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# Making a difference through volunteering

The impact of volunteers who support  
and care for people at home

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## Executive Summary

# Executive Summary



## Introducing the research

This research project was carried out over the course of a year – between May 2005 and May 2006 – with the objective of identifying and highlighting the distinctive contribution of volunteers involved in providing support to people also receiving different health and social care support from statutory services – mainly within or connected to home and intermediate care services.

The research was commissioned by three national charities which between them provide and write on a range of volunteer services, activities and policy developments. This project marked the first joint initiative designed and undertaken by Community Service Volunteers (CSV), British Red Cross (BRC) and Help the Aged (HtA), and is an important demonstration of the influence of strong partnerships in shaping services and policy developments – by pooling resources and sharing knowledge about what works. The work was made possible through funding provided by Lloyds TSB Foundation.

The research work was carried out by the Older People's Programme, with a focus on six study sites in England and Wales which had been identified and 'signed up' by the three partners. Two project management groups were established – a national Reference Group to provide overall direction for the project, and an Operations Group to oversee progress of the research against the agreed project plan.

## The fieldwork

The research covered a number of issues using a variety of methods and data-sets, as follows:

- A background review of related literature to help inform the design of the fieldwork and to identify particular gaps for this research to focus upon
- Extensive fieldwork within the six study sites including: face to face interviews with paid staff at the local organisations providing the volunteer services and schemes; volunteers and service users; one to one and small group discussions with volunteers and service users; and interviews with commissioners and funders of services
- Two postal surveys in the form of focused questionnaires were sent to volunteers and service users and were designed to capture detailed

information about and characteristics of volunteers (who they are, what they do and how they do it); what people value most about volunteering and being supported by volunteers; and the impact on people's independence, quality of life, health and wellbeing achieved through this support

- A one day event towards the end of the project where representatives from the study sites, members of the research team and of the Reference and Operations Groups came together to discuss and challenge the research findings, and to share experiences and good practice from different areas and schemes.

## Key findings and important messages

Fourteen cross cutting themes emerged from the analysis of this fieldwork, which represent the strong, resonating messages from across all the above data-sets and all six study sites.

### 14 Cross Cutting Themes

1. Impact on social isolation
2. Contributing to independence and wellbeing
3. Responding to diversity
4. Relationships between volunteers and service users
5. What volunteers really do
6. Flexibility and freedom as key motivators for volunteering
7. The thorny issue of personal care
8. The importance of time
9. Volunteer coordinators' roles
10. Raising awareness and profile of volunteer services and schemes
11. Provision and delivery of volunteer services
12. Partnerships and partnership working
13. Sustainable commissioning practices
14. Measuring impact

Twelve areas for further development and action are also presented in the report, summarised here, which have implications for national policy and practice developments as well as local services and activities.

## 12 Areas for Further Development and Action

1. Capturing and promoting the full impact of volunteer services
2. Developing qualitative and outcome measures
3. Recognising what volunteers do to reduce isolation and loneliness
4. Strengthening partnerships between volunteer services and public services
5. Joining up Government policy on independence, wellbeing, active communities, citizenship and civic renewal
6. Implementing full cost recovery for volunteer services
7. Building volunteer services into commissioning plans, including Local Area Agreements
8. Promoting the distinctive, diverse and flexible roles of volunteers
9. An open and honest debate about 'personal care' delivered by volunteers
10. Enabling management processes to support volunteers
11. Harnessing volunteers' and service users' experiences to develop volunteer services
12. Developing 'volunteer advocates', in partnership with national advisory bodies and local advocacy organisations.

A synopsis of the cross cutting themes are presented first in this Summary, followed by an overview of the recommended areas for future action. Further details on all of these elements are contained within the main *Making a Difference Through Volunteering* report.

