

St Raphael's Hospice

Meeting of the Board of Trustees

To be held at 13:00 on 2nd June 2021

TO BE PRESENT:

Trustees:

Norman McWhinney (NM) (*Chair*) **Alan Cogbill** (AC) (*Vice-Chair*) **Paul Holmes** (PH)
Sister Veronica Hagen (Sr VH) **Roderick O'Connor** (RO'C) **Sister Kathleen O'Reilly** (Sr KO'R)
Marian Norman (MN) **Joe Ryan** (JR) **Dr Joy Tweed** (JT)

In attendance:

Gail Linehan (GL) (*Joint CEO*) **Nick Stevens** (NS) (*Joint CEO*) **Carrie Chill** (CC) (*Board Advisor*)
Ed Cook (EC) (*Advisor to DoC & Finance Committee member*) **Bernard Marley** (BM) (*Fundraising & Comms Committee member*) **Sara Jane Woods** (SJW) (*Director of Income Generation*)
Rebecca Trower (RT) (*Clinical Director*) **Anna Machin** (AM) (*Clerk*)

1 - Purpose: Discussion/ Approval/ Policy/ Information

| Item | Description | Purpose ¹ | Lead | Timing |
|------|---|----------------------|------------------|-----------|
| 1. | T-Time | Discussion | Chair | 1.00-1.10 |
| 2. | Welcome and apologies for absence | - | Chair | 1.10-1.15 |
| 3. | Declarations of interest | - | Chair | |
| 4. | Minutes of Board meeting held on 24 th March 2021 & Actions List on matters arising | Approval | Chair | 1.15-1.30 |
| 5. | Committee Chair updates & meeting minutes: <ul style="list-style-type: none"> 18th May HR inc. update on Equality & Diversity 18th May Finance & Resources 12th May Fundraising & Communications 14th May Clinical Quality & Governance | Discussion | Committee Chairs | 1.30-2.00 |
| 6. | Joint CEO Report | Discussion | GL, NS | 2.00-2.30 |
| 7. | Fundraising & Communications Report | Discussion | SJW | 2.30-3.00 |
| -- | <i>Break</i> | - | - | 3.00-3.10 |
| 8. | Strategy follow up discussion focusing on next steps relating to: <ul style="list-style-type: none"> St Raphael's Hospice Strategic Communications Strategy 2021/22 Budget, Management Plan & Lottery Plans | Discussion | Chair | 3.10-4.00 |
| 9. | Governance update | Approval | Clerk | 4.00-4.10 |
| 10. | Any Other Business & Date of Next Meeting – Wednesday 21 st July 2021, 1pm | - | Chair | 4.10-4.15 |
| 11. | T-Time (trustee only session) | Discussion | Chair | 4.15-4.30 |
| - | Evidence of Excellent Practice Register | Information | - | - |
| - | Investing in Volunteers Reassessment Report | Information | - | - |

ITEM 06

Joint CEO's Report

Overview

1. The Hospice end of year accounts have been drafted (see finance report).
2. Treasury funding disbursed by HUK has been received for February (£50k) and March (£80k). No further funding is expected for 2021/22.
3. Investing in Volunteers Award attained April 2021
4. Successful re-opening of retail in April targets being met/exceeded.
5. The Donation Centre in Sutton is active and servicing large volumes of donations
6. Planning in train to support the IPU refresh beginning at the end of July.
7. The Wellbeing Centre re-opened to support patients on April 12th and the Living Well Programme launched on May 19th.

Governance and Finance

8. The first CCG contract meeting for 2021 was held on 27 April. The variation agreement to enable the contract to roll over for a further year was signed. There is a query regarding the cost of living uplift to the contract to be clarified.
9. The award paid to staff at the end of March, (£900 pro-rata for the time worked across the Covid pandemic), has been well received and the fact that there was no pay rise has passed without comment.
10. The Accounts to cover the seven months period to 31st October 2020 as per the Transfer Agreement and The Congregation of the Daughters of the Cross accounts have been finalised and show a c£350k shortfall in period.
11. The audit for the year end 31st March commences in first week of June. The accounts cover the 5 months from Independence (plus a few transactions that went through the pre-existing St Raphael's charity) and show a £1.15m surplus. Payments for the grants for February (£50k) and March (£80k) have been received from HUK and this may increase these figures.
12. The HR department continue to support data inputting to access furlough payments which have favourably supported hospice finances. There are only a small number of staff remaining on furlough.
13. The Data Security and Protection Toolkit 2021/22 to ensure organisational compliance was submitted at the end of March by the Quality and Governance Lead.

14. An internet failure on 27 April led to the phone line being down and impacted the electronic patient record (EPR) and Outlook. IT managed to facilitate some access to EPR on one computer. All appropriate action taken at the time of the incident and subsequent to it to ensure organisational functionality. It should be noted that external resources caused the Patient Administration System (PAS) to fail. Further expert support has been put in place to lower the risks associated with such system issues, particularly (as in this case) when our Head of IT is off work.
15. The hospice received 5 stars following an unannounced inspection from Kingston and Sutton Environment Regulatory Service on May 12th.
16. All infection control precautions continue to be maintained across all teams including the undertaking of a Covid Risk Assessment for assurance of fitness to return to work/volunteer.

Staffing and Recruitment

17. Furlough continues for some members of the housekeeping team who are unable to work in clinical areas related to their Covid risk assessment and health vulnerabilities. The majority of retail staff are now back at work. Adjustment to the Covid Risk Assessment acknowledging that two vaccinations have been received is facilitating staff and volunteers over 70 to return to work providing their overall score is within normal parameters.
18. Recruitment of qualified nursing staff to service the IPU continues to present a challenge. There has been successful recruitment to one Band 6 post on the IPU which will commence in June. Advertising for the two remaining posts remains live. Bank staff nurses have also been recruited and are undertaking shifts. Cover for night shifts remains problematic. The nursing team continue to provide flexible cover across all shifts which is appreciated.
19. Successful recruitment to Clinical Nurse Specialist posts- 1 x Band 7 and 1 Band 6 training post. The team are at establishment. Dates of commencement TBC.
20. In April there was successful recruitment to the two part-time roles in the Wellbeing Centre. Simon Oliver and Katie McKenna are very welcome additions to the team.
21. Ewan Lavender commenced in post as the Digital Communications Assistant at the beginning of May. He has settled in well and is making a positive contribution.
22. Recruitment for the two posts in Fundraising (Major Events/Corporate and Community Fundraising) are scheduled for late May. This completes the recruitment of the fundraising team. We are also recruiting for the vacant finance assistant post.
23. We would like to acknowledge and thank Dr Andrew Hoy who will be retiring from his 2 PAs a week at the end June. Dr Hoy has supported the medical and nursing teams since November 2016. His willingness to work flexibly, calm approach, clinical wisdom and general good humour will be missed by us all. Andrew has agreed to remain on the Bank and support the medical team.

- 24.** With our new consultant Naomi Collins joining on 5th July we will be saying farewell to our agency consultant, Dr Annalise Mathews, who has worked with and supported our clinical team since June 2019. Annelise has worked predominately with the community team and provided expert advice and support to patients and fellow community health care professionals. Her expertise has been invaluable in some very tricky clinical situations and we want to acknowledge this and thank her.

Covid - Related Matters

- 25.** The Hospice continues to maintain all infection control processes including weekly PCR testing and weekly LFD testing (as per Government Guidance May 21). There have been no recent positive tests affecting staff.
- 26.** Staff Wellbeing: We continue to monitor and support staff wellbeing across the hospice. Staff who remain in furlough are regularly contacted to keep them in touch with what is happening at the Hospice and check their wellbeing. All staff are aware of the Employee Assistance Programme (EAP) and other support services. The resilience and commitment of all staff has to be commended. The uptake of vaccination is high across all teams which is positive. Staff are updated monthly on hospice matters and communication about the refresh is undertaken every 2/3 weeks for reassurance and information. Communication and interface between various teams both on and off site has improved significantly supporting the 'One Team' approach we are proactively advocating
- 27.** The Clin 52 policy is reviewed and updated monthly to ensure hospice compliance with all Covid matters and government guidance.

Income Generation

- 28.** Seven retail shops opened on April 12th and have performed very well. The first week was particularly buoyant.
- 29.** The Retail Volunteer recruitment campaign has been very successful and there is a continued drive to recruit the large number of volunteers required to support our retail effort.
- 30.** The Donation Centre in Sutton has been receiving and managing huge volumes of donations. The centre is open 6 days a week from 10.00 and the stream of donations is constant across the day. The donation centre sorts and feeds stock to all the shops. The team of staff and volunteers must be acknowledged for the amazing job they are doing.
- 31.** The Sutton discount store was opened by the Mayor and Deputy Mayor of Sutton on Friday May 14th.
- 32.** The Income Generation team continue to engage proactively with supporters to raise income. A current example is the support by offered by a local building firm to build and service the prospective Men's Den which we aim to commence in the Autumn.

External Engagement

33. Thank you to everyone who voted for Pete Morris, in the 'Our Health Hero's' Award. Pete won the Gold award for his work in the hospice gardens and grounds alongside his team of volunteers.
34. We are forward planning events and engagement with our community as Covid restrictions ease and personal engagement reverts to a more normal mode.

Operations

35. The refurbishment work continues across the hospice with completion of replacement guttering in the courtyard garden, the windows are being refurbished and painted prior to the main planting being undertaken. New garden furniture to enable use of the courtyard garden is scheduled to arrive in June.
36. Recent connectivity issues have highlighted hospice reliance on IT. The IT team have successfully dealt with a number of complex issues and supported all teams. Support for out of hours and annual leave cover have been consolidated.
37. The IPU project team are actively supporting the preparation for the July closure and refresh of the unit.

It is gratifying to see the engagement of all our teams in taking forward our strategy of **EVE**. Their hard work in delivering **Excellence** in all aspects of the Hospice work is raising our **Visibility** across our community and our hope is that as we return to an ever more normal mode of operandi it will pay dividends with pro-active **Engagement**.

Gail and Nick - Joint CEOs

ITEM 04.2 ACTION LIST

SAINT RAPHAEL'S HOSPICE ADVISORY COMMITTEE ACTION LIST FOR JUNE 2021 MEETING

| Reference | Lead | Description | Target Date for Completion | Comments |
|------------------------|------------------------|---|------------------------------------|---|
| 24.03.21/04 | JR, NS | Ensure IT failure discussed in further detail by Finance & Resources Committee | May 2021 Committee meeting | Complete |
| 20.01.21/04 | GL, RT | Provide update on Allergy risk raised in Corporate Risk Register | | Complete |
| 24.03.21/02 | JR, NS | Follow up on plans for in-sourcing payroll to Hospice HR team | May 2021 Finance Committee meeting | Complete |
| 169/07 | GL | Incorporate customer care/conflict/complaints management training into mandatory training | | WIP Content of Mandatory Training under review. |
| 180/03 | GL | HLRO report to be signed off by NM | | |
| 23.09/10 & 20.01.21/07 | NM, AM, NS, GL, JT, JR | Take forward Board and Committee member outreach and recruitment process | Spring 2021 | Committee recruitment underway |
| 23.09/11 | NM, AC, NS, GL | Bring together schedule of Provider visits | Spring 2021 | On hold for now due to third lockdown |
| 25.11.20/04 | GL, RT | Organise Safeguarding training for Trustees | | On hold for now due to third lockdown |
| 20.01.21/03 | SJW | Develop paper for FR& Comms Committee and Board giving further detail on plans for Retail | | |
| 20.01.21/05 | GL, RT | Add 'closing the loop' as mitigating action for clinical incidents on Clinical Risk Register | | |
| 24.03.21/01 | GL, NS | Take forward discussions with Diverse Matters re timing and cost of Equality Audit, including reviewing an existing example of Audit Report | Update at May 2021 Board meeting | In progress |

ITEM 04.2 ACTION LIST

| Reference | Lead | Description | Target Date for Completion | Comments |
|-----------------------|--------|--|----------------------------|--|
| 24.03.21/03 | SJW | Prepare report to Board on plans for legacies and related communications | July 2021 Board meeting | |
| 22.07/01; 23.09/01 | NM, AM | Bring Charity Governance Code for review at future Board meeting | November 2021 | Planned for November 2021 Strategy Board meeting |

Governance Report to St Raphael's Hospice Board of Trustees

June 2021 Board meeting

1. Executive Summary

- The agenda plan has been reviewed to ensure it aligns with the Board and Committee Terms of Reference (see **Section 2** and **Appendix 1**).
- Recruitment needs for the Board and Committees have been reviewed and a proposed timeline has been put forward for Board review (see **Section 3**).

2. Terms of Reference & Agenda Plan review

Trustees approved the refreshed Terms of Reference for the Board and Committees at the March meeting, which had been updated to align with the Scheme of Delegation and Hospice's status as an independent charity. The Terms of Reference have been cross-referenced against the 2021 Agenda Plan and several additions have been suggested (see agenda items noted in **purple text** in **Appendix 1**).

Trustees are requested to consider the proposed additions to the agenda plan and any further changes.

3. Board and Committee Recruitment

The recruitment needs at Board and Committee level have been reviewed, in the context of key priorities in the EVE Strategy, and also with Heather Howell recently stepping down as Board Advisor and member of the HR and Fundraising Committees. A proposed set of priorities and timeline has been brought together and if the Board is content to endorse this approach, role descriptions and promotional materials will be brought together.

- **June –**
 - Provide induction to Bernard Marley into Fundraising Committee (initial induction pack, pre-appointment checks & Committee meeting, induction meetings)
 - Develop role description, promotional materials and outreach plan for Trustee outreach role with Marketing skill set (Board approval for role recruitment at 2nd June meeting)
 - Develop role description and promotional advert for HR Committee role (aim to conduct outreach through social media channels and local newspapers to recruit local candidate (Board approval for role recruitment at 2nd June meeting)
 - Outreach for Trustee with Marketing skill set
 - Outreach for Committee member with HR skill set
 - Plan interview process for prospective Trustee and HR Committee member
- **July –**
 - Hold interviews with prospective Trustee candidates (early July)
 - Hold interviews with prospective HR Committee candidates (early July)
 - Invite chosen HR Committee candidate to observe Trustee Board meeting (13th July)
 - Invite chosen Trustee candidate to observe Trustee Board meeting (21st July)
 - Take forward formalities of new appointments (end July)

- **August –**
 - Identify outreach organisations for Clinical Quality & Governance Committee role
 - Prepare role description for CQ&G Committee role
- **September - November –**
 - Undertake outreach for CQ&G Committee role
 - Hold interviews (early October)
 - Invite chosen candidate to observe CQ&G meeting (end October)
 - Take forward CQ&G appointment checks and on-boarding (early November)

Trustees are asked to provide feedback on the proposed timelines.

4. Other governance matters

Risk registers - Departmental risk registers are in progress and useful discussions on this topic were held during the recent cycle of Committee meetings.

Change of registered address - The change of registered address approved at the March 2021 Board meeting has been filed with relevant regulators and updated on the Hospice website and communication materials.

Declaration of interest process – Trustees are thanked for completing the annual declaration of interest process.

Trustee training - Trustees have been given access to the Training Portal and are invited to undertake core training modules.

