

Volunteering Policy

Lead Manager:	Spiritual Care and Volunteering Service Manager
Responsible Director:	AHP Director
Approved by:	Strategic Policy Oversight Committee
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2. Introduction

The NHS Greater Glasgow and Clyde (NHSGGC) Volunteering Policy and accompanying guidance is primarily for use by NHSGGC employees and volunteers.

The preceding 2014 NHSGGC Volunteering Policy has been revised following the publication of:

- Healthcare Improvement Scotland's [New Vision and Strategy for Volunteering in NHS Scotland](#) (2022)
- The Scottish Government's [Volunteering Framework, Volunteering for All: A National Framework](#) (2019)
- Professor Kate Lampard's report ["Themes and lessons learnt from NHS investigations into matters relating to Jimmy Savile"](#) (2015)
- [Clear Pathway Guidance for NHS Boards \(April 2018\)](#)
- Volunteer Scotland's [Volunteer Charter \(2019\)](#).

The achievement of the goals of the NHS is best served by the active participation of members of the community. NHSGGC recognises, values and supports the important part volunteers play in the life and work of the Board and the wider community.

2.1 Purpose

This Volunteering Policy:

- Formally acknowledges and supports the role of volunteers.
- Sets out the principles governing volunteers and provides a set of procedures to ensure good working practice.
- Defines the roles, rights and responsibilities of the organisation and volunteers.
- Encourages the involvement of volunteers from all sections of the community
- Acknowledges the health and wellbeing benefits derived by and from people undertaking volunteering roles.

3. Scope

This policy applies to all employees and volunteers of NHSGGC in all locations.

4. Roles and responsibilities

Volunteer services to the NHS can be provided either in our hospitals or in health services within their local community/HSCP. Both locations are covered by this policy.

4.1 Executive Nurse Director

As Executive Lead for Volunteering, the Executive Nurse Director has overall governance responsibility for NHSGGC's volunteering programmes, and updates the HSCP Chief Officers on new policies or Government directives that directly impact volunteers.

4.2 AHP Director

NHSGGC's AHP Director is the nominated Strategic Lead for Volunteering. Their responsibilities include:

- Communication and engagement with the Volunteering in NHSScotland programme
- Escalation of important issues to the Executive Lead

- Influencing local strategy in keeping with national policy
- Sharing and developing local practice to support the development of volunteering.

4.3 Directors and Chief Officers

NHSGGC expects that each Director/Chief Officer will ensure they have in place appropriate and effective arrangements to implement, monitor and support the volunteering policy, with reference to recruitment, induction, governance, training and support of volunteers (including reimbursement of travel expenses).

For those volunteers who choose to be based in their local communities, the HSCP Chief Officer has responsibility for ensuring safe recruitment, safe practice and appropriate induction and training for volunteers. The HSCP Chief Officer also has ultimate responsibility for ensuring appropriate personal protective equipment (PPE) and identification badges.

4.4 Volunteering Service

The Volunteering Service sits in the AHP Director's portfolio, comprising of one Service Manager and 3 Volunteering Managers for Acute services. The Volunteering Service:

- Implements local policy and procedure in keeping with national and local policy, guidance and their role scope and remit
- Contributes to the national Volunteer Managers Network and the Community of Practice
- Recruits, inducts, trains and supports volunteers in NHSGGC's acute services in line with the principles and standards outlined in this policy
- Liaises with and advises named contacts so they can support their volunteers in line with the principles and standards outlined in this policy.

4.5 Named Contacts

To support service development, staff (clinical leads, operational managers or equivalent) are encouraged to assist in the creation of appropriate, meaningful and productive roles in which volunteers might participate.

Prior to recruiting volunteers, the Volunteering Service will consult and discuss with staff from the area requesting volunteers to ensure that there is a genuine need for volunteers and there is capacity and resources to support them.

A clear role description will be agreed and developed for volunteers prior to involvement.

Each volunteer will be assigned a named contact – a member of NHSGGC staff based in the service the volunteer is supporting - who will have the relevant skills and experience to support and develop volunteers in their role.