## Cross Cutting Themes

1. **Social isolation** was found to be the biggest issue facing people supported by volunteers. The loneliness experienced by a large number of people was emphasised by many individuals, with different perspectives, involved in the research. Vitaly, volunteers help to reduce isolation and loneliness for many of the people they support through the human contact they provide and the social interaction that results – which is often otherwise very limited. Over two thirds of the volunteers who took part in the postal survey emphasised that the most important thing they provide is emotional or personal support, often described as a 'listening ear' or 'social visits'. As one service user told us: *"K spends time with me and explains things...it's uplifting knowing someone's coming round and take me out...knowing someone is coming gives me the incentive to wash my hair"*.
2. Volunteers help to increase or maintain **independence and wellbeing** and improve quality of life for the people they support – and also gain many benefits themselves through volunteering. The majority of respondents to both postal surveys reported that the services provided by volunteers had a positive impact on the recipients' quality of life. Over 80% of the service users who took part, told us that the support they received from volunteers had improved their quality of life. The following quotes illustrate the very personal examples of how volunteers had helped them: *".. always there when I get worried - [I'm] much happier"; "..they got me over a difficult time and helped keep me sane"; "..I can continue to live a day to day life in my own home"*. In addition to reduced loneliness, volunteers also provide a boost for service users – often simply through demonstrating that 'someone cares' and actually wants to spend time with that person. This boost in confidence and self esteem in turn leads to improved physical and mental wellbeing. Volunteers themselves also often reported increases in their own self esteem, and a great sense of satisfaction through making a contribution and helping others. 90% of volunteers who took part in the research reported increases in their own self esteem and confidence through volunteering; and another

70% described how volunteering “helps keep me active and busy”. Many also described the mutual support gained through relationships with service users, other volunteers and paid staff at the organisations.

3. The importance of **identifying and responding to volunteers’ and service users’ very differing needs, preferences and situations** was highlighted by many respondents. Everyone is different and wants to be treated as an individual. Volunteers are a varied group and need flexible levels and types of support – and different options for involvement. Service users told us that they appreciate and value the flexibility of volunteers, and their ability to respond to their particular needs and personal circumstances in order to provide the things they cherished the most – a listening ear and companionship. This is often in contrast with other providers of services, where a proscribed range of support within very strict time limits was described. Finally, volunteers and service users in two of the six sites highlighted the importance of maintaining or re-establishing connections with their own cultural and/or community background through the contacts made through volunteering and individual volunteers. Volunteers from Nubian Life in Hammersmith & Fulham, and members of the knitting groups in Anglesey both talked about opportunities to have conversations in their own language; attending a community centre where the food, conversation and music was comforting and familiar; and being supported by someone who understands your culture and history.
4. The rapport and **quality of the relationship between volunteers and service users** are of huge importance – and often build over a short period of time, demonstrating both the strong inter-personal skills of many volunteers and the emphasis they place on this key feature of the support they provide. The relationships described to us were frequently referred to as friendships. Service users often reported that they had more trust and confidence in volunteers than in other service providers. One powerful story shared by both the service user and volunteer in one of the sites illustrates this theme: *“I felt very supported by them...felt a spark between me and the [volunteer] team. We had a laugh. They are*

*human...treated me with dignity and respect... I felt bullied by the rehab team - bullied to go into the kitchen and cook, information had not been passed onto each other. For three weeks I had to keep telling them what my situation was – treat me like I was stupid and incapable. Felt intrusion in my own home and not supported. I was so impressed by [volunteer] that I want to become a volunteer myself”*. Some participants also described being able to talk to volunteers about things that they felt they could not discuss with others – even family members. Volunteers were often viewed as being independent, impartial and non-judgmental, with ‘no vested interests’ or ‘hidden agendas’. Finally, volunteers also clearly valued the relationships they developed with service users. 90% of volunteers in the survey reported personal satisfaction through helping others; 60% through meeting new people and making friends; and a number of respondents also highlighted the importance of *“doing a job no-one else will”*.

5. **A huge and varied range of tasks** are carried out by volunteers on behalf of service users. These are often ‘services’ which are not provided by any other sector (eg shopping, housework, accompanying people on trips, and dog walking). This range of tasks even included some aspects of personal care (see theme 7). Even where the volunteer service or scheme in question was focused on a very particular task – such as help with transport – volunteers had usually contributed much more than the practical task itself. For example: listening to problems, helping people to get ready to leave the house, picking up prescriptions, and accompanying people on appointments. In addition to the direct support through performing the tasks themselves, the ways in which these are tasks are carried out by volunteers was emphasized by some respondents – who valued the sense that these were carried out ‘willingly, like a friend would’. This seemed to be particularly important when supporting people through difficult transitions and life changes such as returning home from hospital and coping with ill-health or disability, and bereavement. A picture of volunteers as people who often act as advocates for service users, or support them to advocate for themselves, also emerged from the research.

