EXECUTIVE SUMMARY

PROJECT TOPIC	Pennine Lancashire Volunteer Project 2017 - 2019		
PREPARED BY	Maggie Asquith, Volunteer Project Lead	DATE	31/10/2019
OVERVIEW	The project was funded by Health Education England (HEE) with the specific aim of reviewing volunteer services across the NHS, Local Authority and Voluntary Community and Faith Sector to develop a holistic approach to supporting the Integrated Care System (ICS). Twelve organisations formed the project partnership working group, representing thousands of active volunteers deployed in Health and Social Care. Inspired by the 'Five ways to wellbeing' ethos and in line with the Lampard Report (2015) and Kings Fund Review (2018) all working group activity has been in a strong spirit of partnership and so co-production.		
STRATEGIC AIMS	 Ensure that volunteers are consistently trained, recruited and supported in Pennine Lancashire and receive a quality volunteering experience Raise the profile of volunteering and the associated benefits Support communities and vulnerable people in their health and wellbeing; either directly from services or through volunteering itself Ensure that appropriate support, resources and guidance is available for the management of volunteers, including sharing challenges, sharing good practice and ensuring the supporting infrastructure is fit for purpose Support the future supply of the health and care workforce. 		
PROBLEMS AND SOLUTIONS	Voluntary services across the ICS are disparate with variations in governance and dat constant tensions for VCFS organisations between internal values, their raison d'etre environment of external stakeholders to attract funding. There are contradictory ex and now the massive change in service delivery as the ICS, culture and people must in working, together. Against this backdrop, the main drivers for change are a lack of standardisation in th deployment of volunteers and the imperative need to support the emerging ICS prio focused on pragmatic solutions underpinned by strong partnership.	and the nee pectations, f merge and de e manageme	d to work in the inancial constraints eliver new ways of nt, training and
SUMMARY OF REPORT	 Key achievements: The <i>Pennine Lancashire Volunteer Strategy</i> was launched in August 2018 and we Integrated Care Partnership setting out five strategic aims and eight workstream <i>Volunteer Learning Passport</i>. The passport comprises fifteen mandatory e-leat to nine Volunteer Certificate Standards forming a national volunteer framework with partner organisations to high quality standards; they are portable and free! <i>Learning and Development for Volunteer Managers</i>. Learning needs were ide workshops and e-surveys. Workshop delegates represented some 35 different organisations. Evaluation data has helped shape future learning and developm? A <i>Volunteers into Health & Social Care Scheme'</i> is being developed in partnersh to volunteering and ultimately work for people requiring specialist support. <i>Develop Digital infrastructure</i>. A service level agreement was implemented to East Lancashire Hospital NHS Trust to Lancashire Volunteer Partnership (a public completely transformed volunteer services delivery by enabling detailed reportitival training compliance and safer recruitment. Efficiency gains are estimated at 510 for every £1 of investment. <i>Volunteer Peer Support Guidance</i>. Following extensive research and in line we document for Pennine Lancashire Volunteers Guidance. There are many ways volunteers are thanked for the time they give. The NCVO survey (January 20) reasons for volunteering were not about reward, but about improved health and Generic guidance has been produced. 	ns. rning module . The module y accessible ntified and c Health & So ent events. ip with DWP transfer vole sector hub) ng on volunt 0% and socia ith good prace PSW) has be (and pitfalls) 19) indicated	es which are aligned les were co-designed for all volunteers. lelivered through cial Care to facilitate access unteer records from . This has eer deployment, al value has been stice a guidance en produced. around how that the main
CHALLENGES	There is a need to 'Change the Tune' based on current thinking that organisations w from thinking more strategically about integration and that there can sometimes be of fund-raising over friend-raising. Volunteer-led organisations need stable finance partnerships which attract income. There is also the notion that it takes a whole vil Managers can only realise the full potential of effective volunteer engagement if tha entire staff team and all stake holders. That village is more likely to see the full be community.	e an understa ial support to <i>lage to raise</i> t responsibili nefits of volu	ndable prioritisation focus on developing a child . Volunteer ty sits with the nteers in their

	to chunk it up into more meaningful clusters that reflect the distinctions between organisation-led and volunteer-led services and by funding type. This will help to focus future research and development.	
CONCLUSION	In the 'Road Ahead' (NCVO January 2019) we are reminded that for the VCFS, despite the phase of decided uncertainty that our country enters, the key message is that the VCFS will be critical in holding the order together in the short term, and finding solutions to renewing and reforming to ensure its survival in the long term. The health and social care sector have high expectations of the voluntary sector and want to see a reflection of their values in everything they do. Meeting these expectations and demonstrably raising their standards will continue to be one of the most important steps to take over the coming years. How the VCFS go about making a difference will be just as important as what that difference is. This project has only skimmed the surface of all that could be done to support integration of volunteering into Health & Social Care within the ICS, however indicators suggest many exciting possibilities.	

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