

Promising Practices
for **Volunteer**
Administration
in **Hospitals**

A Manual

Femida Handy
Robert Mound
Lisa-Marie Vaccaro
Karin Prochazka

Faculty of Environmental Studies
York University



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Knowledge Development Centre
Canadian Centre for Philanthropy
425 University Avenue, Suite 700
Toronto, Ontario
Canada M5G 1T6
Tel: 416.597.2293
Fax: 416.597.2294
Email: kdc@ccp.ca

www.ccp.ca | www.kdc-cdc.ca

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Canada 

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Promising Practices for Volunteer Administration in Hospitals

Introduction

“Individually they commit their time, expertise, and goodwill. Together they create a powerful force. And their personal contributions are linked inextricably to the health of our hospital system. Every day, hospital volunteers play a prominent role in the lives of patients, families, and staff. Their commitment, dedication, and helping ways have been woven into the very fabric of Ontario’s hospitals” (Ontario Hospital Association, 2001, p.1).

Hospitals would not be recognizable without the contributions of volunteers. Hospital Boards of Governors are made up of volunteers; volunteers enhance and humanize patient services; and much of the behind-the-scenes work in hospitals is done by volunteers. Without volunteers, patients would continue to receive treatment and services from caring professionals, but the components essential to the quality of patient care would vanish. Patient and family anxiety would increase, human contact would be greatly diminished, directions and non-medical information would be less readily available, and the little things that improve the quality of patients’ experience and patient satisfaction, such as hand-holding or refreshments, would disappear. Toronto hospitals experienced life without volunteers during the

outbreak of SARS (severe acute respiratory syndrome) in 2003. For health reasons, hospital volunteers were told to stay home. Their absence had an immediate and negative impact on the quality of patient care.

Volunteers provide many “soft” services that are essential to the comfort of patients. A volunteer’s ability to listen, talk, and spend time with patients, to provide non-medical information and directions to patients and family, and to be available for human contact and comfort, all serve to reduce patient anxiety and provide a calming presence within the hospital. Hospital volunteers also run information desks, assist with research, provide education and mentoring, conduct patient satisfaction surveys, and allow hospital staff to carry out their duties uninterrupted. All of these activities contribute to quality of care.

Indeed, enhancing quality of care is a primary goal of all hospitals and an essential component of the work undertaken by volunteers. Of 28 hospitals surveyed, all had prominent, identifiable goals related to the quality of care they provided that were included in their public mission statement, vision statement, values statement, strategic goals, philosophy of care, or message from the CEO or board chair.

Bridgepoint Health says in their values statement, “We are dedicated to providing compassionate, exceptional care and service.” Scarborough Hospital’s mission statement’s first point is to, “Provide excellent patient care, promote health, and improve quality of life.” Markham Stouffville Hospital’s mission statement is, “To make every experience with us great,” and the first point in Mount Sinai’s mission statement is to, “Work with our patients to help and improve their quality of life by providing a caring, compassionate, comforting, and validating atmosphere.”

A majority (57%) of these hospitals also acknowledged the role of volunteers somewhere in these public statements. Credit Valley says in their values statement, “We recognize and treasure the unique contribution of each member of our family (staff member, volunteer, and physician).” Royal Victoria’s core values statement reads, “Staff, physicians and volunteers make a difference!” and Toronto East General’s mission statement proclaims, “As a community teaching hospital, our staff, physicians, and volunteers are committed to delivering quality, compassionate patient care and to working in collaboration to improve quality of life of our diverse community.”

This manual is intended to help managers of volunteer resources achieve these goals. It offers tips and advice to help readers through the stages from establishing to evaluating and reorganizing a successful volunteer program.

Why Promising Practices?

Although we refer throughout the manual to hospital-based volunteer programs, we nevertheless believe that the ideas presented here can be usefully applied to volunteer programs in other voluntary organizations.

In creating this manual, we had to recognize the differences among the hospitals we consulted and among their volunteers. Someone who volunteers at a children’s hospital may have very different motivations from someone who volunteers at a geriatric care hospital or a teaching hospital. One volunteer may enjoy helping with young children, another may have a parent who received geriatric care at the hospital where he or she now volunteers, and a third may want to become a registered nurse and is volunteering to gain experience.

At the same time, hospitals, like other nonprofit organizations, are increasingly being approached by people who are “voluntold” (e.g., students who are required to do a certain number of hours of community service in order to receive their high school diploma, people on social assistance who have been placed in workfare programs, individuals recovering from accident or illness whose insurance companies ask them to volunteer as part of their recovery, and people who are required to complete community service by the judicial system).

In this manual, we point to effective volunteer management strategies used by managers of volunteer resources in the hospitals we studied. However, given the increasingly diverse nature of the Canadian population, the diverse needs of hospitals, and the diverse motivations of volunteers, it is difficult to say that one practice is necessarily better than another in every circumstance. We have, therefore, chosen to use the term “promising practices” rather than “best practices.” Readers looking for specific information on how to implement these practices should refer to the “Additional Resources” section at the end of this manual.

Organizing and Reorganizing a Volunteer Program

We already have a volunteer program. Why do I need this manual?

Hospitals and their volunteer programs have been undergoing a great deal of change in recent years. Hospital mergers and reorganization, changes in hospital programs or mandates, shifts in the volunteer pool, clarification of relationships with hospital auxiliaries, and unpredictable events like the 2003 SARS outbreak in Toronto can have an impact on your volunteer program. These changes can present an opportunity to re-imagine your volunteer program from the ground up.

Reorganizing your volunteer program will allow you to reassess the needs of your hospital and re-envision the involvement of your volunteers. It will also allow you to make sure that volunteer efforts are true to the philosophy, mission, vision, and values of your hospital. Although the majority of managers of volunteer resources interviewed for this manual said that senior management is supportive of their program, that support was not universal. Making sure that your program achieves the goals of your hospital will help you to gain and retain senior management's support for your program.

Promising Practices:

Conduct a needs assessment

Whether you are developing a brand new volunteer program or reorganizing an existing one, you should first assess or reassess the needs of your hospital. Formal and informal input from volunteers, staff, administration, current and former patients, and their families will be helpful to you as you redesign programs to improve integration of volunteers into the hospital. Being able to show that you are meeting the needs of the hospital and moving strategically with your hospital as it changes will demonstrate

excellence in program management. Remember: your volunteers are there to serve the needs of the hospital. It will be important to determine the elements of a needs assessment for your hospital. Look in the References and Resources sections for more information on this topic.

Revisit your mission statement

Most hospitals have a mission statement. Every volunteer program should also have a mission statement that clearly defines its purpose and goals, and shows how the program will address the hospital's needs. This mission statement should be consistent with the hospital's mission statement and should explain how volunteers will work with staff and patients to meet the goals of the volunteer program within the hospital and the community. For example, "We strive to enhance the quality of life and support the patient, their families, and staff through promoting volunteer development and supporting the mission of the Toronto Rehabilitation Institute" (mission statement of the Toronto Rehabilitation Institute's Volunteer Resources Department).

Develop a vision statement

Most hospitals have a vision statement that describes the hospital's ultimate impact and focuses staff, volunteers, and the community on what the hospital hopes to accomplish. Vision statements can be inspiring and motivational; for example, "Defy disability" (vision statement of the Bloorview MacMillan Children's Centre). They can be ambitious; for example, "Finest hospital in Canada in the hearts and minds of the people we serve" (vision statement of Credit Valley Hospital). Or they can be detailed and specific. For example, St. John's Rehabilitation Hospital has a vision statement that is three paragraphs long and that discusses the hospital's leadership in specialized care, its history as a religious

order, and its goal of maximizing independence and quality of life for clients.

