

Voluntary Services Department
UHCW NHS Trust
Clifford Bridge Road
Walsgrave
Coventry
CV2 2DX

Dear Sir / Madam

Thank you for expressing an interest in becoming a volunteer at University Hospitals Coventry and Warwickshire NHS Trust. Your offer of support at this time is very much appreciated. UHCW NHS Trust values the involvement of local people as volunteers in activities that enhance the quality of the services we provide for our patients, visitors, carers and staff.

Before completing the application form, please see below further information about volunteering for us.

What we look for in a volunteer

- Friendly and approachable
- Caring and good listeners
- Comfortable approaching people to offer help
- Able to work independently and use initiative after initial training period
- Emotionally mature and able to stay calm in difficult situations
- Adaptable

What happens next?

To enable us to process your application swiftly, please email us the following to volunteers@uhcw.nhs.uk

- Your completed application form
- Scanned copies of the relevant identity documents (please see attached DBS checking guidance for more information) – this will be either 3 or 5 documents
- A head and shoulder photo of yourself so that we can prepare an ID badge for you

Upon receipt of your application form, we will contact you to discuss next steps.

In accordance with the NHS Employment Check standards that apply to all applicants for NHS positions and staff in ongoing NHS employment, which includes volunteers, we are required to carry out the following:

- Identity checks
- Eligibility to work in the UK check
- Disclosure and Barring Service (DBS) check – formerly known as the Criminal Records Bureau.

The Disclosure and Barring Service was formed from the merger of the Criminal Records Bureau (CRB) and the Independent Safeguarding Authority (ISA). If you are a member of the DBS Update Service please inform the Voluntary Services Department as we may be able to carry out a Status Check on you.

I look forward to meeting you soon. Should you have any queries in the meantime, please do not hesitate to contact the office on 02476965146 / 02476965147.

Yours Sincerely



Kristine Davies
Head of Voluntary Services

Volunteer Roles

Volunteer Drivers



Our Volunteer Drivers provide a professional and dedicated transportation service in their own vehicle taking patients to University Hospital Coventry and the Hospital of St Cross in Rugby. Patients are generally mobile and require escorting between the vehicle and the clinic or home address. Volunteer Drivers are also required to deliver equipment and medication to patients' homes.

Please note: a four door vehicle is required for transporting patients. Volunteer Drivers are re-imbursed 45p per mile.

Meet and Greet

Our Meet and Greet Volunteers are based in the Main Entrance and Outpatients Department of University Hospital Coventry where they welcome patients and visitors, help people navigate their way around the hospital and reassure and support them.



Clinical Support



Based on wards at University Hospital Coventry Clinical Support Volunteers support staff in the delivery of patient care. Duties include providing nutrition and hydration support, befriending patients, supporting patient discharge from the ward, stock replenishment and admin tasks. **Please note:** Shifts are 8am – 2pm and 2pm – 8pm.

COVID Vaccine Centre Meet and Greet

Our COVID Vaccine Centre Meet and Greet volunteers are based at University Hospital Coventry escorting patients from our outpatients department up to the COVID Vaccine Centre on the 1st Floor. Volunteers are also meeting and greeting patients, staff and members of the community at the entrance of the COVID Vaccine Centre. Volunteers are required between the hours of 8am and 8pm Monday – Sunday.



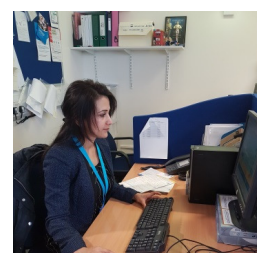
Compassionate Communities Volunteer



Our Compassionate Communities Volunteers work to help support people whose loved one is close to the end of their life, or has died. Through simple companionship, and with the support of the hospital Chaplains, these volunteers can bring immense comfort and ease loneliness in one of the most challenging seasons in life. In the time of COVID-19 we're now trying to move parts of our support online or over the phone, and we are especially looking for volunteers who would feel comfortable working in this way with us.

Administration Volunteer

Our Administration Volunteers support central administration functions and departments across the Trust. Duties include data inputting, responding to enquiries in a polite manner, answering the phone, filing, photocopying and other general administration tasks.



UHCW Charity Volunteer



Our UHCW Charity Volunteers assist and support in many different ways. Duties include attending fundraising events, collections in the Main Foyer of University Hospital Coventry, receiving, sorting and distributing donations from the community to various departments across our hospitals and general administration duties.

