



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

St. Luke's General Hospital Carlow / Kilkenny

Volunteer Policy

Document Reference Number	SLGH HR 001	Document Developed By	Deirdre Dunne, Hospital Volunteer Co-ordinator
Revision Number	0	Document Approved By	Anne Slattery General Manager
Approval Date	November 2016	Responsibility for Implementation	All Staff and Hospital Volunteers
Revision Date	November 2018	Responsibility for Review and Audit	Anne Slattery General Manager

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1 Policy Statement

- 1.1** St. Luke's General Hospital Carlow-Kilkenny welcomes and supports the engagement of volunteers to enhance our services to patients and visitors.

2 Purpose

2.1 The purpose of this policy is to:

- Outline the role of volunteers in the hospital.
- Outline the governance arrangements for the volunteers team.

3 Scope

- 3.1** This policy sets out a framework for the involvement of volunteers in St. Luke's General Hospital Carlow-Kilkenny, recognising the contribution of volunteers.

4 Legislation/Related Policies

N/A

5 Glossary of Terms/Definitions/Abbreviations

5.1 Volunteers

- Volunteers are defined as interested individuals who choose to contribute their time and talent to supplement and enhance the efforts of our clinical and support staff in delivering the best healthcare possible in an unpaid capacity.

Abbreviations

SLGH	St. Luke's General Hospital
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6 Roles and Responsibilities

6.1 Responsibility for complying with the policy

All hospital volunteers and staff, including undergraduate and postgraduate students, volunteers, people on voluntary work experience or placement in the hospital, agency staff or contractors, are responsible for understanding and complying with the policy.

6.2 Responsibility for ensuring compliance with the policy

6.2.1 Department Heads must:

- Ensure that all staff are aware of this policy and the importance of its full and continuous implementation.
- Make this policy available locally.
- Ensure that hospital volunteers are supported, trained and managed according to other hospital policies and guidelines as appropriate.

6.2.2 Hospital Management must ensure that:

- All hospital volunteers are fully indemnified
- All hospital volunteers operate in a safe environment
- All hospital volunteers are provided with the training, information and support as is necessary.

7 Procedure

7.1 The recruitment of Hospital volunteers

Hospital volunteers will be recruited on an ongoing basis by the Volunteer Co-ordinator and the Quality Office as follows:

- General recruitment drives will be held regularly, where necessary
- Interested volunteers will be sent an Application Pack to include (1) general information about the volunteer service, (2) application form, (3) confidentiality form and (4) Garda Vetting form.
- Interested volunteers will be asked to provide two independent references.
- The necessary documentation will be processed by the Volunteer Co-ordinator and the Quality Secretary.
- A meeting will be held with the interested volunteer to establish his/her suitability.
- All references will be followed up with a telephone call.
- Full induction will be provided for new volunteers.
- All hospital volunteers must be aged 18 years or older. Anyone interested in volunteering under that age will be considered under the Work Experience Scheme in the hospital (through the Personnel Office) and will be

provided with volunteering experience alongside an experienced, existing hospital volunteer.

7.2 Governance

- Tasks for the hospital volunteers will be outlined by the Volunteer Co-ordinator. Such tasks will be clearly defined and agreed prior to commencement.
- The hospital volunteers will report directly to the Volunteer Co-ordinator.
- The Volunteer Co-ordinator will report directly to the Executive Management Team with regard to the hospital volunteers.

7.3 Volunteer Forum

- All hospital volunteers will be part of the Volunteer Forum. This forum will facilitate two-way communication between the hospital management and staff, and the hospital volunteers.
- Minutes of all Volunteer Forum meetings will be maintained.
- All concerns/suggestions raised through the Volunteer Forum will be followed through as required.
- The Volunteer Forum will act in accordance with the Terms of Reference of the forum, as agreed.

7.4 Tasks

Hospital volunteers will engage in a range of tasks as follows, but not limited to:

- Meet and Greet Information Points throughout the hospital
- Mobile Library Service
- Hospital Play Scheme (in Paediatric Department in line with the Children In Hospital Ireland Initiative)
- Assisting patients with regard to bedside reading, mobile phones, messaging, obtaining items in shop, etc.
- Assisting at mealtimes in various wards
- Assisting the Pastoral Care Team
- Assisting staff in the event of a Major Emergency
- Assisting with audits
- Assisting with patient experience surveys.