Develop a values statement

This is a statement of the core values that underlie your volunteer program. You may want to use the values of your hospital or tailor them specifically to your volunteer program. For example, Bloorview MacMillan's value statement begins, "We believe in the uniqueness of the individual, the power of our families, and the importance of communities. We believe in creativity, innovation, and in challenging barriers." West Park Healthcare Centre's vision statement is structured as follows: "In the pursuit of our vision, we value people through.... We value excellence through... we value innovation through..." Each value is followed by four specific points on how the value is demonstrated.

Most hospitals include their mission, vision, and values statements on their Web sites. Check several hospital sites for ideas that you can use to develop your statements. You may want to include a philosophy of volunteering or what you value in a volunteer. For example, the University Health Network identifies the qualities that it looks for in volunteers: "positive, caring, sensitive, energetic, customer-service oriented, and self-disciplined."

Develop volunteer position descriptions

Position descriptions help you in recruiting and retaining volunteers. They are three-party agreements between volunteers, staff members who supervise volunteers, and the volunteer resources department. They let volunteers know exactly what is expected of them; tell staff what volunteers are supposed to be doing and how volunteer resources will support them; and allow the volunteer resources department to check that all expectations are being met. Each position description should include the title of the position, responsibilities, necessary skills and training, a schedule, and the person to whom the volunteer is to report. These descriptions are also part of a risk management program that defines the parameters of volunteer involvement. It is critical to indicate who,

within each hospital department, is responsible for supervising volunteers. This ensures that volunteers know where to turn for direction and guidance. Assigning staff responsibility also ensures that staff take volunteer support seriously. Update position descriptions regularly.

Make good use of technology

New database programs (e.g., Volunteer Works, Excel, Access), the Internet, and e-mail are revolutionizing volunteer management. Volunteer Works can be used to track volunteers all the way from the first intake call to the time they leave the hospital. It can be used for volunteer sign-in, communications, and scheduling. It allows you to survey volunteers, generate statistical data, and create benchmarks so that you can identify and describe quantitatively the impact of your volunteer program.

The Internet is a useful research tool and can also be used to increase your volunteer program's visibility in the hospital and the surrounding community. Most major hospitals recruit online. For example, the University Health Network's online recruitment page provides information on the qualities being sought in volunteers, volunteer placements and times available, how to become a volunteer, and contact information. Initial applications and screening are increasingly being done online. You can use e-mail to disseminate information quickly and inexpensively to a large group of volunteers (e.g., emergency information, a request for volunteers for a big event, new volunteer opportunities, or your most recent volunteer newsletter). Some software programs, such as First Class, allow you to set up closed, secure chat rooms and discussion groups so that you can communicate with other managers of volunteer resources.

Keep good records

Record-keeping is necessary so that you can do effective program evaluations and needs assessments; document and recognize volunteers' achievements; identify orientation, training, and supervision needs; provide documentation for mandatory volunteer programs, community service programs, or job

training programs; provide information to unions and the Ontario Hospital Association; and help guide long-term planning, and program development and expansion.

Prepare and monitor realistic budgets

Although budget allocations for the volunteer resources department are usually beyond the control of the manager of volunteer resources, it is still important to assess the costs and benefits of your volunteer program, and pay close attention to your financial, in-kind, and human resource support. Hospital administrators need to have a full picture of costs of volunteer programs in order to approve appropriate budgets. Be sure to include a budget line for all operational needs, including one-time expenses and day-to-day operations. Track hidden costs, such as time related to training and monitoring volunteers. Most volunteer resources departments will have to dedicate resources to:

- planning, creating, and updating policy and procedures;

- recruiting, screening, interviewing, and placing volunteers;
- orienting and training volunteers;
- ongoing supervision of volunteers;
- evaluating volunteers and the volunteer program;
- staff training and professional development (e.g., attendance at conferences and courses); and,
- costs associated with recognition events and fundraising activities (e.g., thank-you cards; perks such as coffee, cookies, and parking; dinners, meal discounts, etc.).

You will also need to budget for staff salaries; communications equipment (e.g., computers and software, phone, fax), postage, and office supplies. If your volunteer program is expanding, be sure to build in additional financial resources so that you will be able to manage and supervise a larger group of volunteers.

Policy and Procedures

Why are policies and procedures important?

Up-to-date and comprehensive written policies increase the professionalism and effectiveness of a volunteer program and help to reduce risk. Although you want to give volunteers as much freedom as possible to decide how the tasks will be completed, volunteers — especially in a hospital environment — must conform to the same standards of practice as staff. This is necessary to maintain the health and safety of all involved, and to ensure staff and administrative support for the volunteer program.

Promising Practices:

Put it in writing

All policies and procedures should be in writing, in a volunteer manual, so that volunteers can refer to them when they are unsure about what to do or if they forget something. Make sure all written instructions are clear and include examples. If your volunteers come from different language groups, translate all policies and procedures. Some volunteer positions may need additional policy and procedure information or additional clinical or program-specific guidelines. Include these in your volunteer manual.

Set professional standards

Most hospitals have written policies concerning the professional behaviour of volunteers and staff. Policies typically cover issues such as language, behaviour, punctuality, hygiene, procedures for calling in sick, appropriate behaviour regarding forms of touching, conflict resolution/discipline processes, and dress code. Include this information in your volunteer manual. State expectations clearly and provide the rationale. This is especially important for younger volunteers who may have had little or no work experience and for volunteers with mental health issues.

Establish guidelines for criminal background checks

Criminal background checks are often recommended or required for people working with vulnerable populations. If you do criminal background checks on your volunteers, establish guidelines about what offences are serious enough to affect a volunteer's placement (i.e., you would either not accept that person as a volunteer or would exercise caution in assigning duties to that volunteer). Always remember, however, that these people have served sentences deemed appropriate by the courts.

Clearly define “off limits” work

Volunteers have to understand what work they can and cannot do. Some tasks will be “off limits” to volunteers because of issues relating to liability, health and safety, training, union contracts, and the job descriptions of salaried staff. Help volunteers understand why this is important by giving specific examples of what could happen if these limits are not respected (e.g., illness or injury to patients or volunteers, lack of staff support for volunteers, etc.). Explain that assignments that carry any risk of injury are off-limits because volunteers are not eligible for Workers' Compensation.

Communicate policies relating to infectious diseases

In a post-SARS environment, hospitals are reviewing and developing policies and procedures to prevent the spread of infectious diseases within hospitals. Health screening (e.g., for tuberculosis) is now standard in Ontario hospitals. Policies should be clear and effectively communicated to ensure the safety of volunteers, patients, and the community, and comply with the Occupational Health and Safety Act and the Public Hospitals Act.

Include policies on harassment, equity, and anti-oppression

You should have policies that prohibit sexual, physical, verbal, and emotional abuse or harassment. Spell out the consequences of such behaviour (e.g., termination of the volunteer). Outline prohibited types of discrimination (e.g., discrimination based on age, ability, illness, gender, class, race, language, cultural background, religious belief, sexual orientation). Provide instructions for reporting and documenting harassment, and specific information on what to do if a volunteer is abused, witnesses abuse, or is accused of abuse. Take all complaints seriously. Investigate all complaints. Not only is this good management, but it is often a legal requirement. Consider offering anti-oppression workshops or some other type of training to teach volunteer leaders and staff how to offer constructive feedback.

Ensure that volunteers understand the need for strict confidentiality

Confidentiality is critical in a hospital setting. Volunteers must understand that they can't ask patients about their conditions. One manager of volunteers explained: "Often patients don't want members of the community to know what is wrong. You have to drill in the importance of confidentiality.

