

NHS Volunteer Responders

Guide for Referrers

The patient referral form is to request a volunteer's support which is a live system against the defined volunteer roles. You will automatically register by making your first referral. Therefore do not use this form as a registration form unless you are ready to request a volunteer for specific support.

N.B - Patient (hereafter referred to as client) Referral Criteria

As an approved referrer you will be able to place a referral on behalf of an isolating - vulnerable at risk - patient providing the person meets the below criteria and would benefit from one of the 4 volunteer roles as determined by you a health care professional or a local authority referrer. The following criteria has been supplied in order to assist you in your decision to refer. However, discretion can be used by a healthcare practitioner/local authority if someone is deemed a vulnerable patient but does not fall into the below.

The programme is open to anyone who needs to self-isolate for any reason. This includes anyone who:

- Has been advised to shield by a health professional;
- Is vulnerable for another reason (for instance disability, pregnancy, over 70, have Parkinson's, epilepsy, or are vulnerable due to a mental health condition, etc.);
- Is self-isolating because they have confirmed Covid 19 or suspected symptoms; or they have been in contact with someone who has.
- Is self-isolating as a requirement of official advice or legislation (such as before surgery, or following entry into the country).
- Is someone with caring responsibilities, if this support helps them to continue in their caring role.
- The programme is also open to frontline health and care staff.

Important information – Cognitive Impairment

- **Community Support:** When referring a patient/client for this support, you will be asked to tick whether the individual has a cognitive impairment or other significant vulnerability. As the NHS Volunteer Responders Programme has developed we are aware that a cohort of patients may require volunteers with a DBS check and additional training due to vulnerability. We have therefore created an additional role '**Community Response Plus**' which will ensure these volunteers have a DBS check and additional training to support these referrals.
- **Check In and Chat Support:** Please be aware that the support offered by our volunteers is a preventative service for isolated/shielded individuals not a treatment service for those with high needs and/or cognitive impairment. If you are unsure whether a patient/client sits within this 'high needs' category, consider the following:
 - Was the individual able to carry out certain basic tasks prior to COVID-19 such as shopping?
 - Would the individual recognise inappropriate behaviour of a volunteer?
 - Would a volunteer be able to chat with the individual without any background in cognitive impairment?

If the answer is no to at least one of the questions, then please do not refer them for this support.

- **Check In and Chat Support PLUS-** This regular telephone support and a 'listening ear' is offered to clients who are also shielding or experiencing challenges as a result of Covid-19. The support that Check-in and chat Plus volunteers provide does not replace treatment/ intervention by medical professionals, but instead it provides:
 - Companionship – forming a relationship of mutual support and understanding
 - Support – pointing to resources that help with mental health first aid
 - Check-in – to help clients identify activities and support that they can access
 - Listening ear - encouraging the client to talk about their experiences.

Support will be delivered to a client by the same volunteer for a duration of 10 weeks, with 3 calls taking place each week.

Patient Referral Form

The following guidance will help you through your request for a NHS Volunteer Responder. Please note that if you are a pharmacy or organisation requesting a volunteer for assistance (rather than on behalf of an individual) further guidance has been included at the end of this document.

If you have a NHS or Gov email address:

- If you are already registered with GoodSAM, your referral will automatically be accepted and pushed into the system
- If you are not already registered and this is your first referral, an account will be generated for you and login credentials along with a **request to confirm the referral** sent to your email

If you do not have a NHS or Gov email address:

- If this is your first referral, your account will need to be approved – please allow up to 72 hours for this to take place. Once approved, you will receive an email confirmation with your login credentials along with a request to confirm the referral sent to your email.

Once you have been provided with your login credentials, you can log in to your account at any time to view or cancel your referrals - <https://www.goodsamapp.org/login>

STEP 1 – Complete the Referrer information

Select which type of referrer you are from the drop down list.

Gather and input specific contact details for the person who requires support including:

- ✓ Client/Organisation – Name, Email Address, Contact number, Address, Postcode

Please ensure that client details reflect the name and location of where the support is required as this will be the information used to suitably match to a volunteer and will be the contact details they receive. The volunteer that is assigned will always call the client first to ascertain their needs, please ensure the client contact telephone number is correct before submitting.

Please also select the correct type of format for any patient letters your referral will receive. Do not enter organisation details here unless you are a requesting a volunteer to help your organisation i.e. pharmacy (details of how to do this are included at the end of this document).

I am a referrer that represents: *

- A General practice (GP)
- A Social prescribing/link worker scheme
- A Community Pharmacy
- A NHS111 / ambulance trust
- A Hospital
- A Local authority
- A Social care Provider
- Approved Charity Partner
- A MP
- The Police or Fire Service
- A Resilience Forum Member
- Healthwatch
- Other

Client (Patient) or Organisation Name *

Client (Patient) or Organisation Email Address

Client (Patient) or Organisation Contact Number *

Patient Safety Letter format preference *

Please enter the Client (Patient) or Organisation postcode and address *

STEP 2 – Choose what support is required

You now need to select from the drop down menu what volunteer support is required from the below 5 options.