VOLUNTEER APPLICATION FORM

Please complete this form and return it to:
Voluntary Services Department
Freepost RLZE-GZBZ-AAXJ
University Hospital
Clifford Bridge Road
Coventry
CV2 2DX



Or Email: volunteers@uhcw.nhs.uk
Office Contact No: 024 76965146 / 024 76965147

Person Details:

Full Name:	
Title: Mr / Mrs / Miss / Ms / Other	Address:
Preferred Name:	
Date of Birth:	
I can confirm I am 16 or over <input type="checkbox"/>	Postcode:
Telephone:	Email:

Emergency Contact Details:

Name:
Relationship to you:
Contact telephone number:

On a successful application, has UHCW NHS Trust permission to hold these Emergency Contact Details? Yes No

How did you hear about us?

UHCW NHS Trust Website Volunteer Facebook Other Please write: _____

Do you have any previous experience of voluntary work? Yes No

If yes, please give details:

Which volunteer role/s are you interested in?

Driver	Clinical Support
Meet and Greet	Companionship (Compassionate Communities)
Administration	COVID Vaccine Centre Meet and Greet
UHCW Charity	Other

If other, please specify:

VOLUNTEER HEALTH FORM

PRIVATE AND CONFIDENTIAL

Section 1 – Voluntary Services Team to complete

ROLE INFORMATION (To be completed by the Voluntary Services Team)

ROLE TITLE	VOLUNTEER		
DEPARTMENT	VOLUNTARY SERVICES	DIVISION	CORE
RESOURCING OFFICERS			TELEPHONE / EXT
MANAGER	KRISTINE DAVIES		25147
RESOURCING	SUKIE DHARNI / CHERELLE MANNING		25146 / 26949

Section 2 – Applicant to complete

PERSONAL DETAILS (To be completed by applicant)

TITLE	Mr/Mrs/Miss/Ms/Dr/Rev/Other _____	DOB	
SURNAME			
FIRST NAME(S)			
ADDRESS			
TOWN/CITY			
POST CODE			
TELEPHONE		MOBILE	
EMAIL			

1. Following the release of Government guidance, we are unable to facilitate placements for people who are considered 'extremely vulnerable'. The definition of this group of people can be found:

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

Does the above guidance apply to you? Yes/No

2. The Government has also identified a group of 'vulnerable' people who are advised to socially isolate. We are unable to facilitate placements for people who are considered 'vulnerable'. The definition of this group of people can be found:

<https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people/guidance-on-social-distancing-for-everyone-in-the-uk-and-protecting-older-people-and-vulnerable-adults>

Does the above guidance apply to you? Yes/No

3. Do have a health condition or disability? Yes/No

If yes, please specify:

.....
Will this affect your ability to be a volunteer? Yes/No

If yes, what adjustments would you like us to consider to support your needs?

.....

Have you ever been vaccinated or immunised against any of the following? If YES please give details and include documentary evidence if available. If exact dates not known please give year.

VACCINATION	RECEIVED	CHILDHOOD OR FIRST COURSE DATES	OTHER DATES	COMMENTS
Tuberculosis (BCG)	YES / NO			
Rubella (German Measles)	YES / NO			
MMR (Measles, Mumps, Rubella)	YES / NO			
Varicella Zoster (Chicken Pox)	YES / NO			

The Trust undertakes to discuss any information revealed in a Disclosure with the person seeking voluntary work before withdrawing a conditional offer from volunteering.

Having a criminal record will not necessarily bar an ex-offender from volunteering with the Trust. This will depend on the nature of the position and the circumstances and background of the offence.

Rehabilitation of Offenders Act 1974

In order to protect the public, the post for which you are applying is exempt from Section 4(2) of the Rehabilitation of Offenders Act, 1974, by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) order, 1975. It is not, therefore **IN ANY WAY CONTRARY TO THE ACT** to reveal any information you may have concerning convictions which would otherwise be considered as “spent” in relation to this application. Any such information will be kept in strict confidence, and used only in consideration of your suitability for this post.

Do you have any convictions, cautions, reprimands or final warnings that are not “protected” as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198?