Appendix 1: Agenda Plan



2021 Board and Committee Agenda Planner

St Raphael's Hospice

This agenda planner sets out meeting dates for 2021 for the St Raphael's Hospice Trustee Board and Committees. It is proposed that four meetings of each Committee are held during the year. All meetings will be held at St Bede's unless circumstances at the time mean that it is decided that holding the meeting virtually by Zoom would be better (it is possible that this will be the case for the January 2021 meeting). Each meeting will start with: Apologies; Approve minutes of previous meeting; Actions List & Matters arising; Declarations of interest. Each meeting will end with: Any other business; Date of next meeting. Additional agenda items arising from Board and Committee meetings will be added throughout the year.

| Meeting | Date and time | Key agenda items |
|---|--|---|
| <i>Christmas break – Finance Committee only in advance of January Board meeting</i> | | |
| Finance Committee | Wednesday 13 th January 2021 2-4pm | Standing items: Finance Report; Management Accounts & Balance Sheet (Detailed & Summary) Review of investment options 2021/22 draft budget – for review |
| Trustee Board | Wednesday 20 th January 2021 1.30-4.30pm Board meeting | Standing items: Joint CEO Report; Committee Chair updates; Governance update |
| Remuneration Committee | Wednesday 27 th January 2021 11.30am-12.30pm Committee meeting | Hospice annual pay award Implementation of National Minimum Wage Executive pay award |
| Clinical Quality & Governance Committee | Friday 26 th February 2021 10am-12pm Committee meeting | Standing items: Recruitment/ Staffing update; Clinical Risk Register; Evidence of Excellent Practice Register; Clinical Quality & Governance Report: Clinical Action Plan; Minutes of internal meetings Committee Terms of Reference Hospice Risk Register |
| Fundraising & Communications Committee | Wednesday 3 rd March 2021 2-4pm Committee meeting | Standing items: Fundraising Figures; Update on – Fundraising; Lottery; Retail; Supporter Care; Communications; HR and Staffing Matters 2021/22 Fundraising Strategy Committee Terms of Reference Hospice Risk Register |

| Meeting | Date and time | Key agenda items |
|---|--|--|
| Finance Committee | Wednesday 10 th March 2021 2-4pm Committee meeting | Standing items: (see above) 2021/22 Annual Budget – for recommendation to Board Audit Report to 31 October 2020 Committee Terms of Reference Hospice Risk Register |
| HR Committee | Tuesday 16 th March 2021 10am-12pm Committee meeting | Standing items: Volunteer Services/ Dashboard; Update on HR activity; Update on Management Plan; Equality & Diversity; Speaking Up report Committee Terms of Reference Hospice Risk Register |
| Trustee Board Strategy afternoon | Wednesday 24 th March 2021 1-4pm Board strategy meeting | Strategy discussion: <ul style="list-style-type: none"> • Equality and diversity at St Raphael’s Hospice (presentation) • Hospice strategic communications (presentation) • 2021/22 Annual Budget, Management Plan & Lottery Plan – for approval Standing items: (see above) Terms of Reference – for approval |
| Fundraising & Communications Committee | Wednesday 12 th May 2021 10am-12pm Committee meeting | Standing items: (see above) 2020/21 year-end income figures Management Plan update Departmental risk register |
| Clinical Quality & Governance Committee | Friday 14 th May 2021 10am-12pm Committee meeting | Standing items: (see above) IPU Refresh |
| HR Committee | Tuesday 18 th May 2021 10am-12pm Committee meeting | Standing items: (see above) Investing in Volunteers Report Departmental risk register Personal accident insurance |
| Finance Committee | Tuesday 18 th May 2021 2-4pm Committee meeting | Standing items: (see above) October 2020 audited balance sheet & March 2021 draft financial statements Learnings from IT outage |
| Trustee Board | Wednesday 2 nd June 2021 1-1.30pm lunch 1.30-4.30pm Board meeting | Standing items: (see above) Strategy follow up discussion |
| Clinical Quality & Governance Committee | Friday 25 th June 2021 10am-12pm Committee meeting (date may change) | Standing items: (see above) |

| Meeting | Date and time | Key agenda items |
|--|--|--|
| Fundraising & Communications Committee | Wednesday 30 th June 2021 2-4pm Committee meeting (date may change) | Standing items: (see above) Management Plan update Fundraising applications pipeline report |
| Finance Committee | Tuesday 6 th July 2021 2-4pm Committee meeting | Standing items: (see above) Update on Hospice approach to pensions |
| HR Committee | Tuesday 13 th July 2021 10am-12pm Committee meeting | Standing items: (see above) Review of staffing contracts & vaccination programme |
| Trustee Board | Wednesday 21 st July 2021 1-1.30pm lunch 1.30-4.30pm Board meeting | Standing items: Joint CEO Report; Committee Chair updates; Governance update Hospice Risk Register Financial Delegated Authorities Legacy communications |
| <i>Summer break – Finance Committee only in advance of September Board meeting</i> | | |
| Finance Committee | Wednesday 8 th September 2021 2-4pm | Standing items: (see above) 2020/21 external auditors' report 2020/21 St Raphael's Annual Report & Accounts – for recommendation to Board Corporate governance update (data protection, insurance & compliance activities) |
| Trustee Board | Wednesday 22 nd September 2021 1-1.30pm lunch 1.30-4.30pm Board meeting | Standing items: (see above) Hospice Corporate & Clinical Risk Register (mid-year review) 2020/21 external auditors' report 2020/21 St Raphael's Annual Report & Accounts – for approval Hospice Policy Framework – for approval |
| Clinical Quality & Governance Committee | Friday 29 th October 2021 10am-12pm Committee meeting | Standing items: (see above) Review of Hospice's position in local healthcare ecosystem |
| Fundraising & Communications Committee | Wednesday 3 rd November 2021 2-4pm Committee meeting | Standing items: (see above) Management Plan update Update on progress vs Fundraising Strategy |
| Finance Committee | Wednesday 10 th November 2021 2-4pm Committee meeting | Standing items: (see above) Review of financial position vs five-year plans Review of performance of external auditor |

| Meeting | Date and time | Key agenda items |
|---|---|---|
| HR Committee | Tuesday 16 th November 2021 10am-12pm Committee meeting | Standing items: (see above) High-level Hospice staffing structure & succession planning 2022/23 |
| Trustee Board – Strategy mid-year review | Wednesday 24 th November 2021 1-1.30pm lunch 1.30-4.30pm Board meeting | Standing items: (see above) Hospice toolkit (presentation) Review of financial position vs five-year plans Annual Board self-evaluation (Charity Governance Code) |
| Remuneration Committee | Tuesday 14 th December 2021 10am-12pm | Standing items: Hospice annual pay award; SMT remuneration |

| Ref No. | Recorded By | Date | EXAMPLES OF EXCELLENT PRACTICE - Description | Link to evidence | PT Id | KLOE | Key Staff | Related System |
|---------|-------------|------------|---|--|-------|------------|-------------|---------------------------|
| 2021/23 | TY | 12/02/2021 | Over the last few weeks and months ALL the housekeeping and clinical staff have shown how adaptable they are and how they are pulling together as a team. TY feels they all deserve a mention but on this occasion she would like to mention a few individuals who work on the IPU for the outstanding commitment and gigantic hearts over the last few weeks. <ul style="list-style-type: none"> •JF – JF has stepped up to run the IPU while TY off with Covid 19 recently and has been the glue that has held it together. JF has been pulled in every direction possible but she has remained professional and passionate about what we do here at the Hospice and has the patients best interest at heart and endeavours to be the voice of the patient, family and staff alike. •DM – DM is a whirlwind when it comes to practical tasks on the ward , her enthusiasm carries people and she ALWAYS has a cheery voice and a phenomenal “can do” attitude. DM has taken on the mammoth task of assisting with the deep clean of the ward area and TY cannot thank her enough for her attitude towards embracing the team work spirit. •PDP – PDP has the task of coordinating the housekeeping team and a variety of issues have been raised in the changing COVID environment over the last few weeks. PDP has kept her smile and cheery manner the whole time despite some trying situations brought to her attention. Nothing sees to be too much bother for her when asked. | TY E-mail | | C,R,E,S,W | JF, DM, PDP | Clinical |
| 2021/24 | TY | 19/02/2021 | Excellent care demonstrated by SD on Thursday. The patient in bed 9 was very frightened and SOB she did not want to be left alone. SD stayed with her for almost 3 hours until her family arrived. During this time SD was a great comfort to the patient relaxing her with gentle massage and making her feel safe and cared for. This is true palliative care. | TY E-mail | | C,R,E | SD | Clinical |
| 2021/25 | TY | 23/02/2021 | JL in IT is so responsive to the IPU – no query is too small or too much of a bother – well at least that is how he makes it seem. He is always responsive when he is on duty in the Hospice to help with our IT queries and issues. We have had an issue with the wi fi for a patient on the ward today who could not access it but he has gone away and done what he needs to do and has sorted it for her and come back and made sure she is happy with the solution (wearing the full PPE of course!) . He has even stayed longer in his day than he should to sort this out for her. | TY E-mail | | C,R | JL | IT |
| 2021/26 | TC | 24/02/2021 | Linda has visited every day this week and was present yesterday when she died. She stayed on in the house and together with the District Nurse helped lay her out and dress her in her wedding dress at the request of the husband. | | 14907 | C | LM | Clinical |
| 2021/27 | AR | 23/03/2021 | Gold awarded to Pete Morris, Facilities, in the National Health Hero's Awards. Outstanding. | Evidence of excellence c | n/a | R, E, C | PM | Facilities |
| 2021/28 | JG | 08/04/2021 | Excellent response and review of causation caused by IT system downtime between 25-30 March 2021 | N:\Care Quality Commission\Excellence in Practice\Evidence of excellence copy\SystemDowntime Line 25-30 March 2021.pdf | n/a | W,R | JG & IT | IT |
| 2021/28 | JS | 19/04/2021 | We looked after a patient who was admitted from a local prison. Our community consultant arranged a timely admission to the IPU for end of life care. The staff demonstrated compassionate and excellent care. Mediation was ordered from a local pharmacy that had been left behind on a Bank holiday Friday, the doctor on call went herself to pick up medication from the local pharmacy. The ward manager communicated with the prison team and considered information governance and Caldicott principles with regards to 'need to know' sensitive information. The nursing team and specialist social worker spent a lot of time ensuring his family were aware of the situation and organising complexities around his affairs. One of the doctors on the ward recognised how important his spirituality was to him and read to him from the bible where he had book marked important passage to him. He died shortly after this. I think this demonstrates how compassionate and caring the IPU team are, treating all patients with respect and dignity and ensuring all holistic needs are addressed to ensure a 'good' death. | Evidence of excellence copy\2021-04-19 JS Excellence recording.msg | | R, C, E, W | IPU MDT | Clinical |
| 2021/29 | RT | 20/04/2021 | A neighbouring hospice ran out of a needed injectable drug and we 'loaned' some of our stock medication to them so that their patients didn't go without and they also didn't incur a large fee for emergency ordering. This was endorsed by our clinical Pharmacist and the practice supported within policy/procedure. | | | R,C,E,W | IPU MDT | Clinical |
| 2021/30 | GL | 06/05/2021 | Investors in Volunteers Accreditation Achieved - May 2021 | | | E,W | G Toubal | Volunteers Organisational |

St Raphael's Hospice

Minutes of a Meeting of the Board of Trustees

Held at 13:00 on 24th March 2021 by conference call

Trustees:

Norman McWhinney (NM) (*Chair*) **Alan Cogbill** (AC) (*Vice-Chair*) **Paul Holmes** (PH)
Sister Veronica Hagen (Sr VH) **Roderick O'Connor** (RO'C) **Sister Kathleen O'Reilly** (Sr
Marian Norman (MN) **Joe Ryan** (JR) KO'R)
Dr Joy Tweed (JT)

In attendance:

Gail Linehan (GL) (*Joint CEO*) **Nick Stevens** (NS) (*Joint
CEO*) **Laura Briant** (LB) (*Practice
Educator - item 3*)
Natasha Broomfield-Reid (NB-R) **Kelly Channer** (KC) (*Head of
(Director, Diverse Matters - item
HR – item 3)*) **Carrie Chill** (CC) (*Board
3.1-3.4*) *Advisor*
Ed Cook (EC) (*Advisor to DoC &
Finance Committee member*) **Maura Flint** (MF) (*Practice
Educator - item 3*) **Heather Howell** (HH) (*Board
Advisor*)
Diamond Naraviene (DN) **Dr Jenny Strawson** (JS) **Rebecca Trower** (RT) (*Clinical
(Communications Officer – item 4)*) *Consultant* *Director*
Sara Jane Woods (SJW) (*Director
of Income Generation*) **Anna Machin** (AM) (*Clerk*)

PART 1: STRATEGY ITEMS

1. Welcome and apologies for absence

1.1 The Chair welcomed Trustees to the Strategy meeting.

2. Declarations of interest

2.1. There were no declarations of interest in relation to items on the meeting agenda.

3. Presentation: Equality and Diversity

3.1. Paul Holmes introduced Natasha Broomfield-Reid to the meeting, who is Director & Principal Consultant at Diverse Matters and brings a wealth of experience in fostering diversity and inclusion across a range of organisations.

3.2. Natasha Broomfield-Reid shared key points from the presentation, which was designed to provide an open forum for Trustee discussion:

- Many organisations are working to review their diversity, equality and inclusion practices, including through reviewing processes, undertaking audits, addressing discrimination and unconscious bias, and developing internal targets for equality and inclusion. Use of terminology is also important, for example the term 'BAME' is now more contested. It is important to strive for equality, but organisations are also focusing on equity as a way of ensuring a level playing field.
- There are two areas of law and guidance which are particularly applicable to St Raphael's Hospice as a charity. Firstly, the Charity Governance Code has been re-issued recently with an increased focus on equality, diversity and inclusion, for example to ensure Board meetings are accessible for all and how Boards can understand and respond to the needs and views of local communities.

- Secondly, the Equality Act also outlines the 9 Protected Characteristics, which are safeguarded in law, and sets out three 'general duties' – to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between people who share a protected characteristic and those who do not.
- There are a range of practical ways in which the Hospice can foster an inclusive culture. These include provision of staff training, reviewing policies and practices, maintaining focus on Equality, Diversity and Inclusion on the Board agenda, and undertaking Equality Audits. Diverse Matters has delivered these developmental, supportive audits for a range of charities and healthcare organisations, which involve an initial survey, interviews with key stakeholders, to then inform collation of a detailed Report and Action Plan.

3.3. Colleagues from St Raphael's Hospice reflected on the actions undertaken by the Hospice over the past year to foster inclusion. In response to the tragic incident of George Floyd's death in summer 2020, the Joint CEOs had sent an open letter to all staff to encourage reflective conversations and feedback. All staff undertake mandatory Foundation training and Managers undertake Diversity training which includes a module on unconscious bias. There is more engagement underway to reach out to local community groups and St Raphael's is part of the local Hospice LGBTQ+ South London network. In order to further this work, the Executive leadership team are aware that more equality data on staff would be beneficial and that patient data could be further analysed to understand in what ways the Hospice's patients are reflective of the local community. Tailored training could also be provided to staff in a way that is specific to their roles.

3.4. Trustees thanked Natasha Broomfield-Reid for the insightful presentation. Trustees expressed support for this work, and recommended that it would be useful to establish a baseline to understand the Hospice's current position as a newly independent organisation, and show areas of excellence and for improvement. Trustees also encouraged the team to learn from good practice in other Hospices and healthcare organisations. It was also noted that the Equality Audits can work alongside the CQC frameworks, and that there are specific 'key lines of enquiry' relating to this area.

Natasha Broomfield-Reid left the meeting.

3.5. It was agreed that the Executive team would liaise with Diverse Matters to receive a formal quote for the Equality Audit, which would likely cost in the region of £5,000. An example of an Equality Audit Report in a relevant organisation would also be requested, to ensure that this would present good value for money. The Board was also conscious of ensuring that the time commitment involved was clear and manageable for staff, when balancing priorities due to the strain on the team arising from Covid-19.

24.03.21/01(GL,NS)

4. Presentation: St Raphael's Hospice Strategic Communications Strategy

4.1. Sara Jane Woods introduced Diamond Naraviene to the group, who had been making a significant contribution to the Hospice's communications activity over recent months in order to improve the consistency and quality of communications and develop the organisation's social media presence.

4.2. Diamond Naraviene highlighted key points from the comprehensive presentation:

- The Hospice is focusing on developing both internal and external communications, with three overarching strategic objectives that are also integrated into the Hospice's five-year plan. These are to create a smoothly running communications function to support the EVE strategy; embrace digital marketing and incorporate it into the promotion of care services and fundraising activities; and raise brand awareness in Merton and Sutton, particularly in areas where the Hospice currently has little or no presence.

