Guidelines for Volunteer Induction, Statutory and Mandatory Training
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Acknowledgements

The development of guidelines such as these often starts as an idea generated by those working in the particular area of specialism or expertise. That idea is then developed by a group of individuals who research the subject and speak to others in the field to get views and opinions on how to progress the work. The National Association of Voluntary Services Managers would like to thank those that were involved in developing these guidelines and reviewing the Skills for Health UK Core Skills Training Framework to inform them, in particular thanks go to:

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The following guidelines are based on the UK Core Skills Training Framework

What is the Core Skills Training Framework?

A UK wide framework which contains guidance for organisations, to standardise the interpretation of the ten key subjects which frequently feature as part of statutory and mandatory requirements within the health sector. With the support of the relevant subject matter authorities and experts who advised the Framework’s development and an understanding of UK wide or country specific legal and policy requirements, the framework will greatly help organisations understand their training requirements for these subjects. The framework can be accessed at the following site:

http://www.skillsforhealth.org.uk/developing-your-organisations-talent/uk-wide-core-skills-training--framework/
Foreword

Many healthcare organisations significantly benefit from the commitment and efforts of volunteers. Volunteers make a local difference and provide a vital connection between organisations and the communities that they serve.

For organisations to fully utilise, value and respect the contribution of volunteers, they need to demonstrate commitment in providing the required training, advice and information needed to help volunteers meet the expectations and responsibilities of the role they have committed to undertake. To ensure their safety, organisations are required to ensure that volunteers are supported and receive the necessary statutory and mandatory training.

Skills for Health have therefore been pleased to work with the National Association of Voluntary Service Managers in considering how the UK Core Skills Training Framework might be practically applied within the context of training volunteers.

Whilst organisations will, based upon their own risk assessment, need to agree how any training provided meets any local requirements for compliance maintained, the guidelines offered here can be incorporated into local delivery. They should of value in helping Voluntary Service Managers promote an approach which will help ensure quality, consistency and relevance of statutory and mandatory training for the volunteers.

John Rogers
Chief Executive
Skills for Health
Guidelines for Volunteer Induction, Statutory and Mandatory Training

The National Association of Voluntary Services Managers (NAVSM) has prepared this document following the launch of the Skills for Health UK Core Skills and Training Framework 2013 to provide guidance to NHS Trusts across England on the implementation for volunteers. These guidelines will ensure compliance with Health and Safety legal requirements and the standards set by the NHS Litigation Authority (NHSLA) and Care Quality Commission (CQC) for induction, statutory and mandatory training for volunteers in the NHS.

1. Introduction

Induction, statutory and mandatory training for volunteers in the NHS varies greatly between Trusts, highlighting the need for national guidance to ensure consistency and safe practice. The role of the volunteer is to complement paid staff to enhance patient experience by undertaking specific tasks within clear role descriptions and guidelines. The role of the volunteer is limited so that it does not constitute paid work, and the time a volunteer is engaged in volunteering varies from an hour to several hours per week. Therefore, induction and refresher training should be at a level relevant to the volunteer role. If not relevant, the volunteer may not take away the key messages relevant to them and their behaviour whilst undertaking their role. It is important to note that training that is over and above that required for the volunteer role could be considered a benefit, which could imply a contractual agreement, i.e. employment.

National discussions with Voluntary Service Managers and reference to the following were used to inform these guidelines:

- NHSLA Risk Management Standards 2012-13
- Care Quality Commission: Guidance about compliance - essential standards of quality and safety, March 2010
- Skills for Health, UK Core Skills and Training Framework 2012
- Health and Safety Executive

The rationale used for these guidelines is based on the NHSLA rationale for employees, which states that the purpose of a corporate induction is to ensure that everyone is given the key information they require to help them integrate into their role within the organisation quickly and effectively. Through the induction process, everyone should have all of their necessary initial orientation, safety, training and information needs addressed.

The guidelines also incorporate the CQC Essential Standards, in particular Standard 12b, which requires evidence to demonstrate that people who use services benefit from staff (including volunteers, students, temporary and ancillary staff and practitioners working under practising privileges) who are competent and have the required qualifications, knowledge, skills and experience to carry out the roles which they have been assigned (Appendix 1).
2. Core training topics for volunteers

The following core topics have been taken from Skills for Health, UK Core Skills and Training Framework 2013 and are recommended to be included in the induction and training of volunteers:

1. Equality, diversity and human rights
2. Conflict resolution
3. Fire safety
4. Health and safety
5. Infection prevention and control
6. Moving and handling
7. Safeguarding children
8. Safeguarding vulnerable adults
9. Information governance
10. Resuscitation

Full details of the topics included in the framework can be found on the Skills for Health Website. Healthcare organisations are asked to register their use of the framework so they can be kept up to date of any changes or amendments. Volunteer Managers should liaise with their Learning and Development lead or other appropriate person to confirm the organisations use of the framework and to ensure they are advised of any changes which might have implications for training of volunteers.