4.6 Volunteers

An NHS volunteer is defined as a *“person who gives freely and willingly of their time to help improve the health and wellbeing of patients, carers and users of the NHS in Scotland”*.

Scottish Government CEL 2011 23

NHSGGC offers a [range of volunteer roles](#).

Volunteers are required to:

- Complete induction/training sessions as required.
- Comply with all Board policies and procedures.
- Complete relevant Disclosure Scotland/ PVG Criminal Record checks, depending on role and inform volunteering manager of any criminal conviction incurred after taking up role.
- Sign a volunteer agreement.
- Be aware of immunisation protocols as recommended by the Board.
- Wear NHSGGC identification badges at all times and wear as directed (badges must be returned for disposal at the end of placement).
- Undertake their volunteer duties at agreed times.
- Inform their named contact if they are unable to attend, in advance if possible.
- Give as much notice as possible if unable to continue volunteering.
- Raise any issues of concern relating to their volunteering with their named contact.
- Inform their named contact of any change in personal contact details.
- Inform their named contact of any relevant changes in their health status.
- Work within the scope and remit of their role descriptions.

5. Volunteering Standards

5.1 Outcomes

The [National Volunteering Framework](#) encompasses five high-level outcomes. These outcomes are:

- Volunteering and participation is valued, supported and enabled from the earliest possible age and throughout life.
- Volunteering in all its forms is integrated and recognised in our lives through national and local policy.
- There is an environment and culture which celebrates volunteers and volunteering and all of its benefits.
- The places and spaces where we volunteer are developed, supported and sustained.
- There are diverse, quality and inclusive opportunities for everyone to get involved and stay involved.

NHSGGC reaffirms its commitment to volunteers and the principles of volunteering as highlighted within the Framework.

5.2 Principles

In alignment with Volunteer Scotland's [Volunteer Charter](#), NHSGGC is committed to ensuring that:

- The tasks that volunteers undertake complement, not replace, the work of staff.
- Volunteers are not permitted to take on tasks formerly undertaken by paid employees or to work in ways which facilitate a decrease in paid employment.
- Volunteers are not permitted to do the work of paid staff in times of industrial action. They may continue their regular duties if adequate supervision can be provided.
- Volunteers are appropriately managed, supervised and supported.
- Steps are taken to ensure that staff at all levels and people who use the service are clear about the role of volunteers and to promote good working relationships between staff, patients, service users and volunteers.
- Support is provided for those working alongside volunteers.

- The safety and well-being of patients, users of the service and staff is paramount. The standard of care and conduct of volunteers must be of the same high quality as that of paid staff.
- All volunteers have clear Role Descriptions, which includes the level of [Disclosure Scotland/PVG clearance](#) required.
- The opportunity to have informal discussions with relevant members of staff is available to anyone considering applying to volunteer.
- Additional support will be available to anyone who requires it, to complete the application/recruitment process
- Volunteering roles will be assessed to ensure they do not pose unacceptable clinical risk to patients, staff or volunteers.
- Volunteering is strategically planned, resourced and monitored.

5.3 Age Considerations

For all NHS volunteering opportunities the general law of “duty of care” applies. Consideration must be made of the capability of the individual concerned to undertake the duties and comply with NHS Policy and procedures.

There is no higher age restriction to volunteering. Where volunteers are no longer able to conduct their duties (e.g. due to ill health or disability), consideration should be given to changing their role. Where this is not possible the volunteer should be supported to step down from their role.

Children and young people under 16 years of age can and do make a responsible and active contribution to society through volunteering and community involvement. NHSGGC has an enhanced duty of care to ensure they involve them in a sustainable way which ensures their safety and protection from harm.

An individual risk assessment will be undertaken in advance of any proposed involvement, to assess the risks to the health and safety of the young person. In addition, the [Protection of Children \(Scotland\) Act 2003](#): Guidance for Organisations and the Board’s Child Protection Policy and Guidelines will be followed to ensure that children and young people who are involved with the organisation are protected and appropriate safeguards are in place. Those with responsibility for the young volunteer will be required to undergo Disclosure Scotland checks as appropriate.