A student once read her best friend's mother's file and told her friend about the mom's psychiatric treatment. This caused the family personal distress and there was almost a lawsuit. It was also a serious blow to the hospital's reputation.

Another volunteer took a list of names and illnesses, read them in church and asked the congregation to pray for them. "We have clear volunteer rules: No religion. No politics. No personal information." Make it clear that consequences for breaching confidentiality include dismissal from the volunteer position.

Spell out policies relating to discipline and termination

Some problems are so serious that volunteers need to be disciplined or even terminated as volunteers. To be fair, discipline should follow the generally accepted guidelines for disciplining employees: verbal warning; written documentation; a second chance, if appropriate; termination if the problem persists. Communicate this policy to volunteers so that they understand the seriousness of their responsibilities. Some hospitals require their volunteers to sign an "at pleasure relationship" statement that states that volunteers are there at the pleasure of the hospital and that the hospital can terminate the relationship at any time. Others require a signed annual contract between the volunteer and his or her supervisor.

Recruitment

Why is recruitment important?

One manager of volunteer resources said: “Invariably a hospital will touch your life. You will have to walk through this door. One woman came in when she wasn’t well and said ‘I saw how happy the volunteers were and I thought, I want to be that happy too’.”

This story highlights several points. First, many volunteers derive joy and meaning from volunteering. Second, there are many opportunities to recruit volunteers. Third, existing volunteers are often the best advertisement for your volunteer program. Finally, in the case of hospital volunteers, everyone has an interest in the health of hospitals. However, recruiting volunteers is not always an easy task.

Few of the managers of volunteers interviewed for this manual were experiencing a shortage of people willing to volunteer. However, they often experienced a shortage of the “right kind” of volunteer: people with the appropriate skills and experience to perform the tasks required. One manager of volunteer resources described the type of volunteer most needed as, “responsible, reliable, and retired.” Recruiting committed volunteers with appropriate skills is a big part of the job of any manager of volunteer resources.

Promising Practices:

Review your success with volunteer retention

If you are finding it more difficult to retain volunteers than are your peers at similar institutions or if you constantly have to recruit new people because existing volunteers are departing, stop and analyze the problem. Are volunteers having negative experiences? Are they feeling undervalued or unappreciated? Are they getting the training they need? Do they have specific concerns? You should address these problems before recruiting new volunteers.

Set realistic goals

A small, but excellent, volunteer program is better than a big, but ineffective, one. As you set your recruitment goals, keep in mind that you can accomplish more if you can attract a few high-quality, committed volunteers than you can with thousands of people who have few skills and little commitment. You should also keep in mind that length of service does not necessarily mean quality of service; do not discount the potential of short-term volunteers.

Target specific audiences

For each volunteer position description, brainstorm potential sources of people who may have the necessary qualifications. Don’t be afraid to seek volunteers from unlikely sources. Some places where you may want to look for volunteers include recreation centres, community centres, welcome centres for new immigrants, homes for seniors, corporations, small businesses, business and resident associations, professional societies, trade unions, places of worship and other religious institutions, the military, group homes, halfway houses, prisons, homeless shelters, high schools, and universities. You may also want to approach hospital employees, patients, teachers, and night-shift workers.

Decide whether to accommodate the new “40-hour” volunteer

Many jurisdictions now require high school students to complete 40 hours of community service before they can graduate. It’s up to you, taking into account the needs of your hospital and your volunteer program, to decide whether and how you might involve these volunteers. Some hospitals have created programs for these volunteers that require minimal training and supervision. One hospital assigns less interesting roles to these volunteers, which may decrease the possibility that they will

stay after they have fulfilled their 40-hour requirement. On the other hand, some managers of volunteer resources require a commitment of 100 hours or more in order to get the type of volunteers they need.

Deliver a personal recruitment message

Research confirms that more people get involved as volunteers because they were personally asked than in any other way (Hall, McKeown, and Roberts, 2001). One manager of volunteers reported that someone who knew the hospital, such as a volunteer, a staff member, a teacher, or a patient, referred 90% of her volunteers. But sometimes the manager of volunteers is not the most effective recruiter. Involve the entire hospital — the CEO, the board of directors, staff, patients, and volunteers. Ask each board member to recruit a volunteer. Offer a prize to the employee who recruits the most volunteers. Use current volunteers as ambassadors in their communities. Some hospitals groom a few volunteers to act as ambassadors. Others encourage volunteers to talk to friends and colleagues. One hospital asks its student volunteers to recruit their parents. This has worked remarkably well, especially in multicultural communities.

Tailor your recruitment messages

Your hospital can have multiple recruitment messages tailored to specific groups of potential volunteers and specific motivations. For example, when recruiting retired people, you might emphasize that volunteering can supply social interaction and help to maintain independence; with younger people, you might stress that volunteering helps to develop leadership skills and provide career experience; with religious communities, you might focus on the joy of giving or appeal to a sense of duty; with new immigrant communities, you might point out that volunteering provides Canadian experience and helps develop language skills; with other groups you might emphasize personal challenges, creativity, the potential for self-improvement, or the importance of the cause.

Use targeted media to deliver your recruitment message

Select the most appropriate technique to communicate your message to each of your potential sources of volunteers. Don't assume a general advertisement in the newspaper will attract all or most of the volunteers you need. For example, if you want to recruit a culturally diverse group of volunteers, consider placing your recruitment message in ethnic community papers. To reach young urbanites, consider weekly entertainment magazines, or community newspapers that serve specific neighborhoods. To reach college or university students, consider delivering your message through campus radio stations and newspapers.

Consider all means of recruiting volunteers

There are many ways to deliver your recruitment message: mass media (print, broadcast), local newspapers, newsletters produced by other organizations (e.g., businesses, professional associations, service clubs), public speaking opportunities, volunteer fairs, Web sites (your own and those of other organizations), online volunteer recruitment Web sites, and your local volunteer centre. Brainstorm how you can make the best use of these media.

Talk it up

Be inviting and encourage people to become involved. Tell volunteers that what they are doing is important to the hospital. Show them the hospital's mission statement and explain how their involvement will help the hospital achieve that mission. People need to hear that "This is a good place to work and volunteer," and "Your contributions will be valued here."

Put a face on your volunteer program

Photographs of your volunteers help to put a face on your volunteer program. Take photos of volunteers in action or get volunteers to provide photos of themselves for a special newsletter, display, or booklet

on volunteering at the hospital. Ask for stories about their experiences while volunteering at your hospital. These can be used (with permission) in your recruitment materials, annual reports, and hospital newsletters.

Recruit for specific roles or projects

Rather than sending out blanket requests for volunteers, focus on vacant roles or special projects. When you advertise for volunteers, profile the roles you most want to fill. The more specific you are about the project and the caliber of skills required, the more likely you will be to attract volunteers who are interested in that type of assignment. If you are planning activities or events that require a large number of volunteers for a short period of time, be specific about what you are looking for. And remember that volunteers who have experienced positive short-term placements may be return for your next event or activity.

Recruit for diversity

Diversity demonstrates to the community that people are assets and should be an essential element in your recruitment plan. In addition to race and ethnicity, consider age, gender, education, income, religious beliefs, physical abilities, and skills. Know the demographics of the community your organization serves and try to replicate it in your volunteer pool.

Be culturally sensitive

This is a key factor in the successful recruitment of volunteers. Managers of volunteer resources reported that in some communities, wearing a volunteer smock or jacket is considered degrading and in some age groups smocks or jackets might be considered 'uncool.' For this reason, some hospitals use different ways to identify volunteers: name tags, T-shirts, or vests with the hospital name or crest.

Treat volunteers like customers

Find out what your volunteers value in their volunteer experience and cater to it. If your volunteers crave social interaction, make sure that they get it. If they are hoping to improve their resume, consider offering reference letters or certificates of achievement.