3. Applying the core topics to volunteers

When considering the development and implementation of an induction and training programme for volunteers it is important to take account of the limited role of volunteers, including the restrictions on the activities and tasks they may be involved with, and the limited number of hours contact they may have with an organisation. A proportionate approach is required to ensure relevance of the content for each core topic to ensure the volunteer receives the information and training required for them to be able to undertake their role safely.

Risk assessments should be undertaken for all activities that volunteers are involved with. The assessments should inform the level of knowledge and understanding that the volunteer requires to be able to carry out the activity safely. The outcome of the risk assessment should then be considered when planning the necessary training for volunteers.

While each organisation will, as part of their own local risk analysis, need to determine specifically in what ways and how the frequency of any required training will be ensured, the guidelines given here offer a proportionate approach to guide training of volunteers and which should be helpful in informing local plans and delivery.

In Appendix 2, we have set out, based upon an assessment of each of the core topics key learning outcomes, our experience of and understanding of volunteer training issues, the suggested recommended content, and a proposed refresher period for inclusion in local training delivery which should be suitable for volunteers.

To enable a proportionate approach each of the core topics has key learning aim, recommended content, and a refresher period which is deemed suitable for volunteers. Appendix 2 Learning Aim and Content for Volunteers, has been developed with reference to the core topics to the Skills for Health mapping tool.
Training methods

NAVSM recommends that face to face training be the preferred method of delivery by the Voluntary Services Department and, where appropriate, lead Trust staff in specialist areas. This method should be supported by an induction booklet and other tools, containing information approved by the relevant topic leads. In order to provide evidence of training, all volunteers should sign to say they have undertaken their training. Appendix 3 shows suggested induction and training programmes currently used by NAVSM members at some Trusts.

To ensure these guidelines are adopted and maintained, Voluntary Service Managers may wish to incorporate them as part of their volunteer policy, ratified by their Trust Board.
### TABLE I: Care Quality Commission Essential Standard 12B

<table>
<thead>
<tr>
<th>Care Quality Commission Essential Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have relevant qualifications, knowledge, skills and experience to carry out their role</td>
</tr>
<tr>
<td>Where this is not possible and does not impact on the safe delivery of the service the staff member agrees to work towards gaining the skills and qualifications necessary.</td>
</tr>
<tr>
<td>Where trainees and students are working, they are only given tasks and provide care, treatment and support that is appropriate to the stage of their training and their competence</td>
</tr>
<tr>
<td>Have their qualifications, knowledge and skills reviewed on a regular basis to ensure they keep up to date with current practice.</td>
</tr>
<tr>
<td>Have an awareness and knowledge of diversity and human rights and have the competencies to support, appropriate to their role, the diverse needs and human rights of people who use services.</td>
</tr>
<tr>
<td>Have a good understanding of the communication needs of the people who use the service.</td>
</tr>
<tr>
<td>Can identify and respond to the changing needs of people who use services.</td>
</tr>
<tr>
<td>Are knowledgeable of the individual needs and preferences of the people who use the service.</td>
</tr>
<tr>
<td>Understand the physical and emotional needs of people who use services.</td>
</tr>
<tr>
<td>Recognise and promote the independence of people who use services.</td>
</tr>
<tr>
<td>Are aware of the services’ policies, procedures, legislation and standards</td>
</tr>
<tr>
<td>Know who they are able to contact, and how, when expert advice is needed</td>
</tr>
</tbody>
</table>
Learning Outcomes and Content for Volunteers

The following tables map the learning content and outcomes for volunteers with those contained within the Skills for Health Framework, which can be found on the Skills for Health website at http://www.skillsforhealth.org.uk/. The content and outcomes demonstrate a proportionate approach for volunteers, recognising their roles and responsibilities within NHS organisations.

I. Equality Diversity and Human Rights

Volunteers complement paid staff and their behaviours should reflect the aims of the organisation with regard to equality, diversity and human rights.