Do you have any convictions, cautions, reprimands or final warnings which would not be filtered in line with current guidance? Yes No

If yes, please give details: _____

Does your name appear on the Protection of Children Act List? Yes No

Does your name appear on the Protection of Vulnerable Adults List? Yes No

Are you a member of the Disclosure & Barring Service (DBS) update service? Yes No

General Data Protection Regulations 2018: Personal data relating to your application or any voluntary work with UHCW NHS Trust shall be processed fairly and lawfully in accordance with the Data Protection Act 1998. Please read the Privacy Notice on page 8 for information on how your personal information will be processed. Please indicate that you give your consent to be added to our volunteer database.

I consent to being added to the Volunteer Database

Confidentiality: I understand that all matters relating to the treatment of patients are to be held by me in the strictest confidence and that no information will be divulged to any third party.

I declare that the information given on this form is accurate to the best of my knowledge and that the voluntary placement offered will be subject to the information on this form being correct.

Signed: _____ Date: _____

Privacy Notice

As part of the volunteer application and management process, we will collect certain personal data, which we will process and hold in accordance with the General Data Protection Regulation (GDPR); which came into force on 25 May 2018.

This data will include your full name, date of birth, address, email address, contact numbers, school, college or other education centre (if applicable), training record and hours of work at our hospital(s). It will also include, where supplied, your disabilities (if any), gender and ethnic background. It will include a record of your DBS and Occupational Health checks.

Please tick to indicate your consent for this data to be held and processed by us for the purpose of assessing your suitability as a volunteer, managing your volunteer experience and monitoring our volunteer population only.

Please note that identity documents, proof of right to work in the UK, references, DBS and OH check results form part of the application. We will not process your data for any other reason and will not share it with any third parties.

For information, our volunteer software stores and processes data on secure servers in Canada, a country approved by the European Commission as trusted to comply with our data protection requirements.

If your application is unsuccessful, we will hold your data for 12 months, and then destroy it. If you are successful, we will hold your data (including training and attendance records) for the duration of your time with us, plus an additional period of six years before destroying it.

Your rights

Under the General Data Protection Regulation 2018 you have a number of rights with regard to your personal data. You have the right to request from us access to and rectification or erasure of your personal data, the right to restrict processing, object to processing as well as in certain circumstances the right to data portability.

If you have provided consent for the processing of your data you have the right (in certain circumstances) to withdraw that consent at any time which will not affect the lawfulness of the processing before your consent was withdrawn.

You have the right to lodge a complaint to the Information Commissioners' Office if you believe that we have not complied with the requirements of the GDPR with regard to your personal data.

Contact details

UHCW NHS Trust is the controller and processor of data for the purposes of the GDPR.

If you have any concerns as to how your data is processed you can contact:

Information Governance Team on information.governance@uhcw.nhs.uk

Equality data collection form

UHCW NHS Trust is committed to delivering services that are fair and accessible for all of our communities. To ensure that we do not knowingly discriminate against any section of society, it is important for us to gather the following information.

All information is confidential and will be used for statistical purposes only.
You do not have to answer any of these questions, but we would be very grateful if you would.

Race (taken from the proposed 2011 census categories)	
White <input type="checkbox"/> English/ Welsh/ Scottish/ Northern Irish/ British <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Any other White background, write in:	Mixed/ multiple ethnic groups <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other mixed/multiple ethnic background, write in:
Asian/ Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background, write in:	Black/ African/ Caribbean/ Black British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Any other Black/ African/ Caribbean/ Black British, write in:
Other ethnic group <input type="checkbox"/> Arab <input type="checkbox"/> Any other ethnic group, write in:	<input type="checkbox"/> I prefer not to say
Religion/Belief	
<input type="checkbox"/> No religion <input type="checkbox"/> Christian (including Church of England, Catholic, Protestant and all other Christian denominations) <input type="checkbox"/> Buddhist <input type="checkbox"/> Agnostic <input type="checkbox"/> Sikh <input type="checkbox"/> Muslim <input type="checkbox"/> Jewish <input type="checkbox"/> Hindu <input type="checkbox"/> I prefer not to say <input type="checkbox"/> Any other religion/belief, write in:	
Disability	
<i>Do you consider yourself to have a disability, impairment or health condition?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I prefer not to say If yes, please list the type of disability or health condition you have:	
Sexual Orientation	
<input type="checkbox"/> Heterosexual <input type="checkbox"/> Gay <input type="checkbox"/> Lesbian <input type="checkbox"/> Bisexual <input type="checkbox"/> I prefer not to say	
Sex/Gender	
<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I prefer not to say <input type="checkbox"/> Please tick if you live and work permanently in a gender other than that assigned to you at birth	

Thank you for your cooperation