Match volunteer tasks to the volunteer's interests, skills, and motives

Give volunteers a choice of tasks. Don't assume that you know what they want. Volunteers are more likely to stay involved and be committed if the tasks they are assigned match their interests and reasons for volunteering. In fact, it is often preferable to leave a position vacant than to fill it with a volunteer who is not interested in the task.

Screening, Interviewing, and Placement

Why is screening important to volunteer administration?

Screening ensures that you recruit the right volunteers for your organization and match them to the right position. Many volunteer programs use a volunteer application form on which volunteers can indicate their interests and provide contact information. These organizations then invite suitable volunteers to an orientation session. Volunteers who are still interested are then interviewed (interviews generally last between 30 minutes and one hour), which leads to placement in a volunteer role.

Many Toronto-area managers of volunteer resources whom we interviewed for this manual use a slightly different human resources model. They first have volunteers fill out an application form. Then they interview volunteers. Only then do they do orientation, followed by training.

Screening is of the utmost importance and should start with the first phone contact. You should follow as many of Volunteer Canada's ten screening guidelines as possible. These guidelines are available on Volunteer Canada's Web site at www.volunteer.ca. Volunteer Canada also has sample screening policies on its Web site.

Promising Practices:

Be prepared to redirect some volunteers

Not everyone who approaches your organization will be suitable for your volunteer program. There are many reasons for this. Perhaps they cannot make the commitment you require or perhaps they do not understand what hospital volunteers can and cannot

do. In these cases, acknowledge the positive impulse that brought the person to you and, where appropriate, redirect that person to a suitable community agency or to your local volunteer centre. Develop a standard statement that you can use when this situation arises.

Develop and use a standard volunteer application form

Use this form to collect personal contact information, emergency contact information, length of commitment the person is prepared to make, when they are available, and information on the applicant's interests and motivations, which will be helpful to you as you screen and assign new volunteers. Depending on the positions you are trying to fill, you may also want to ask about previous experience or for references. Keep in mind that it is against the law to ask certain questions, such as those relating to religion, age, and the criminal records of young people. Review the Human Rights and Employment Standards Act before creating your application form.

Establish medical screening guidelines

Hospital volunteers will have to be tested for TB and, possibly, other diseases. Consult with the human resources department or the senior manager of your organization on which diseases to screen for. Testing could be done in your hospital, although the standard practice is to refer volunteers to their own physician or a walk-in clinic. If lifting or carrying is part of a volunteer's position description, you may want to assess that volunteer's strength and balance. Remember, volunteers are not eligible for Workers' Compensation.

Develop a policy on Police Records Checks

Conducting a Police Records Check (PRC) or a Criminal Records Check is one of Volunteer Canada's ten screening guidelines. PRCs may be legally required for some positions, specifically when a volunteer will be alone with "vulnerable persons" or children. Although some hospitals have implemented PRCs to reduce perceived liability, as part of risk management strategies, or in response to community pressure, a recent informal survey of 25 Toronto-area hospitals found that almost none do these checks. PRCs can be costly in terms of the money, time, and energy involved. Furthermore, they identify only individuals who have a criminal or other police record, and do not provide information on those who are or were young offenders or those whose criminal records have been erased. PRCs may be perceived as a barrier to people who have criminal records for offences that would in no way affect their ability to volunteer.

Establish guidelines for PRCs. For which volunteer positions should they be mandatory? Which offenses are serious enough to result in rejection of a potential volunteer? What policies, if any, exist for staff? If you do a PRC, you must first get written permission from the prospective volunteer. Your organization should pay for the PRC. You should give the results to the volunteer first so that he or she can check the accuracy. Finally, the PRC should concern itself only with convictions and not police contact. Keep in mind that people who have been convicted of crimes and have carried out the sentence deemed appropriate by the court may be excellent volunteers. More information on Police Record Checks is available on the Volunteer Canada Web site at www.volunteer.ca.

Provide orientation for volunteers


Orientation is the first step in volunteer integration. It provides an opportunity to review policies and procedures with new volunteers and allows them to get to know the hospital and its needs, and learn more about what is expected. It also allows some volunteers to screen themselves out. Some hospitals do orientation before they conduct volunteer interviews. Others do orientation only after a volunteer has been accepted. Orientation should include the organization's mission, vision, and values statements; dress codes; and legal requirements, such as fire safety and Workplace Hazardous Materials Information System codes. It's a good idea to have a staff person who works with volunteers and/or a volunteer present to answer questions.

Make good use of volunteer interviews

Allocate 30 to 45 minutes for a volunteer interview. This will allow you time to get to know the volunteer, their interests, and their motivations. It will also give the volunteer time to get to know your organization and its needs. During the interview, you and the volunteer should come to a shared understanding of what the volunteer will be doing. It is also an opportunity to discuss the results of the PRC, if available, or the requirement for a PRC and what will happen as a result of the check.

Provide volunteer position descriptions

The last step in the screening process is placement. Provide the volunteer with a written position description that includes the name of the assignment; the purpose of the assignment; tasks to be undertaken; time commitment; skill requirements; training and development support offered; supervision (to whom the volunteer reports; feedback mechanisms); authority and decision making; supporting policies; and, benefits.



For more information on designing volunteer positions and developing position descriptions, see *A Matter of Design: Job design theory and application to the voluntary sector*, a handbook produced by Volunteer Canada. It is available online at www.volunteer.ca

Orientation

What is good orientation?

Good orientation is the first step in helping new recruits become successful volunteers. Orientation should help volunteers decide whether your organization is a good place for them to volunteer, inform them of your volunteer program's mission, give them information about the types of volunteer positions available, outline your expectations and their responsibilities, address their concerns, make them feel part of the team, and explain the rewards and benefits of volunteering. McCurly and Lynch (1996) describe the three main aspects of orientation as cause orientation (why should I be working here?); system orientation (how will I be working here?); and social orientation (how do I fit in with everyone else?).

Promising Practices:

Set aside time for orientation

Our research found that Toronto-area hospitals run approximately 28 orientation sessions a year and that sessions average two hours each. Hold orientation sessions at a variety of times. Orientation for employed persons or students should be scheduled right after work or school. Orientation for seniors is best done between 10 a.m. and 3 p.m. so that participants do not need to travel during rush hour or in the evening. Breakfast orientations may work best for some people, and Saturday or Sunday orientations for others. Depending on your program, you may be able to offer part of your orientation online or use your Web site to provide volunteers with training material in advance of an orientation session. For more information on this, visit www.volunteertoday.com.

Provide a copy of your mission statement

Giving volunteers your mission statement is an important part of orientation and helps to answer the question, "Why should I be working here?"

Ask about volunteers' needs and expectations

This also helps to answer the question, "Why should I be working here?" Use your orientation session to find out what volunteers need and want to learn; what they already know; their fears, concerns, and motivations; and the skills that they can bring to the program. Assess the effectiveness of your orientation with an exit survey and update as necessary.

Describe your volunteer positions

The biggest questions volunteers have are, "What can I do?" and "What will I be doing?" Providing position descriptions at an orientation session (or, if your program is too big, providing sample position descriptions) is part of system orientation and answers the question, "How will I be working here?"

Avoid jargon and explain technical language

The use of exclusive or technical language can prevent people from feeling like a part of a group. When providing an overview of your organization and introducing a volunteer to your policies and procedures, avoid using jargon and explain any terms or words that may be unfamiliar to them.

Give volunteers an orientation package to take home

People forget most of what they hear in a conversation fairly quickly. Give volunteers an orientation handbook or volunteer manual that contains the information, policies, and procedures they need to carry out their assignment. If this information is also available on your Web site, provide volunteers with the URL. If your volunteers come from various language groups, be sure to provide translation.