Learning Aim and Suggested Content for Volunteers

| Learning Aim: |
| Awareness of Trust values and objectives, as defined in the organisations’ Equality Delivery System (EDS), which is reflected in their behaviour. |

| Content: |
| Guidance that volunteers must treat everyone equally, with dignity and respect as required by the Trust EDS. |
| Illustration of how to treat everyone with dignity, courtesy and respect |
| Identify protected characteristics |
| Recognising inappropriate behaviour |
| Being comfortable with challenging or reporting inappropriate behaviour |

| Frequency: |
| Refresher every 3 years |
2. Conflict Resolution
Volunteers must not involve themselves in situations where there is conflict or potential for conflict and are advised to seek help from staff and remove themselves from the situation immediately. In areas where potential for conflict is greater e.g. main reception and accident and emergency departments. The need for specific training will be decided by local risk assessment.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
Understands potential for conflict, need to, and how to, remove themselves from a situation and get help.

Content:
• How to recognise potential for conflict
• Understanding antagonistic behaviours
• Guidance on dealing with difficult situations
• Recognising behaviours
• Knowing when and how to seek help
• Understanding how and when to remove themselves from a difficult or dangerous situation

Frequency:
Refresher every 3 years

3. Fire Safety
Volunteers have limited responsibility in fire situations. Bearing in mind that every situation is different, volunteers must be guided by the staff with whom they are working and must not be placed in danger. The safety of the volunteer is paramount and in most situations they will simply be asked to leave the building and go to the muster point. All volunteers must be aware of the procedures in their department.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
The volunteer must be aware of the procedures in their department, how to raise the alarm if they suspect or see a fire, and be able recognise the alarms and know the fire procedure.

Content:
• How to raise the alarm in the event of, or suspicion of a fire
• How to recognise the different alarm sounds
• What to do if they hear the fire alarm
• Where the muster points are

Frequency:
Face to face refresher every 2 years
4. Health and Safety

Recognising that every situation is different, volunteers must be guided by the staff with whom they are working and must not be placed in danger. All volunteers must be aware of the health and safety procedures in their department.

Learning Aim and Suggested Content for Volunteers

**Learning Aim:**
The volunteer has an awareness of the meaning of health and safety and how it applies to their role.

**Content:**
- Volunteers made aware of legislation regarding health and safety
- Examples of potential hazards they may see
- Limitations of volunteer roles
- Outline additional training required for specific volunteer roles
- Where to get advice
- How to report incidents or near misses

**Frequency:**
Refresher every 3 years

5. Infection Prevention and Control

The risk of infection in hospitals is significant. Volunteers must play their part in reducing those risks and preventing the spread of infection.

Learning Aim and Suggested Content for Volunteers

**Learning Aim:**
The volunteer understands their role in helping to prevent and control the spread of infection and how to clean their hands

**Content:**
- How infection spreads.
- Volunteers’ role in protecting themselves and preventing the spread of infection.
- Demonstrates awareness of the following:
  - Principles of hand hygiene
  - Use of personal protective equipment
  - Protocols for specific areas including infection signage, bodily fluids, spillages and safe practice with sharps
  - Volunteers’ role in prevention and control of infection: - the do’s and don’ts.

**Frequency:**
- Refresher every year for those in clinical areas
- Refresher every 3 years
6. Moving and Handling
Volunteers are restricted to specific moving and handling tasks for which the role must be risk assessed and appropriate training provided.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
Volunteer will have an awareness of the principles of good back care, the risks of manual handling, and how it applies to their role.

Content:
- Manual handling risk factors and how injuries can occur
- Limitations of volunteer role in relation to manual handling
- Potential hazards of moving and handling within their role
- Where to get advice
- How to report incidents or near misses.

Frequency:
Refresher every 2 years

7. Safeguarding Children
Volunteers need to know the procedure for reporting safeguarding issues. Volunteers working directly with children must receive the staff level 1, safeguarding training.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
The volunteer will have an awareness of children’s rights, what constitutes maltreatment, and what they should do if they suspect maltreatment of a child.

Content:
- Definition of safeguarding
- An understanding of what constitutes abuse or maltreatment
- What the role of the volunteer is in relation to this
- Recognising when to report issues and to whom
- Reporting procedure for volunteers and subsequent process

Frequency:
Refresher every 3 years
8. Safeguarding Vulnerable Adults
Volunteers need to know the procedure for reporting safeguarding issues.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
The volunteer will have an awareness of who might be a vulnerable adult, what constitutes maltreatment, and what they should do if they suspect maltreatment.

