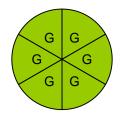
Internal Audit



Volunteer Recruitment & Reimbursement

November 2017

Report Assessment



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Introduction

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

Applicants wishing to volunteer must obtain Protection of Vulnerable Groups (PVG) (also known as Disclosure Scotland) and Occupational Health clearance before being considered for formal interview with a Volunteer Manager. Successful applicants must then complete NHS Lothian induction and training prior to commencing their activities.

The Scottish Government '*Guidance on Reimbursement of 'Out of Pocket' Expenses for Volunteers NHS Scotland (2011)* includes the general principle that no volunteer should be out of pocket as a result of his/her volunteering work. This applies to volunteers who work alongside or are under the supervision of NHS staff as part of a range of managed voluntary services/activities and to volunteers who participate in patient focus or public involvement activities.

The guidance requires NHS Boards to have a written policy which provides clear advice on the reimbursement process which is consistently applied across the relevant Board area.

Scope

The audit reviewed the adequacy and effectiveness of internal controls over the recruitment and training of volunteers, and the reimbursement of expense claims

Acknowledgements

We would like to thank all staff consulted during this review, for their assistance and cooperation.



Executive Summary

Conclusion

Overall an effective framework of control is in place for the recruitment of volunteers and the reimbursement of expenses incurred. Some improvement opportunities have been identified around the process for identifying and requesting volunteers, the completeness of information within paper files and the electronic national Volunteer Information System VIS, monitoring the training and performance of volunteers and the submission of claims for the reimbursement of expenses.

Summary of Findings

The table below summarises our assessment of the adequacy and effectiveness of the controls in place to meet each of the objectives agreed for this audit. Definitions of the ratings applied to each action are set out in Appendix 1.

No.	Control Objective	Control	Numb	per of actions	by action r	ating
		objective assessment	Critical	Significant	Important	Minor
1	Volunteer health and background checks are carried out and recorded.	Green	-	-	1	-
2	Initial and on-going training requirements of volunteers are met.	Green	-	-	2	-
3	NHS Lothian has an up-to-date policy for the payment of expenses for volunteers which is regularly reviewed and accessible to all relevant parties.	Green	-	-	1	-
4	Volunteers are aware of their entitlement to reimbursement of reasonable out of pocket expenses and the process for making a claim.	Green	-	-	-	-
5	Effective processes are in place to ensure expense claims are valid, accurate and appropriately authorised.	Green	-	-	1	-
6	Management Information is sufficient to provide monitoring of volunteer's expenses, and prompt remedial actions.	Green	-	-	-	-



Control Objective Ratings

Action Ratings	Definition
Red	Fundamental absence or failure of controls requiring immediate attention (60 points and above)
Amber	Control objective not achieved - controls in place are inadequate or ineffective (21 – 59 points)
Green	Control objective achieved – no major weaknesses in controls but may be scope for improvement (20 points or less)

Main findings

Volunteer recruitment is aligned with the Human Resources and Government recruitment policies for NHS Lothian. This includes requesting references from persons nominated as referees on the application form and completing an occupational health form. Volunteers are asked to disclose any criminal conviction or any criminal charges pending against them and are required to complete a Disclosure Application at the time of applying. The national Volunteer Information System (VIS) is used to record the information received during the recruitment process, including receipt of disclosure certification and approval from occupational health.

Paper records are also maintained for each Volunteer to hold as evidence the documentation associated with their recruitment, which in addition to that mentioned above also includes proof of the Volunteer's ID and signed confidentiality statements.

New volunteers are expected to comply with the NHS Lothian formal induction process, which requires completion of the necessary mandatory LearnPro training modules (usually done at home) or, if more appropriate, face to face training. Additional training requirements are determined by local induction procedures and are relevant to the role being carried out.

NHS Lothian Staff and volunteers are advised on the procedures for claiming expenses through the Volunteering in NHS Lothian Policy Including NHS Lothian Expenses Procedure for Volunteers, which was approved by NSH Lothian's Clinical Policy, Documentation & Information Group in July 2017. Also, prior to commencing their role, Volunteers are handed the NHS Lothian Guide for volunteers, who are required to sign a section to confirm that they have completed all necessary learning and understand the confidentiality requirement of their role. The Guide was refreshed in August 2017 and advises the volunteer on what expenses they are able to claim back from NHS Lothian.

Standards documentation is used for the submission of reimbursement claims, which require the signature of the Volunteer and their responsible officers. They are submitted with receipts where necessary to the VSM for further checking and approval.