Provide mentoring

This is a component of social orientation and helps to answer the question, “How do I fit in with everyone else?” The faster new volunteers feel comfortable, the faster they will be able to meet their potential. Also, retention rates increase in departments where volunteers have a direct link to staff.

Provide mentoring opportunities for new volunteers by pairing them with a staff member or a current volunteer who is willing to be supportive and open to input. If a volunteer position was created in response to a staff suggestion, ask the staff member who made the suggestion to orient the new volunteer.

Training and Supervision

Why are training and supervision important?

Specific training and supervision are necessary to address health, safety, and liability issues; enhance volunteer satisfaction; and maintain a high quality volunteer program. The relationships and reporting structures between volunteers, on the one hand, and volunteer supervisors, mentors, supervising staff, emergency contacts, and patients, on the other, need careful consideration. Trainers and supervisors should strive to empower volunteers to take ownership of the volunteer program and its role within the hospital.

Promising Practices:

Provide specific training

Training should be designed for specific volunteer roles and needs, and should provide the specific skills and information that volunteers will need to fulfill their role. Training topics should come from experienced volunteers, supervisors, and volunteer administration. Training should be evaluated for effectiveness. Find expert staff or volunteers to run the training sessions.

Consider providing general training. All of your volunteers could benefit from training sessions on developing supervisory skills, creating a supportive environment, stress management, team building, working with unions, health and safety, infectious diseases, delegating responsibility, and communicating effectively.

Train staff who work with volunteers

You can help to ensure a positive staff/volunteer relationship by offering training and coaching to employees who work closely with, or supervise, volunteers. Mentors and senior volunteers who supervise other volunteers could also benefit from training on how to offer feedback and direction to volunteers in a productive and affirming way; how to deal with problems that may crop up; and how to support, nurture, and reward volunteers. You should be able to fund this type of training through your organization's professional development budget.

Designate supervisors

All volunteers should have a designated supervisor to whom they can go for direction, advice, feedback, materials, training, and the information required to be successful in their role. Although most hospitals designate a staff person for this purpose, some use experienced volunteers to mentor and supervise new recruits. This recognizes the achievements of experienced volunteers, promotes teamwork and volunteer ownership of volunteer programs, and minimizes staff workload. Care should be taken, however, that staff do not abdicate their responsibility to volunteers.

Consider unique supervisory situations

Different situations and different types of volunteers require different levels and types of supervision. Take some time to consider the unique supervisory requirements of younger volunteers, older volunteers, disabled volunteers, groups of volunteers, event-based volunteers, staff as volunteers, community service volunteers, workfare volunteers, and volunteers who work full-time.

Evaluation of Volunteers

Why evaluate volunteers?

Effective evaluation is an essential part of the volunteer management cycle and contributes to recognition and retention. Evaluation is necessary to ensure that the needs of the organization and the needs of volunteers are met. It helps volunteers understand how well they are doing and how their efforts contribute to the organization. It can also be a time for volunteers to consider moving into a new role or taking on new challenges.

Promising Practices:

Involve volunteers and staff

During the evaluation, ask volunteers what they think is going well and what needs to be improved. Volunteers often know best what their strengths and weaknesses are, when they need a change, and how to make a volunteer role more effective or rewarding. Ask the same questions of staff who supervise volunteers. They should be able to identify poor fits and suggest ways to make volunteers or volunteer roles more helpful in meeting the hospital's mission.

Keep records

Keep formal records for yourself and your volunteers. This is becoming increasingly important as young people volunteer to gain experience, and mandatory volunteering becomes more commonplace. Having records of performance will help volunteers document their experience and give you a volunteer service record to discuss in future meetings.

Make evaluation an annual event

Conduct formal volunteer evaluations annually. If evaluations are regularly scheduled, then volunteers are less likely to feel singled out or threatened if there are concerns, and will feel more comfortable in voicing their own concerns about a volunteer role.

Set performance standards

Be clear about what the hospital and its volunteer program value. Set high standards and get a commitment from volunteers to meet those standards and expectations. Base your evaluations on the outcomes that you and the volunteer hope to achieve by setting these standards.

Recognition

What does recognition achieve?

“Recognition is the art of catching people being good and taking the time to tell them so.”
(Vineyard and McCurley, 2001, p.56)

Everyone likes to be thanked for work done. This is especially important for volunteers. Effective recognition makes volunteers feel good about what they do. Morale increases when volunteers feel respected, appreciated, and valued. Recognition boosts volunteer retention. It can also help increase recruitment as happy, energetic volunteers proudly tell others about their experiences. Inappropriate or ineffective recognition — or worse, no recognition at all — can lead to a decline in volunteer commitment and derail your volunteer program.

Promising Practices:

Know your volunteers

Greet volunteers by name when they report for their assignments. When we asked one manager of volunteer resources how she recognizes volunteers, she said: “I recognize them! I know their names. I know everyone’s name and most people’s phone voice even if I only met them once six months ago.” Greeting people in this way makes them feel that they are important members of your team.

Don’t overlook the importance of informal recognition

Ongoing, informal recognition of achievement and expressions of gratitude are often more appreciated than formal events or gifts. Look for opportunities to say thank you. You can use newsletters, speeches, cards, posters, and photographs to convey appreciation. Send personal notes to anyone who volunteers a certain number of hours in a specific time period, or to everyone who helped with a

special event or project. Program your Volunteer Works system to give a special message when a volunteer signs in. Remember birthdays or anniversaries of volunteer involvement. Have staff report on good things they have seen volunteers do. Set up a “care fund” to send sympathy cards or flowers in the event of illness or loss.

Budget for formal recognition

Devote some resources to volunteer recognition. Capitalize on National Volunteer Week, held each April, to raise the profile of your hospital volunteer program and recognize volunteer accomplishments. Volunteer Canada prepares and distributes materials for this annual event. You can find out more by visiting the Volunteer Canada Web site at www.volunteer.ca. Promote a team approach by tying volunteer recognition to staff recognition. For example, use the same forum to distribute length-of-service awards to volunteers and staff.

Recognize volunteers frequently and promptly

Give recognition frequently and on a timely basis. Send out a memo to staff asking them if they have thanked their volunteers today. Send thank-you letters to volunteers promptly after a major event. Begin evaluations with a list of contributions that the volunteer has made.

Tailor your recognition

Not all volunteers want to be recognized in the same way. Some may want public recognition and would enjoy seeing themselves on a “volunteer of the week” poster; others prefer to work quietly and anonymously, but might appreciate an e-card thanking them for their contribution. The better you understand your volunteers and their motivations, the more successfully you can tailor recognition to their individual needs.

Have fun

Recognition should be fun and creative. Use appropriate humour and every ounce of creativity you can muster. For example, if your volunteers have a high threshold for corniness, Vineyard and McCurley suggest naming the coffee pot after volunteers who have “really poured themselves into their work (2000, p.54).”

Keep good records

Keep track of volunteer roles and accomplishments so that you can be specific with praise and recognition in person, in evaluations, and in reference letters. Keep a

file on any notes citing excellence in volunteering that you receive from staff, patients, or patients’ families and refer to them when recognizing volunteers.

Set benchmarks

Create a volunteer satisfaction survey. Ask what volunteers are looking for in their volunteer experience and try to provide it. Monitor changes in the number of people volunteering and expressions of satisfaction from year-to-year to see if this special attention is having an impact.

Retention

Why is increased retention beneficial?