Content:
- Definition of safeguarding
- An understanding of what constitutes abuse or maltreatment
- What the role of the volunteer is in relation to this
- Recognising when to report issues and to whom
- Reporting procedure for volunteers and subsequent process

Frequency:
Refresher every 3 years

9. Information Governance
Volunteers must have a clear understanding of the issues around confidentiality, the protection of personal, identifiable information and data, and their duty under the Data Protection Act 1998. The very nature of volunteering in a hospital brings the potential for a breach of confidentiality.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
The volunteer will have an awareness of the principles of Information Governance and their role in ensuring patient information is kept safe and not disclosed to anyone.

Content:
- Comprehensive definition of confidential information
- Overview of Data Protection Act
- Examples of bad practice
- How to respond to requests for information
- Appropriate sharing of information
- Demonstrate an understanding of the definition of confidential information in a healthcare setting
- Able to identify examples of possible breaches of confidentiality
- Able to demonstrate good practice

Frequency:
Refresher every year
10. Resuscitation
Volunteers should have a clear understanding of what they are expected to do should a person collapse or they find a person collapsed.

Learning Aim and Suggested Content for Volunteers

Learning Aim:
The volunteer will have an awareness of the emergency procedure and how to summon help in the event of a person collapsing. They will be clear that they have the option to start chest compressions but that this is not compulsory.

Content:
• How to recognise an emergency situation
• How to call for help
• How to start chest compressions

Frequency:
Refresher every year
## Examples of Volunteer Induction Programmes

### Example 1:

<table>
<thead>
<tr>
<th>Session:</th>
<th>Time:</th>
<th>Training delivered by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome &amp; Introduction to volunteering</td>
<td>08.45</td>
<td>Voluntary Service Manager</td>
</tr>
<tr>
<td>• Induction</td>
<td>09.00</td>
<td>Voluntary Service Manager</td>
</tr>
<tr>
<td>• Equality, Diversity and Human Rights</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Conflict Resolution</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Fire Safety</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Resuscitation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Infection, Prevention and Control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Moving and Handling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Bed Making</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safeguarding Vulnerable Adults Dementia</td>
<td>10.00</td>
<td>Lead Adult Safeguarding Nurse</td>
</tr>
<tr>
<td>Safeguarding Vulnerable Children</td>
<td>10.30</td>
<td>Lead Children Safeguarding Nurse</td>
</tr>
<tr>
<td>Information Governance</td>
<td>10.45</td>
<td>Voluntary Service Manager</td>
</tr>
<tr>
<td>Food Hygiene</td>
<td>11.00</td>
<td>Catering Manager</td>
</tr>
<tr>
<td>Break</td>
<td>11.15</td>
<td></td>
</tr>
<tr>
<td>Nutrition and volunteer support at mealtimes</td>
<td>11.30</td>
<td>Nutrition Nurse Specialist/Dentition</td>
</tr>
<tr>
<td>Speech &amp; Language</td>
<td>12.15</td>
<td>Speech and Language Therapist</td>
</tr>
<tr>
<td>Close</td>
<td>12.30</td>
<td></td>
</tr>
</tbody>
</table>
Example 2:

<table>
<thead>
<tr>
<th>Session:</th>
<th>Time:</th>
<th>Training delivered by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signing in/introduction/housekeeping</td>
<td>09.00</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Information Governance</td>
<td>09.05</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Fire Safety</td>
<td>09.25</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Health &amp; Safety. Resuscitation</td>
<td>09.35</td>
<td>Health and Safety Adviser</td>
</tr>
<tr>
<td>Safeguarding Vulnerable Adults</td>
<td>09.45</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Infection Prevention and Control</td>
<td>10.00</td>
<td>Infection Prevention and Control Nurse</td>
</tr>
<tr>
<td>Coffee</td>
<td>10.30</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Safeguarding children</td>
<td>10.45</td>
<td>Child Protection Nurse</td>
</tr>
<tr>
<td>Customer Care, Conflict Resolution &amp; Equality &amp; Diversity</td>
<td>11.15</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Moving &amp; Handling</td>
<td>11.30</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Comfort break</td>
<td>11.45</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Food Safety</td>
<td>11.50</td>
<td>Facilities Training Manager</td>
</tr>
<tr>
<td>Nutrition and ward routine</td>
<td>12.10</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Competencies, badges &amp; next steps</td>
<td>12.20</td>
<td>Voluntary Services Team</td>
</tr>
<tr>
<td>Close</td>
<td>12.45</td>
<td></td>
</tr>
</tbody>
</table>