The Deputy Director (Corporate Nursing) regularly reviews the budget for volunteer reimbursement through tableau dashboards. Monthly meetings are held with the Assistant



Head of Finance, where financial performance including expenditure under volunteer coordination (which includes reimbursement) is discussed. Quarterly performance reviews are also taking place

We identified five important issues during this review:

- Volunteers information and supporting documentation is not available.
- Completion of mandatory training modules is not being monitored.
- No formal feedback is provided to Voluntary Services on the performance of volunteers.
- Procedural documentation is not being followed.
- Petty cash expenditure sheets are not being completed in line with procedures.

Further details of these points are set out in the Management Action Plan.



Management Action Plan

Control objective 1: Volunteer health and background checks are carried out and recorded

1.1 Volunteers information and supporting documentation is not available

Important

Observation and Risk:

The Lampard Report was commissioned by the Department of Health following investigations into matters relating to Jimmy Savile and was published in February 2015. The report contained 14 recommendations for NHS bodies and the government to take forward in reviewing their policies, governance and procedural compliance, and training and support for volunteer managers.

In May 2017 the Scottish Government issued circular DL(2017)7 to all health boards. This required boards to consider each of the Lampard Report Recommendations, identifying any necessary local actions and to ensure that arrangements for the monitoring, measurement and reporting of the impact of these actions are considered through their Board level governance processes.

NHS Lothian assessed its processes and procedures against the recommendations in 2015 and again following the release of circular DL(2017)7. In response to one recommendation relating to the recruitment, selection and training of volunteers, Voluntary Services Managers (VSMs) use the previously developed national Volunteer Information System (VIS) to record all information provided during the recruitment process, including volunteers' Disclosure and PVG certification.

However, the review has noted several instances where information is incomplete or missing:

 From a sample of 15 individual's records on VIS who had been registered and placed within the last 18 months, one had no information recorded to confirm receipt of PVG/Disclosure documentation and seven had not recorded whether volunteer ID checks had been carried out. Though it is noted that volunteers' identity is confirmed for all new starts as part of the Board's recruitment procedures.

Further testing of this sample has been carried out on the corresponding paper records, in addition to a further 5 individuals held across RIE, SJH and the WGH sites, with the following findings:

- Disclosure/PVG documentation was not on file for 2 individuals, who had started volunteering with NHS Lothian in 2004 and 2008 respectively. Although they would have been requested and reviewed during the recruitment process.
- Learnpro certificates are not being held on file following corporate induction.
- The file for one individual did not have evidence of a signed confidentiality agreement.



• Three individuals had left their roles with NHS Lothian, however VIS had not been updated to record their leaving dates.

Without complete and up-to-date records for volunteers, there is a risk that volunteers may be placed without appropriate approval, guidance and instruction.

Recommendation:

Management should remind staff of the requirement to have complete and up-to-date records for all volunteers, including evidence of completed LearnPro modules. A procedure for the retrospective checking of PVG/Disclosure certification should be established and followed.

Management should also introduce controls to request updated PVG/Disclosure certification from current volunteers appointed several years ago.

Meanwhile the use of VIS to electronically scan and attach documentation to volunteers' records should be investigated.

Management Response:

While there is a separate debate to be had around what training is relevant for volunteers, the importance of LearnPro training as part of the induction procedures is noted.

The migration of all paper based data to the VIS was a manual exercise. Management accepts that there were two VIS entries where PVG had not been transcribed and / or was not held in the paper records, from 2004 / 2008.

All volunteers who started prior to 2011 (prior to implementation of PVG/Disclosure scheme) were contacted as part of the retrospective PVG process to ensure they completed the appropriate paperwork for the role. Not all roles require a Disclosure / PVG although every application is sent to Disclosure Scotland.

Currently there is no functionality for attaching scanned documentation into VIS.

Management Action:

Volunteers will be instructed to submit their completed LearnPro certificate to their VSM as soon as possible following Corporate Induction. Communication will be sent also to the VSMs, reminding them of the requirement to maintain complete files for all volunteers.

The community nursing programme manager will write to the National Programme Manager (Volunteering) to investigate adding the ability to scan and attach documentation as a function to the VIS (a national database system). Any decision made by the National Programme Manager will be documented, with justification not to proceed with this system change made clear.

VSMs will check the VIS data and paper files of the volunteers and confirm that every volunteer has a current PVG if their role requires it.



Responsibility: Programme Manager (A. Jarvis)	Target date: 31 March 2018
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Control objective 2: Initial and on-going training requirements of volunteers are met

2.1 Completion of mandatory training modules is not being monitored

Important

Observation and Risk:

Volunteers undergo mandatory corporate induction training before they are placed. This is normally through the completion of LearnPro eLearning modules and consolidated by local induction procedures.

While we have noted a lack of evidence on volunteers' files of LearnPro certification under control objective 1, there is also no framework of control in place to monitor for each volunteer when eLearning modules expire and the completion of refresher training.

It is a requirement of the Lampard report and circular DL(2017)7 that NHS Lothian ensures that its staff and volunteers undergo formal refresher training, including Public Protection training.