6. The **flexibility of support** provided, whilst much appreciated by service users, was also found to be an important motivation for volunteers themselves. Many respondents talked about how much they valued the opportunity to apply their own common sense to what they were doing, within clear parameters, in order to respond to individuals' particular needs. Flexibility in the level and type of commitment offered to the schemes is also a key feature here, to ensure different people are attracted to join, and stay with, the organisations as volunteers. Bureaucracy (in terms of excessive paperwork and over prescriptive procedures) was generally viewed as a deterrent to volunteering.
7. Flexibility and freedom in what volunteers do can mean that volunteers become involved in providing what we have described in this report as '**the thorny issue of personal care**'. This is an area of considerable contention, and indeed has stimulated much debate amongst the stakeholders and partners involved in this research. It is clearly a critical area that is also often raised by managers, commissioners and practitioners from health and social care services – especially in relation to perceived and actual risks in supporting potentially vulnerable people; and in discussing the actual and potential role of volunteers within these areas. This research has demonstrated the powerful and positive impact that volunteer support has on individuals' health, independence and overall quality of life – and we believe that this is partly because this support includes some aspects of personal care, which we heard no-one else either can or does provide.
8. The subject of **Time** was an area that emerged throughout the research in a number of different ways. Service users in all six areas frequently described time as 'hanging heavily', with volunteers helping to break up long periods of loneliness and isolation. The feeling that volunteers do not have to adhere so rigidly to strict timetables (as in the case of paid staff) was also described positively. This is mainly due to how volunteers approach their role – starting with what needs to be done and converting that to whatever is required to achieve it – rather than being limited at the beginning by how much time is available. Service users clearly welcome this, with *'not having the feeling that the clock is ticking'* when a volunteer is visiting. Time is also a key ingredient in enabling mutually beneficial relationships to build between volunteers and service users, especially through the sense of time shared and the fact that volunteers have chosen to be there: *"it makes all the difference knowing someone will call in once a week...time for a chat and a cup of tea"*. One aspect of time, however, did prompt differing responses from both service users and volunteers: time limited support provided by some of the volunteer services (eg Home from Hospital schemes) was seen in a positive light by some people, providing a useful boundary and framework for achieving specific goals; however many people also found this kind of support difficult, reporting that they missed the contact with individuals and were concerned about how some people would cope once the support period had ended.
9. **Management, co-ordination and support of volunteers** are central to the ongoing effectiveness of volunteer services – both on an individual and a group basis – to ensure that support provided to service users has a positive impact and is of a consistently high quality. This is only likely to happen through effective organisational arrangements covering the recruitment, induction and training, supervision, support, ongoing motivation, development and active retention of volunteers. The nature of this type of volunteering also means that emotional support needs to be available for volunteers – although (as previously highlighted) it is important to tailor the support offered to meet individual volunteers' particular needs.
10. Many participants involved in this research stressed the **need for a higher profile for volunteer schemes and services** – particularly amongst funders and service commissioners (both individual donors and organisations); staff working for other service providers; and potential service users and volunteers. Not many people involved with the schemes in these six sites (either as volunteers or as service users) had any prior knowledge of the scheme's existence, the work carried out and the enormous impact it has on people's lives, before their direct involvement in it.