There may be specific placements where a minimum age is set, to protect the individual volunteer, balancing the potential benefit, risk and resource involved.

5.4 Work Experience/placements

People who are looking for experience of the NHS can obtain further information on the [Board’s webpages](#).

5.5 Volunteer Driving

Local procedures should be developed for recruitment and management of volunteer drivers. Appendix 1 offers guidance on the range of areas that local procedures should cover.

5.6 Public Engagement

NHSGGC has a statutory duty to ensure that service design, development and delivery be informed by patients, carers and members of the public. There exist various bodies which

enable local service users, carers and the public to make a contribution to the improvement of health services, for example, Integration Joint Boards; Locality Engagement Networks and Forums, or Stakeholder Reference Groups.

The contribution made by Lived Experience Volunteers (LEVs) can be on two different levels. They may only be called upon to participate in a single focus group where individuals will have opportunity to share their personal and lived experience of care; or care in respect of a family member's experience. Alternatively, they may wish to contribute through a longer-term commitment by becoming involved as integral members of committees or forums where their participation is in relation to providing generic insight, which is representative of local communities.

In all cases, LEVs can be distinguished from other volunteers due to the nature of their contribution. However LEVs will be subject to normal Volunteering Recruitment processes including Disclosure Scotland/ PVG checks where the role descriptor indicates regular peer support of patients. As with other volunteers, steps should be taken to make sure that people with protected characteristics are able to, and supported to, participate effectively in support of the organisation.

5.7 Recruitment and Selection

NHSGGC via the Volunteering Service:

- Will promote volunteering opportunities appropriately to ensure our volunteers reflect the wider community. NHSGGC embraces its public sector responsibilities as directed by the Equality Act (2010) and to this end will ensure any barriers to volunteering opportunities on the grounds of: age, disability, gender identity, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation, socio economic status are identified and removed by means of proportionate reasonable adjustment and broader inclusion activity.
- Requires all prospective volunteers to attend an initial informal interview.
- Requires all volunteers to complete an application form, occupational health clearance, governance checks with relevant [Disclosure Scotland/ PVG checks](#) where indicated.
- Requires all volunteers to sign a volunteer agreement indicating they will advise NHSGGC of any criminal convictions incurred after taking up volunteering role.
- All volunteers must provide 2 referees; these references will be taken up following a successful interview.
- Require all volunteers who have lived outside of the UK for more than 6 months in the past 5 years to obtain a criminal record check from the country they lived in (if required for the role). This is commonly referred to as a '[Certificate of Good Conduct](#)' but has many different names including 'Certificate of Clearance' and 'Certificate of no Criminal Conviction'. They will also need to apply for a [Disclosure Scotland/ PVG](#) check, if required for role. Not all volunteer roles qualify for mandatory disclosure clearance and in these cases a robust risk assessment will be undertaken to ensure patient safety is not compromised.
- Will provide information on volunteering in various services via the Board's [webpage on Volunteering](#).
- Will place volunteers in accordance with rigorous volunteer recruitment and selection procedures and with due care and attention to the process of matching volunteers needs and service requirements.
- Will clarify any specific requirements for certain roles by issuing volunteer role descriptions. Volunteers will be matched and placed if their skills meet the requirements of the role.

- Will make all reasonable adjustments to support volunteers to fulfil their potential roles. Recovery from certain experiences or health conditions may affect an individual's ability to undertake certain roles at any given time, advice will be offered to volunteers in these situations.

5.8 Information and Training

NHSGGC will:

- Provide appropriate induction, training and information in line with that provided by Healthcare Improvement Scotland, updated as required.
- Identify named contacts for volunteers in a specific area, who will ensure that volunteers receive appropriate information/training and orientation in relation to the role/tasks to be undertaken. The named contact can provide on-going opportunities for learning and development where required, as well as additional opportunities where possible and appropriate.
- Ensure volunteers complete all appropriate training and in a timely manner before starting role, in particular completion and sign off of mandatory training, induction, code of conduct and Volunteer Agreement form which will be retained on file.
- Refresher training will be re-issued annually in conjunction with Volunteer Experience Survey.