However, without effective controls for monitoring training volunteers may not be adequately trained and therefore unable to carry out their role effectively and with the safety of patients and staff considered.

Recommendation:

Management should introduce a system of control for the monitoring of volunteer training. This should included identifying where training has lapsed, contacting volunteers or their responsible officers to advise them of this and obtaining evidence that refresher training has been completed.

Management Response:

Volunteers are sent automatic reminders when they are due to refresh their module from within Learnpro. This information is not sent to the VSMs and volunteers' records are not held on PWA (the ER system for employees) therefore there is no access to a reporting mechanism to provide this information.

Within the current VSM resource, the administrative burden of manually collating records for LearnPro is prohibitive. However this may in some cases be delegated to the appropriate individual with 'line manager' responsibilities.

Management Action:

Volunteers will be reminded on a regular basis of their obligation of refreshing their LearnPro modules. This will be done via the Newsletter which is sent to all volunteers twice a year and at the annual 'Celebration of Learning' that is marks the start of the national Volunteer Week in June, which includes a training update.

Where possible, NHS Lothian staff will be instructed to contact placed volunteers annually to request confirmation that their LearnPro training is up-to-date.



Responsibility: Programme Manager (A. Jarvis)	Target date: 31 March 2018
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2.2 No formal feedback is provided to Voluntary Services on the	Important
performance of volunteers	

Observation and Risk:

Currently, the document 'Volunteering in NHS Lothian – A Guide for Staff' advises that as a matter of course the member of staff supporting a volunteer will meet regularly with them and be aware of the volunteer's role, providing opportunities for discussion and guidance on good standards of practice.

It also a requirement of the Lampard report that not only are volunteers properly recruited, selected and trained, but that they are subject to appropriate management and supervision.

However, no formal controls are in place to confirm that such meetings are taking place for all volunteers and the outcomes reported to the appropriate Voluntary Services Managers.

Without reasonable controls around the review of volunteers' performance, there is a risk that specific concerns around the behaviour or performance on volunteers are not being addressed and resolved.

Recommendation:

Management should implement across NHS Lothian a formal process for obtaining feedback on the performance of volunteers. It is advised that this should be carried out place at least every year/6months.

Management Response:

Given the VSM resources available it would be administratively impossible to see every volunteer annually. Volunteers have most contact with staff in the wards and departments in which they volunteer.

The VSM's have an 'open door' policy and will meet with any volunteer or member of staff who wishes to discuss any particular issues. VSMs provide assistance for any identified member of clinical staff in supporting a volunteer if there is a concern or issue about a volunteer's performance or behaviour. This may involve a change of volunteer placement, or (if necessary) terminating their placement with NHS Lothian and supporting the volunteer to find a different volunteering opportunity.

Management Action:

On the intranet pages, a new section will be developed, using a survey monkey tool that will enable ward areas to feed back on the performance of volunteers.

The VSMs will develop a mechanism to ensure a face to face / telephone review discussion with volunteers after 3 months of being in their role.

Responsibility: Programme Manager (A. Jarvis)	Target date: 31 March 2018



Control Objective 3: NHS Lothian has an up-to-date policy for the management of volunteers and reimbursement of volunteers' expenses.

3.1 Procedural documentation is not being followed	Important
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Observation and Risk:

The Guide for Staff has two appended forms – Planning a Volunteer Placement form and Volunteer Request form. Staff are advised in the guidance that these forms can be used when identifying the type of person they are looking for, along with the skills and experience they require from the volunteer.

Once completed, the forms are required to be sent to the appropriate Voluntary Services Manager to begin the volunteer recruitment process.

However, these forms are not being used and instead the planning and request process is carried out in direct discussion between the department/area and Voluntary Services Manager.

Without the use of appropriate documentation, staff may not be not provided all relevant information prior to volunteer appointment, including:

- Qualities/skills/experience required.
- Training and support provided by the department/area.
- Supervision arrangements, and
- Whether a budget is in place for out-of-pocket expenses.

Consequently, there is a risk that a volunteer may not hold the necessary skills, knowledge and experience to carry out their role.

Recommendation:

Management should review the use of the two forms and determine whether they are required as part of the volunteer recruitment process. If they are still deemed necessary the Guide for Staff should be promoted or relaunched to encourage the completion of the forms. However if the forms are no longer relevant to the recruitment process they should be removed.

Management Response:

Management accept the recommendation and have work underway to review both the guide for staff and the volunteer handbook.

Management Action:

The Guide for Staff is currently being refreshed, the pro formas will be removed from the process and the necessary information built into the role descriptors as part of the on-going work to review all the information provided to both staff and volunteers.

Responsibility: Programme Manager, (A. Jarvis)	Target date: 30 ^t September 2018



Control Objective 4: Volunteers are aware of their entitlement to reimbursement of reasonable out of pocket expenses and the process for making a claim

We identified no significant weaknesses in relation to this control objective.