- ✓ Community Support - Community Support Plus
- ✓ Patient Transport Support
- ✓ NHS Transport Support
- ✓ Check in and chat Support - Check in and Chat PLUS Support

The below outlines a little more information about what this support looks like for each of our roles. **Ensure you select the correct support as this is matched to a volunteer with specific vetting for that role.**

Community Support: Self isolated individual requires assistance such as shopping and/or medication collection/delivery.

Community Support Plus: Same as Community support but for patients who have cognitive impairments or significant vulnerabilities (enhanced volunteer vetting).

Patient Transport Support: NHS site requires support transporting patients who are medically fit for discharge, and ensuring that they are settled safely back in to their home or transport to and from an NHS appointment (enhanced volunteer vetting).

NHS Transport Support: NHS site requires transporting equipment, supplies and/or medication between NHS services and sites. Pharmacy needs support with delivery of medication.

Check in and chat Support: Self isolated individual requires short-term telephone support to provide companionship.

Check in and chat Plus Support: Regular telephone befriending (3 x per week over 10 weeks period)

An individual requiring shopping or prescription pick up is Community Support. A pharmacy/GP surgery/NHS site requiring the collection and delivery of many prescriptions/supplies is NHS Transport Support. **IF YOU ARE UNSURE PLEASE CALL 0808 196 3382.**

If you select **Patient Transport:**

You will be asked to confirm the following. If you are unsure please select 'possibly':

- **Patient Transport Support:** Provides transport to take patients home who are medically fit for discharge.
- **NHS Transport Support:** Provides transport for equipment, supplies and/or medication between NHS services and sites. Also involves assisting pharmacies with medication delivery.

Do the patient(s) have suspected or confirmed COVID 19 (High Risk) *

▼

Yes

No

Possibly

Periodicity *

STEP 3 – Select the frequency and priority level

Periodicity: Confirm how often the support is required. Note – this will generate an automatic alert to a volunteer according to the frequency requested e.g. if you requested community support (such as shopping) and would like a volunteer to do this every week, you would select 'weekly'. The system will generate an alert to volunteers once a week showing the task and information you have entered.

Periodicity *
 This will automatically alert a volunteer for the frequency requested - this is LIVE - it is not a registration form

One-off
Daily
Weekly
Fortnightly
Monthly

Priority: Select the priority of this referral:

This will allow the system to appropriately prioritise the support and ensure that we match to a volunteer in the appropriate sequence. Below are some tips on deciding the level of priority.

HIGH:

This is someone who is in immediate need of support and ideally that day:

- ✓ They have no essential food items or supplies
- ✓ They have ran out of essential medication which may pose further risk to health
- ✓ They have no support network who can assist them
- ✓ They are self-isolating as they are over 70 or have an underlying medical condition

MEDIUM:

This is someone who requires support within the next 48 hours

- ✓ They have access to essential food items and medication but this will be running out in the next couple of days
- ✓ They have no short term access to any support network who can assist them
- ✓ They are self-isolating but are not over 70 or aware of any underlying medical condition

LOW:

This is someone who requires support in the coming week or beyond

- ✓ They have all they need for the next week but will require support after this
- ✓ They are self-isolating but are not over 70 or aware of any underlying medical conditions.
- ✓ They need our support but also do have friends or neighbours that could assist if required

STEP 4 – Complete the referrer contact details and declaration

Now you need to record the referrer (your) contact details: name, email and contact number. Please note that if a safeguarding issue were to arise, we will use the number you have provided to contact you so use a direct email/phone number where possible.

Referrer First Name *

Referrer Last Name *

Referrer Email *

(You will receive an approval link after your first referral, once you have confirmed this, you will receive your login details - Requests from NHS/Gov email addresses will then go live automatically, alternative addresses will need approval and may take up to 72 hours)

Referrer Contact Number *

Then select where you heard about us and confirm that the patient is aware and has given permission for the referral. If you have not confirmed this please contact the patient before you submit the referral as once submitted volunteers will receive alerts and contact the patient with the details you have given.

If there is a possibility you make need to make additional referrals or the patient may require a one off referral at any point please tick the box to allow for duplicate referrals.

Finally click to register the referral.

Where did you hear about us? *

I confirm that the patient is aware of this referral and that I have permission from them to refer for support and for Royal Voluntary Service to use the information included in this form (including information about their health) for the purposes of providing support to them through the NHS Volunteer Responder Scheme.

Allow duplicate referrals.

YOU ARE ABOUT TO REQUEST A VOLUNTEER - THIS IS NOT A REGISTRATION FORM.

Register Referral

ORGANISATION/SERVICE REQUEST

For healthcare organisations the guidance is as above but you will need to enter details as follows:

Client/Organisation Name: Please enter the name of the person that the volunteer will need to speak to on arrival – alternatively if you are unsure of this, please enter the name of the organisation/service eg Boots Pharmacy.