When we asked managers of volunteer resources if they had noticed a change in the number of volunteers and length of stay in the last five years, we found that the number of volunteers who remain involved for five years or longer has decreased at 80% of hospital sites. At the same time, the number of volunteers who serve for three months to a year has increased at 80% of sites. The majority of respondents also reported an increase in the number of volunteers who serve for less than three months.

Although some turnover is normal and can even help your volunteer program reflect changes in the community, a high turnover rate can be counterproductive. It can increase the costs of ongoing recruitment, as well as the costs associated with orienting, interviewing, training, and supervising volunteers. It can also reduce the overall experience level of your volunteer pool and may negatively impact the quality of your volunteer program as a whole.

However, given that volunteers appear to be getting involved for shorter periods of time, you should assess whether increasing retention is a realistic goal. You may find that you need to redesign your volunteer opportunities to fit the time constraints of your volunteers. If you decide to do this, you may find Volunteer Canada's manual, *A Matter of Design: Job design theory and application to the voluntary sector*, available online at www.volunteer.ca, to be helpful.

Promising Practices:

Share your vision

Create and communicate a vision for volunteer involvement. Make sure that volunteers know that they are working towards a greater goal and a greater good. Display your vision statement, mission statement, philosophy of care, and core values so that

volunteers feel they are part of something bigger and more important than themselves.

Understand and meet volunteers' expectations

Volunteers who are getting something out of their volunteer experience are more likely to stay involved. More than 90% of the managers of volunteer resources interviewed for this manual noted that volunteers have high expectations. Understanding individual volunteers' motivations and needs, giving them a variety of meaningful tasks that match their interests, and meeting those expectations will aid retention in many cases. For example, some people often volunteer as a way to build their skills or get experience. After they have accomplished this, they may want to leave. Offering them new opportunities to learn may entice them to stay longer.

Allow for change and advancement

Some volunteers need new challenges, more responsibility, or greater room for growth. Try to create leadership, learning, training, or mentoring opportunities for these volunteers. Or recruit them to be ambassadors in the community. Encourage volunteers to try different roles. Find out what they like about their volunteer assignment and, if necessary, move them to a position that includes more of what they enjoy.

Use volunteers to boost retention

Encourage volunteers to give and solicit feedback. Ask experienced volunteers to mentor new volunteers and to help create a safe, comfortable, and friendly volunteer environment. Solicit good news stories from volunteers and then, with their permission, publicize them.

Use staff to boost retention

Ideally, staff should be engaged in taking on the rewarding challenge of supervising volunteers. Encourage staff to give and solicit feedback from volunteers. Ask staff to identify issues and problems, and then address these immediately to ensure that volunteers have a positive experience.

Assess special needs in advance

Volunteers have different needs and bring different experiences to their assignments. For example, younger volunteers may not have learned how to behave in a workplace. Some new Canadians may not have mastered enough English for some roles. Other volunteers may be hearing impaired or have other special needs. Take these issues into account before assigning roles. Watch for signs that a volunteer may need to move to a new role. Ensure that you have policies on “loss of capacity” (e.g., for older volunteers who may develop health or mobility problems) and how you will handle this sensitive issue. Often volunteers with decreased capacity are aware of the situation and, if approached by the manager of volunteer resources, will suggest a shift in responsibilities or will decide to stop volunteering.

Provide enabling funds

Unlike people who make financial donations to charitable and nonprofit organizations, volunteers who donate their time receive no tax credit for their contribution. Few organizations reimburse volunteers for the out-of-pocket costs associated with volunteering, such as transportation, parking, or childcare. Hospital volunteers in the Greater Toronto Area reported that these costs totaled an average of \$315 per year. Reimbursing volunteers for some of these costs could help to attract a more diverse group of volunteers (e.g., students, people on government income support, people on fixed incomes, and low-income people). A volunteer-run childcare program would help to involve volunteers with young children.

Provide benefits

In some cases, employee benefits, such as employee insurance programs and registered education funds, can be offered to volunteers. Although most hospitals cannot afford to give scholarships or bursaries to volunteers, they could set up a scholarship information program and provide reference letters to help students in job searches.

Create social spaces

Many people volunteer because they want interaction with others. Providing volunteers with a space, such as a lounge, where they can socialize over a cup of coffee, may help to keep some volunteers coming back for years.

Be flexible

Once volunteers have chosen a role, be as flexible as you can about when and how they complete the task. Some tasks must be done at certain times, and this should be made clear in the position description. Otherwise, allow volunteers to schedule themselves as much as possible.

Deal with problems as soon as they arise

When a volunteer raises a problem, act immediately to solve it. Don't allow issues to poison an environment. Give each individual involved the opportunity to speak, suggest a solution, and then monitor the situation. Support anti-oppression policies to ensure that a healthy, productive, and inspiring climate exists for all volunteers and staff.

Involve volunteers

Include current and past volunteers when you are evaluating your volunteer program, re-designing volunteer roles, or planning new initiatives. This can be done in a formal way, by setting up a committee, or more informally, through a suggestion box.

Conduct exit interviews

Exit interviews (i.e., interviews with volunteers when they decide to withdraw from your volunteer program) can help you understand if there are problems in the volunteer program or the specific placement, or if there are greater social trends to which the program hasn't adapted. Ask volunteers why they have decided to leave, what might have encouraged them to stay longer, and what changes or improvements they might suggest to the position they are leaving. Create benchmarks to monitor volunteer turnover, identify trends, and evaluate the success or failure of your retention efforts. You can also use exit interviews to get ideas from short-term volunteers about the benefits, training, flexibility, opportunities, or vision that would encourage or allow them to make a longer-term commitment.

Program Evaluation

Why evaluate the volunteer program?

Evaluating your volunteer program allows you to identify whether the program is meeting your goals and the hospital's goals, creating benefits that justify a continued investment of resources, and helping volunteers reach their potential. Assessing the program's overall efficiency and effectiveness also allows for good decision-making, and helps to build or maintain support for the program at the senior management level of your organization. You should involve volunteers, staff, patients, and senior management in evaluating your program.

Promising Practices:

Evaluate costs and benefits

It is generally assumed that the benefits of using volunteers far outweigh the costs to hospitals. But by how much? Identifying the actual and potential benefits of a volunteer program can help you educate staff and management about the value of volunteers to your organization. It is also important to recognize that volunteers are not "free." There are real costs, including staff time, associated with recruiting, training, and supervising volunteers. These have to be accounted for so that your organization can fund its volunteer program appropriately. See the additional resources section for more information.

Keep good records

Good record-keeping is necessary to evaluate program effectiveness, document volunteer achievements, track your own achievements, justify program expansion, develop program history, recognize the work of

volunteers, identify gaps in service, identify volunteer training needs, aid in long-term planning, and get information to use in recruitment. See Ellis and Noyes (1990) for more information.

Consider using Volunteer Works software

Volunteer Works is a database and communications software program designed specifically for volunteer programs. As one manager of volunteer resources said, "Being in a hospital gives one access to resources and funds. This is very positive. It means access to a database. It means being able to use a computer to streamline the intake process and track volunteers from intake to the time they leave. Volunteer Works can be used for sign-in and communications. It generates quality pieces of information and benchmarks, and allows managers to identify the impact we make."

Develop benchmarks

What are the goals of your volunteer program? Is your program exceeding, achieving, or approaching those goals? How effectively are volunteers helping to meet those goals? What are the benchmarks that will allow these questions to be answered? Some things are easier to measure than others. Identify some benchmarks, like turnover of volunteers, percentage of positions filled, or lag-time in filling positions. Look at human resource models and try to standardize the intake process. As more and more organizations use software programs like Volunteer Works, there will be greater potential for sharing similar information and beginning a process of professional benchmarking.

Fundraising

What does fundraising have to do with volunteers?