- In terms of internal priorities, further Digital and PR expertise will be added to the team, consistent guidelines and templates will be shared with colleagues, an Intranet platform will be launched and there will be internal staff and volunteer 'brand ambassadors'.
 - This activity will then support growing external awareness and brand recognition. A comprehensive stakeholder map has been developed, and Focus Groups can be used, which will help to develop a personalised marketing approach using communications platforms. Digital communications give the opportunity to analyse the effectiveness of marketing campaigns and the 'return on investment' of spend.
 - During 2021, the key focus will be to develop the team's structure and communications tools, preparing campaign kits and run awareness-raising activities in the local area.
- 4.3. Trustees asked about the relative priorities amongst the areas for development that had been outlined, and ways in which the team would be supported to hold sufficient capacity to deliver these ambitious plans. It was confirmed that there were new roles within the budget to add capacity to the team, and volunteer time would also be used for example through local sixth form volunteers. Funds had also already been secured from a prior Covid-19 bid to undertake Education in Care Homes outreach programmes through the Education team. Trustees also noted that this activity could connect into recruitment outreach, to use social media and LinkedIn to promote the Hospice as an employer of choice.
- 4.4. Trustees asked for further detail on the aspects of the Hospice's communications infrastructure that are out of date. Diamond Naraviene confirmed this mainly related to the speed and efficiency through which content and videos could be created and shared, and this would be a priority to address.
- 4.5. Trustees asked about the techniques that could be used to analyse the link between outreach and fundraising income. It was confirmed that digital marketing tools show where audiences are coming from and funds generated in different areas – whether lottery, donations or other areas of engagement. This is far more effective than print media and campaigns can even be adjusted whilst campaigns are underway to maximise effectiveness.
- 4.6. Trustees thanked Diamond Naraviene for the inspiring presentation, which reflected and matched the ambition held within the Hospice's wider EVE strategy, and would be key to the Visibility and Engagement aspects of these plans.

5. Presentation: 2021/22 Budget, Management Plan & Lottery Plan

- 5.1. Nick Stevens and Gail Linehan drew out key themes from the 2021/22 Management Plan:
- There are five strategic themes had been agreed to guide activity in the coming year - Embedding the excellence begun, Widening the reach, Communications, Volunteers and Data management. Each of the priorities links specifically to the overarching goals of Excellence, Visibility and Engagement (EVE).
 - Gail Linehan updated that a key aim for the 'Embedding the excellence begun' priority would be to bring each team to establishment, supported by the recent recruitment of the third Consultant post. Bringing in new colleagues will help to find fresh ideas to deliver excellent care. The Education team will refocus on training colleagues and offering support more widely in the sector, now that they have

embedded the work to respond to Covid-19. The Ward Refresh will be undertaken in August, and further work will be undertaken to improve the Hospice gardens.

- In relation to the goal of 'Widening the reach', the Hospice is mindful that after extended periods of lockdown, community members will need to be supported to re-enter real life, and the Wellbeing model will be tailored to providing this support to patients. The Hospice is keen to launch a 'Men's Den', recruit more Student Counsellors to increase capacity of psychological support team, and diversify the hours in which support is offered in order to better support those who work office hours and have suffered a bereavement. The Hospice will provide short films and videos to Care Homes to provide guidance on ways to effectively deliver care.
- To reach the 'Communications goals', as previously discussed there are new roles in the budget to support Diamond's work. The tone of voice for communications will remain tailored, responsive and sensitive. Internally there will be a nominated communications lead in each team. There is a range of community fundraising activity underway currently, for example through the Rudolph Run which was shared widely on social media, and information in The Raphaelite.
- 'Volunteers' will play a crucial part in the strategy going forwards, particularly the Hospice Neighbours programme. The Clinical Volunteers student programme will be run four times each year and explore both the clinical and operational aspects of running a Hospice. It is planned that there will be a large growth in supporter volunteers for Retail and Lottery, and an improved Volunteer Database will be vital to underpin this.
- 'Data management' will underpin all these activities, for example improvements in the Volunteer Database, link with the Fundraising database and de-duplication of contacts, and streamlining of the HR timesheet process.

5.2. Nick Stevens presented the 2021/22 budget which had been presented in the meeting papers alongside the ten-year projections. The key goal as agreed with Trustees previously is to make investment spend in coming years in key areas such as Communications and Fundraising, which will lead to increased income and therefore a steady reduction in the deficit. During the process of developing the budget, the original October 2020 plan included in the Transfer Agreement had been revisited in order to understand and communicate reasons for any changes:

- The key change is that there was a depreciation cost of £150k, but due to the arrangements made on the buildings which are still held by the Daughters of the Cross (DoC), £120k of notional rent has been added into the budget. The costs for 2021/22 are £27k higher but lower in future years and so the overall cost envelope is the same.
- The Joint CEO roles are now budgeted for a longer time period, to reflect recent conversations with the Board. The overall staff headcount is the same as the budget included in the Transfer Agreement. Covid-19 caused some delays in recruitment meaning more posts will be filled in 2021/22, and also led to certain changes in expenditure in order to be responsive to the external environment.
- There will be capital spend over summer 2021 to put in a new extractor fan system on the roof which will cost up to £65k, develop the Men's Den at a cost of £40k and also on IT and fire safety projects.
- The priority is to retain the overall cost envelope and the planned outcome, as shown on the Cash Movements and Balance Sheet graph. The level of cash at the end of the five-year period is £2m and there may be recourse to DoC in 2023 to discuss potential receipt of additional funds, from the contingency they have set aside, to bring the Hospice to the threshold recommended by the Charity Commission of 3-6 months of operating costs being held in reserve.

- 5.3. Trustees thanked Nick Stevens, Gail Linehan and the team for the detailed work that has been delivered to develop the 2021/22 Management Plan and Budget. Trustees asked how in-sourcing payroll might save the Hospice money. Nick Stevens confirmed that tracking timesheets in nursing is a complicated time-based exercise and the current payroll structure was put in place by EY in 2013. There is duplication between the work of the HR team and Buzzacott and so in-sourcing payroll would reduce the fees paid to Buzzacott. Joe Ryan would follow up with Nick Stevens to discuss this in further detail.
- 5.4. Trustees asked for further detail on the projections for Retail, noting that the projected turnover had reduced by £0.5m compared to the October 2020 plan, but with the same overall profit margin. Nick Stevens confirmed that the original plan included 10 shops but Covid-19 has created uncertainty around the wider Retail environment. It may be more prudent now to have a smaller portfolio of 15 rather than 20 shops. This reduces income and expenditure, and also lowers the cost of setting up new shops. The focus would be on ensuring higher margins, building on key learnings from the Skyline Report, and so the overall profit would be expected to remain the same.
- 5.5. Nick Stevens and Sara Jane Woods shared the summary plans for the Lottery, which is considered to be a key driver of growth. The Lottery Agency and volunteers would work together order to conduct outreach for the Lottery in the local community. A recent local survey showed that there are some residents who would not donate but would enter the Lottery, and using volunteers who could speak authentically about all of the Hospice's activity would help to sign up both new Lottery entrants and donors. Glenda Withall has proven as an excellent salesperson for the Lottery and would be supported by colleagues who could deliver the technical aspects of the Lottery.
- 5.6. Trustees formally approved the 2021/22 Management Plan and Budget.

PART 2: GOVERNANCE ITEMS

6. Minutes of Board meetings held on 21 January 2021

- 6.1. The minutes of the 21 January 2021 meeting were reviewed and approved as an accurate record of proceedings.

7. Actions List & matters arising

- 7.1. Trustees reviewed the list, noting that a range of actions had been completed since the January 2021 meeting. The remaining actions were primarily on hold due to restrictions relating to Covid-19.

8. Joint CEO Report

- 8.1. Nick Stevens updated that a further £170k has been received through DoC since the report had been written. The Hospice has now reached the forecast income position to 31st March 2021 and may now end the year ahead of budget. £100k had been estimated for the January 2021 government grant, which has now been received at a much higher amount of £303k, and further funds may be received for February and March. Trustees noted the full Report and emphasised the huge, continued commitment and work undertaken by the Joint CEOs and whole team.

9. Committee Chair's Report & meeting minutes

- 9.1. 16th March HR Committee - Paul Holmes confirmed that the Pay Award had been revisited at the meeting. Rather than put in place a differential rise between Clinical and Non-Clinical staff, it was recommended that a one-off Recognition Award is given in April 2021, but without any general pay increase. It is now becoming clear that the

NHS staff Pay Award will be 1% rather than 5%, and so the Committee were content that this Award was in keeping with other healthcare organisations. The Board formally approved the Pay Award.

- 9.2. 10th March Finance & Resources Committee – Joe Ryan updated that a key action arising from the Committee meeting had been to consider a retender of the external auditor. The communications surrounding legacies would also be considered at an upcoming Board meeting.
- 9.3. 3rd March Fundraising & Communications Committee - Rod O'Connor highlighted the huge efforts by the Fundraising team in challenging circumstances to achieve strong performance. The Committee had considered the Fundraising Strategy which included a key focus on engaging more with residents in Merton Borough.
- 9.4. 26th February Clinical Quality & Governance Committee – Alan Cogbill raised that the Committee had discussed an IT failure which it was recommended should be considered in more detail by the Finance & Resources Committee.

24.03.21/03(SJW)

24.03.21/04(JR, NS)

10. Governance update

- 10.1. Board & Committee Terms of Reference – The Board approved the Terms of Reference which had been reviewed in detail by the Committees, subject to one suggested change to the Clinical Quality & Governance Committee Terms of Reference.
- 10.2. Committee recruitment – Alan Cogbill updated on the interview that had been undertaken with Bernard Marley. The Board approved the appointment of Bernard Marley to the Fundraising & Communications Committee.
- 10.3. Registered address – the Board approved the change of registered address from Provincialate, Tite Street, London, England, SW3 4JX to St Raphael's Hospice London Road, Cheam, Sutton, SM3 9DX, to reflect the independent status of the Hospice.
- 10.4. Corporate risk register – the Board noted the update in the meeting paper, and the proposal to develop Departmental risk registers to ensure a comprehensive approach to risk management across the organisation.

11. Any Other Business

- 11.1. The date of the next meeting was confirmed as 26th May 2021.
- 11.2. There were no further items raised under Any Other Business.

The meeting ended at 4.30pm.

Signed:

Date:

ITEM 07
Communications & Fundraising Report

Aim

To update the Advisory Committee members on the fundraising activity at St Raphael's Hospice.

Recommendations

It is recommended that the Committee note the activity and developments since the last meeting.

Report Overview - Sara Jane Woods

- Legacies picked up in the last quarter meaning we ended the year in a strong position. Other Hospices have reported a similar picture and feel that it is down to the reduction in staff at solicitors holding up the notifications.

RETAIL – Sara Jane Woods

- We are still struggling to balance the return of our volunteers, the recruitment of new volunteers and the quantity of paid staff in the shops and Donation Centre (DC). 107 new people expressed an interest in volunteering in our shops and 76% have done one or more shifts. We have been delighted to welcome five new drivers which means that we can get two vans out every day of the week.
- We have developed a new way of working which maximises the income generated from our donations. All shops only accept two carrier bags from each donor a day. They are encouraged to take any other donations to the DC in Sutton where it is easy to unload and donate in quantity.
- In the DC Gift Aid is maximised and we sort all items, sending them to the shops where they will get the best price. Rags and books are centrally sorted meaning that we can command a slightly better price and they are not blocking up the back rooms of stores. Shops are banded and items are only on the shop floor for 14 days or less. Unsold stock is in the first instance moved to another store and finally ends up in a clearance shop before being ragged. We reopened Sutton as the first of our Clearance stores on Friday 14th May, it has proved very popular and successful.
- Two part time assistant managers have resigned in the last four weeks. One because they no longer felt the job was for them and the other was unable to afford doggy day care following their partners return to the office. This has compounded staffing rotas. We are currently recruiting students to the bank to fill the gaps hoping things will be less pressured by September. At the same time, we are trying to settle staff into permanent positions.
- We are currently advertising for a second Area Manager and hope to recruit shortly while we still have support from Skyline.

- The Fundraising Team and Supporter Care are very busy with preparation for the Lavender Walk and appeal.
- Corporate fundraising is doing really well building strong relationships and being creative in applications for Charity of the Year.

DONOR DEVELOPMENT - Emily Nicholls

Events

- **Royal Parks Half Marathon** – Virtual team of 6 raised £5,191 in April.
- **Lavender Walk** – Mayfield Lavender Farm have donated 1000 packets of lavender flower heads to be sent to Donors engaging with our In Memory appeal. These are being sent in the post alongside a recipe card for Lavender Shortbread Biscuits. 49 people have signed up to the walk so far, mostly choosing to take part in the live event rather than virtual.
- **Legacy Reception** – Lunch and tour at Denbies Vineyard will be organised for 29th September. Supporters will be invited to attend for free with an expectation that they will find out more about St Raphael's, the importance of legacies for our organisation and how they can pledge their support in their Will. A further reception will be booked at Cannizzaro in Wimbledon for May 2022 to coincide with their Azaleas blooming.
- **Special Events Manager** – We are recruiting for this new role to develop the programme of high-profile events to increase visibility and income. They will research and put in place a strategy for potential future mass participation event and major donor/corporate ball/auction.
- **Ultra-Series Challenge Events** – A group of hospice nurses and ex-nurses plus other external supporters have signed up to take on the Thames Bridges Walk, London to Brighton and Snowdon Trek.

Community

- **Hamper Raffles** – Easter hampers raised £1,500 with very minimal cost as all contents were donated.
- **Fundraising Groups** – 3 key individuals have been highlighted who may be able to develop a fundraising group. These include our high-net worth group, a digital fundraising group and a golf society.
- **Fundraising Group Handbook** – the content is complete and ready for editing. A website area is also being developed. On target for a roll out in July 2021.
- **Groups and Associations** – A list of local G&As has been produced and contact information updated on RE. A new quarterly 1-page newsletter has been sent out with updates about the Hospice and an ask to either volunteer or invite us along to deliver a talk.

- **Lavender Bucket Collections** – 3 venues are booked including Centre Court Wimbledon, ASDA Sutton and London Victoria station. We are finding that many are not quite ready to host us in June so some collections will roll into July this year.
- **Fundraising Groups Manager** - We are recruiting for this new role to manage and expand our fundraising groups from 8 to 23 in the next 4 years.

Corporate

- **Make Your Will Fortnight** – The 2021 campaign ran from 10th – 23rd May. Over 80 enquiries were received but feedback from solicitors say that appointments booked are lower than previous years. This could be because we ran a later campaign in Sept 2020 due to COVID. Donations could take 2-3months to be received by the fundraising office.
- **I'm A Director Get Me Out of Here** – This corporate event was due to take place in Autumn but sadly we have been let down by 3 event companies due to COVID. Therefore, we plan to run the event ourselves but will need more time to ensure that it runs smoothly. We have postponed it to April 2022. However, we continue to talk to companies about it who seem to be keen to get involved.
- **Corporate Thank You / Awards Night** – Planning to run a Corporate Awards night in St Bede's in September to thank and recognise the wonderful businesses that have supported us through COVID as well as an opportunity to invite potential new corporate supporters. The event will include a champagne reception, meal, networking opportunities, presentations about our work and awards.
- **Sutton United FC** – We are one of 4 charity partners for SUFC and were able to deliver a presentation to their business club on 24th May. Excitingly this was the day after the club won their final match to be promoted to League 2! We are looking to do more work with them and increase visibility of the hospice through this avenue.
- **Nurses Day** – To celebrate International Nurses day the team worked alongside the Education Team to deliver a day that made our nurses feel special. Local companies (many we had never worked with before) donated gifts such as a balloon arch, flower wall, cupcakes, sandwiches and treats. All sourced through a LinkedIn post on Emma's personal account.
- **Octopus Energy Partnership Application** – We submitted a last minute application to Octopus Energy to become their charity partner over the next 3 years (a £45k a year partnership). Emma worked hard to submit an application in a very short timeframe. She went above and beyond by asking staff to contribute to the question 'if your organisation was an animal, what would it be and why?'. We received many amazing responses which can now be used in further comms. She also filmed an emoji video of an octopus which she sent alongside the application and to individuals on LinkedIn to help us stand out. Although she received a really positive response we were unsuccessful this time. However, this

will have been a very good experience of which we hope to do more of in line with our strategy.

- **Men's Den** – Jamie Lenny of AJ Build, who upgraded the Capitol House kitchen, has agreed to construct a new Men's Den including ground works, installation of electric/plumbing, a kitchen and bathroom. He will be doing this free of charge and will be our first major corporate partner of this scale.