5.9 Support, Supervision and Recognition

- Each volunteer will be assigned to a staff member who will have the relevant skills and experience to support and develop volunteers in their role.
- The role of the volunteer will be regularly reviewed to ensure that they have the necessary support, encouragement, guidance and training, if appropriate, to undertake the assigned task.
- Volunteers will be given the opportunity to share their views on their role with appropriate NHS staff.
- Volunteers will be expected to conduct themselves in a reasonable manner, perform their task(s) to an acceptable standard and comply with organizational policies and procedures as applicable to NHS staff e.g. NHS Code of Conduct, Infection Control, Violence and Aggression. When this standard is not met, appropriate support will be offered to improve the situation. If the volunteer does not then improve sufficiently, their involvement will be reviewed in line with organisational policies and procedures. In the case of serious breach of conduct or inability to perform agreed tasks, the named contact reserves the right to end the volunteer placement.
- Following a period of six months active volunteering, volunteers may request a reference from their named contact.
- The contribution of volunteers will be recognised and celebrated by the Board, for example through the annual Staff awards ceremony, and promotion of good news stories during National Volunteers Week.

5.10 Funding and Expenses

NHSGGC recognises that, whilst volunteer involvement is an investment with significant benefits, there are many associated costs, including staff time.

Within relevant budgets, the Board will fund the costs associated with volunteering - marketing, recruitment, selection, training, development and support - and will ensure there is a fair, transparent and accessible system for reimbursing authorised reasonable out-of-pocket expenses for volunteers (as outlined in Appendix 2).

Where appropriate, consideration will be given for the need to identify designated posts to manage volunteers and develop volunteering.

NHSGGC will ensure that:

- NHSGGC complies with [guidance](#) issued from Scottish Government to ensure a fair, consistent and transparent system for the reimbursement of out-of-pocket expenses is in place for volunteers as outlined in Appendix 2.
- Volunteers are treated in the same way as paid staff for liability purposes, providing their duties are within the parameters set out in role descriptions.
- Volunteers are given information on other legislation and policies which may affect them (e.g. Health and Safety, Infection Control, Data Protection).

5.11 Indirect Volunteering

NHSGGC reaffirms its commitment to volunteers and the principles of volunteering as highlighted within the Framework. A commitment to the same principles is expected from voluntary organisations whose volunteers carry out duties on NHSGGC premises.

NHSGGC is committed to ensure the same “Duty of Care” principles apply to all volunteers who carry out duties on NHS premises, regardless of the source of recruitment.

The Board respects the independence of these voluntary organisations and recognises that they are directly responsible for the management of volunteers who support specific projects or services in partnership with the NHSGGC.

Notwithstanding, the Board expects that voluntary organisations providing a service to NHSGGC will have volunteering policies and procedures, which adopt similar standards to those outlined in this Policy, especially in terms of training, induction, conduct and governance (including Disclosure Scotland/PVG checks as appropriate).

Following recommendations from “Clear Pathway” guidance and The “Lampard Report”, Service Level Agreements (SLAs) will be negotiated between NHSGGC and partner organisations to ensure governance standards for all volunteers match those of NHSGGC. SLAs will be signed by a senior representative from the 3rd sector organisation and by a senior NHS manager within the area facilitating 3rd sector involvement. SLAs will be reviewed on a regular basis, every 3 years or earlier if circumstances dictate. A template SLA is available from the volunteering service (ggc.voluntary.services@nhs.scot).

To support the assurance of appropriate governance for volunteer recruitment, practice and roles, a Volunteering Strategic Oversight Forum will meet quarterly, chaired by NHSGGC’s Strategic Lead for Volunteering.

5.12 Relationships with the Voluntary Sector

NHSGGC recognises the contribution to volunteering from third sector organisations. [TSI Volunteer Centres](#) have a primary role in promoting volunteering, providing useful information and training for volunteer-involving organisations in both the public and third sectors.