11. There are often several organisations involved in delivering volunteer services – often in different capacities such as funder, commissioner and provider, and with **varying degrees of partnership building and joint working** going on between them. In addition, the boundaries between traditional statutory and voluntary organisations and the services that each type of body provides are becoming increasingly blurred. Against this backdrop, it is increasingly important for organisations and their staff and volunteers to work in partnership, as a broader network or community of interest, within a wide system of care and support for individuals. Such networks, broader teams and systems are evolving and developing more effectively in some areas than others. It is vital that people in each part of the ‘system’ recognise and appreciate the contribution of others, both paid and unpaid. For example, medical staff recognising and respecting the role of volunteer drivers in ensuring patients get to their appointments on time.
12. The effective delivery of services is therefore increasingly dependent upon **positive and beneficial relationships and joint processes** being built and maintained between different organisations in each area. Some people may refuse statutory help, but accept help from a volunteer service and/or voluntary organisation. It is therefore vital that organisations work together to ensure that people do not ‘*fall through the gaps*’ and are provided with services which fit with their needs. Volunteers often provide complementary services to statutory organisations or services, which the latter are unable to provide. Systems and mechanisms that enable joint working across sectors and different providers are crucial in ensuring that holistic ‘packages’ of services are delivered, based on individuals’ needs, circumstances and preferences. Volunteers in these six areas were often found to act as a ‘glue’ for people receiving support from different agencies. Voluntary organisations can also develop their own systems and practices through working together to share information and experiences about what works well, and for whom in the delivery of these services.
13. Funding for volunteer services is frequently short term and can involve an array of different contracts from different types of funders with varying terms and conditions. Funding for volunteer services is often precarious and can be one of the first things to be cut when budgets are under pressure. This leads to a great deal of anxiety for all involved. The situation does vary from scheme to scheme – with larger organisations generally having greater economies of scale with more secure funding and a stronger track record of skillful contract negotiation, management experience and resources. Commissioning practices do not always support the longer term development of volunteer services, especially those run by smaller organisations – who may at times be best placed to deliver services in a particular area or to meet a particular need.
14. Finally, throughout this project the positive impacts that volunteer support can have, both on their own lives and on those of the people they support, has been seen in many ways. Quantitative measures of the impact of volunteering only give a small part of the picture, yet these are the measures which are most frequently used to make decisions on which these services will be funded. The **absence of clear outcome measures and meaningful qualitative indicators** of effectiveness was striking, and requires further work to address this gap – for example as part of the wider national debates and policy developments around wellbeing, independence and citizenship.

## Recommendations and areas for future action

1. It is essential that both commissioning organisations and service providers can, and do, **measure the full impact of volunteer services** – and for this impact to be more widely understood by all parties involved in commissioning, funding, providing, volunteering (or potentially volunteering), using (or potentially using) and referring other people to these services.
2. **Qualitative and outcome measures must be developed**, communicated and widely understood for the real impact of volunteer services to be determined effectively. Case studies and life stories

can be very powerful, and could be used more prominently to communicate the benefits and outcomes of volunteer support, and of volunteering to a much wider range of audiences – including through local and national media.

Individual service user and volunteer measures of how their quality of life has been enhanced could also be developed further and used more widely. There is a key role here for national bodies and government departments who are progressing similar issues in relation to statutory and other VCS service provision. The Department of Health in England and the Department for Health and Social Services in Wales; the Active Communities Directorate in England and the Department for Local Government and Culture in Wales; and the three partner organisations who commissioned this research, are in a prime position to take this work forward to design a practical Outcomes and Impact Assessment Framework for volunteer services and support associated with health and social care.

3. **Recognising the role played by volunteers in reducing the isolation and loneliness** experienced by some of the most vulnerable people in society is of paramount importance. The boost to self esteem and confidence which people receiving volunteer services often experience – sometimes through simply knowing that someone cares – and the subsequent positive impact on their wellbeing and ability to live as independently as possible, need to be particularly acknowledged and fully exploited by service commissioners/funders, policy makers, researchers, and other service providers. The role which volunteer services can play in supporting policies and helping to attain objectives and targets should not be under-estimated.
4. **Effective methods of partnership working need to be developed and continuously nurtured** to secure the ongoing and appropriate provision of volunteer services – which are complementary to and work effectively alongside statutory health and social care services available within the same area. Staff in many different positions working within a range of partner organisations, need to be more aware of the role of volunteers, and their contributions both to the individuals supported and the effective running and impact of other services – including the ones they provide.