Client Contact number: The contact number of the person the volunteer may need to speak prior to completing the task/arriving at the location. i.e. on duty pharmacist or GP Receptionist.

Client address: Enter the address where you would like the volunteer to arrive

NO MATCH IS MADE

If you receive a notification that there is not a suitable volunteer match in your area you can always log a new request for support as we have new volunteers who join our network daily.

Please note Patient Transport requests complete after three hours as we have fewer volunteers available for this task. This is to allow you to seek alternative arrangements if a match cannot be found.

WHAT NEXT?

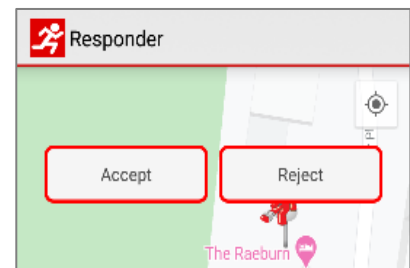
The referral will go into the system and an automatic search will take place for nearby 'on duty' volunteers. Alerts will be sent to one volunteer at a time. If a volunteer 'accepts' then the referral will be matched. If a volunteer rejects an alert or does not accept an alert, it will move on to the next volunteer.

After you have confirmed your first referral (a link will be sent to your email address), you will receive a password. This will then become your log in and you will be able to view the referrals you have made and cancel referrals if needed. If you have any problems, please contact the support team on **0808 196 3382**.

VOLUNTEER ALERTS OR NOTIFICATIONS

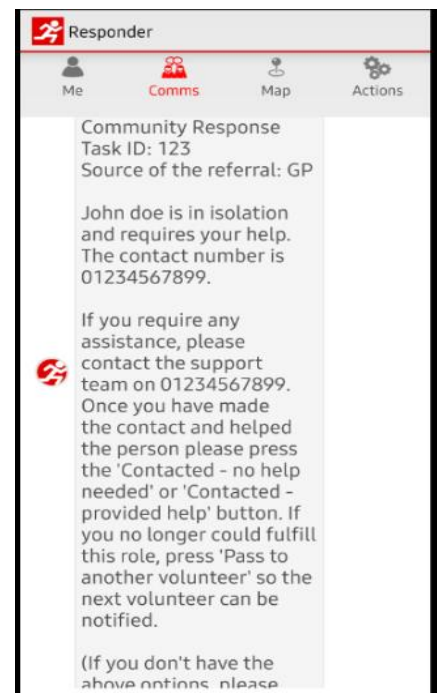
Each volunteer is approved for a specific role. It is therefore important that you select the correct role e.g. do not select Check in and Chat volunteer if you are requesting a volunteer to undertake shopping. Otherwise you are likely to find that the alert gets 'rejected' by volunteers as this is not the role they have signed up for (e.g. they do not have access to transport and have not received any guidance on how to perform the tasks).

A volunteer will receive an alert which they can accept or reject:



If they accept, they will receive a message such as below:

If the volunteer does not want to accept the task then they can 'drop the call' which will then push the alert to the next volunteer. This cycle continues until a match is found. It is therefore essential that you are requesting tasks that they are prepared for, otherwise the person needing support may end up with a no match as all volunteers have 'dropped the call'.



The below will show you what information is pulled through the system to the volunteer. Please note the message is adapted for each role and the key information that is pulled from the form you complete may be different. For example, if a Check In and Chat role has been matched, the address field will not pull into the message to the volunteer as they should not have this data.

Client (Patient) or Organisation Name *

Client (Patient) or Organisation Email Address

Client (Patient) or Organisation Contact Number *

Patient Safety Letter format preference *

Please enter the Client (Patient) or Organisation postcode and address *

Support Required * You must select the correct support as this is matched to a volunteer with specific vetting for that role. An individual requiring shopping or prescription pick up is Community Support. A pharmacy/GP surgery/NHS site requiring the collection and delivery of many prescriptions/supplies is NHS Transport Support. IF YOU ARE UNSURE PLEASE CALL 0808 198 3382.

- Check in and Chat Support: Provides short-term telephone support to individuals who are at risk of loneliness as a consequence of self-isolation.
- Community Support: Provides collection of shopping, medication or other essential supplies for someone who is self-isolating, and delivering these supplies to their home.
- Patient Transport Support: Provides transport for patients who are medically fit for discharge or to support patients going to NHS appointments.
- NHS Transport Support: Provides transport for equipment, supplies and/or medication between NHS services and sites. Also involves assisting pharmacies with medication delivery.

Support required: Community Response.

[Name] is in isolation and requires your help. The contact number is [contact number]. Their address is [address]

If you require any assistance, please contact the support team on 0808 XXXXXXXX. Once you have made contact and helped the person, please press the 'Contacted - Provided help' or 'Contacted – no help needed'.

If you can no longer fulfil this role, just press 'pass to another volunteer' so the next volunteer can be notified

Please note: Volunteers will call from a withheld number, if you are raising a referral on behalf of an isolating person please make them aware.