Hospitals, like many other organizations, have been asked to do more with fewer resources. Governments have increasingly looked to the private and voluntary sectors to bridge the gap in the provision of social services. Hospitals have been encouraged to seek private donations of money and time, and to take advantage of commercial opportunities, such as the introduction of for-profit retail outlets on hospital property. Many hospitals have created foundations that focus solely on fundraising. In some hospitals, auxiliaries have become increasingly focused on generating funds for capital needs. Not only are many volunteers active donors, but often substantial funds are generated by volunteer activities. One manager of volunteer resources told us: “We are running two stores. We do it all with volunteers. Raising \$100,000 is a big deal.”

Promising Practices:

Ask volunteers if they would like to be included in your organization’s fundraising appeals

Volunteers often donate money to the organizations for which they volunteer. When we asked volunteers about their giving, we found that 46% of active volunteers donated money to the hospital where they volunteered and 74% donated money to other

organizations. In all, 79% of active volunteers donated to their hospital, to an outside organization, or to both.

The majority of hospitals in Ontario have a registered foundation whose sole responsibility is to raise money for capital expenditures. Some managers of volunteer resources encourage the hospital to raise funds from among volunteers. Others do not allow the hospital to use their volunteer database for fundraising purposes because they believe that volunteers might be offended if they were sent fundraising appeals. One manager of volunteer resources came up with a good solution to this dilemma. She asks on the initial volunteer application if the volunteer would like to receive fundraising requests from the hospital. Those who say yes are included in appeals; those who say no are not approached.

Volunteer programs create awareness that helps fundraising

Volunteer programs help to raise the profile of nonprofit and voluntary organizations in the community which, in turn, paves the way for successful fundraising appeals. As one manager of volunteer resources put it, “An important contribution of volunteers is the impact on community relationships. The hospital tries hard to develop strong relationships in the community to ensure support, donations, volunteers, and to market itself to potential new staff.”

Relations with Auxiliaries

What is the relationship between volunteer services and auxiliaries?

Unlike the traditional auxiliary volunteer, today's hospital volunteers tend to get involved for shorter amounts of time. Many approach volunteering by asking, "What can hospitals offer me?" As well, higher rates of patient turnover have led to a need for volunteers to have greater skills and to accept more responsibility. This, in turn, has resulted in the need for professional management of volunteers and paid professional managers, who now run most volunteer programs in hospitals. In some cases, auxiliaries have shifted their focus to fundraising. In others, hospital foundations have made auxiliaries obsolete.

Volunteer auxiliary departments existed at 60% of the hospitals we surveyed, while 24% reported that the auxiliary had recently disbanded, and 16% reported that auxiliaries had never existed. Of the 18 hospitals that had auxiliaries, only five reported a good relationship between the auxiliary and the volunteer resources department. Several respondents noted the existence of tensions and power struggles between auxiliary members and managers of volunteer resources.

It is difficult to generalize on the nature of these tensions as each case is highly idiosyncratic and reflects the history of the auxiliary, its unique relationship with the hospital, the formation of a professionally run volunteer program, and the overlap between the volunteer program and the ongoing services of the auxiliary. Nevertheless, we can offer the following points for consideration.

Promising Practices:

Respect uniqueness

It is important to remember that volunteers see themselves as "part of the culture" of the hospital. Mergers of volunteer departments, hospitals, auxiliaries, or other changes that do not retain the uniqueness of the organization may affect the morale and commitment of volunteers.

Maintain a clear division of roles and responsibilities

The most successful relationships are those in which there is a clear division of roles and responsibilities between auxiliaries and volunteer services. Typically, the auxiliary is responsible for fundraising efforts, such as lotteries, gift shops, and coffee kiosks. Auxiliaries are often also responsible for rewards and scholarships. Volunteer departments are typically responsible for the management of volunteers and for all other volunteer programs and services.

Maintain independent governance structures

Relationships between auxiliaries and volunteer resources departments are more positive when there are separate governance structures, a clear delineation of roles, and mutual reporting and information sharing with each department keeping the other informed. When one program feels that it has to answer to the other, there tends to be more conflict.

Be supportive of your auxiliary

Good relationships can be enhanced if the volunteer resources department supports the auxiliary by including auxiliary opportunities in its screening and orientation programs.

Relations with Staff

What is the relationship between paid employees and volunteers?

Staff surveyed for this manual said overwhelmingly that volunteers are essential, appreciated, and well-liked. It was clear that the level of commitment and skill that volunteers bring to their assignments impressed staff. However, during times of cutbacks, workers may feel threatened by volunteers and may worry about losing their jobs. This can create tensions, which the volunteer resources department will have to address.

At 48% of hospital sites we surveyed, staff now carry out activities that were done by volunteers five years ago, while at 35% of sites, volunteers carry out activities that were done by staff five years ago. Labour unions existed at 90% of the hospital sites in our survey. Although most managers of volunteer resources indicated that they had no problems with the labour unions at their hospital, some reported problems that had led to mediation or arbitration. Some managers of volunteer resources have managed to avoid conflicts by working to build positive, respectful relationships with both unionized and non-unionized staff.

Promising Practices:

Attend to legal requirements

Managers of volunteer resources in hospitals should be aware of the “Burkett Award,” which resulted from a grievance filed by the Canadian Union of Public Employees (CUPE). This ruling stated that work done by the bargaining unit before 1986 could not be done by volunteers. This has been incorporated into section 11.02 of the Central Hospital Agreement, which represents 25,000 hospital workers and states that “the use of volunteers to perform bargaining unit work shall not be expanded

beyond the extent of what would normally be bargaining unit work, except in those areas which were run by volunteers before 1986.” At certain sites, bargaining unit work can therefore still be done by volunteers, but the agreement limits the number of volunteers involved to the 1986 census so that volunteer involvement cannot be expanded to work historically done by members of the bargaining unit, or beyond volunteer involvement before 1986.

Be mindful of language and terminology

To avoid any suggestion that volunteers are a replacement for paid staff, use the term “volunteer role” rather than “position” or “job” to differentiate volunteers from staff. Don’t claim that volunteers “save” money. In most cases, volunteers provide support and services that would not otherwise be available. They also provide many soft services, such as giving directions or taking time to comfort people that are essential to the comfort of the patients. These roles enhance the quality of care, supplement the work of staff, and reduce pressure on staff, but do not replace staff.

Protect jobs

Never replace a paid position with a volunteer. The success of your volunteer program depends on staff cooperation and support, which will disappear if people feel that their livelihood is threatened. Make it clear that volunteers are there to support, not supplant, paid staff. Consider the impact on jobs when you are creating or re-evaluating volunteer roles. One manager of volunteers noted that sustained goodwill from the union was achieved, in part, by refusing to replace workers with volunteers during staff downsizing in the 1990s. You should also have a policy on the role of volunteers during any job action by unionized staff.

Involve staff in identifying volunteer roles

Staff often have ideas on how volunteers can help and what roles they can and should play. These roles are more likely to be seen as valuable if the staff have been involved in identifying the need. Quarterly requests for volunteer role descriptions were used at one hospital to identify possible roles.

Ask questions when developing a new volunteer role

These questions might include: Who, if anyone, did this work before? Why isn't the hospital hiring someone to fill this position? Is this an activity that should be carried out by paid staff? Guidelines for answering these questions should be developed based on the skill involved in the work, past practice, necessity of the service etc.

Clear new volunteer positions with Human Resources

Discuss any new volunteer positions with your human resources department or with the person responsible for human resources before the position is created. Human resources personnel can identify potential conflicts and discuss these with union representatives.