Trusts

- **IPU Refurb** – £17,591 has been received so far from 6 funders.
- **Unrestricted** – Grant for £10,000 from Sir Albert Hunt received of unrestricted funds.
- **Bariatric Room** – St James' Place Wealth Management have now re-opened their large grants programme and our contact through BNI will be supporting an application for our bariatric room.
- **Education Room Equipment** – Bids are out for wall-mounted computers and a training couch for the new education and training room. We hope to receive funds by July.
- **Garden Appeal** – We continue to work closely with Salvia Trust Fundraising to develop a strategy for a third (£100,000) of the garden appeal funding to be received through trusts and foundations.

SUPPORTER CARE - Lucy Ribaldo

- Supporter Care is now back to a full team, working both in the office and from home. We continue to be very busy receiving phone calls and emails in response to the easing of lockdown and of course, with the different events and appeals we have.
Mainly processing, banking and thanking all donations received for the Crocus Appeal, Easter Hampers, Make Your Will Fortnight, Challenges, Events and the In Memory, general donations and sponsorships, including JustGiving and Virgin Giving pages.
- Undertaken data cleansing project in preparation for our Lavender Mail out and have implemented changes to how we record and store supporter's data.
To date we have processed 608 donations totalling £41,374 from online, postal and over the phone sources, with all personalised Lavender markers written and posted along with Lavender Seeds and a recipe card for Lavender Shortbread.
- We are also working alongside Finance on a new reporting process which will enable finance to reconcile against our Raisers Edge system. Our Database Manager is building new reports and assisting with writing new processes and guides for the team to use.

- The Database Manager is in the process of re-registering with HMRC to enable him to make Gift Aid claims under our new charity number, the forms have been sent and we are just waiting HMRC's confirmation.
- We are still sorting through historic sponsorship forms and preparing them for gift aid claim.

LOTTERY - Glenda Withall

- The start of the new financial has been steady a * **TOTAL** of 74 new members – 105 entries
- There are a couple of Campaigns running along side the Spring Draw 2021. The Spring Raphaelite 9 members – 11 entries.
- The 20 Week campaign has been very popular and it has been included again in the Spring Raffle 59 members – 59 entries.
- Gift voucher leaflets have been included in the Lavender Appeal mailing and so far, I have had 12 supporters purchase a Gift Voucher – Total income £540.
- * **All lottery figures are included in the total in the first paragraph.**

SPRING BUMPER DRAW

- The Spring bumper draw takes place on 18th June 2021.
- Once again, the Bumper Draw admin is being done inhouse to save on costs.
- The Prize structure is the same as previous years with a 1st Prize of £3,000 and 18 other cash prizes.
- I have not got a total so far to date as I have been inundated but I would say an approximate figure £16,000 of which this includes draw tickets, draw donations and 20 Week lottery.

COMMUNICATIONS - Diamond Naraviene

Branding/Merchandise

- Living Well Programme - promotional pens ordered and delivered
- Supporter backpack flags and banners are being designed

Campaigns

- **Living Well Programme**
A new look has been developed, it focuses on a specific target audience and highlights the benefits of the programme. The programme was promoted online, on radio and in print.

➤ **Make you Will Fortnight**

The campaign has generated great response through a well-planned and targeted multi-channel campaign to include adverts in print, paid online exposure, radio ads and revision of the webpage which helped to streamline the enquiry process.

➤ **Lavender Appeal/Walk**

Both the appeal and the walk are being currently promoted online and in print, as well as on air. The aim is to engage with people, who have suffered loss either with us or outside the Hospice.

➤ **Hospice Awareness in the Borough of Merton**

A full-page ad has been secured with [My Merton](#) magazine, the readership of which is 80,000. The magazine is produced by the Council and contains well selected resident-conscious information. The ad has been designed as an advertorial and talks about the Living Well Programme, what the Hospice does and how community can help us through volunteering.

Digital Marketing

- Ewan Lavender joined our Communications Team as a Digital Communications Assistant.
- Social media ambassadors' implementation plan was introduced and explained at the Communications Strategy Meeting.
- Weekly social media master schedule is being developed.
- Hootsuite, a platform for managing social media channels, is being tested. It will enable brand ambassadors to schedule and review posts through one platform avoiding overlap in their posting activity.
- Social media posts increased from three times a week to daily engagement.
- Videos featuring our nurses were taken during the International Nurses' Day.
- Slide show for the launch event of our Living Well Programme produced.
- Hospice photo pool is being re-arranged, a professional photographer is due to be recruited and a regular refresh of photos to be negotiated.

Collateral

- In support of Education Team, A1 posters were designed in-house to include COVID-149 reflection, hospice values and framework of behaviours. Values and behaviours are going to be framed and displayed across all hospice sites.

- To support the launch of our Living Well Programme the following items were designed and printed: A4 poster, DL leaflet, A6 attention-grabbing card, Wellbeing Centre business cards, rail banner and roller banners.
- Hospice Neighbours leaflet is under revision.
- 'Thinking of you' cards to celebrate Volunteers Week have been designed in-house and are going to be printed professionally.
- Diary 2022 content is being revised.
- **News/Press Releases:** Living Well Programme press release was published in Sutton Guardian (online); Sheila Payne did a 6-minute interview with Radio Jackie.

VOLUNTEERING - Lorraine Hunt

- We launched our Retail Volunteer Campaign on 10/3/2021. Creating a campaign page on our website with an online application form linked to a related email. We used posters in shop windows, Radio, Social Media and a press release to promote and the Sutton Volunteer Centre did a big push on their own social media platforms.
- To date 107 New volunteers have expressed interest with 95% applying online. 76% of the new recruits have completed one or more shifts, volunteering in the shops, The Donation Centre and driving.
- We are now in the process of tracking all of the volunteers who have decided to continue on a regular basis, we estimate around 50% will convert to permanent volunteers.
- We have 114 existing shop volunteers who were all sent the revised COVID-19 risk assessment form. To date we have received 93 forms and 47 volunteers have returned to the shops. The remaining volunteers who have returned their form are either waiting for their preferred shop to reopen or receive their 2nd Vaccination before they return. 14 More volunteers have decided not to continue and we have 2 volunteers who are high risk and are unable to return at this time.
- Volunteers Week is 1st -7th June, we will be sending all existing volunteers a card. We will also be sending the same card to all the volunteers who have joined throughout the campaign. We are in the process of planning an event in the Wellbeing Centre, during Volunteers Week, for all our volunteers who are to receive a long service award this year.

St Raphael's Hospice
Minutes of a Meeting of the Finance & Resources Committee
Held using Zoom Video Conferencing
At 14:00 on Tuesday 18th May 2021

Members: Joe Ryan (JR - Chair)
 Alan Cogbill (AC)
 Ed Cook (EC)
 Paul Holmes (PH)
 Sr Kathleen O'Reilly (KO'R)

In attendance: Gail Linehan (Joint CEO – GL)
 Nick Stevens (Joint CEO – NS)
 John Groom (IT & Facilities Manager – JG)
 Neena Vadgama (Finance Manager – NV)
 Anna Machin (Clerk – AM)

Actions arising

| Agenda item | Action | Responsible | Timeline | Ref. |
|----------------------|--|--------------------|-----------------|-------------|
| 2. Review of minutes | Bring together departmental Finance Risk Register and share initial draft with Committee Chair | NS, NV, JR | July meeting | 18.05.21/01 |

The meeting commenced at 2.00pm.

1. Welcome, apologies for absence and declarations of interest

Committee members were welcomed to the meeting. There were no apologies sent to the meeting. There were no declarations of interest in relation to items on the meeting agenda.

2. Review of minutes from 10th March 2021 Committee meeting

The minutes of the previous meeting were reviewed and approved as an accurate record of proceedings.

Committee members asked for an update on the proposed plan to bring payroll in-house. Nick Stevens confirmed that Buzzacott are currently paid £10k per annum to deliver payroll services, however the HR team have identified duplication of activity. HR will streamline the process by bringing in-house and move away from the unwieldy manual processes previously set up by EY, which also recently led to an error in overtime payments. A software package from BrightPay will cost £1k per annum and HR have piloted the system and worked with the finance and IT teams to develop a rigorous process. The process will be run alongside Buzzacott initially, who are on three months' notice for this aspect of their service. In follow up to the discussion at the March meeting, the Chair suggested that a departmental Finance Risk Register be brought together. This would include a risk relating to the differential between NHS and non-NHS pensions. Nick Stevens confirmed that St Raphael's contributes 3% and employees 5%, however the NHS pension requires a 14.5% employer contribution.

3. Actions List and update on matters arising

The Committee reviewed the actions arising from the previous meeting:

- Ensure legacies strategy discussed at upcoming Board meeting – this has been placed on the agenda for the July Board meeting.
- Bring together detailed proposal on Fundraising Database spend – a verbal update would be given as item 5.
- Communicate recommendation to keep reserve funds in NatWest at upcoming Board meeting – the Trustees had been updated at the March Board meeting.
- Oversee external audit review and possible tender for 2021/22 accounts – this would be placed on the 6th July meeting agenda.
- Update Terms of Reference and submit to Board for approval – the Board had given approval at the March Board meeting.

4. 2020/21 Year to Date Finance Report inc. October 2020 audited Balance Sheets, March 2021 draft financial statements, Management Accounts (Detailed & Summary), Balance Sheet & Cash Movements

4.1. Audit to 31st October 2020 – Nick Stevens updated on the process with Buzzacott which had been used to develop a balance sheet for use in both the Daughters of the Cross (DoC) annual accounts and the Hospice Transfer Agreement. The Buzzacott team had used the opportunity to audit the transactions to 31st October through extensive transactional analysis, to streamline time spent during the upcoming audit process. Ed Cook confirmed that the DoC were content with the process that had been followed. The financial position to 31st October 2020 showed a shortfall of £347k. The Committee approved the letter from Buzzacott for signature.

4.2. March 2021 draft financial statements – Nick Stevens confirmed that the audit process will commence in June, with the timetable set around staff availability and Board deadlines. The financial statements contain 12 months of activity, with a small number of transactions to 31st October 2020 at which point the staff and assets were transferred to the Hospice. Further work will be undertaken to split out designated and restricted funds, and reflect the assets, liabilities and gift from DoC in the balance sheet, based upon advice from the external auditors. The Committee noted the letter from Buzzacott.

The headline figures show a £1.1m surplus for the five-month period from 1st November, primarily due to Covid-19 grants (£1.4m) and legacies (£1.9m) received later in the year. The auditors have confirmed that grants for Covid-19 must be treated as restricted income and will be offset in the accounts by charitable expenditure. The net 12-month position is a surplus of £730k, and the drawdown of £280k from DoC funds has been made. This drawdown was reflected in the financial figures shared with the CCG and Hospice UK.

A further government grant of £50k for February and £80k for March £80k has recently been confirmed and will be added in to the figures. £1.22m has been received in fundraised income, down only slightly on the prior year's figure of £1.24m which is a testament to the generosity of donors and work undertaken by the Fundraising team. Lottery income remained constant, and the main change was Retail income sitting at £200k rather than the £1.2m budgeted.

The Committee expressed gratitude for the £1.3m legacy income received in February and March, and asked whether this would change the Hospice's forward-looking projections on legacies. Nick Stevens confirmed that the average income for the past four years had been £1.6m. However due to the uncertainty on the pipeline, the finance team would not suggest increasing projected income. The confidence level for actual receipt of the two large outstanding legacies has been set at 85% of the quantum notified. This assumption will be discussed with the auditors.

The Committee asked for an update on the reopening of charity shops. There has been a gradual reopening of seven shops, and high levels of donations received which are being held at the Donation Station store in Sutton. This space provided on an in-kind basis by CarpetRight is on 28 days' notice and additional storage facilities would be required.

Based on the strong year-financial financial position, the Committee was asked to note that some items that had been capitalised, but which had cost below the policy threshold of £5k, would be written off to the SOFA at a cost of £70k. £20k in accrued holiday pay would be carried over to 2021/22 and Long Service Awards had been estimated at a cost of £63k. It was planned to pass the lease of one charity shop to a new lessee who unfortunately pulled out and so the £70k lease has been written off however the Hospice will endeavour to find an organisation to take over this space.

The Hospice asked how St Raphael's year-end position compared to other Hospices. Nick Stevens stated that, anecdotally, several Hospices had ended the year with a small surplus due to the Treasury/ Hospice UK grants. Going forwards there is no further guarantee of Covid-19 recovery funding so Hospices will need to be more self-sufficient. However Hospice UK is leading work to liaise with Clinical Commissioning Groups to ensure momentum is maintained with the progress made in perceiving Hospices to be a key part of local healthcare ecosystems.

4.3. 2021/22 year-to-date – a legacy of £150k was received in April and so the income target was outperformed by £120k but other budget lines are in line with expectations. A vacancy on the Finance team is being filled through upcoming interviews.

4.4. Balance sheet & cash movements – cash is sitting at £6.6m and once legacies are received this is forecast to rise to £7m. Thereafter the projections show that cash will fall during the year as part of the strategic plan to invest in key staffing areas such as the fundraising team, and cash at the end of the financial year is estimated to be £1m lower.

4.5. Financial targets – the Committee noted the information provided on progress against financial targets set out in the Transfer Agreement. The Hospice has experienced a £2m improvement compared to the target set in October 2020 due to higher than expected donor income, legacies and government grants. The Kent variant of Covid-19 had not yet caused disruption and further lockdowns in October 2020, which explains why the Retail projections had not been achieved. The targets for future years included an assumption on the total number of shop leases as a KPI, but the balance of income plans had shifted slightly with a greater focus on profitability of existing shops and growth of the Lottery.

The Committee recognised the significant improvement in financial position compared to initial expectations at the outset of the financial year based on concerns around the impact of Covid-19. Funds will continue to be spent wisely and strategically for benefit of Hospice patients and the community.

4.6. IT and Facilities – John Groom updated on progress made since the last Committee meeting, including setting up two-factor authentication on Office365, purchasing network switches, improving web filtering software and the IT asset database model. The VoIP system will be upgraded which will allow integration between the Hospice site and Capitol House. The IPU refurbishment is booked for August so that Hospice will close the ward but continue Community services. It has not been possible to move patients to Spire Hospital or nursing homes, however patients will be offered to go to Royal Trinity or St Christopher's Hospices, or receive care at home. Admissions will be scaled down from July and Gail Linehan gave assurance that there will be clear communications to patients and families. The time will be used to instal new electrics, ventilation and flooring and upgrade the lighting and digital provision for patients and their visitors. A corporate donor will be installing the Men's Den free of charge. The Committee advised that materials for the refurbishment should be procured in good time as there have been shortages due to large numbers of people undertaking home improvements.

5. Proposed Fundraising Database spend

John Groom confirmed that the upgrade to Raiser's Edge had been reviewed from an IT perspective. The cloud software is very dynamic and offers more automated reporting which will reduce staff time spent on analysis. The budget of £100k was set to ensure that the implementation could be done to the highest standard. Quotes for the software implementation amount to around £20k with an annual license which is £5k more than the Hospice currently spends. There will be additional costs for data cleansing and training, though it is not expected to approach the level set aside.

6. Learnings from PAS IT Failure

John Groom shared the reasons for the IT failure and that server access should have been given directly to colleagues. The data caching has now been corrected and will be tested during the IPU refresh. A 24-hour support service has been bought in for a one-year period to ensure robust cover.

7. Any Other Business and Dates of future meetings

There were no items raised under Any Other Business. Committee members noted the dates for future meetings:

- Tuesday 6th July 2021, 2-4pm
- Wednesday 8th September 2021, 2-4pm
- Wednesday 10th November 2021, 2-4pm

The meeting ended at 4pm

Approved.....

Date.....