5.13 Encouraging Employer-supported Volunteering

The Board recognises, values and supports the important contribution that their own staff who already volunteer, make to communities. Where possible, the Board will support employees who are involved in volunteering or who may consider volunteering in the future.

6. Review

The Board is committed to an ongoing process of monitoring and evaluation of this Policy in consultation with all relevant parties every three years, or more frequently if relevant legislation or guidance requires it. The Policy will reflect and complement corporate objectives and priorities, and will be reviewed annually by the Volunteering Service in relation to these.

7. Communication and Implementation Plan

When approved, the policy will be cascaded via NMAHP and published on the NHSGGC volunteering webpage. Corporate Communications will be asked to communicate the policy across NHSGGC.

8. Monitoring

In addition to agreed governance routes, the HIS volunteering service encourage all health and social care organizations involving volunteers to participate in an annual HIS volunteering evaluation.

As part of this, NHSGGC acute volunteers, patients and staff will be asked about their experience of volunteering to provide assurance that this is in line with the principles and standards set out in this policy.

In addition to these outcomes we will continue to monitor the levels of volunteer activity within our hospitals, although it must be stressed that this should not be regarded in a performance management context. Activity will be monitored to enable us to quantify and appreciate the contribution of volunteers, and also to alert us to any significant changes in our volunteer population or their contribution.

The HSCPs will use their own local measurements, but again, this will not be from a performance management perspective.

9. Impact Assessment

An equality impact assessment has been undertaken and published on the Equalities in Health website www.equalitiesinhealth.org

Further assurance is as set out in the Assurance Checklist in Appendix 4.

10. Appendix 1 - Volunteer Drivers

There are small numbers of volunteers who drive in the course of their volunteering role.

Local policies and procedures will apply in line with the Scottish Government [DL\(2023\)29.pdf](#)

We would expect all local policies and procedures to make reference to the following:

1. Vetting Volunteers:

Volunteer drivers will be recruited, selected, trained, supervised and supported in the same way as other volunteers in accordance with NHSGGC Volunteering Policy.

2. Insurance:

- Legal requirements: All Volunteer Drivers will be required to produce their Drivers Licence, annual Insurance Policies and MOT Certificates (if applicable) to the department responsible for their recruitment.
- All volunteer drivers must act in accordance with [NHSGGC's Work Related Driving Policy](#), subject to individual risk assessment where required.

3. Mileage Reimbursement – see guidance on reimbursement of volunteer expenses.

4. Changes to health:

Volunteer drivers should report any changes to their health or any serious accidents, which may affect their ability to continue in this role.

11. Appendix 2 – Reimbursement of Out of Pocket Expenses for Volunteers

1. Introduction

1.1 Scope

NHS Circular [DL\(2023\)29.pdf \(scot.nhs.uk\)](#) provides NHS Boards with guidance on the payment of out of pocket expenses to volunteers. This guidance supersedes that given in NHS Circular No. CEL 23 (2011) and DL (2022) 34.

This guidance provides additional clarity or further details where required.

Unless otherwise stated below, arrangements for paying out of pocket expenses to volunteers are as stated in [DL\(2023\)29.pdf \(scot.nhs.uk\)](#). The [DL\(2023\)29.pdf \(scot.nhs.uk\)](#) should be therefore be referred to for specific guidance on expenses payments in the first instance.

The guidance should be read in conjunction with the extant NHSGGC Volunteering Policy.

1.2 Reimbursement Conditions

Volunteers should not be given set amounts (or flat rate payments) or additional payment that do not reflect actual costs. The payment of 'flat rates' can constitute a wage; in this situation the organisation could be liable to pay the volunteer for all the time worked. In addition, this could be regarded as a contract by a tribunal or similar body giving volunteers the same rights as employees, and could have the potential of requiring NHSGGC to comply with minimum wage legislation.

