

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

Dear

Thank you for expressing an interest in becoming a volunteer at University Hospitals Coventry and Warwickshire NHS Trust.

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.

Your offer of voluntary help is very much appreciated and you can be assured of a warm welcome in whatever area of volunteering you choose.

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

### **What we look for in a volunteer**

Volunteering at UHCW NHS Trust can offer a great opportunity to give something back to your local community. Volunteering at the hospital should not be viewed as a work or educational placement.

Volunteering is defined as “An activity that involves spending time, unpaid, doing something that aims to benefit the environment or individuals or groups other than, or in addition to, close relatives.” (Volunteering England’s “The Compact Code of Good Practice on Volunteering”).

To be a volunteer you need to be able to commit to the role fully and ensure you are the right type of person to volunteer in a hospital environment.

Volunteers need to be:

- 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
- Able to offer a regular weekly commitment for at least **6** months.

### **Volunteer responsibilities**

Each role has a specific list of duties that the volunteer can undertake, however all volunteers must also:

- Attend the Volunteers Induction Programme (the date of which will be given to you at your informal meeting). Please note that the training programme is 9:30am – 4pm.
- Be polite, courteous and respectful to others
- Know the hospital layout and be a source of information



**We Care. We Achieve. We Innovate.**

- Direct or escort patients or visitors to their appropriate destination
- Wear the Trust volunteer ID badge appropriately
- Adhere to the volunteer code of conduct
- Promote a positive image of the hospital, staff and voluntary services
- Uphold the values of the Trust (treating other Volunteers, staff, patients and visitors in a respectful, dignified manner at all times)

If you feel you have what it takes to become a volunteer, please complete the enclosed application form, supporting information and equality data collection form and return it to the freepost address provided at the top of the form. Please note we are unable to accept your application without all sections complete.

For information on the roles we have available please read the "Volunteer Roles" information sheet overleaf.

### **What happens next?**

On receipt of your application we shall request two references (one professional and one character) regarding your suitability for voluntary work. Your references should not be from anyone related to you and should be UK based references.

Upon receipt of two references you will be contacted by either myself or my colleague Sukie Dharni to arrange an informal meeting to discuss your application further.

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
- Occupational Health Clearance
- Disclosure and Barring Service (DBS) check – formerly known as the Criminal Records Bureau.

The above will be completed during your informal meeting.

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

**Meet and Greet:** to assist in creating a friendly, welcoming and helpful environment at University Hospital, Coventry. Offer directional advice and practical assistance, as required by patients and visitors, in collaboration with other “front of house” personnel.

**Drinks Trolley:** provide a high standard of service to patients in the delivery of a beverage service. Make and serve patients beverages from a pre-stocked trolley. Ask the patients if they have any special dietary requirements. If patients request a snack (as these are sometimes on the trolley) check with a Nurse that the patient is allowed a snack.

**Mealtime Companion:** to improve the mealtime for patients within our in-patient services who have difficulty eating and drinking. Some of our patients will also benefit from company whilst eating, help with cutting food and encouragement to maintain their nutritional intake.

**Accident and Emergency:** to offer support to staff and non-medical assistance to patients accessing our emergency services. Duties include making refreshments for patients and befriending.

**Support for the Dying Companion:** to give comfort and support to dying patients, their family or carer(s) at their time of need by listening to their needs and befriending them. Full training is provided for this role.

**Compassionate Communities:** supporting patients in the last year of their life, last days of their life and their loved ones after the patient has passed away. This is a non-clinical role based in patients homes.

**Patient Partners’ Programme:** The Patient Insight and Involvement Team at University Hospitals Coventry and Warwickshire NHS Trust is recruiting to its exciting Patient Partners’ Programme. There are three Patient Partner roles within the Programme each offering a wide variety of interesting tasks. Here is a brief example of the type of tasks you could get involved with as a Patient Partner:

### **Patient Partner - Role 1:**

- Conducting patient surveys including the Friends and Family Test and other ad hoc surveys either at Trust or Specialty/Departmental level;
- Awareness raising and engaging staff with various patient experience-focused campaigns, e.g. #hellomynameis;
- Informally talking with patients on various wards/areas to discuss their experience in hospital, e.g. listen to suggestions on food and drink, cleanliness, noise levels and waiting times;
- Membership of Trust’s Patients’ Forum (*this is dependent on election*).