St Raphael's Hospice
Meeting of the HR Committee
Held using Zoom Video Conferencing
At 10:00am on Tuesday 18th May 2021

Members: Paul Holmes (PH - Chair)
Marian Norman (MN - Trustee)

In attendance: Kelly Channer (KC – Head of HR)
Gail Linehan (GL – Joint CEO)
Nick Stevens (NS – Joint CEO)
Ginny Toubal (GT – Volunteer Services Manager – items 1-2)
Anna Machin (Clerk – AM)

Actions arising

| Agenda item | Action | Responsible | Timeline | Ref. |
|---------------------------|---|--------------------|------------------------|-------------|
| 2. Volunteer Update | Include Investing in Volunteers Report in Board paper pack | Anna Machin | June Board meeting | 18.05.21/01 |
| 5. Update on HR activity | Prepare written HR update to next meeting | Kelly Channer | July Committee meeting | 18.05.21/02 |
| 6. Equality and diversity | Embed recognition of gender fluidity into draft questions on gender in staff survey | Kelly Channer | July Committee meeting | 18.05.21/03 |
| | Share update on equality benchmarking process | Gail Linehan | June Board meeting | 18.05.21/04 |
| | Take forward discussion on Board diversity with Board Chair | Paul Holmes | June 2021 | 18.05.21/05 |
| | Arrange staff evaluation form for equality training | Kelly Channer | June & July 2021 | 18.05.21/06 |
| 8.1. HR Risk Register | Update HR risk register with additional risks and scoring | Kelly Channer | July Committee meeting | 18.05.21/07 |
| 8.2. Insurance | Share additional information requested by Committee on insurance arrangements by email for approval | Nick Stevens | June 2021 | 18.05.21/08 |

1. Welcome, apologies for absence and declarations of interest

Committee members were welcomed to the meeting. There were no apologies sent to the meeting. There were no declarations of interest in relation to items on the meeting agenda.

It was confirmed that Heather Howell had stepped down from the role of Board Advisor and HR Committee member. The Committee wished to record their thanks to Heather for many years of committed service to the Hospice. The meeting was confirmed as quorate.

2. Volunteer Update & Volunteer Services Dashboard

Ginny Toubal confirmed that reassessment process for the Investing in Volunteers award had been successful. Whilst the Steering Group had initially met in July 2019, the pandemic and move to virtual inspection had delayed the timelines. There had been a rigorous process with 11% of volunteers and 11 staff interviewed. The assessor had noted that the team were well organised and that many volunteers expressed passion for their roles and the Hospice's caring ethos. Volunteers noted the recent improvements in innovation, communication and procedures. A new Volunteer Policy was brought together on the recommendation of the assessor.

Committee members expressed the significant achievement to receive the award, and requested that the Reassessment Report be shared with the Board at the upcoming meeting. The Committee asked how the new Policy had been developed. It was confirmed that the existing Speaking Up policy had a staff-facing emphasis, and so this bespoke Policy had been brought together for use with volunteers. It draws from good practice in other sector policies.

Ginny Toubal updated that the volunteer recruitment campaign had gone well and had coincided with the closure of a local Covid-19 vaccination centre closing meaning that some volunteers moved to sign up for the Hospice. Volunteers returning to roles are going through comprehensive induction. The charity shops are gradually reopening, with strong turnover levels so far. 35 of the one-off volunteers have chosen to continue in role but outreach and campaigns will continue to meet the Hospice's needs in terms of volunteer time. . Volunteer hours continue to be tracked closely, and the 2020/21 figures show the impact of the pandemic with Events volunteers at 10% and Retail at 20% of usual levels.

3. Review of minutes from 16th March 2021 HR Committee meeting

The minutes of the previous meeting were reviewed and approved as an accurate record of proceedings.

4. Actions List and update on matters arising

The Committee reviewed the actions arising from the previous meeting:

- Take forward recommendation of 'recognition award' to the Board – this had been approved by the Board at the March meeting and staff had received the award as part of the March salary run. The approach to the annual leave allowance has been well received.
- Develop staff survey questions – these would be brought to the July Committee meeting.
- Review Equality & Diversity policy and training based on Trustee meeting feedback – an update would be provided under the Equality and diversity agenda item.
- Develop HR-specific risk register – this was included in the meeting agenda.
- Provide update on annual leave allowances – this item had been placed on the November agenda.

5. Update on HR Activity and Management Plan & Staff survey questions

Kelly Channer updated that the team had been busy supporting recruitment exercises, including recruiting to two CNS and one Band 6 posts. There are several upcoming interviews for Healthcare Assistants and roles on the Fundraising team. The Hospice aims to grow the number of Bank staff to support Housekeeping and Fundraising activity.

The Hospice is looking to bring payroll in-house using the BrightPay system, and a colleague recently passed the Payroll Diploma qualification. The planning process has been rigorous and several other Hospices were consulted to learn from their experience.

The Hospice has concluded medical dismissal process and is waiting to hear whether this will progress through the Conciliation Service.

The Committee thanked Kelly Channer for the team's continued work during this busy period. It was agreed that a written HR report would be provided for future meetings to capture the extent of work undertaken by the team.

Gail Linehan updated on staff wellbeing, confirming that the intensity brought by Covid-19 had been lessening in line with the number of cases decreasing. Staff moral is generally good and staff absence levels are within normal limits. Staff returning from furlough are being supported and given training for example on PPE, with some making a phased return.

Nick Stevens confirmed that staff had been grateful to receive the recognition award. There had not been negative feedback that there had not been a year-on-year pay increase, with staff understanding the wider financial climate that the Hospice is operating in.

6. Equality and diversity

The Committee noted the Policy which had been updated to include further information on inclusion. Data on staff would be collected through the staff survey and it was suggested that recognition of gender fluidity would be embedded into the questions on gender.

Gail Linehan updated that following discussion of a possible Equality Audit at the March Board meeting, a contact at St Mary's Hospice Birmingham had been identified. This Hospice is in a similar position of wanting to better represent local community in Board, staff and patients. Based on the discussion and feedback from Trustees, it has been decided that the NHS Equality Tool will be adapted for the Hospice's use as an internal benchmarking exercise. The results would be used to consider whether to progress with a full Equality Audit. It was agreed that this update would be shared at the June Board meeting.

Gail Linehan shared that one of the key strategies adopted by St Mary's Hospice had been a decision not to interview for Board-level roles until 40% of applicants came from non-White British backgrounds. The Chair would take forward a discussion with the Board Chair on diversity and share this example of good practice.

Gail Linehan confirmed that a meeting was planned with local faith leaders in September. Two days of staff training in June and July would focus on equality and diversity. The Committee suggested that staff should be asked to complete an evaluation form following this training in order to receive feedback and insights from colleagues.

7. Speaking Up

There were no concerns raised under the Speaking Up Policy since the last HR Committee.

8. Governance items

8.1. Risk register - the Committee noted the headline risks outlined in the meeting paper, and agreed that this was a comprehensive list of strategic HR risks. It was suggested that based on the meeting discussion, an additional risk could be added relating to

implementation of the payroll system and related authorisation controls. A risk would also be added relating to the differential between the Hospice pay levels compared to the NHS. The Committee also noted that the Hospice financial plans were based on Hospice pension levels, but that further staff joining with an NHS pension would add additional cost pressures to the budget. Morale of existing staff may also be affected due to awareness of the differential between pensions levels, and so the pension differential would also be added as a risk. It was agreed that the updated HR Risk Register would be brought to the next meeting with scoring by Impact and Likelihood.

8.2. Personal accident insurance proposal – Nick Stevens updated that the Hospice holds personal accident insurance, and in the event of staff injury on- or off-site funds would be received to the Hospice towards the cost of putting in place reasonable adjustments. The Hospice team would recommend that in the event of this funding being received, the funds would be split between the Hospice and the member of staff in question. This would contribute to the Hospice’s overall employee value proposition.

The Committee gave in principle approval subject to receipt of further information to be circulated by correspondence relating to (a) the total annual cost of the insurance; (b) the proposed split of funds between the Hospice and staff member; and (c) integration of the approach into the relevant Hospice Policy, for example Sickness Absence. The Committee also suggested that HR advice could be sought to confirm that it would be in line with the Hospice’s charitable purpose to pass a portion of the insurance funds to individual staff members.

9. Any Other Business and Dates of future meetings

There were no items raised under Any Other Business. Committee members noted the dates for future meetings:

- Tuesday 13th July 2021, 10am-12pm
- Tuesday 16th November 2021, 10am-12pm
- Remuneration Committee – Tuesday 14th December 2021, 10am-12pm

Notwithstanding any change to government guidance, Hospice Board and Committee meetings would be held in person from 21st June onwards.

The meeting ended at 11.15am.

Approved.....

Date.....

St Raphael's Hospice
Minutes of a Meeting of the Fundraising & Communications Committee
Held using Zoom Video Conferencing
At 10:00 on Wednesday 12th May 2021

Members: Mr Roderick O'Connor – Committee Chair (RO'C)
Bernard Marley (BM – Co-opted Committee Member)
Marian Norman (MN - Trustee)

In attendance: Gail Linehan – Joint CEO (GL)
Emily Nicholls – Head of Donor Development (EN)
Sara Jane Woods – Director of Income Generation (SJW)
Anna Machin – Clerk (AM)

Actions arising

| Agenda item | Action | Responsible | Timeline | Ref. |
|--------------------|--|--------------------|-------------------------------|-------------|
| 6. Risk register | Develop high-level risks into departmental risk register | Sara Jane Woods | 30 th June meeting | 12.05.21/01 |

1. Welcomes, apologies for absence and declarations of interest

Apologies were received and accepted by Nick Stevens (Joint CEO) and Rod O'Connor. Marian Norman took the Chair. The meeting was confirmed as quorate. The Chair welcomed Bernard Marley to the meeting following his recent appointment as a Committee member by the Board.

The Committee also wished to record their sincere thanks to Heather Howell who had stepped down as Board advisor, for her significant contribution and wise counsel over many years.

There were no declarations of interest in relation to items on the meeting agenda.

2. Review of minutes from 3rd March 2021 Committee meeting

The minutes of the 3rd March 2021 meeting were reviewed and approved as an accurate record of proceedings.

3. Actions List and update on matters arising

Committee members reviewed the matters arising:

- Share Fundraising Strategy with Board – this action had been completed.
- Take updated Terms of Reference to Board for approval – this action had been completed.
- Check Terms of Reference vs annual agenda plan – this action was in progress to be brought to the upcoming Board meeting.
- Put Management Plan on agenda – this item is on the meeting agenda.
- Bring together department risk register – this item is on the meeting agenda.

4. 2020/21 year to date Fundraising update

- 4.1. Fundraising Figures** – Emily Nicholls updated on the 2020/21 year-end figures. A total of £1.45m had been received, in comparison to £1.29m in 2019/20. Corporate fundraising, direct mail, individual donations, in memory giving and Gift Aid had all performed much better than had been expected at the onset of the pandemic. The growth in individual giving, which had also been experienced in Hospice across the sector, had helped to offset against income not being received from events and community fundraising activities.
- 4.2. Update on Community Fundraising** – Fundraising groups have stayed engaged through regular Zoom meetings and calls, and there is an aim to set up three new Supporter Groups for Digital Media, High Net Worth individuals and events such as Golf Days. Outreach is underway to secure five 'charity of the year' partnerships with local community organisations, and organise the Lavender Appeal collection. The Fundraising Handbook will be ready for roll-out in July and contains comprehensive information and guidance.
- 4.3. Update on Corporate Fundraising** – AJ Carpentry & Building Services have given an in-kind donation of £50k to support the set-up of the Men's Den. 60 enquiries have been received in relation to Make a Will Fortnight with £8k was raised in September. The company due to run 'I'm a Director Get Me Out of Here' has not been in contact and so another organisation may need to be sought as there is interest from local companies in taking part. International Nurses' Day has also been used as an opportunity to speak to local businesses and received in-kind items for St Raphael's staff.
- 4.4. Events** – The Council have approved the 26th June Lavender Walk and effort is being put in to ensure it is Covid-safe, with the number of sign-ups ahead of previous years. Several groups are taking part in other challenge events, and a pilot Legacies Event is being held at Denbies Vineyard in the autumn.
- 4.5. Direct mail** – The team are developing the Business Case and communications plan for a Garden Fundraising Appeal with aim of raising £300k. This provides an opportunity to reach out to new local organisations, grant funders and extend marketing in Merton. This project would go ahead only if sufficient funds are raised.
- 4.6. Trusts and foundations** – The Committee were asked to note that there has also been a drop in income received from trust fundraising, which reflects a combination of funders switching to focus on Covid-19 priorities, reductions in funders' investment income, but also the Hospice's move to independence. Some trusts have noted that the Hospice received the generous donation from the Daughters of the Cross, and the fundraising team have maintained communications to explain the benefit and need for receiving grants for vital projects. There have been successful bids for £17k towards the IPU refresh and £10k for core funding.
- 4.7. Lottery** – The annual review will be submitted shortly to the Lottery Commission and role descriptions are being reviewed and developed to set up the staffing in line with the Fundraising Strategy.
- 4.8. Supporter Care** – The Lavender Appeal has raised £32k in 2.5 weeks compared to £47k in total last year. The Supporter Care team are providing personalised donor care. The Raiser's Edge will be updated to sit in the cloud and new capabilities that will support the team's work.
- 4.9. Update on Retail** – Seven stores were reopened in April along with the new Donation Centre in Sutton. The Hospice has opened for donations earlier than some other charities and large numbers have been received. Staff and volunteers are working hard to respond and it has also created more waste and rag items. The Donation Centre has been valuable to enable stock to be strategically signposted for each shop - for example to boutique, or clearance, stores. Several volunteer drivers have been recruited alongside staff drivers to move stock through more quickly. Shop Managers have been supportive and in the first

week of opening the aim was to take £12k and £20.5k was spent and the weeks since have mostly outperformed targets.

4.10. Communications – A new staff Digital Communications Assistant has joined the team to further develop outreach on the website and social media platforms, working with staff and volunteers. New equipment has been purchased to film website content and films by the Education team.

4.11. HR and Staffing Matters – Lucia Herd has returned from maternity leave and Caroline Worley has returned is working part-time. A second Area Manager post is being advertised along with posts on Special Events and Individual Giving.

In terms of Retail volunteers, there were 150 prior to pandemic and the team stayed in touch throughout Covid-19 very regularly to other Hospices through newsletters, phone calls from Shop Managers, flowers and cards. 114 wished to return when surveyed last summer but it was high-risk to return at that point. From the 79 who expressed willingness to return after the third lockdown, 47 have completed risk assessments and are spending time in the shops, 13 decided not to volunteer, 2 were too high risk and 22 have not returned the risk assessments. There is a volunteer alumni network now in place. A promotional campaign was run to reopen the shops, and 101 individuals responded through an online application process. 65 carried out one or more shifts, 35% of which are in the Donation Centre. The Campaign will be re-run to keep momentum and balance with the time involved in the on-boarding process.

Committee members asked whether social media outreach for volunteers would change profile of the Hospice. Sara Jane Woods confirmed that 86% of applicants were made online which shows volunteers becoming more digitally connected due to the pandemic. Volunteers were still primarily retired with some joining who are on furlough.

Committee members asked whether there would be further outreach to new potential groups of volunteers in order to encourage more diversity. It was confirmed that the Hospice has been reflecting across the Board on diversity and inclusion over the past year. The Hospice has a Christian ethos but exists to serve patients from all backgrounds. The team are building outreach to different faith groups and develop reciprocal relationships. There is also staff training on Equality, Diversity and Inclusion to mitigate against unconscious bias.

The Committee recognised the tireless work undertaken by the Fundraising team over an exceptionally difficult year, and the significant achievement to reach these income figures. The Committee asked that their sincere thanks would be passed to the rest of the team.

5. Management Plan Update

Gail Linehan updated that the Trustees had approved the 2021/22 Management Plan at the March Board meeting. The Strategic Leadership Team will continue to present key sections to one another and refine the Key Performance Indicators (KPIs) for the year. The Fundraising team has a full Strategy which runs on a three-year period from pandemic to sustainability and progress will be reported at Committee meetings.

6. Discussion on Departmental Risk Register

Sara Jane Woods presented that some key strategic risks that had been developed in conjunction with Emily Nicholls for Fundraising and Communications:

- Failure to meet budget
- Loss of key members of staff and volunteers, which links in to health and safety
- Cancellation or incidents at events or Fundraising Groups
- Risk to reputation especially via social media
- Failure of legacies to be received – unpredictable
- Legal changes for fundraising particularly around Gambling Commission

The Committee held an initial discussion on these risks, and also received assurance that all relevant insurance and guidance for volunteers was in place. It was agreed that these high-level risks would be developed into a risk register format for consideration at the next meeting, with mitigating activities and risk scores added.

7. Any Other Business and Dates of future meetings

There were no items raised under Any Other Business. Committee members noted the date of the next meeting of Wednesday 30th June at 2pm.