Any potential personal tax liability arising from the payment of expenses will be the responsibility of the individual claimant. Such payments may also put volunteers' benefits at risk; volunteers concerned about reimbursement payments affecting current benefits claims should contact their Job Centre Plus for further advice.

Volunteers should be aware that 'out of pocket' expense claims should be made to one organisation only. If it becomes apparent that a volunteer is making the same claim from another organisation reimbursement through NHSGGC will be withdrawn, and repayment of expenses overpaid may be sought from the volunteer.

Asylum seekers are also affected, with strict Home Office guidelines advising that anything beyond remuneration for actual expenses will be construed as payment for illegal work.

NHSGGC staff must ensure volunteers are aware of the possibility that they may need to pay tax on any potential profit incurred from mileage rates in excess of cost incurred, in line with [HMRC guidance](#).

2 Travel Expenses

A sample claim form is included at Annex 1.

2.1 Public transport or commuting rate

Based on the guidance in [DL\(2023\)29.pdf \(scot.nhs.uk\)](#) and in line with the current [approved mileage rate](#) by HMRC, the public transport or commuting rate for volunteers in NHSGGC is set at **45p per mile**.

2.2 Car parking

On production of appropriate receipts, car parking costs can be reclaimed for the duration of the time spent volunteering.

3. Motor vehicle insurance

When using their vehicles in the performance of their duties, volunteers must ensure they possess a valid driving license, MOT certificate and motor insurance which covers business travel, that he or she is fit to drive and drives safely and that they obey the relevant laws e.g. speed limits.

The volunteer must inform NHSGGC of a status change.

NHSGGC staff are asked to remind volunteers of this responsibility.

A standard letter for the volunteer to send to their insurance company is attached at Annex 3. Any costs levied by an insurer for providing this may be reclaimed by the volunteer.

4. Payment process

4.1 The payment of expenses is normally made by cheque; however, if it is preferable for the volunteer, arrangements for some volunteers can be made for payment to be paid by BACS transfer directly into the volunteer's bank accounts. Volunteers must complete the form at Annex 2 if they wish to be paid by BACS. Unfortunately this process is not possible for NHSGGC Acute Volunteers.

4.2 Where the nominated individual is unable to approve the expense claim due to incomplete or insufficient information, or where expenses are deemed ineligible, the expense claim will be returned to the individual for amendment with the details of the reason for return. The volunteer may then resubmit the claim.

4.3 To ensure there is equal opportunity for participation in volunteering activities there may be a need, where small amounts of expenses are involved, to pay out of pocket expenses in cash on the day of the activity (usually through local Cashier's Office) and in some cases in advance. Advances may also be paid by cheque or by BACS. Volunteers should then complete and submit a travel claim form showing the actual expenses and the advance received as soon as possible following the travel.

Please complete in BLOCK CAPITALS. All expense claims must be agreed in advance. You must provide receipts and attach them to this form.

Name	
Address	
Postcode	

Period & Placement	
From	
To	
Voluntary Placement	

		Car Mileage			Travel Fares £	Other Expenses (please list)	Cost of Other Expenses
Date	Details of Volunteering	No.of Miles	Rate	Total			
			£0.45				

I declare that the above travelling and subsistence expenses claimed have been incurred by me. I also declare that no other claim for reimbursement from public or charitable funds has been nor will be made in respect of this claim.

Name		Signature	
Verified by		Signature	
Payment Authorised by			

Date	
Date	
Date	

For Office Use:	Form of Payment:	Charge to Endowment Fund
Payment made by:..... Date:.....	Bacs / Cheque / Cash	

ANNEX 2

Bank details for payments via B.A.C.S.

Please complete form using **BLOCK CAPITALS**.