Rosters will be drawn up and will be regularly reviewed. Hospital volunteers will outline their availability on a weekly basis on a form which will be left in the volunteer folder in the volunteer press.

If a hospital volunteer is ill or cannot come in for any reason on a scheduled day, he/she should make contact with the Volunteer Co-ordinator or Quality Secretary as soon as possible.

7.5 Identification

- Hospital volunteers will be provided with a Hospital Identification Badge, which must be worn at all times. This will also allow the volunteers to park free of charge in the staff car park.
- Hospital volunteers must wear the tabard, which clearly identifies them as volunteers, at all times while volunteering in the hospital.

7.6 Personal Property

Hospital volunteers will be advised not to bring valuables with them to the hospital. However, a locked press will be provided for their personal property.

7.7 Hospital Policies and Guidelines

Hospital volunteers must follow all hospital policies and guidelines relating to their relevant area. Volunteers must report to the Ward Dept. Manager. They must adhere to the instructions of the manager in the area in which they are based. In the event of an emergency, hospital volunteers must take direction from the managers in charge and assist patients and other staff, where possible.

Hospital volunteers should also refer to and adhere to the Dress Code for St Luke's General Hospital Carlow-Kilkenny.

8 Implementation Plan

The policy and supporting evidence will be circulated in electronic format to all heads of department in SLGH and to hospital volunteers. This policy will be forwarded to the Quality Manager for inclusion in the PPPG Index and for placement on the hospital intranet site.

It is the responsibility of all heads of department to ensure that staff within their area of responsibility are familiar with and adhere to this policy.

Ultimately, it is the responsibility of each member of staff and hospital volunteer to read and understand the contents of this policy and to agree to adhere to it.

9 Evaluation and Audit

9.1 Evaluation

This policy will be revised every two years.

9.2 Audit

The Volunteer Co-ordinator will carry out regular audits within their department to ensure compliance.

10 Revision History

Date	Review Number	Section Number	Change/s
N/A			

11 References/Bibliography

N/A

12 Appendix I PPPG Development Group Membership

Deirdre Dunne
Change Management Facilitator

Signature: Deirdre Dunne
Date: 7th November 2016

13 Appendix II Peer Review of Policy, Procedure, Protocol or Guideline

Reviewer: The purpose of this statement is to ensure that a Policy, Procedure, Protocol or Guideline (PPPG) proposed for implementation is circulated to a peer review (internal or external). You are asked to sign this form to confirm to the committee developing this Policy or Procedure or Protocol or Guideline that you have reviewed and agree the content and approve the following Policy, Procedure, Protocol or Guideline for use within the organisation:

Volunteer Policy for St. Luke's General Hospital, Carlow/Kilkenny

I acknowledge the following:

- I have been provided with a copy of the Policy, Procedure, Protocol or Guideline described above.
- I have read the Policy, Procedure, Protocol or Guideline document and agree the content
- I approve the Policy Procedure, Protocol or Guideline for implementation

Signature: Maria Horgan **Date:** 09/11/16
Maria Horgan
A/Assistant Director of Nursing

Please return this completed form to:

Deirdre Dunne
Change Management Facilitator

14 Appendix III Key Stakeholders Review of Policy, Procedure Protocol or Guideline

Reviewer: The purpose of this statement is to ensure that a Policy, Procedure, Protocol or Guideline (PPPG) proposed for implementation is circulated to Managers of Employees who have a stake in the PPPG. You are asked to sign this form to confirm to the committee developing this Policy or Procedure or Protocol or Guideline that you have reviewed and agreed the content and approve of the following Policy, Procedure, Protocol or Guideline for use within the organisation

Volunteer Policy for St Luke's General Hospital, Carlow/Kilkenny

I acknowledge the following:

- I have been provided with a copy of the Policy, Procedure, Protocol or Guideline described above.
- I have read the Policy, Procedure, Protocol or Guideline document and agree the content
- I approve the Policy Procedure, Protocol or Guideline for implementation

Signature: 
Ms. Anne Slattery
General Manager

Date: 2/11/16

Please return this completed form to:
Deirdre Dunne
Change Management Facilitator