The meeting ended at 11.30am.

Approved..... Date.....

St Raphael's Hospice
Minutes of a Meeting of the Clinical Quality & Governance Committee
Held using Zoom Video Conferencing
At 10:00 on Friday 14th May 2021

Members: Dr Carrie Chill – Board Advisor & Committee member (CC)
 Alan Cogbill – Trustee & Committee member (AC)
 Dr Joy Tweed – Trustee & Committee member (JT)

In attendance: Gail Linehan – Joint CEO (GL)
 Nick Stevens – Joint CEO (NS)
 Norman McWhinney – Chair of Trustees (NM)
 John Groom – IT & Facilities Manager (JG – items 6-10)
 Alex Rudkin – Quality Development Manager (AR)
 Dr Jenny Strawson – Consultant (JS)
 Dr Gaby Tamura-Rose – Consultant (GT-R)
 Rebecca Trower – Clinical Director (BT)
 Anna Machin (Clerk – AM – items 6-10)

Actions arising

| Agenda item | Action | Responsible | Timeline | Ref. |
|--|--|---------------------------|------------------------------|-------------|
| 5. Evidence of Excellent Practice register | Share document with Board | Anna Machin | 2 nd June meeting | 21/05/14-01 |
| 6. Clinical risk register | Ensure HR Committee consider position on staff contracts and vaccination | Gail Linehan, Anna Machin | Next HR Committee meeting | 21/05/14-02 |
| 10. AOB | Move date of next meeting | Anna Machin | Immediate | 21/05/14-03 |

1. Apologies for absence

Committee members were welcomed to the meeting. There were no apologies sent to the meeting.

2. Review of minutes from last meeting

The minutes of the 26th February 2021 meeting were reviewed and approved as an accurate record of proceedings.

3. Action list from previous meetings

Committee members reviewed the matters arising, noting that many actions had been completed since the prior meeting:

- 04/01; 11/01 Performance management policy – Gail Linehan and the Head of HR had a meeting planned to progress this policy.
- 21/02/26-06 – the outreach process for new Committee members is underway and an update will be provided at the next meeting.

4. IPU refresh

The IPU refresh project will start on 26th July and the ward will re-open 31st August 2021. The options appraisal considered re-locating the IPU service but due to the short term nature of the closure this has been decided against. Other local Hospices (StC & RTH) have agreed to accept admissions of our patients should their capacity allow. Admission wind-down of the IPU commences 26th June with plenty of communication planned with patients/ families. It is hoped that on the planned re-opening date of 31st August, a 12 bed service can be offered, subject to staffing safely.

The project will deliver a re-fresh, redecorated unit with design changes to accommodate a designated family area, a new IPU reception area and more effective use of storage space. The patient rooms will have SMART TVs installed, with the en-suite bathrooms refreshed and perhaps re-floored. The Mortuary will also be refreshed.

IPU and Housekeeping staff will be re-deployed/ take annual leave/ fulfil mandatory education needs. There will also be opportunity for IPU staff to enable the Community and Housekeeping staff to support Retail and Reception.

Recent email communication has diluted emerging anxiety amongst staff if they were to be re-deployed to areas they did not wish to work in or were forced to take annual leave and the staff outlook now is very positive for the 5 week period.

Infection control has been considered in the project's planning and there are plans for fewer soft furnishings in the refreshed unit than before and carpets will be replaced by an alternative flooring. The rooms will be more spacious.

Consideration of the required replacement of fire doors on the IPU and accommodation of viewing windows in such replacement doors will also be undertaken following the Fire RA visit planned for 27th May. Replacement of fire doors does have a significant funding implication and the requirement needs further consideration. The possibility of using technology to observe patients in their rooms was discussed and was not thought to be a currently viable solution due to issues around privacy and consent.

5. Evidence of Excellent Practice register

The following areas were highlighted from this document:

- The Gold Award to Pete Morris, Facilities Dept, at the Health Hero Awards
- The care delivered to a patient admitted from a local prison. Elisa Lunn has completed a reflection and MDT staff are all slightly wiser to the system.
- The willingness and commitment of staff on the IPU to step up to roles and that such behaviours are not taken for granted. A recent International Nurses' Day showed the unity amongst the team.

It was agreed that the Excellent Practice Register extracts would be useful documents for the Board to see, and this item would be added to the Board agenda.

6. Clinical Risk Register

The Committee discussed the organisational position regarding staff hesitancy to be vaccinated and supported the stance that there was no mandate for staff to be vaccinated. Staff are recommended to undertake weekly PCR and lateral flow testing.

It is understood that there is a consultation underway to consider the mandating of vaccination of healthcare staff but there is no official line at present.

The Hospice continues to follow government guidance on the use of PPE. The review of CLIN52 Managing COVID continues to be reviewed as required and each month. The organisational approach to staff who do not undertake testing may be a consideration that needs to be covered in the CLIN52 policy.

The Committee suggested further consideration for the Hospice's employment contracts to cover vaccination requirements. This item would be referred to the HR Committee to consider the matter of Staff Vaccination and Contractual Implications alongside any legal advice that can be obtained.

Registered nurse staffing on the IPU remains a risk despite recent appointment of a band 6 nurse and 4 RGNs to the bank. Consideration is being given to training up band 4 nurses but unsure if that would service acceptable cover for the 2nd RGN on nights. It was agreed that the rating should remain constant for this risk. The Hospice is upskilling Band 5 nurses and this is included in the Clinical Action Plan.

In relation to other risks notes on the risk register, the Sickness and Maternity leave policies have been reviewed. It is acknowledged that the IPU Manager has undertaken a lot of clinical shifts alongside her management role and Rebecca Trower is reviewing a number of issues aligned to the role. Supervision of the Nursing Associate hasn't added to the supervisory burden that is in place for all new clinical personnel, and the role is proving a real benefit. Nursing Associates have their own registration infrastructure. It was agreed that risk of incidents requires no change.

IT system failure out of hours is a risk that has recently seen a support contingency set up with an IT consultant but it remains a risk that is noted. John Groom, Head of IT, was invited to summarise recent IT issues and explained that the Hospice system had been recently upgraded to a hybrid system with servers in the cloud. A number of separate issues had regrettably happened in the space of 6 weeks including a cyber attack having had a sustained period of years with very little disruption. Disaster recovery testing is further planned for the IPU's down-time. It was agreed that the risk rating for IT would remain unchanged pending the DR testing review in August 2021.

7. Clinical Quality & Governance Report

Rebecca Trower updated on the Hospice's continued Covid-19 response. Head of Department meetings are held monthly and the Hospice will review visiting restrictions in line with government guidance. The updated Wellbeing Centre offer will be launched on Wednesday 19th May. The IPU is flexing bed capacity in line with staffing and recently moved from 6 to 8 beds. The Education team have produced a poster for Hospice UK on approaches to supporting non-clinical staff during Covid-19 which arose from the St Raphael's Reflections report. The Capacity Tracker continues to be completed on a daily basis.

In terms of staffing, the third Consultant has recently been appointed and commences in post on July 5th, the Physician Associate role is working well, and medical students from St Helier's Hospital spend time in the Hospice. Dr Andrew Hoy (Consultant) who is a longstanding team member has confirmed his resignation and will continue to deliver some training. Thanks are also due to Dr Annaliese Mathews who has been an agency Consultant for the Hospice for the past two years. The committee asked for their thanks to be passed on to both Andrew and Annaliese.

The Community Team will soon be moving from one to three teams based on geographical location. The Committee asked whether this would align with local primary care networks.

Rebecca Trower confirmed that this had been based on locations of GP surgeries to ensure support would be time-efficient and responsive. Once shift patterns have embedded, further opportunities to network with other agencies will also be explored.

The Committee noted the sensitive handling and learnings from Complaints. The Committee noted that referral numbers had decreased for the past year from around 1,000 to 870. It was confirmed that this had been experienced by other Hospices and was primarily due to the impact of Covid-19. There has been a recent rise in referrals, which may in part link to the increase in late presentation of cancer diagnoses.

8. CAP 2021/22

Alex Rudkin framed the Clinical Action Plan, noting that that some items that had been carried over from 2020/21 were at or nearing completion, such as increasing counselling support. The rotation of IPU staff across 24 hours (CAP2) continues to be a focus to ensure staffing at night. There has been progress in relation to including the audit of clinical risk assessment that supports individualised care planning (CAP6). The implementation of Outcome Assessment Complexity Collaborative (OACC) is a significant project (CAP7), the Policy has been written and a training session delivered to coincide with International Nurses' Day on May 12th.

Staff will engage further with the Datix system (CAP9) before the IPU refresh and new joiners to the organisation are engaging well with the data. Processes relating to the Verification of Expected Death (VoED) during daytime and out of hours are being reviewed (CAP11). There has been outreach to increase the Hospice's community profile (CAP14) through attendance at the Community Heart Failure MDT, a nursing home joint visit, and delivering GP masterclasses. The time when IPU is closed will be used to focus particularly on this area. The designation of Clinical Lead for the medical team (CAP15) will rotate every 18-24 months- the current Clinical Lead is Dr Jenny Strawson. Dr Gaby Tamura-Rose has taken on the Caldicott Guardian role.

The Committee commented on the extraordinary process of change within the Hospice as shown through this document during such a challenging year.

9. Minutes of meetings and other documents

The Committee noted that the VOICES report touched on linkages with other agencies, and equality and diversity, which had been considered at the March Board meeting. The Hospice is on a journey to increase the diversity of patient referrals, and providing information on patient equality data compared to the local area will help to contextualise progress towards this goal.

10. Any Other Business and Dates of future meetings

There were no further items raised under Any Other Business. It was agreed that the next meeting would be moved from 25th June to July to allow a greater interval between Committee meetings.

The meeting ended at 11.45pm.

Approved..... Date.....

INVESTING IN VOLUNTEERS FINAL REPORT



St Raphael's Hospice

21st to 29th January 2021

CONTENTS

| | |
|-----------------------------------|----|
| ASSESSMENT SUMMARY | 2 |
| ORGANISATION SUMMARY | 3 |
| SAMPLING..... | 5 |
| SUMMARY OF PRACTICE | 7 |
| SUGGESTIONS FOR DEVELOPMENT | 17 |
| CONDITIONS (IF APPLICABLE) | 19 |



ASSESSMENT SUMMARY

| | |
|---|---------------------|
| IIV HOST ORGANISATION: | Volunteer Now |
| ASSESSOR: | Graham Maunders |
| NAME OF LEAD ASSESSOR: | Janet Lewis - Jones |
| 1ST ASSESSMENT/RENEWAL: | 3rd Renewal |
| ASSESSMENT OUTCOME: | Met with Conditions |
| CONDITIONS IF ANY: | |
| <p>1.2 and 7.5 - A Problem Solving Policy / Procedure for volunteers is required to meet the Investing in Volunteers Practice. There needs to be a distinct policy and procedure for volunteers to use if they wish to complain about their treatment by paid staff, users, committee members or other volunteers; this should be set out clearly, in both the Volunteer Policy and the revised Volunteer Handbook.</p> | |
| DATE CONDITIONS MET: | 19th March 2021 |
| FINAL ASSESSMENT DECISION: | Met |

ORGANISATION SUMMARY

In 1987 St Raphael's Hospice was established as part of the registered charity, the Congregation of the Daughters of the Cross of Liege. The original building project was paid for with funds from the charity, and operated under the wing of St Anthony's Hospital which is located on the same site, and was also a Daughters of the Cross of Liege facility. When St Anthony's Hospital was sold to Spire Healthcare in September 2014, St Raphael's was retained by the charity, but operated as a stand-alone activity.

In October 2020, the hospice became an independent charity in its own right and has put in place structures to support its independent practice. Overall governance of the hospice now sits with a Board of Trustees which oversees its work.

The hospice offers specialist medical and nursing care for people with cancer and other life limiting illnesses living in the London Boroughs of Merton and Sutton. It comprises of a 14 bedded in-patient ward, a Wellbeing Centre, overnight family accommodation and the Orangery café that is open to the public. The community teams that operate out of the hospice include the Clinical Nurse Specialist Community Palliative Care Team, 'Hospice at Home' and 'Hospice Neighbours' services that provide people and their families care and support at home. The hospice also has a pastoral and counselling service for people and their families.

Whilst every person in its care is an NHS patient, the hospice only receives about 24% of its funding from the NHS. The remainder, more than £4 Million per year, has to be raised to enable the families living with a life-limiting illness to access care free of charge.

In 2019 / 2020 the hospice: cared for 977 patients; provided Clinical Nurse Specialist visits to patients 2,972 times; called 12,234 patients and families, with the Home Team undertaking 1,807 visits to people in their homes; enabled 211 patients to use the Wellbeing Centre; and through the Psychosocial Team provided after-death support to 287 people.

A team of specialist consultants, doctors, nurses, health care assistants and a range of other health and social care professionals, therapists and volunteers provide the care, treatment and support. Volunteers are seen as part of a one team approach to service delivery alongside paid staff and are involved in all areas of St Raphael's work.

Central and strategic responsibility for volunteering is led by a dedicated team of three, each with a focus on particular areas of the charity's work; the Hospice, the Community and Income Generation. Each volunteer lead reports to one of the Executive Leadership - the two Joint CEOs and the Director of Income Generation.

These six people meet together on a monthly basis as the Volunteer Strategy Group to oversee the development of the activity. The management of volunteers is shared between staff team-managers and the volunteer team with reporting taking place at the regular Head of Department meetings and also to the HR Committee of the Board of Trustees.



Since the previous assessment, St Raphael's Hospice has continued to operate a proactive approach to volunteering. The Volunteer Policy was updated in January 2021. There were five development suggestions at the last assessment which have been addressed as follows:

1. A minority of staff seemed unclear on the expense policy (5.3) - The Volunteer Policy has been revised to provide more clarity and this is being added to the website shortly.
2. Interview questions in shops were of a more general nature (6.3) - The recruitment process has been managed by one of the lead Volunteer Managers since 2018, providing much more consistency to the approach generally.
3. Sometimes there was a lack of response to reference requests (6.7) - This is now managed by the Volunteer Managers who ensure a response, or seek an alternative reference.
4. A minority of volunteers were not aware of the range of services offered by the hospice (7.1 / 7.2) - Some volunteers were excluded from the induction programme. The induction, including a tour of the hospice, is now open to all volunteers
5. Inconsistency in the approach to the performance management of volunteers (8.2) - With the introduction of three lead Volunteer Managers there is greater resource, consistency and support for volunteers and their immediate supervisors.

During the past year Covid-19 has had a major impact on operations significantly affecting and limiting people facing services such as on the wards, Hospice Neighbour face to face visits, Hospice Biographers and St Raphael's shops.

There are 439 volunteers who work across fourteen locations, including the hospice, Wellbeing Centre, retail warehouse, shops and community outreach, in the London Broughs of Merton and Sutton.

Volunteers undertake a wide range of specific roles across all aspects of the organisation. A number of the roles undertaken are similar in nature and so for the Assessment were grouped as 16 generic roles: administration, art, chaplain, coach / mentor, driver, events, facilities, flowers, gardening, hairdresser, Orangery Café, parent / Family Support, shop, Support Group, therapy and ward.



SAMPLING

SAMPLING RATIONALE:

In order to cover as many of the sites and roles as possible, interviews were held with people from twelve sites.

The sample selected by the Assessor included a good cross section of volunteers, staff from all levels, including the Chief Executive, Volunteer Services Manager, managers, staff working directly and not directly with volunteers and a Trustee.

35 interviews with volunteers were conducted face to face via Zoom, and 11 were by telephone. The assessment coincided with the third COVID 19 lockdown which impacted on people's availability and willingness to engage. None the less the Assessor was confident that the evidence provided through face to face and telephone interview provided a good sample on which to base the Assessment.

The sample interviewed included a cross section of the volunteers by gender, age and ethnicity. Volunteers interviewed had worked for St Raphael's for varying periods of time, ranging between one year and twenty-one years. The amount of voluntary time given generally varied between two and ten hours a week.