Inform volunteers of their limits

Be sure that volunteers know what they can and cannot do. Volunteers should have clearly defined roles and should understand why some work should only be done by paid staff (e.g., because of health and safety issues, liability issues, or issues pertaining to the bargaining unit or the collective agreement).

Run a volunteer/union workshop

Work to develop mutual respect for the role of a union and the role of a volunteer. Make sure volunteers understand the role of a union and that union representatives understand the role of a volunteer. This workshop should be coordinated with the union and include both volunteers and union representatives to explain the roles and value of each group. This might take the form of a presentation by a union representative during orientation.

Acknowledge staff concerns

Let staff know that the volunteer department takes their concerns seriously and to contact the manager of volunteer resources if there is a problem. Take all concerns seriously, even if, on the surface, they appear trivial. If there are problems, take the volunteer out of the role until the issue has been resolved.

Report volunteer hours to the union

Section 11.02 of the Central Hospital Agreement states: "Effective October 1st 1990, the Hospital shall submit to the Union figures indicating the number of volunteers as of September 20th, 1990. Thereafter, the Hospital shall submit to the Union, at three (3) month intervals, the number of volunteers for the current month and the number of hours worked." This information should also be reported to the human resources department. If the number of volunteer hours increases, the union will want to know why. Be prepared to describe the type of activities volunteers are doing. Hours spent entertaining patients, raising funds, or making items like clothing for babies, will not be questioned. Hours spent transporting patients within the hospital, or doing clerical or administrative work, will be. Other areas of concern might include staffing the information desk or assisting with recreational and social programs.

Conclusion

Whether you are using the volunteer management strategies presented in this manual to support the establishment of a new volunteer program, or to enhance an existing program, remember that volunteers are a very valuable resource. The contribution that a professionally managed volunteer program can make to a hospital is considerable.

Just as a hospital's volunteer pool continues to change, so too does every hospital environment. This is particularly true in the context of today's mergers, re-organization, and programming changes. Such fluidity opens the door for managers of volunteers to re-tool existing programs, and to ensure that they are seen to be moving strategically with the hospital as a whole. By demonstrating such ability to continue to meet the hospital's needs, your volunteer program will be perceived as successful and well-managed, and will help you gain and retain the support of senior management.

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Additional Resources

Online Resources:

AIMR, Society Leader (Association for Investment Management and Research),
http://www.aimr.com/socservices/socleader/dec02/best_practice/bestpracticesI.html

AmeriCorps National Service Web site,
Volunteer Maryland
<http://www.volunteermaryland.org>

Association for Volunteer Administration
www.avaintl.org

Canadian Administrators of Volunteer Resources
www.cavr.ca

Canadian Centre for Philanthropy
www.ccp.ca,
www.nonprofitscan.ca
www.givingandvolunteering.ca
www.kdc-cdc.ca

The Department of Canadian Heritage's
Community Partnerships Program
www.pch.gc.ca/cp-pc/progs/pc-cp/cvi_e.cfm#1

Energize
www.energizeinc.com

Points of Light
www.pointsoflight.org

Virtual Volunteering Project
www.serviceleader.org

Volunteer Canada
www.volunteer.ca

VolunteerToday.com: The Electronic Gazette for
Volunteerism. MBA Publishing:
<http://www.volunteertoday.com>.

Whatcom Council of Nonprofits. Best Practices
for Nonprofits
<http://www.wcnwebsite.org/practices/resources.htm>

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Appendix: Hospital Volunteers: Background and Trends

Background

Volunteerism is an important part of Canadian life; 6.5 million Canadians volunteered a total of 1.05 billion hours in 2000. Although this reflects a drop in the number of volunteers and total hours volunteered from 1997, more volunteering events and volunteer hours were directed towards healthcare organizations in 2000 than in 1997 (Hall, McKeown & Roberts, 2001).

In the summer of 2001, a team of researchers from York University began studying the role of volunteers in supporting healthcare and hospitals in the Greater Toronto Area. Much of the information contained in this document is derived from that research.

Our sample consisted of 31 hospital sites, with an average of 468 beds each. Nearly two thirds of the hospitals described themselves as acute care and general hospitals. Others described themselves as providing long-term rehabilitation or psychiatric care. Due to recent hospital amalgamation, several hospitals in our sample operated in more than one location. For example, three downtown hospitals had recently amalgamated into the University Health Network. However, each site had its own volunteer programs and distinct sets of volunteers. Therefore, we used hospital sites, rather than hospitals, as our unit of analysis.

The number of volunteers in these sites ranged from 125 to 3,240, with an average of 700 volunteers at each site. The number of volunteer hours contributed annually ranged from 6,100 to 204,000, with an average of 70,515 hours per site. Overall, this represents an average of 101 hours per volunteer per year, or the equivalent of 42 full-time jobs per hospital site.

Trends

Whereas just over half (54%) of all Ontario volunteers in 2000 were female, the volunteers at the hospitals we surveyed were overwhelmingly female (74%). These female hospital volunteers contributed significantly more hours than did their male counterparts.

Whereas almost half (47%) of all Ontario volunteers were employed full-time in 2000, nearly 75% of hospital volunteers in Toronto were not in the labour force, and less than 10% were employed full-time. Nearly half of hospital volunteers, and the majority of those who were not in the labour force, were retired. This suggests that hospitals are attractive places for retired individuals to volunteer.

There were, however, some similarities between hospital volunteers in the GTA and the average volunteer in Ontario. More than half (51%) of all volunteers in Ontario in 2000 had a post-secondary certificate, diploma, or university degree, as did 50% of volunteers at the hospitals we surveyed. Ontario volunteers who were not in the labour force contributed more hours on average than did those in the labour force. The same was true for hospital volunteers.

Over two thirds (69%) of the managers of volunteers we interviewed said that there had been an increased interest in volunteering at hospitals in the past three to five years, especially among participants in government-run workfare programs. However, less than one third (31%) reported that they were accepting greater numbers of volunteers from these programs. They also reported a greater number of requests by and placements of students during the same period.

The overwhelming majority of managers of volunteers (97%) said that more people from diverse cultures wanted to volunteer, and that their departments were accepting more volunteers from various ethnic backgrounds. Fluency in English was often stated as a barrier to volunteering (79%) among this population, although hospitals could make good use of volunteers who speak languages other than English and who could translate for and answer questions from patients.

Managers of volunteers noted several trends, including a greater push to volunteer in society, whether to learn new skills, build resumes, or meet school requirements. They pointed out that volunteering appears to be especially attractive among youth and new immigrants. They also reported that volunteers were generally talented and brought a host of valuable skills to their hospitals.

Managers of volunteers also noted the importance of keeping up-to-date on demographic trends so that they can make appropriate changes to volunteer recruitment, training, and supervision efforts; redesign volunteer roles to meet changing needs and expectations; make adjustments to recognition and retention activities; and otherwise accommodate the changing volunteer pool.

Here's what a few of the managers of volunteers we interviewed had to say about trends in volunteering:

- “There will likely be an intensification of demographic shifts and a shift in volunteer orientation to ‘what can hospitals offer volunteers.’ This is very different from an auxiliary model.”
- “Youth change the culture of the group. The increase in youth is helpful and adults are seeing the value of youth.”
- “There is a greater push for people to volunteer. This is good because we need them. But it is a systematic top-down approach without putting infrastructure in place to support needs at the grassroots level.”
- “Responsible, reliable, retired volunteers are key. We are not seeing a drop in older volunteers. We have teachers, fire chiefs, the retired CEO of a hospital. Over 50’s bring a lot, a big commitment. Our key demographic is the 60–65 range.”
- “Volunteerism is hot with new immigrants and youth who want to be more proactive.”

You can get national and provincial profiles of volunteers online at www.givingandvolunteering.ca.