### **Patient Partner - Role 2:**

- Participating in improvement projects within the Trust including those managed by UHCW Improvement (UHCWi) System and the Transformation Team;
- Undertaking observational audits, including environmental, infection control, communication, information and others;
- Participating in the 15 Step Challenge and/or Observe & Act exercises;
- Verbally reporting the findings from [any] projects you have participated in which may include taking part in and/or giving presentations to Trust staff about the findings of the projects;
- Possible membership of Trust’s Patients’ Forum (*this is dependent on election*)

### **Patient Partner - Role 3:**

- Membership of Trust wide forums to provide lay perspective including Strategic Committees of the Trust
- Sitting on staff appointment panels;
- Membership of Trust’s Patients’ Forum (*dependent on election*)

**Pharmacy Runner:** To deliver medication from inpatient pharmacy to wards, departments and the satellite pharmacies completing relevant paperwork as and when required.

**Admin/Clerical:** to undertake basic clerical duties as required by department. Duties can include photocopying, filing, preparing mail shots, compiling information packs etc.

**Lay Visitor:** to help with the spiritual, pastoral and religious support of patients. Volunteers should be able to provide a reference from their own faith group.

**Art Cart Volunteer:** to take the art cart onto wards and offer patients free creative activities. This is a role that requires good social skills and the ability to work independently.

**pARTicipate Volunteer:** to bring simple art activities to patients in hospital and supporting artist led creative workshops, helping to integrate the arts programme into wards and collating feedback. This role would be carried out on a Tuesday or Thursday and primarily be ward based.

**Exhibitions Volunteer:** to support the Healing Arts Coordinator in displaying art exhibitions at University Hospital. This role requires flexible working but would predominantly be on a Friday.

**Arts Admin Volunteer:** to support the Healing Arts Coordinator with general office administration both for the visual arts programme and creative workshops. The role required ICT skills and knowledge of the Microsoft Office Suite, including Excel and Access. This role is available on Monday or Tuesday.

**Play Assistant:** to help children, young people and their family adjust to time in hospital. Provide children and young people with the opportunity to play, providing normal play activities. Enjoy your time with the children and use your skills to the best of your ability. Volunteers should be confident and outgoing to approach patients with ideas to play different activities.

**Complementary Therapists:** based in the Arden Cancer Centre, offer complementary therapy including gentle soothing massage, reflexology, aromatherapy or non-touch therapy to patients who may be undergoing treatment or pre/post treatment. Applicants should be Qualified Complementary Therapists and hold their own insurance.

**Befriending:** provide companionship to our patients to help to reduce isolation or loneliness. Chatting and listening to patients, reading to the patients or looking at books or pictures and supporting and assisting patients with ward based activities.

**Arden Centre Tea Bar / Kiosk:** serve patients, carers and staff refreshments including hot and cold drinks and confectionery, replenish stock and ensure the kiosk is kept clean and tidy. Volunteers are required to handle cash and operate a till. Training will be provided.

**Dementia Buddy:** to spend time befriending patients with Dementia carrying out activities that stimulates patients.

**Wheelchair Service:** to provide a wheelchair service to our patients and visitors where required. Transporting them in a wheelchair to the department / clinic they are attending.

**Carers Trust:** to inform family carers about support services provided by Coventry Carers' Centre. To disseminate leaflets, posters to all the departments/ Hospital wards.

**Age UK:** to help older people access the services they need through visiting them whilst they are in hospital. At the direction of the Hospital Outreach Worker the volunteers will talk to those patients who have requested help and link in to staff on the wards to identify other patients. Offer a listening ear and, where wanted, will complete the Contact and Connect form to link the patient to services and provide the patient with an information pack and any relevant leaflets on services requested.

**UHCW Charity - Administration:** to assist the hospitals' Charity with a variety of administrative tasks, including writing thank you letters to donors, uploading contact details to the database and preparing fundraising materials for events.

**UHCW Charity - Fundraising:** to assist with a variety of fundraising events, such as annual fundraising dinners, community events, challenge events and street collections.

## 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



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

### Personal Details:

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

### Emergency Contact Details:

<b>Name:</b>
<b>Relationship to you:</b>
<b>Contact telephone number:</b>

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

### How did you hear about us?

NHS Website  Voluntary Action  College / University  Volunteer  Patient Involvement Hub   
We Care Newspaper  Other  Please write:

Are you currently in further education? Yes  No

If you answered 'Yes', please tick the type of further education you are in:

6<sup>th</sup> Form  College  University

Please list the course you are studying:

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

If yes, please give details:


### Which volunteer role/s are you particularly interested in?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Meet and Greet               | <input type="checkbox"/> Drinks Trolley           | <input type="checkbox"/> Mealtime Companion                     |
| <input type="checkbox"/> Accident and Emergency       | <input type="checkbox"/> Support for the Dying    | <input type="checkbox"/> Compassionate Communities              |
| <input type="checkbox"/> Patient Partner Role 1       | <input type="checkbox"/> Patient Partner Role 2   | <input type="checkbox"/> Patient Partner Role 3                 |
| <input type="checkbox"/> Pharmacy Runner              | <input type="checkbox"/> Admin / Clerical         | <input type="checkbox"/> Lay Visitor                            |
| <input type="checkbox"/> Play Assistant               | <input type="checkbox"/> Dementia Buddy           | <input type="checkbox"/> Art cart/pARTicipate/Exhibitions/Admin |
| <input type="checkbox"/> Arden Centre Tea Bar / Kiosk | <input type="checkbox"/> Befriending              | <input type="checkbox"/> Wheelchair Collector                   |
| <input type="checkbox"/> UHCW Charity Administration  | <input type="checkbox"/> UHCW Charity Fundraising |   |
| <input type="checkbox"/> Other                        |   |   |

### Reason(s) for wanting to become a hospital volunteer

- |  |  |
|--|--|
| <input type="checkbox"/> To give something back to the community | <input type="checkbox"/> To help my local hospital                       |
| <input type="checkbox"/> As a means of meeting new people        | <input type="checkbox"/> I need such experience for educational purposes |
| <input type="checkbox"/> For a new experience                    |  |
| <input type="checkbox"/> Other reasons                           |  |

**Referees:**

Please give the names and contact details of two referees. These should be people who have known you for at least **2 years**. They must not be related to you, e.g. your Brother, Aunt, Sister-in-law, but should be someone who can tell us about you as a person e.g. your tutor, your neighbours, your current or previous employer:

Referee 1		Referee 2	
Name:		Name:	
Address:		Address:	
Tel:		Tel:	
Email:		Email:	
How does the referee know you? (e.g. manager, tutor)		How does the referee know you? (e.g. manager, tutor)	

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**

**Commitment:** We hope that you can volunteer for a long period of time and we will supply references after you have been with us for six continuous months.

**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.

**Leaving the Trust:** Volunteers are asked to inform the Voluntary Services Department if they decide to stop volunteering.

**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](mailto: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.

<b>Date of birth:</b> ___/___/___	<input type="checkbox"/> I prefer not to say
<b>Postcode:</b>	<input type="checkbox"/> I prefer not to say
<b>Race</b> (taken from the proposed 2011 census categories)	
<b>White</b>	
<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:	<input type="text"/>
<b>Mixed/ multiple ethnic groups</b>	
<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:	<input type="text"/>
<b>Asian/ Asian British</b>	
<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:	<input type="text"/>
<b>Black/ African/ Caribbean/ Black British</b>	
<input type="checkbox"/> African	
<input type="checkbox"/> Caribbean	
<input type="checkbox"/> Any other Black/ African/ Caribbean/ Black British, write in:	<input type="text"/>
<b>Other ethnic group</b>	
<input type="checkbox"/> Arab	
<input type="checkbox"/> Any other ethnic group, write in:	<input type="text"/>
<input type="checkbox"/> I prefer not to say	
<b>Language</b> What is your main language?	
<input type="checkbox"/> English	
<input type="checkbox"/> Other (including sign languages), write in:	<input type="text"/>
<input type="text"/>	

**Equality data collection form continued**

<b>How well can you speak English?</b>			
Very well <input type="checkbox"/>	Well <input type="checkbox"/>	Not well <input type="checkbox"/>	Not at all <input type="checkbox"/>
<b>Religion/belief</b>			
<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: <input style="width: 300px; height: 15px;" type="text"/>			
<b>Disability</b> Do you consider yourself to have any of the following? (Please tick all that apply)			
<input type="checkbox"/> Mental health condition <input type="checkbox"/> Learning disability <input type="checkbox"/> Speech impairment <input type="checkbox"/> Long standing illness <input type="checkbox"/> Physical impairment <input type="checkbox"/> Learning difficulty <input type="checkbox"/> Sensory impairment <input type="checkbox"/> I do not have a disability <input type="checkbox"/> Cognitive impairment <input type="checkbox"/> I prefer not to say <input type="checkbox"/> Other, please state: <input style="width: 300px; height: 15px;" type="text"/>			
<b>Sexual orientation</b>			
<input type="checkbox"/> Heterosexual <input type="checkbox"/> Gay <input type="checkbox"/> Lesbian <input type="checkbox"/> Bisexual <input type="checkbox"/> I prefer not to say			
<b>Sex/Gender</b>			
<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I prefer not to say Please tick if you live and work permanently in a gender other than that assigned at birth. <input type="checkbox"/>			
<b>Caring responsibilities</b>			
Do you currently look after a relative, neighbour or friend who is ill, disabled, frail or in need of emotional support?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, are you registered with your GP as a carer?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Thank you for your cooperation.**

Please contact the Equality and Diversity Department at [equalityanddiversity@uhcw.nhs.uk](mailto:equalityanddiversity@uhcw.nhs.uk) if you have any questions about this questionnaire.