Payee name:	Title: Forename: Surname:
Home Address:	Address line 1: Address line 2: Town / City:Postcode:
Communication:	Home phone number E-mail address
Bank/Building Society:	Name: Address line 1: Address line 2: Town/City:Postcode:
Account details:	Sort/Swift code: Account No: Roll number:

Signature:

Date

Please return completed form by:

Fax [*insert local contact details*]

or

Post [*insert local contact details*]

ANNEX 3

Name

Address

Date

To (Insurance Company)

Re (Policy Number)

Dear Sirs

I intend to undertake voluntary work for NHS Greater Glasgow and Clyde and I will use my vehicle to carry out voluntary duties and may carry passengers as requested. I will receive a mileage allowance for these journeys to contribute to fuel and the running costs of my vehicle. Such expenses will be in accordance with the HM Revenue & Customs tax free rate per mile. I estimate the number of miles driven under this voluntary basis will be xxxxx per year.

I should be grateful if you would confirm that my existing policy covers me for such volunteer driving. Please complete the reverse side of this letter and return to me.

Please also confirm that my insurance policy contains a clause indemnifying NHS Greater Glasgow and Clyde, with which I am a volunteer, against third party claims arising out of the use of my vehicle for such voluntary work.

Yours faithfully

(Policy Holder)

12. Appendix 3

Assurance Checklist

Name of Policy **Volunteering Policy**

Approving Body or Bodies

(in order) Strategic Policy Oversight Committee
Area Partnership Forum (secretariat)
Area Partnership Forum (workforce)
END Core Group

Date of Approval 7 November 2024

3 February 2025

12 February 2025

7 March 2025

Director/Policy Lead AHP Director

	Requirement	Comment
Scope	The scope is clearly defined. There is clear evidence that it does not duplicate existing policy. Recognition is given where it overlaps with or supplements existing policy.	Policy last formal review 2014. There has been significant organisational and operational change within Volunteering service since. The policy sets out all aspects of volunteering roles, recruitment, governance and structure and include updated recommendation HRMC, SG, HIS re volunteer travel remuneration increase.
Consultation	There has been sufficient consultation with those affected by the policy, including those with responsibility for implementation.	Volunteering Service, HSCP, HIS, END SMT, volunteers and third sector partners were consulted on the draft policy/ EQIA. Policy approved by MNAHP Strategic Policy Oversight Committee, and tabled for

		approval to Area Partnership Forum. Noted by Nursing and Midwifery Steering Council.
Staff Partnership	The policy development requires collaboration with, and agreement of, Staff Partnership.	Staff side representation requested however no nominations were received. Staff side comment again requested twice in November; no comments received. Policy approved by MNAHP Strategic Policy Oversight Committee, and tabled for approval to Area Partnership Forum. Noted by Nursing and Midwifery Steering Council.
Communications Plan	There is a comprehensive communication and implementation plan in place.	When approved, the policy will be cascaded via NMAHP and published on the NHSGGC volunteering webpage
Finance	Cost implications are fully understood and agreed by budget holders, or additional resource Secured.	Additional cost for mileage uplift for acute volunteering service can be met within existing Endowments allocation until 2025.
Equalities	The policy has been subject to EQIA assessment and shared with the Corporate Inequalities Team.	An equality impact assessment has been undertaken and published on the Equalities in Health website www.equalitiesinhealth.org
Human Resources	Implications for staff are fully understood and agreed.	N/A
Sustainability	Impact on the environment (e.g. carbon emissions; travel) is understood and agreed.	Volunteers are encouraged to use public transport wherever possible.
Risk	Any risks to the organisation are fully understood and agreed as a result of this Policy.	Risk to NHSGGC of reduced number of volunteers within NHSGGC. Volunteers enhance and improved the experience of both staff and patients within NHSGGC. If policy not approved, in particular approval to adopt

		recommended increase in travel expenses from 24p to 45p per mile, volunteer may choose to assist elsewhere.
Service Delivery	Implications for service delivery including achievement of performance targets are fully understood and agreed.	N/A
Review	A review has been carried out to evaluate the effectiveness of the current policy.	The acute volunteering service is participating in a HIS volunteering evaluation. As part of this, NHSGGC acute volunteers, patients and staff will be asked about their experience of volunteering.

The completed Assurance Checklist should be submitted to Iain Paterson, Corporate Services Manager (ian.paterson2@ggc.scot.nhs.uk) following approval of the Policy.