5. At a national level this needs to be **mirrored by the way in which Government departments develop, implement and monitor public and social policies and practices** that promote health, independence and wellbeing alongside and in synchrony with public policy on active communities, civil renewal and citizenship. There needs to be far greater synergy and evidence of joint working on these developments across the Department of Health, DCLG and Cabinet Office, the Home Office, Regional Government and local planning decisions. Past attempts to achieve this through ring-fenced project funding (such as Section 64 grants) have often, inadvertently, led to short term-ism of contracting arrangements and stop-start service developments at a local level.
6. Volunteer services often provide excellent value for money – but are not a cheap alternative. It is crucial that robust and effective structures are in place to support and develop volunteers and the services they provide, and that these are fully costed and considered when services are planned and developed. Whilst the Treasury and Government are committed to the implementation of full cost recovery for public services provided by voluntary organisations, this has tended to be targeted at public service delivery previously provided by statutory agencies. Volunteer services, however, tend to be excluded from this level of attention and as a result remain under-resourced. **Full cost recovery also needs to be fully implemented to ensure volunteer service provision is sustainable and properly resourced.** In view of the small scale of many local schemes and providers, with a consequent lack of capacity (and often capabilities) to undertake this task, we recommend the three partner organisations – in partnership with ACEVO (who have published guidance on full cost recovery for the VCS), the Department of Health, the Active Communities Directorate, the Departments of Public Service and Performance and Local Government and Culture in Wales – to **publish detailed guidance on full cost recovery for volunteer service provision.** This could be a simple checklist for costing and pricing all elements of service provision for use in contract negotiations that can be used both by local volunteer service providers and by service commissioners.

7. This research has identified a number of concerns with **under-developed commissioning practices and weak contractual arrangements** in relation to volunteer services and activities. If these services are to be properly recognised and appropriately resourced then they need to be **built into commissioning priorities and investment plans being developed to meet the needs of local populations**. And the contractual or commissioning lead for volunteer services should not be delegated to a junior position where the full impact and profile of volunteer support is neither properly understood nor clearly defined.
  8. The flexibility of volunteers, volunteer schemes and the voluntary organisations that usually host or provide them, should be nurtured, promoted and celebrated. Flexibility is a key, defining feature that promotes person centred care and increases choice and control for service users and volunteers – in turn enhancing their independence and wellbeing. Flexibility (both in terms of role and time commitment) in how volunteers can contribute, and how they will be supported needs to be maximized and promoted widely to **support the recruitment, personal development and active retention** of this valuable resource.
  9. We know that flexibility and freedom, and the ability to use discretion and judgment in what people do as volunteers can lead to them sometimes providing personal care. We also know that this is not a straightforward or clear-cut topic, with often rigid approaches taken to minimize risk and comply with statutory regulatory mechanisms (eg such as being registered, or not, with the Commission for Social Care Inspection if personal care is provided by volunteer services). In view of the overwhelming positive responses we received about the flexible and personal aspects of the support provided and received in these six sites – and the positive practices we observed – we believe that the time has come for a **renewed, open, honest debate about what constitutes acceptable personal care, as delivered by volunteers**. We hope that this debate can be conducted in the spirit of what can be achieved to enhance people's lives, rather than what should be avoided in the name of risk management and professional control.
  10. Organisational and management processes within volunteer services should be constantly reviewed to ensure that these are **robust and supportive but as streamlined and free from bureaucracy** as possible. Volunteers value the ability to use their own common sense and judgement in often unpredictable situations – but within a clearly defined framework. **Public agencies need to consider and build these features into local volunteer service provision when designing, planning and commissioning services to meet local needs.**
  11. The research suggests that volunteers are an important but often untapped resource for the schemes and organisations they are associated with. They could contribute far more than they currently do to the planning and development of local services. **Effective methods for capturing volunteers' views and suggestions for improving and further developing local services** (which are not overly time consuming or 'involved') need to be established as a marker of good practice in this field.
  12. Volunteers often advocate on behalf of clients - or support them to advocate for themselves. **Further development and support for volunteers to undertake a 'volunteer advocate' role** may be appropriate; and could enable a wider range of provider organisations to engage and involve service users – both in their own support arrangements and in planning, developing and evaluating services. This does require detailed exploration with national and local groups and organisations that have expertise in this area, such as the Advocacy Alliance, the Older People's Advocacy Alliance (OPAAL) and others.
- Finally, to support the wide dissemination and use of these findings a series of five briefing notes, *'Making A Difference Through Volunteering Shortcuts'* have been produced to accompany this report – and to act as stand-alone briefing papers on the work. They are provided at Appendix Four of the main report, are available as separate documents, and can be downloaded at [www.csv.org.uk](http://www.csv.org.uk) .

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