Eleven members of staff were interviewed via zoom: Clinical Lead - Psychological Support Services, Clinical Nurse Specialist, Driver / Coordinator, Donor Development, Executive Assistant, Facilities Assistant, Groundsman, IT & Database Administrator, Joint Chief Executive, Retail Manager and Voluntary Services Manager.

| | |
|---------------------------------------|----|
| NUMBER OF SITES, BRANCHES, LOCATIONS: | 14 |
| NUMBER INCLUDED IN INTERVIEW SAMPLE: | 12 |

| | |
|-----------------------|-----|
| NUMBER OF VOLUNTEERS: | 439 |
| NUMBER INTERVIEWED: | 46 |
| NUMBER AS % OF TOTAL: | 11% |

| | |
|---------------------------------------|------|
| NUMBER OF VOLUNTEER ROLES: | 16 |
| NUMBER OF ROLES SAMPLED BY INTERVIEW: | 16 |
| NUMBER AS % OF TOTAL: | 100% |

| | |
|----------------------------|-----|
| NUMBER OF STAFF: | 165 |
| NUMBER INTERVIEWED: | 11 |
| WERE TRUSTEES INTERVIEWED? | Yes |

WRITTEN EVIDENCE:

Provided before the assessment were:

Volunteer Policy, Volunteer Forum minutes, and Volunteer Extract - Hospice Management Plan 2019 / 2020

Reviewed at the assessment:

Volunteer Policy - updated January 2021, Hospice Management Plan 2020 / 2021, Diversity Monitoring, Role Descriptions - Art, Hairdresser and Mentor, Welcome Pack and example References and Exit interviews.

SUMMARY OF PRACTICE

INDICATOR 1

There is an expressed commitment to the involvement of volunteers, and recognition throughout the organisation that volunteering is a two-way process which benefits volunteers and the organisation.

St Raphael's has a Volunteer Policy that was reviewed in January 2021. The Policy sets out the organisation's approach and policy in relation to the recruitment and management of volunteers. It provides an overview of the key aspects including: equal opportunities, the appointment process, training, supervision, key policies such as confidentiality, health & safety and concerns. One of the CEO's highlighted the fundamental importance of volunteering which is 'included in every part of the delivery strategy', and that 'EVE [Excellence, Visibility and Engagement] are the overall objectives for all staff and volunteers'.

The Volunteer Policy highlights a number of generic policies that apply to all staff and volunteers, including health & safety, safeguarding and confidentiality. It also sets out volunteer specific policy in relation to other key aspects including recruitment, expenses and supervision. The section on Concerns sets out how issues with volunteer performance will be dealt with through a bespoke volunteer process. It also covers the process for any issues, concerns / complaints that volunteers have, involving an initial discussion with either the individual concerned or the Volunteer Services Manager. The next stage is to raise the concern through the Hospice's HRO3 Raising Concerns [whistleblowing] Policy. The Raising Concerns Policy is universal and is written from a staff perspective. It also makes the process unduly convoluted from a volunteer's perspective. The practice requires that volunteers should have their own equivalent policy and should only be included in general policies if appropriate.

A Complaints Policy for volunteers is required to meet the Investing in Volunteers Practice. There needs to be a distinct policy and procedure for volunteers to use if they wish to complain about their treatment by paid staff, users, committee members or other volunteers should be set out more clearly, in both the Volunteer Policy and the revised Volunteer Handbook (in production at the time of the Assessment).

The benefits of involving volunteers was recognised by people from across the organisation. A Trustee thought that 'the benefit from volunteers is colossal', and that 'without their efforts we would not be able to run either practically or financially'. One of the CEOs thought that volunteers 'bring the added value of various skills sets and life experiences'. A volunteer manager thought 'it's a two-way process', 'for some it's a stepping stone to work', and that for others 'it is beneficial for people who have mental health needs'. Adding that volunteers are the 'best ambassadors for us'. One of the managers thought 'without them it wouldn't function' and that volunteers 'bring so much experience... brilliant skills'. Another manager said it enables volunteers to 'give something back', and that volunteering is 'partly social'. A member of staff not working directly with volunteers said that having volunteers 'allows more time for patients'. For volunteers it 'gives me a sense of fulfilment', 'puts my whole life into a different perspective', and is 'part of the healing process'. One said 'I use and get different skills', and for another 'they are local and I want to support my community'.



A Volunteer Forum is held quarterly enabling ongoing review of volunteering in practice. All volunteers are invited to attend. There is ongoing discussion with individual volunteers through support / supervision, supplemented by Volunteer Services Department discussion with volunteers. Policy documents are annotated with review and issue dates, and the date for the next review. The Volunteer Policy is reviewed every two years.

This indicator is now met

INDICATOR 2

The organisation commits appropriate resources to working with all volunteers, such as money, management, staff time and materials.

Volunteering is led by a dedicated team of three, each with a focus on particular areas of the charity's work; the Hospice, the Community and Income Generation. Day to day management is shared between staff team-managers and the volunteer team with reporting taking place at the regular Head of Department meetings and also to the HR Committee of the Board of Trustees. The responsibility for volunteers is documented in job descriptions. One of the volunteer managers confirmed that 'volunteers are mentioned in my job description'. Another manager thought there is 'more structure and procedure', which was supported by volunteers who thought that it has 'got more efficient...they are very communicative with us', and that the management of volunteering has 'really improved in the last five years'.

The knowledge and experience requirements of key staff is set out in their job descriptions and confirmed at interview and by reference. Merton and Sutton Volunteer Bureaux has provided ongoing training. A Trustee thought that the 'triumvirate [who manage volunteering] onsite, in the community and at shops', are 'very skilled and committed'. Volunteers commented 'I'm very impressed by the way they run this programme', that it is 'well organised', 'all very well run' and that the volunteering team do 'an incredible job...they are on top of it'.

A Trustee said that they 'meet with the Chief Executives and Vice Chair twice a month and we discuss what's happening [with volunteers]'. Each volunteer lead reports to one of the Executive Leadership - the two Joint CEOs and the Director of Income Generation. These six people meet together on a monthly basis as the Volunteer Strategy Group to oversee the development of the activity. One of the CEO's spoke of 'regular meetings with volunteer leads'. Volunteer service managers attend monthly Heads of Departments meetings. One of the volunteers highlighted that they 'had regular [organisation wide] meetings with the CEO and other people'.

The Hospice Management Plan is reviewed annually. The Volunteer Services Manager reviews planning and objectives for volunteers. One of the Trustees highlighted that the 'Business Plan has a section dealing with volunteers'. The hospice's Annual Management Plan has a dedicated section on volunteering. In the Management Plan 2020/21 there are specific objectives in relation to volunteers including the expansion and promotion of diversification of all volunteer roles, and promotion in each department to identify new volunteer roles.



A CEO spoke of reporting which informs understanding of 'what's happening in the strands of work, any issues...', and of receiving 'an update on all aspects' and of 'ask[ing] how things are going', and that 'each year we look at the resource we are putting in'. Also highlighting the importance of 'feedback from volunteers'. A member of staff not directly involved with volunteers thought if there was 'any equipment they need we would buy it'. Volunteers confirmed that they had all of the resources they needed to carry out their roles. One volunteer summed up the view of others in saying 'I'm often asked if there is anything I need'.

This indicator is met

INDICATOR 3

The organisation is open to involving volunteers who reflect the diversity of the local community and actively seeks to do this in accordance with its stated aims.

St Raphael's commitment to equal opportunity is clearly stated in the Volunteer Policy. A Trustee said 'greater engagement will mean greater volunteering, reflecting the importance of the hospice in the community'. A CEO said the organisation are 'open to everyone who would like to apply', and 'try to offer roles that would appeal to a wide spectrum of people'. One of the managers highlighted that they were 'trying to get all staff to think about functions volunteers could do'. In practice, a member of staff not working directly with volunteers thought there was 'a fair range, even younger people'. Volunteers commented 'volunteers come from all walks of life', 'young, old, people from different backgrounds', and that 'there are a range of volunteers. Diversity is close to [the volunteer managers'] heart'. Other volunteers thought 'there is a bit of a variety' and 'it is diverse, but not as much as it could be'.

A Trustee said diversity is 'very much on our mind, from the top right through', adding 'we want to get it penetrating through the organisation'. 'In March we are having a Board awayday. An expert on diversity has been invited to address the meeting'. One of the managers said St Raphael's is 'definitely seeking to embrace and change'. In practice volunteers thought 'yes, it is underlined, a moral obligation', 'I'm pretty confident they are committed to diversity', 'I would say so [they embrace diversity] definitely', and 'they have to encourage and yes they very much do'.

The website volunteer page encourages diversity stating 'our volunteers come from every walk of life', and 'we are always looking for new faces to bring different skills... no matter what your motivation, circumstances or background'. The images on the website generally, in the volunteer section, and in newsletters that can be downloaded reflect some diversity. However, it is suggested that this is an area that could be further developed to ensure that the wider community is better reflected, and to encourage a wider group of volunteers.

A CEO said 'we advertise as widely as possible'. St Raphael's promotes volunteering opportunities in a variety of ways including through the website, the local volunteer bureaux, its shops, leaflets, posters in the community and a banner in the grounds. The volunteers interviewed had been recruited through a range of sources including 'through the volunteer bureau', 'the website', 'I responded to an Ad in the Church newsletter', 'my Father died in the Hospice', 'I approached the local shop', '[a banner] as I walked past St Raphael's', 'my friend works there', 'a flyer at a carers lunch', and 'a speaker came to my group'.



All applicants are asked to complete diversity forms. Monitoring information is presented quarterly to Heads of Department meetings. A Trustee confirmed that the '[volunteer manager] reports to the HR Sub Committee', that 'also all Board members get the papers', and that they are 'very thorough...the number of volunteers, areas people want to volunteer in, who has left'. One of the managers spoke of using the data to 'correlate and look at gaps', and that they 'want to go out and find partner agencies' to help develop the approach.

This indicator is met

INDICATOR 4

The organisation develops appropriate roles for volunteers in line with its aims and objectives, which are of value to the volunteers.

A role description is drawn up for all volunteer roles - broad descriptions for generic roles and more detailed for specialist roles such as coach / mentor. A manager spoke of 'proformas for roles and person specifications', that are used 'when we go to advert'. Most volunteers were able to confirm they had one. Comments included 'a role description – yes', 'I probably was, everything was well explained' and 'I had a piece of paper'. However, one volunteer comment summed up the response of a number of others in saying 'I don't think I did. It was discussed at length at the beginning...what was expected of me'. It is suggested that all volunteers are made aware of their role description and requirements to help ensure clarity of the role expectations.

The responsibility of the Volunteer Services Manager to ensure there are guidelines for all volunteer duties is highlighted in the Volunteer Policy. Role descriptions set out the necessary skills, attitude and experience required to carry out the role. Three role descriptions reviewed: Hairdresser, Art and Mentor all covered the expectations of the role, provided a role profile, listed the duties of the role, and included specific guidelines pertaining to the role.

There are sixteen broad role types. A Trustee thought St Raphael's are 'very lucky in the spread of the volunteer force', adding 'as far as possible operating processes have a volunteer aspect'. One of the CEO's spoke of there being 'a plethora of roles'. A manager said 'there is a volunteer presence in every department'. One of the Volunteer managers spoke of expansion through 'different roles, for example coaching and mentoring are new roles', and 'trying to increase volunteer ambassadors in the community'. Volunteers thought the organisation are 'very creative in the use of volunteers', and that there are 'far more volunteers in recent years'. One had observed 'a lot of people with special needs' and another said 'one chap came in with his carer'.

The hospice endeavours to tailor roles to the abilities of volunteers. Managers gave examples of 'a mother and her son who has Downs Syndrome who volunteer together', 'an elderly lady who used to be a jeweller...she's able to advise and organise the display for me', and a volunteer inputting data 'we agreed it wasn't really him, so he changed to an external communication role that definitely suits him'. One manager said 'we find out what they enjoy doing, can do and don't want to do'. Another gave the example of 'one who is ex HMRC who helps me with Gift Aid'.

Volunteers thought staff are 'always in discussion of things that suit my skills and



experience', they 'notice what other skills you have', and find 'jobs to suit the person'. One had observed 'a lady who volunteers on the till was a former bookkeeper. She's brilliant!'. Another said 'I sometimes have to leave early. It's not questioned, they're always very flexible'.

This indicator is met

INDICATOR 5

The organisation is committed to ensuring that, as far as possible, volunteers are protected from physical, financial and emotional harm arising from volunteering.

Risk assessments are undertaken for both the role and the work location. Volunteer managers commented 'I give the role details to the office who do a risk assessment', 'the risk assessment is agreed before we have volunteer gardeners in', and that now 'we have a Covid risk assessment before they come in'. When asked about the management of risks one volunteer said 'I feel very very safe working in the hospice'.

It is stated in the Volunteer Policy that volunteers are insured, within the boundaries of the work they are undertaking, through both Employers Liability and Public Liability insurance cover.

The Volunteer Policy sets out the entitlement of volunteers to claim for agreed expenditure necessary in carrying out their role. This includes travel to the hospice. Volunteers are also entitled to discount in the Orangery Café, and volunteers working in the shops are allowed a discount on purchases. A member of staff with no direct contact with volunteers observed 'in strategy meetings it has been discussed'. Volunteers commented that there was 'something in the papers at the start', and that it was 'covered in the induction'. However, most volunteers interviewed don't claim on principle as they are volunteering, but as one said they have been 'told I could claim if I wanted to'. One volunteer with a long commute said 'a train and two buses...I was told I could claim travel expenses if I wanted to'. Another said they are 'always chased for time sheets and expenses'. A volunteer manager said 'I have to encourage them to claim'.

Volunteer personnel data is protected by IT Information Governance, which includes data protection guidelines and confidentiality procedures. Data can only be accessed by personnel with appropriate clearance. The protection is clearly stated in the Volunteer Policy and every volunteer signs a Volunteer Agreement Form to confirm their understanding and agreement to confidentiality and information security.

This indicator is met

INDICATOR 6

The organisation is committed to using fair, efficient and consistent recruitment procedures for all potential volunteers.

The website has pages dedicated to volunteering setting out the opportunities, the process of getting involved, and how to find out more information.

Potential volunteers are encouraged to contact the Volunteering Team to find out more or attend monthly open sessions to explore the volunteering opportunities



available and the process of becoming a volunteer. Current vacancies are listed together with a brief role summary and a link to apply online. One volunteer said in the initial contact the '[volunteer manager] explained everything to me'. Another said it was 'very thorough' and they were 'told what to expect'.

The procedure for recruiting volunteers - dealing with enquiries, meeting applicants, and the checks required is clearly set out in the Volunteer Policy. This includes where there are specific requirements, for example drivers must have a valid Driving Licence. One volunteer conveyed the experience described by other volunteers, in recalling 'I completed a form, had an interview, provided two references and had a DBS check'. Another volunteer described the process as being 'the same as applying for any job'.

The standard online application requires only the basic necessary information - contact, reason for applying, availability and relevant experience. At interview only essential information needed to make an appointment is recorded. All information is managed in accordance with the hospice's Information Governance Procedure. A manager confirmed the standard approach, commenting 'we always give out a form and seek two references'.

At interview the volunteer's reasons for applying are explored 'to ensure the aspirations and requirements of both the individual and the organisation are met'. A volunteer said 'when filling out the form part of it asked what would you like to do, are qualified to do'. Other volunteers commented 'I had a chat with the volunteer manager who asked what I'd done', 'she was interested in what I was doing', 'we spoke about what I'd like to do', and 'I was asked what I might be suited to'. One volunteer said 'they asked a few questions and I asked a few questions'.

The Volunteer Services Manager documents the outcome of all interviews. A letter is sent to the applicant advising of the outcome, with signposting to other organisations where appropriate. The Volunteer Policy requires that unsuccessful applicants are contacted with reasons for the decision. Additional feedback is provided where further clarification is sought.

The website promotes regular monthly open sessions to explore the volunteering opportunities available at the hospice. All volunteers are given an initial 12-week probation period to determine if it is the right role for the individual. Shop managers said they 'offer a trial to see if they like us, and what things they like to do', and that they 'always give a two-hour trial'. Another manager spoke of volunteers being invited to 'come to an initial meeting where we sit and chat it through'. Volunteers spoke of being offered 'a taster session to come in and do a couple of hours to see what it's like', and that a member of staff had 'sat with me the for the first couple of visits and asked if I was happy [to continue]'. One volunteer had an immediate response to their initial enquiry, recalling 'I got to the bus stop and my phone rang inviting me back to an introduction meeting that afternoon!'.

