteering for charities or public sector organisations. However if you are in any doubt, please speak to Sam Shepherd, sam.shepherd@imperialcharity.org.uk

2 Definitions

- An asylum seeker is a person who has asked for protection but has not received a decision on their application to become a refugee, or is waiting for the outcome of an appeal
- Discretionary leave to remain is temporary permission to stay in the UK and is unlikely to exceed three years
- Indefinite leave to remain is permission to stay in the UK indefinitely
- A refugee is an individual to whom the UK government has offered protection in accordance with the Refugee Convention 1951 and granted leave to stay.
- A refused asylum seeker is someone whose asylum application has been unsuccessful and is waiting to go to their home country or has decided to stay without permission.

References - [Social care institute for excellence](#)

3 Applications

Imperial Health Charity welcomes applications from all aspects of the community. All individuals applying to volunteer must have a unique personal email address for the purposes of applying and becoming a volunteer with us. For those who have limited access to the internet or specific digital/literacy needs, reasonable adjustments will be made, where possible, including support from staff to complete an application form. At Imperial Health Charity, volunteer recruitment is driven by organisational need so potential volunteers can apply for roles advertised, which are clearly defined opportunities. All volunteer opportunities will be supported by individual volunteer role descriptions.

4 Vetting

4.1 References

Volunteers are required to provide two satisfactory character references. Where a volunteer is not able to provide 2 references, a reference from their hotel manager would be sufficient.

4.2 DBS

All roles within the Hospital require a DBS check. We will apply for a DBS Disclosure at either standard or enhanced level (appropriate to the role) for the individual. Where roles require a DBS disclosure, a repeat application must be completed every three years. Where a volunteer does not have a Group 1 document, we are unable to continue their application.

4.3 DBS/ID Documents

- [Identity Documents required for DBS applications](#)

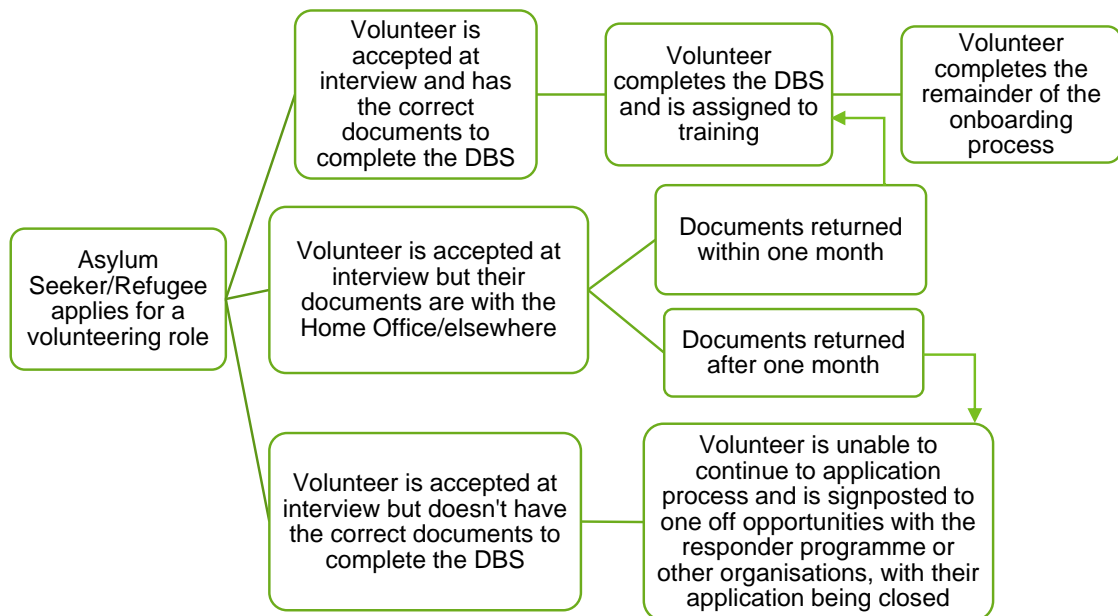
You may also come across the below:

- ARC card – is an Asylum Application Registration Card and typically contains nationality, name, age and right to work in the UK. This ID Card from the Home Office is not accepted as proof of ID on the UK by the DBS.
- Section 4/95 Asylum support letter – These may count as a Group 2b document from a central/local government authority or agency giving entitlement.
- Schedule 10 immigration bail support letter – This may count as a Group 2b document from a central/local government authority or agency giving entitlement.

4.4 Address History

Refugees and Asylum Seekers need to provide a full five year address history in support of their DBS application. This can include a permanent or temporary residence.

5 Recruitment Process



6 Language Used

It is important the language that we use is, especially when it comes to shaping narratives around migration and migratised communities. For more information on what language to use, visit <https://migrantsrights.org.uk/projects/wordsmatter/>

To find out a potential volunteers status, we should start the conversation by allowing applicants tell us about their situation or status. Their status may also be included on their BRP (Biometric Residence Permit).

7 Expenses

Asylum Seekers and Refugees will be reimbursed any out-of-pocket expenses in line with our Expenses Policy, but are unable to receive an allowance for the same, including pre-paid oyster cards.

8 Signposting

- [Breaking Barriers](#)
- [Hammersmith & Fulham Volunteer Centre](#)
- [One Westminster](#)
- [Refugee Council](#)

9 References

- Home Office – [Permission to work and volunteering for asylum seekers](#)
- Home Office – [Application registration card \(ARC\)](#)
- Social care institute for excellence – [Good practise in social care for refugees and asylum seekers](#)
- Imperial Health Charity – [Volunteering Policy](#)
- Imperial Health Charity – [DBS Check Guidance](#)
- Helpforce – [Volunteer recruitment for asylum seekers and refugees](#)
- Migrants Rights Network – [Words Matter](#)