When volunteers are placed, they are provided with Volunteering in NHS Lothian: A handbook for volunteers. Upon receipt, they are required to sign of the document as read and understood, in addition to acknowledging the description of their volunteering role.

The handbook advises volunteers of their right to claim expenses incurred form volunteering and includes travel, parking and sustenance. Volunteers are advised to contact their Voluntary Services Manager or Project Manager in order to obtain a claim form and information on how to complete it and return it for processing.

Also, in July 2017 the NHS Lothian Clinical Policy and Documentation Group approved for publication an updated Volunteering in NHS Lothian Policy, including NHS Lothian Expenses Procedure for Volunteers. The Volunteering Policy and accompanying procedures are intended primarily for the use of NHS Lothian staff and volunteers, and set out in further detail the financial guidance/policy on the payment of out-of-pocket expenses.



Control Objective 5: Effective Processes are in place to ensure expense claims are valid, accurate and appropriately authorised

5.1 Petty cash expenditure sheets are not being completed in line with procedures

Important

Observation and Risk:

The Expenses Procedure for Volunteers has been developed to ensure that all reasonable and actual expenses incurred by Volunteers tasks are reimbursed by NHS Lothian through a clear, consistent, accessible and equitable system. Volunteers are required to complete a claim form detailing the nature of the claim (mileage etc) and have this countersigned by their responsible officer. Once done the form is passed to the appropriate Voluntary Services Manager for review and approval.

A sample of 37 expense claim forms were reviewed to confirm that they had been processed in line with the Expenses Procedure. The following findings were made:

- No forms had been countersigned by the volunteer's responsible officer to confirm that the volunteer had attended and the claim is valid. This is a requirement of the Expenses Procedure. Of the claims reviewed as part of the sample, 20 had a total value of £639.46, with the highest value claim £112.
- One claim, totalling £60, had been authorised by a Voluntary Services Manager. However, the Expenses Procedure for Volunteers states that VSMs can authorise claims up to the value of £50, with higher authorisation required above this.

Unless the procedures for completing and processing reimbursement claims are followed, there is a risk that volunteers are receiving payment erroneously. Also, procedures should be followed to demonstrate that claims are being appropriately reviewed and approved.

Recommendation:

Management should advise all volunteers that reimbursement claims should be countersigned by their responsible officer prior to submission to the VSM's for approval.

Also, the £50 threshold on claim approval should be reviewed and either followed for future claims or management should increase the value of delegated authority to the VSMs.

Management Response:

The VSMs currently have the right to approve up to £200 within the Authorised Signatories Database and the claims described above are within their authorisation parameters. The VSMs have been informed of the increased amount of delegated authority. The refreshed volunteering policy (which includes a section of reimbursement of expenses) which was ratified by CPDIG in July 2017 is at odds with the ASD levels.

Management accept that expenses claims should be countersigned by a responsible officer in the location that the volunteering takes place.

Management Action:



A technical update to the Volunteering Policy will be submitted to CPDIG for approval.

The Guide for Staff is currently being refreshed, requirement for local pre authorisation of the expenses will be included in this guide as part of the on-going work to review all the information provided to both staff and volunteers.

Completeness of reimbursement claims, including appropriate countersigning will be checked by the VSMs. Where it is identified that this has not been carried out, VSM's will contact the appropriate individual to confirm actual attendance.

Responsibility: Programme Manager (A.

Target date: 30 September 2018



Control Objective 6: Management Information is sufficient to provide monitoring of volunteer's expenses, and prompt remedial actions

We found no significant control weaknesses in relation to this control objective.

The Deputy Director – Corporate Nursing regularly reviews the budget for volunteer reimbursement through tableau dashboards. Monthly meetings are held with the Assistant Head of Finance, where financial performance including expenditure under volunteer coordination (which includes reimbursement) is discussed. Quarterly performance reviews are also taking place.

Volunteer travel and subsistence costs have an annual budget of £25k. Year-to-date expenditure for 2017/18 (April –July) in this area is £2k, which is less than the £8 budgeted year-to-date amount.



Appendix 1 - Definition of Ratings

Management Action Ratings

Action Ratings	Definition
Critical	The issue has a material effect upon the wider organisation – 60 points
Significant	The issue is material for the subject under review – 20 points
Important	The issue is relevant for the subject under review – 10 points
Minor	This issue is a housekeeping point for the subject under review – 5 points

Control Objective Ratings

Action Ratings	Definition
Red	Fundamental absence or failure of controls requiring immediate attention (60 points and above)
Amber	Control objective not achieved - controls in place are inadequate or ineffective (21 – 59 points)
Green	Control objective achieved – no major weaknesses in controls but may be scope for improvement (20 points or less)