The Volunteer Policy sets out the requirement for two references, and a Disclosure and Barring Service check where volunteers work with vulnerable adults. The practice is informed by advice and support from uCheck. Volunteers described a similar process, 'interview, references and a DBS check' as one said. Another commented 'I had to give two references. I know they were taken up'.

St Raphael's takes a considered approach to convictions / disciplinary actions. Where there is a positive response from a reference, DBS check or given to



questions about the Rehabilitation of Offenders Act 1974, applicants are asked to detail their offences / any actions. The opinion of the Head of HR is then sought to determine if an application can be progressed. Assessments are made on a role by role basis.

This indicator is met

INDICATOR 7

Clear procedures are put into action for introducing new volunteers to their role, the organisation, its work, policies, practices and relevant personnel.

Volunteers, including shop volunteers, attend an Induction Day which includes a tour of the hospice and an introduction to staff. One manager said 'we walk them round and show them where things are', another highlighted that volunteers are 'given a little walk round'. A member of staff not working directly with volunteers said 'anyone new I'm introduced to'. One of the volunteers commented 'when I did my induction there was a cross section of staff and volunteers', and 'I recall a lot being introduced as you walk round'. Another recalled being 'walked around and shown where everything was', and feeling 'well briefed'. One volunteer spoke of being introduced to new volunteers, 'when they come along, we get introduced'.

All volunteers are given a Welcome Pack which includes the Volunteer Policy, information on key contacts, training, health & safety, and the Volunteering Agreement. The Volunteer Handbook is not being used at present as it is being updated. It is hoped that this will be reintroduced in April. St Raphael's has an online platform The Learning Zone, which provides a selection of mandatory training courses and additional resources, and is available to volunteers and staff. Managers spoke of providing 'lots of induction training' and that over the past year 'before they go in the shop, we offer PPE training'. One volunteer said they had 'a whole day induction course. Health & Safety, fire safety and so on..', and that they were 'well prepared before I started' Other volunteers commented that the 'induction presentations were excellent', and 'presentation was excellent ... outlined what the roles were and what they would like us to do'. One said they 'got a volunteer booklet, pamphlets and guidance', and felt 'completely informed'.

Boundaries are set through role descriptions, induction, ongoing supervision and support. Managers added that 'volunteers are trained in clinical governance' and are 'given very specific jobs'. A member of staff not working directly with volunteers commented 'I've heard volunteers on the phone explaining that they can't give out information... 'I'll put you through to someone who can''. Volunteers said they were 'made very aware of patient confidentiality', and volunteers interviewed generally thought, as one said that 'the role is very clear...clearly defined'.

The Volunteer Policy sets out how any performance issues will be managed, including that both the initial discussion, and the final decision, would be with the respective Volunteer Services Manager. The exception to this being Bereavement Support Volunteers, where the Clinical Lead Psychological Support Services and the Volunteer Services Manager have the final decision.

Volunteers spoke of 'a Volunteer Handbook and quite a lot of paperwork' on starting, and for those interviewed there was an awareness of 'a process in place as any situation', but as one said of the actual process, 'I don't know it's never come up'. It is



suggested that the performance issue process is further refined to separate the responsibility for initial discussion and the final decision, providing volunteers with an opportunity of a second opinion, and enabling greater transparency and accountability.

The Volunteer Policy has a section on Concerns which sets out how any concerns / complaints that volunteers have will be dealt with. The process involves an initial discussion with either the individual concerned or the Volunteer Services Manager. The next stage is to raise the concern through the Hospice's HRO3 Raising Concerns [whistleblowing] Policy. The Raising Concerns Policy is universal and is written from a staff perspective, and not designed to deal with day to day volunteer concerns. It also makes the process unduly convoluted from a volunteer's perspective. A stand-alone complaints policy for volunteers is required to meet the Investing in Volunteers Practice.

This indicator is now met

INDICATOR 8

The organisation takes account of the varying support and supervision needs of volunteers.

Support and supervision is shared between service managers and the Volunteer Team. In addition, the Volunteer Service Manager facilitates forums for the various groups of volunteers. One manager spoke of volunteers having 'fortnightly supervision – one to ones with me', another said '[volunteer managers] have an open-door policy'. For volunteers, arrangements vary according to the nature of the role. Responses to the nature of support / supervision included 'done as you went along', 'we chat every time I'm in the shop', 'regular calls to check in with me', 'we review monthly', and 'I go to the [volunteer] office if I need to speak to anyone'. On the whole volunteers 'did feel adequately supported', staff are 'always available to have a talk', and 'volunteer managers go out of their way to ensure we are ok', 'support is there all the time'. One volunteer said 'I've been involved with a dozen charities and St Raphael's is in the top two for support of volunteers'. A review of three role descriptions highlighted that whilst the key contacts for the volunteer are referenced, it could be more clearly stated how support and supervision of the volunteer will be delivered. It is suggested that the role description could be developed when it is next reviewed to ensure clarity and ensure expectations are managed.

The Volunteer Service Manager facilitates general forums in addition to forums for the various groups of volunteers. One manager said 'we meet quarterly as a group', and another said they 'always talk [with volunteers] every day'. In addition, the Volunteer Services Team actively seek to engage with volunteers to assure them of support. Volunteers spoke of 'meetings every 3 or 4 weeks' and 'Volunteer Forums and catch up meetings a couple of times a year'. Others confirmed that there were 'group meetings certainly', and 'one or two zoom meetings'.

One volunteer said their supervisor 'just rings monthly to see how you are doing' and another said 'I get a text back at the end of each visit'. One volunteer spoke of 'regular meetings of receptionists', and 'regular volunteer meetings'. Overall, as one said 'if I need help its always there for me', and another felt 'very well supported'.



The Role Description sets out the tasks that are required by the role. At induction volunteers are made aware that they can say no. One manager said ‘we remind them that they don’t have to do anything as volunteers’, and another tells volunteers ‘don’t be afraid to say no’. A volunteer said the ‘management style is to ask you to do something, you’re never told’. Others commented that ‘it was made very clear that you don’t have to’, ‘I was told I didn’t have to do it if I didn’t want to’, and ‘they said if you’re uncomfortable please do say so’. Another said they were told ‘if you feel you can’t, just tell us’. In line with best practice that volunteers may refuse demands they consider unrealistic, beyond the scope of the role or that they do not have the skills to carry out, it is suggested that it is referenced in the Volunteer Policy, Volunteer Handbook and Volunteer Agreement when they are next revised.

Feedback is sought at the volunteer forums and periodic satisfaction surveys, in addition to individual meetings and discussion. A Trustee said ‘at cream teas I’ve asked ‘any complaints?’’. A CEO commented that ‘volunteers are very good at telling us when things aren’t right, they’ve nothing to lose’, ‘there are suggestion boxes all around the hospice’, and that there are ‘little surveys’. Volunteers were positive about their experience commenting that the hospice was ‘very receptive to receiving feedback’, volunteers are ‘allowed to generate ideas / improvements’, that it’s ‘always a two-way street. We discuss things’, they ‘always feedback – I felt heard as a volunteer’, and ‘your opinion is asked for’. One volunteer recalled ‘I suggested new tools which were agreed’. Another said the hospice have ‘a volunteers’ meeting every now and then...anything you want to bring up’.

Information is shared via forums, newsletters and email updates. A volunteer manager said ‘volunteers are invited to all briefing sessions’, and that there were an ‘awful lot of briefings and informal meetings’. Other managers spoke of the ‘monthly newsletter’, ‘bi weekly emails with updates’, and that volunteers have access to ‘all policies [which are] altogether on the N Drive’. A volunteer said ‘there is a regular newsletter, they are very good at keeping us informed’. Another commented that the hospice ‘always let us know what’s going on, there are loads of emails’. Others said ‘there have been information presentations’, and that during lockdown there have been ‘regular meetings via zoom’. One echoed the comments of many in saying there have been ‘many emails and phone calls during lockdown’. Others thought ‘communication is excellent’, and ‘I feel part of the team and feel informed’.

This indicator is met

INDICATOR 9

The whole organisation is aware of the need to give volunteers recognition.

A Trustee said ‘we did cream teas in January. Over three afternoons and mix people up. It’s a chance to meet people’, and that ‘Trustees drop into their local shops’. One of the CEO’s spoke of ‘hand written Christmas Cards ...all got personal messages acknowledging what they do’, of the importance of volunteers being ‘valued and importantly feeling valued’, and highlighted the ‘long service awards for volunteers’. One of the managers spoke of ‘a real sense of praise and recognition’ and that it was ‘top down’. Another said they ‘give out badges of how many years they’ve been here’. A volunteer spoke of a meeting at which the ‘[CEO] praised volunteers and thanked them’. Others said ‘there are volunteer events in the summer, BBQs’, that there are ‘emails from the leadership thanking everyone for giving of their time’, and



'I got a long service certificate! It's nice to be recognised'. One said 'I feel a valued part of the team', and another said 'I give the hospice 10 out of 10 for love and care'.

Volunteer forums, briefing sessions, suggestion boxes, and ongoing discussion provide opportunities for volunteers to make their views known. Managers gave examples in practice. One said 'the volunteer manager emailed yesterday about changes to visiting hours, [highlighting the need] to speak to volunteers to get feedback'. Another said 'volunteers on reception had a say so on the alterations'. A member of staff not directly working with volunteers highlighted 'we have them in meetings, [including] meetings with the Chief Executive about organisational changes'. Volunteers were very positive about being involved. One spoke of 'a very good manager. Very enabling'. Another said 'we were all involved as a group. We feel consulted, part of the process'.

Others commented 'I do make suggestions and they are taken into account', and 'I came up with a couple of ideas which they were happy to go with'. Examples in practice included a volunteer who 'suggested stopping using paper cups. There were glasses there the next week!' and 'I suggested something in the window. She did listen to me and it worked'.

Volunteers receive mandatory training alongside paid staff and have access to The Learning Zone - the hospices on line platform. One manager said that 'it's important to invest in their training from the start to help them to become more independent'. Another said 'volunteers receive mandatory training alongside staff'. A volunteer manager spoke of 'free inhouse training' for volunteers, adding 'I let them know about conferences that they can go to'. Volunteers said staff were 'always asking people if there are any courses they would like to do', that 'courses are available annually including health & safety, equality & diversity', and there is 'always ongoing training there. It's now online'. One of the volunteers spoke of the 'option of the Learning Zone for up to date training'. Another said 'last week I caught up on the Learning Zone – eight courses'.

References are provided by the volunteer coordinator on request. The examples reviewed were in a standard format covering the relationship, length of service, together with an assessment of the individual in relation to: reliability, punctuality, trustworthiness, team member, initiative, and confidentiality.

A new leavers form, to be completed by the volunteer's line manager, was introduced in 2021, to try and get more feedback. If possible, staff try to sit down face to face with volunteers before they leave. The form is sent to the volunteer coordinator who sends the volunteer a thank you and monitors responses.

This indicator is met



SUGGESTIONS FOR DEVELOPMENT

Summary of suggestions for development

3.3 - The images on the website generally, in the volunteer section, and in newsletters that can be downloaded reflect some diversity. However, it is suggested that this is an area that could be further developed to ensure that the wider community is better reflected, and to encourage a wider group of volunteers.

4.1 - A number of volunteers did not think they have a role description. It is suggested that all volunteers are made aware of their role description and requirements to help ensure clarity of the role expectations.

7.4 - It is suggested that the performance issue process is further refined to separate the responsibility for initial discussion and the final decision, providing volunteers with an opportunity of a second opinion, and enabling greater transparency and accountability.

8.1 - A review of three role descriptions highlighted that whilst the key contacts for the volunteers are referenced, it could be more clearly stated how support and supervision of the volunteer will be delivered. It is suggested that the role description could be developed when it is next reviewed to ensure clarity and ensure expectations are managed.

8.3 - In line with best practice, that volunteers may refuse demands they consider unrealistic, beyond the scope of the role or that they do not have the skills to carry out, it is suggested that it is referenced in the Volunteer Policy, Volunteer Handbook and Volunteer Agreement when they are next revised.

Above and Beyond

In March 2021 a new Investing in Volunteers Standard is being introduced. This will be used to assess St Raphael's at the next Investing in Volunteers renewal in 2024/25. It will be introduced to the organisation at the initial workshop and will need to be utilised in the Self-Assessment. Discussion to help St Raphael's undertake the necessary steps to achieve the new Award will also take place at each annual contact.

Overall, it appears that provided St Raphael's address the issues highlighted for further work; the organisation will be well placed to achieve the new Investing in Volunteers Standard. However, there are some areas that would benefit from further consideration. The suggestions below are areas that the organisation should give particular attention to (the numbers in brackets relate to the practices of the 2021 Standard).

Given the aim to develop volunteering across more of the hospice's services it will be important to maintain a consistency of approach (Quality Area 2: Planning for volunteers: 2.1 There are specific and proportionate systems and processes for volunteer involvement that are regularly reviewed).



In line with the hospice's ambition to develop engagement with the wider community, it will be important to make good use of the data to inform targeted recruitment and exploration of different ways in which volunteers can be involved. (Quality Area 3 Volunteer inclusion: 3.2 There is a proactive approach to increasing volunteer diversity, addressing under-representation, and including targeted groups as part of the organisation's overall inclusion, equity and diversity aims).

The organisation will need to ensure that volunteers have an opportunity, appropriate to their role, for support and supervision. This will help address any issues, assist with any development needed, and aid retention (Quality Area 5: Supporting volunteers: 5.1 Volunteers feel appropriately supported in their role and able to discuss all aspects of volunteering AND 5.3 Volunteers have the opportunity to discuss how they are doing).

CONDITIONS (IF APPLICABLE)

Summary of how conditions were met:

The reassessment involved re-interviewing the Volunteer Services Manager, and reviewing the revised Volunteer Policy and new Volunteer Problem Solving Policy - which covers how volunteers can complain about their treatment. Copies of notifications sent to volunteers, Heads of Departments and staff, alerting them to the new policy were also provided.

Utilising the list of volunteers previously issued, four were selected for interview - two of whom were previously interviewed, covering three different work locations and four roles: Receptionist, Driver / Gardner, Hospice Neighbour and Complementary Therapist. The volunteers had been involved between two and fourteen years.

1.2 / 7.5 - The Volunteer Policy has been updated to include a new policy and procedure - signposting a new bespoke Volunteer Problem Solving Policy, for more formal complaints that need to be escalated.

A new Volunteer Handbook is currently being developed, with an expected May issue, that will reiterate the revised policy.

The revised Volunteer Policy and the new Volunteer Problem Solving Policy have been communicated to Heads of Departments and staff via email and briefing. Volunteers who use email have been sent an electronic copy of the policies, and hard copies have been posted to all those who don't.

The volunteer manager had 'collaboratively drawn up the draft policy' with other managers, which was then signed off by the Department and Heads of Departments. Volunteers were 'emailed copies [of the Volunteer Policy and Volunteer Problem Solving Policy] and hard copies posted to those not on email'. Adding that 'support meetings will check it's embedded'. The volunteer team are 'putting together the [volunteer] handbook and the problem-solving policy will be embedded in that'. The policies are available on the N drive for volunteers working at the hospice, and further hard copies are available from volunteer's supervisors.

Volunteers said 'I got an email a couple of weeks ago with the policy documents', and one had 'an email a few weeks ago had two documents ...an updated Volunteer Policy and Volunteer Complaints Procedure', another 'received a hard copy of the problem-solving document and the Volunteer Policy'. For one volunteer the new policy is 'quite short. A step by step guide'. One thought the new policy is 'very well set out and clear' Another said 'it's quite easy to understand'.

Volunteers were confident that they had sufficient information to refer to of the appropriate steps to take if they were unhappy. One said 'I can refer to it if I need to', another said 'if I needed a copy, I would go to the volunteer services manager', and one said 'there are always policies on the desk if you need to follow anything up'. All the volunteers interviewed echoed the view of one who said 'I would go first to the volunteer lead and hopefully resolve the issue with an informal chat'. One said 'there is a procedure if you want to take it further', adding that 'there is a set procedure of how the formal discussion is conducted'.

One said 'before I didn't see how [the policy] affected me, now I can see that it does'.



OR

Summary of why organisation has not met the standard: