

*'It helps me as much as it helps others':
Perceptions of Employee Volunteering in the NHS*



Employee Volunteering: A Qualitative Project and Recommendations

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Foreword

NHS Health Education England is delighted to publish 'It helps me as much as it helps others': Perceptions of Employee Volunteering in the NHS qualitative project report following the exploration into the lived experiences of employee volunteers within the National Health Service and Voluntary, Community and Sector Enterprise sector.

The benefits of employer supported volunteering programmes are wide-ranging to the individual, the employer and organisation the volunteer supports. *'Volunteering gives employees the chance to build connections with their local communities and give back to society while working on issues they feel passionate about. They also gain the opportunity to develop key soft skills in areas such as coaching, leadership and organisational abilities'* (CIPD, 2021). However, there is limited research into the benefits in relation to the individual's learning, skill gain, work and career development, employees volunteering within their own organisation and at times of crises.

A qualitative project was therefore commissioned to explore individuals' lived experiences of volunteering, their motivations, and the learning and impact to careers and skill development. The report highlights case illustrations and quotes from the volunteers throughout the report to ensure the voices of volunteers are central and to ensure the experiences of volunteering and the difference it makes is highlighted. The report makes a series of recommendations for organisations undertaking employer supported programmes and provides recommendations for applicable learning across the National Health Service and the Voluntary, Community and Social Enterprise sector.

We would like to take this opportunity to thank the volunteers for sharing your experiences; without your time and contributions this project would not have been possible. Thank you to the organisations who have supported the communication of the study and thank you to the University of Portsmouth for undertaking the project on behalf of NHS Health Education England.



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Executive Summary

The aims of this project were to explore the impact of volunteering by NHS employees in relation to issues such as learning, skill gain, work and careers. Commissioned by NHS Health Education England, this report uses qualitative data drawn from semi-structured interviews with 23 volunteers across England. The study was conducted in summer 2021, with the shadow of the pandemic still continuing to influence the work of the NHS and its employees. As a qualitative piece of work the findings are not generalisable, but they do shed light upon the lived experience of those NHS employees who choose to combine paid work, voluntary work (either within or outside the service) and home life.

Staff are engaged in a wide variety of voluntary activities within the service including helping to feed patients on busy wards, acting as conversation partners with stroke victims, acting as NHS ambassadors to encourage and inspire next generation NHS staff, and stewarding at vaccination centres. But staff are also involved in external voluntary effort for organisations as diverse as the Pankhurst Trust, the Trussell Trust and the Prince's Trust.

Employees' reasons for volunteering are by no means uniform. We found evidence of staff wanting to give something to the service 'over and above the paid role', and of wanting to do something in accordance with their values. Some employees were looking for roles or tasks that would help them personally, especially in dealing with stress or anxiety. One interviewee spoke of their volunteering as having therapeutic value and another of wanting to do physical helping tasks in contrast to their mentally demanding paid role. This finding supports a recent study by a researcher at Cambridge. Howlett (2021) reported on a study conducted by Fleming using data from the Britain's Healthiest Workplace Survey. This suggested that of all the wellbeing initiatives being promulgated in organisations currently, volunteering is the one activity which demonstrably improves mental health (Fleming, cited in Howlett, 2021).

In volunteering none of our interviewees spoke of learning gain as a motivating factor *in itself*, however volunteers do derive a range of learning benefits including improved networking skills, communication, presentational and problem-solving skills. This finding echoes previous research in other contexts. Some interviewees were able to identify very specific gains such as improving their computer skills, but often learning appeared to be of an incidental informal kind, unanticipated and often unexpected.

Senior staff undertaking voluntary roles were able to point to volunteering as a way of connecting with frontline staff and the fundamental operational work of their Trust. This was especially the case with those interviewees who no longer had patient contact or who, by the very nature of their role, would not otherwise have any direct patient contact. Some individuals spoke about the value of their volunteering experiences when developing policy and in seeing the impact of strategic decisions at ground level and the learning that comes with this experience.

A number of themes emerged around the role of the line manager and the organisational climate for volunteering. In particular, a greater need for clarity about some voluntary roles and the way in which employee volunteers (those volunteering within the service) are managed. There appears to be a need for a more consistent approach to helping those employees interested in volunteering get access to information about opportunities. Some Trusts demonstrated a highly professionalised approach to managing the process of volunteering. However, there also appear to be inconsistencies in terms of time off for voluntary activities with some Trusts having a clear policy and guidance and others with limited or no specific guidance

of which interviewees were aware. We suggest here that a model Trust policy developed and disseminated by HEE could make a valuable contribution towards broader consistency across NHS Trusts.

Recognition and support for the contribution made by employee volunteers is also of importance. It may, for example, be helpful for Trusts to generate and share case illustrations of successful employee volunteer activities both in terms of internal voluntary activities and external ones. Marketing, HR and communications teams could assist in helping to publicise such success stories.

Volunteers were asked if their voluntary activities were or should be discussed in appraisal meetings. For some interviewees this was considered positively, especially where they felt they could point to some direct benefits for the work role such as particular learning gains or a better understanding of operational challenges. Other interviewees did not think their managers knew about their voluntary work or would be especially interested in it. For some interviewees, volunteering was considered a personal choice and an entirely private matter. Thus, there is no consistent opinion on this subject and we suggest that recognition by line managers should be encouraged as good management practice, rather than implemented as a structured process.

Because this study sought out the experiences of individuals, the report which follows leads with quotations taken directly from interviewees so that the voices of the employee volunteers predominate. The report also includes four slightly longer case illustrations to give the reader a better insight into NHS employee volunteers' lived experience and perceptions.

Introduction

Employee volunteering is a subject of increasing relevance and importance in all kinds of workplaces. Corporate volunteering programmes, for example, appear to be part of a growing trend as a component of corporate social responsibility strategies and it has been suggested that between a quarter and one third of employees engage in employer supported volunteering at least once a year (IVR, 2015). However, Wilson (2012) in his review of conventional volunteerism research suggests that the *experience* of volunteering has been somewhat neglected.

Volunteering has been seen as a complex phenomenon with often quite 'loose' boundaries existing between what does and does not fall within its margins. It has been suggested that what is understood to be volunteering is a matter of public perception (Hustinx, Cnaan & Handy, 2010) and we would suggest perhaps also a matter of organisational perception.

There does not appear to be one single agreed definition of employee volunteering. In their comprehensive review of corporate employee volunteering, Rodell, Breitsohl, Schroder and Keating (2016) discuss some of the difficulties. Should it embrace volunteering done by employees in their own time or should it be limited to company sponsored initiatives? They acknowledge that many employees volunteer on company time and are therefore in receipt of monetary compensation – how does this affect the definition?

Rodell et al (2016) suggest that employee volunteering should involve giving time, should be planned and should involve some (external) volunteer group or charitable organisation. Whilst this offers a helpful perspective their definition does not take account of staff volunteering within and indeed *for* their own organisations. However, in the same article in their review of the extant literature they use the term employee volunteering to denote **'any volunteering exhibited by employed individuals'** (p. 59) which is more relevant to NHS employees who volunteers within and outside of the service. According to the National Council for Voluntary Organisations (2019) a successfully-managed employer-supported volunteering (ESV) programme can be a beneficial experience that might be **'an employer encouraging their own staff to volunteer in their own time, or providing volunteering leave so that staff can volunteer in work time. It might be a formal ongoing partnership between a business and a charity or it might take the form of a one-off corporate team day'**.

In the context of this project, volunteering may consist of employees who give unpaid help on a regular basis either within or outside the NHS, or it may be episodic, in which people give short term, flexible help during crises in order to provide (for example) services to patients or to enable such services to be provided. Micro-volunteering has emerged as a practice in which people are more likely to volunteer their time in short and convenient, 'bite-sized' chunks, for example collecting prescriptions or picking up some shopping, or supporting patient feeding once a month. Rodell et al (2016) make the important point that frequency, length and intensity of volunteering activity are instrumental in determining if skill gain, for example, can be attributed to it.

In this report we focus upon the experience of volunteering undertaken by staff of any grade, contract type, or discipline currently working in the NHS be it *within* the service or *outside* of it on behalf of a particular charitable cause. We were charged with securing 20 interviews; in the event we undertook 23. It became apparent that there is no clear picture of the extent of employee volunteering, be that within or outside of the NHS. Employee volunteers in the NHS

proved to be a challenging group to reach, which may be a consequence of the pandemic and the fact that these employees have many demands upon their time.

The specific objectives for the project are as follows:

- To explore employee volunteers' experiences in volunteering.
- To explore individual and organisational learning gains arising from employee volunteering experiences.
- To identify any perceived or actual impact on work or career development as a result of voluntary activities.
- To offer suggestions as to how NHS organisations might better support and recognise employee volunteering.

The study draws on two principal sources: scoping and reviewing existing peer reviewed journal articles, and any other relevant literature on employee volunteering, plus online interviews with employee volunteers either volunteering in the NHS or outside the service. The literature search, review, analysis and synthesis were conducted in accordance with procedures described by Torraco, (2016). The literature review comprised over 70 articles and reports. The following search terms were used: employee-volunteering, employee-voluntarism and employer-supported volunteering. Literature was searched for in three principal databases, Scopus, Emerald and Web of Science and in the following academic journals:

Academy of Management Journal, Social Responsibility Journal, Applied Psychology, Journal for the Theory of Social Behaviour, Voluntas, Journal of Business Ethics, International Journal of Sociology and Social Policy, International Public Management Journal, Management Decision, Non-Profit Management and Leadership, Non-Profit and Voluntary Sector Quarterly, Review of International Comparative Management, Frontiers in Psychology, Social Forces, Personnel Review and Journal of Management.

Much of the literature to do with employee volunteering is either concerned with corporate / employer supported volunteering in other organisations and the link to corporate social responsibility, or else it addresses issues in the not-for-profit sector such as whether or not to enter into partnerships with corporate bodies. There appears to be a limited body of research on the experience of employee volunteering *within and for* one's own organisation.

The online interviews comprised 23 volunteers and were conducted between May and July 2021. Interviews lasted from 30-45 minutes in length. Participants were self-selecting following internal NHS Health Education England (HEE) communications via emails to NAVSM, HEE vaccination leads and HEE staff newsletter. In addition, communications were sent through regional and national NHS England newsletter.

Initial findings were presented at the *Future of Volunteering Conference* held on 2nd June 2021. The interviews focused on such questions as the motivation for volunteering, types of voluntary role, learning gains, the volunteering climate, benefits and challenges, and how the organisation could better support employee voluntary effort. The interviews yielded 250 pages of transcript which the researchers then coded in order to find the key themes discussed in this report.

Interviewees were drawn from Trusts and other NHS organisations as far afield as Cambridgeshire, Kent, Nottinghamshire, Buckinghamshire, Greater London, South Yorkshire, North Yorkshire, Dorset, Derbyshire and Hampshire. Interviewees were employed in both clinical and non-clinical roles, such as, for example, clinical nurse specialist, patient safety

practitioner, physiotherapist, vaccinations supervisor, workforce resourcing manager, voluntary services co-ordinator, HR manager and ICU consultant. Interviews revealed that employee volunteers were engaged in a wide variety of volunteering roles and activities both within and outside the service. For example, within the NHS, roles ranged from physical tasks such as feeding patients and stewarding at vaccination centres through to a variety of administrative, advocacy, befriending and counselling roles. Outside the service, roles included lobbying and campaign work, packing food parcels, coaching and mentoring.

Table 1. Snapshot of Employee Volunteer Roles & Activities

The following is a list of some employee volunteer roles represented in this study (see Appendix for full list):

Trussell Trust Food Bank Worker - Prince's Trust Mentoring - Taking food orders and delivering food for staff - Royal Voluntary Service Check-in and chat - Vaccination clinic support including stewarding - NHS Ambassador – Conversation Partner – Befriender – Lunchtime support & assistance feeding – Green Champion – Youth Voice Panel – Delivering free pilates instruction for staff - Administrative roles for charities (including chairing) – Digital Champion – Bereavement Team Member – Mentoring women for the Pankhurst Trust – Campaigning for the Anthony Nolan Trust – Breastfeeding counsellor – Smart Works Coaching and Mentoring

We found that 14 of the 23 volunteers interviewed did so within the NHS, with a small minority undertaking more than one voluntary role simultaneously in addition to their paid NHS roles. For example, in the case of one part-time worker:

'I run a free Pilates for Wellbeing session for staff...I have done some work with the vaccination centres (as a steward) and I'm still doing 'check in and chat' (Smoking Cessation Trainer)

Two of our interviewees might be considered outliers, in the sense that although they volunteered to undertake activities, their work might be described as an extension of their respective organisational roles or perhaps as good organisational citizenship. However, in both cases they worked longer hours on the projects for which they volunteered than their substantive roles normally demanded. We have included them here because they saw themselves as volunteers. We excluded a group of former employees who contacted us and were undertaking voluntary work as they were no longer in paid roles.

The next section of the report presents the findings from the interviews, which are discussed in relation to relevant points of interest from the literature. Without exception, the employees who took part in the interviews impressed with their positive, pragmatic approach to volunteering. Regardless of time commitment or frequency, all the interviewees were passionate advocates for the difference that volunteering can make. In addition to exploring learning gains and impact, the interviews also revealed perceptions about culture and managerial factors that warranted separate discussion in the findings.

Findings: Motivation of Volunteers

Often employee volunteering is written about in the context of some externally sponsored voluntary programme on the part of a company, perhaps linked to a Corporate Social Responsibility strategy. Though there are examples of voluntary work within organisations (in the not-for-profit sector, for example) this is much less of a focus in the literature than company sponsored external volunteering schemes. Once employees become involved with a charity it becomes common for them to identify closely with it and its cause (Peloza and Hassay, 2006). In Peloza and Hassay's (2006) research employees reported feelings of 'company pride' and some even went so far as to say it was their duty to support the company in its philanthropic efforts. This could well mirror the motivations of employees in public health organisations such as the NHS who may already be said to identify with NHS values through their formal job roles.

It is noteworthy that most of our NHS respondents spoke about volunteering chiming with their personal values. For some it's part of their DNA; it's what they do and it speaks to those values. For others, especially but not exclusively younger volunteers, there is a discernible skill development benefit and a link to a job or career direction.

'I've always volunteered. I think it's an important service – like lifelong learning I think there should be lifelong volunteering.' (Workforce Resourcing Manager)

'Because my values are really towards helping people; it speaks to my values, which is one of the reasons I work for the NHS.' (National Programme Manager)

'You perhaps have got something to share because you're not just a nurse; you're a nurse that really cares about what you do...wants to invest in the future of nursing.' (Patient Safety Practitioner)

There are multiple reasons why people volunteer, irrespective of the context. Rodell et al (2016) argued that motivations for volunteering can range from 'individuals fulfilling their values to socialising with others to escape their troubles' (2016, p. 58). Motivation to volunteer cannot be ascribed to one single cause but the notion of employees volunteering because they identify strongly with their profession or with the organisation and its particular values, appears to have real significance for employee volunteering in the NHS. We found evidence to support this with interviewees telling us about 'wanting to give something over and above the (paid) role', 'wanting to make a difference to others' and 'wanting to contribute to others' development'. But there is also evidence of volunteers looking for roles or tasks that help them personally – for example interviewees spoke of 'volunteering as therapy', 'wanting to break down the myths about nursing', 'wanting to do something physical rather than mentally demanding' and 'looking for a different role to the paid one'. This is consistent with the findings of research into corporate employee volunteer programmes (Sekar & Dyaram, 2017).

Interestingly none of our interviewees spoke of learning gain in and of itself as a *motivating factor* in undertaking a voluntary role or task. It may be that the voluntary work shares some aspects of the individual's substantive job content and so they may already possess some or even all of the necessary skill set for the role. However, even in cases like these volunteers told us they developed or enhanced their skills through their voluntary activities.

Case Illustration 1: Lorraine Fox – Hospital Community Charity & Volunteer Team



'The more we've done it (volunteering) and the more I've seen and done it myself, you can absolutely see the benefit; the pressure it takes off departments so they're not having to do some of the tasks that stop them from doing the core part of their job. And I think from the patient's perspective, it makes a massive difference.'

Thinking about non-clinical staff, it makes non-clinical staff really become aware of how difficult it is for clinical staff. It helps with communication skills, attention to detail and, how people understand things. Because I think we could on occasion make assumptions about roles, for example that looking after someone on a ward is very easy. And then when our staff go down to help them say at mealtimes, they realise how many different things a member of staff is trying to juggle at one time.'

Findings: Learning, Skills & Career Development

Learning gain is seen as one of the perceived benefits of volunteering. A number of previous studies point to the development of job-related skills that can be enhanced through volunteer programmes. These include teamwork skills, written and verbal communication skills, project management skills and leadership and people-related skills (Wild, 1993 cited by Peterson, 2003). Peterson's study (2003) showed that volunteerism was viewed as enhancing teamwork skills the most and project management skills the least, and that employees participating in a volunteer programme perceived greater enhancement of job skills through volunteering than did non-participating employees.

Pelozo and Hassay (2006) suggest that at-work voluntarism offers a unique set of benefits such as team and morale building and networking opportunities. Wilson and Hicks (2010) in their research into employee volunteering focusing on 16 businesses operating in the City of London, found that competencies were developed in areas such as communication skills, including the ability to communicate clearly with a range of people and to listen actively, the ability to help others through such means as coaching and counselling and the ability to be adaptive and capable of being effective within different contexts with different kinds of people. Percy and Rogers (2021) in their survey of 1,026 employee volunteers in education (including NHS employees in Ambassador roles) found that 80% or more volunteers reported benefits in terms of communication, influencing and relationship skills.

Interviewees for this project were asked what skills they brought to their volunteering activities and what skills they gained or further developed as a result of these activities. In terms of skills brought to the roles, interviewees' spoke about bringing extensive NHS knowledge (some of which might be termed their insider or tacit knowledge). This 'insider' knowledge coupled with developed communication skills meant that they could make information more accessible

especially in ambassador roles where they aim to encourage young people to think about NHS careers.

'I think I can relate to people at different levels. I think that's something nurses learn to do, and to translate complex information into something more easily understood.' (Clinical Nurse Specialist)

'I spend a lot of time translating medical jargon into what that means for a patient so this helps when explaining (the role) to 17-year olds.' (ICU Consultant)

Volunteers spoke about the wide range of other skills they brought to their volunteering roles, from highly specific technical skills through to softer skills to do with engagement, organising and (something mentioned by many interviewees) listening:

'I guess what I bring is a listening ear and a friendly face, and I have a wide range of activities and interests - that's useful for connecting with patients.' (Executive Team Member)

'I hope I bring communication skills...I hope I can, you know, establish rapport...with check in and chat I had to reach quite deep sometimes.' (Smoking Cessation Trainer)

'I brought organisational skills, I'm used to disseminating information and collecting and analysing a lot of data, and working at pace.' (Workforce Resourcing Manager)

'I bring professional experience...but I was also an inpatient for 6 months...I have laid in bed and watched and observed and received supportive care and been fed...I have that personal insight.' (Physiotherapist).

Volunteers were also able to bring some highly specific skills to their roles, for example:

'I've had a lot of experience with digital technology and virtual reality and what that can do for wellbeing and mental wellbeing particularly. I developed an entire bank of films on allied health professionals.' (Administrator)

'I'm good at feeding people! I think some people find it hard to feed people and give them a drink; it can be kind of intimidating to 'cos you're stood over someone.' (Head of Education)

In addition, respondents spoke about the ways in which volunteering helped them as NHS employees. NHS Ambassadors remarked that they were learning about the expectations and experiences of the younger generation, which supports actions in the workplace:

'It helps me in both my clinical role and when I need to work with those 18+ undergraduate students.' (ICU Consultant)

Senior non-clinical staff spoke about the impact of learning about patient care and the concerns of staff engaged in patient focused roles:

'I really wanted to interact with patients more directly, and I thought it would help me in my day job and remind me why I work in the NHS...it's given me a much better understanding of how things work operationally. The more you know about the organisation, the more it will help you with your job, like in ways you don't even know.' (Executive Team Member)

This quotation, from an NHS employee in a senior non-clinical role, links with points made about motivations for employees specifically to get involved in volunteering activities within their respective organisations. It is evident that patient-focused volunteering offers opportunities for non-clinical staff, or senior staff no longer in clinical roles, to connect in a meaningful way with the fundamental work of the Trust. One striking example of connecting with the concerns of those at the sharp end are the comments of someone who had previously been a Chief Nursing Officer:

'I've learned a lot because if you're a volunteer you're not seen as part of the management structure. People are far more prepared to be open and honest about the culture of a place' (Vaccination Supervisor)

In addition to skills and competencies developed in the course of their volunteering, the volunteers also reflected upon less easily explained benefits such as what might best be termed 'self-knowledge':

'You hear in a day ten different perspectives on the world that you think you know inside out, that actually you don't because the perception is different for everybody.' (Regional Director)

'I know that I've been institutionalised, so being able to engage with people...different ages...grades...does contribute to me not becoming too closed-minded.' (Head of Performance)

Some interviewees were able to identify specific unanticipated learning gains, such as how wards are managed and also experiences that reignited their passion to learn more. Some interviewees pointed out that volunteering activities allowed them opportunities to experiment and to transfer skills back and forth between their paid roles and their voluntary roles (approaches to training in the workplace was given as one example of this).

'When there's a problem I want to roll my sleeves up, I want to get it sorted, and I definitely brought that to the role. But that role has also helped me to develop my own problem-solving skills...I think the approach you take to problems is so much more important than just sort of problem-solving in itself.' (National Programme Manager).

Employee volunteerism has potential as an employee development method. As Wilson and Hicks (2010) observed there is value in the experiential nature of the learning gained, partly because volunteers may have to engage with work they do not routinely undertake and be

called upon to work with people they do not normally encounter. As one interviewee observed in relation to a voluntary role which sometimes required her to be involved in difficult meetings:

'It's increased my confidence...I've now got that knowledge of how to handle myself because 18 months ago I wouldn't have had the leadership skills...'
(Volunteering & Befriending Lead)

Informal and incidental learning occurs in a range of situations and which, when faced with the unpredictable and uncertain, may be called upon to help people 'learn their way through' (Watkins & Marsick, 2021). This informal and incidental learning may also be a feature of employee volunteerism. One example of this is learning gained by an interviewee who was involved in setting up a field hospital, never having been involved in such an undertaking before.

We found that the amount and extent of training for voluntary roles varied, dependent as might be expected upon the type of role and the pre-existing skills of the volunteer. Mandatory training such as data protection, diversity and inclusivity was relevant for some roles. Other volunteers, for example Trustees, had completed on-line training in governance. Some roles came with extensive training, for example:

'It was quite a lengthy training though not particularly structured. We had tutorials and we had to submit pieces of work...there was a lot of training.'(Volunteering Lead)

It is notable, however, that some interviewees had minimal training, and in some cases limited or no induction and would have appreciated having at least some form of induction. Unsurprisingly, we found examples of induction support provided through a buddying system, where a paid member of staff or another volunteer provided essential information to the new volunteer. Some interviewees spoke about being given background reading to do, such as relevant Trust policies and procedures. In other cases, volunteers spoke about colleagues assuming they had knowledge and skills because they were known to have formerly been in patient facing roles or simply because they were NHS employees:

'because of my old job (they) assumed that I had all the knowledge required, which I thought was wrong at the time. I felt (they) should have treated me like a volunteer and taken me through what I perceived to be the normal process.'
(Workforce Planner).

Without exception, volunteers reported that their experiences resulted in learning, be that skills, knowledge or self-awareness. These are of course self-reported findings; it would be interesting to see if these observations could be endorsed by line managers and colleagues in the workplace. In their quantitative survey of employer supported volunteer schemes, Booth, Park and Glomb (2009) suggested that such schemes are an excellent route to skill acquisition and Wilson (2000) concluded that learning from volunteering may enhance 'the quality of the current job.' (p. 323).

Turning now to consider the potential impact of volunteering on career development, in a study by Wilson and Hicks (2010) respondents were asked if their volunteering experience placed them in a better position to apply for more senior roles. Only 24% agreed but where respondents had their volunteering assessed as part of their appraisal discussions that figure rose to 42%.

Volunteering seems to give individuals the opportunity to think about their role, what they enjoy and what alternatives might be possible. Thus, in a workplace setting, volunteering roles can provide thinking space through action. For example, in terms of career development, volunteering led directly to one individual being short-listed for an administrative role:

'it counted towards my success' (Administrator)

Another example from a senior manager charted his career trajectory. He cited volunteering as the means through which he secured a significant career change and subsequent responsibilities:

'I was working in construction industry but I wasn't able to work on the building sites so overnight I had to change my career...thinking about what I actually wanted to do, which was difficult, but then decided to go and do some volunteering....I worked with victim support and then moved into a management role....that was how I got into volunteering and how I got into this career.' (Head of Volunteering)

Existing literature shows that volunteering can be influential in developing the careers of younger people. Pelozo, Hudson and Hassay (2009) observed that volunteering can provide decision-making and leadership development opportunities that offer a 'training ground' for prospective managers. For example, for a graduate, volunteering gives them something substantive to put on their CV and may be a proactive means of gaining experience:

'I wanted to do something that would put me in good stead for work opportunities.' (Management Trainee)

The impact of volunteering on learning, skills and career development was evident to some degree for all the interviewees. Unsurprisingly, role-specific skills were easier to articulate but during the interviews, employees reflected on wider learning impact and what emerges is the power of unexpected and incidental learning. This suggests that an opportunity to reflect and discuss aspects of volunteering is valuable to help individuals recognise their learning gains.

Case illustration 2: Yasmeen Rabindranath - Business Manager

My current role is as a Business Manager, before that I was a Divisional Accountant working within Management Accounting at the Trust. I've had three volunteering roles in the NHS. I was placed on one of our spinal injuries wards and worked 5pm-6pm one hour a week mainly helping with feeding patients but also chatting to them. Following a career break I applied for a specific volunteering role on a dementia ward in a similar sort of role to the previous one, with the same sort of time commitment. There I was reading to patients, chatting with them, watching them to help prevent falls.



I then became interested in a speech and language therapy role that was advertised so I applied for that. So that's my current (third) role where I was a conversation partner and I had one client that I worked with – a patient who'd had a stroke - and it focused specifically on communication. It was a really well-structured role and it was clear what I needed to do. For this role there was a very thorough induction and training – a full day of it with the speech and language therapy teams. They presented to us, gave us a good overview of the role and it was quite 'hands-on'. So, we learned about the nuances, various things to take with you to connect with people and their interests, a newspaper or a magazine... And then we did some role play exercises and we worked with the patients and their carers. It's rewarding, establishing this one-to-one relationship.'

Findings: Impact of Volunteering

The interviews revealed impact not only on others (those being helped through volunteering) but also, crucially, revealed the nature of the impact felt by volunteers themselves. In terms of impact on volunteers a number of shared themes emerge from the data including improved mental health, and a release from mentally challenging tasks and responsibilities (especially in the case of volunteers occupying a befriending role or a physically demanding role of some kind). These findings support recent research undertaken by Fleming using Britain's healthiest workplace survey and reported on in *People Management* (Howlett, 2021). Fleming found that of all the initiatives analysed – including resilience and stress management classes, relaxation classes, mental health and wellbeing coaching, and events promoting healthy sleep – only volunteering for charity work improved mental health, while stress management classes actually contributed to worsening staff wellbeing.

'I suffer from anxiety and actually the community spirit among the (volunteer) coaches has been a real lifeline.' (Volunteering Lead)

'It's helped me to relax some of my perfectionism and to accept that other people approach the task in different ways.' (National Programme Manager)

'I am now volunteering on the nature reserve, and I love it, I enjoy being with the children. I feel transported every time I go and do a session and for the two hours that I spend with these young people walking around the nature reserve, it consumes me, it's my therapy.' (Education Programme Manager)

Interviewees also commented on volunteering offering a safe space within which to try out new things. One volunteer (quoted below) offering the analogy of the sandbox and the voluntary role

as a space within which to practice skills, enhancing aspects of the individual's substantive paid role.

'It's a sandbox environment where I can try things out. So, training people brand new to the voluntary job where the training pathway is very short has helped me to hone my training skills for the longer training pathway needed for the day job which involves complex office work and yearly cycles.' (National Programme Manager)

Some volunteers spoke about the value of such experience when engaged in making policy, or when occupying a non-clinical role remote from direct patient care. Those no longer in patient-facing substantive roles (especially those in senior roles) commented on the value of undertaking activities contributing directly to patient care.

'My volunteering role has given me an insight into operational stuff. It's given me a context, like having seen how consumables are actually used on a ward, for example. There's also a networking angle, knowing the people you're emailing or knowing their colleagues because you've worked alongside them.' (Executive Team Member).

A very senior policy and planning professional who volunteered in a vaccination centre reflected on the unanticipated benefit of volunteering. She spoke of the reality of policy in practice, where she learned at first hand the impact of decisions that had been taken:

'I think you know, some of the things that were planned nationally and regionally in terms of the pathways, actually when you stood there you thought this isn't the best way of doing this, you know sometimes these plans that look so good on paper, when you actually operationalise them aren't as good as they look.' (Regional Director)

Senior managers might be surprised to know that their involvement in volunteering is noticed and has an impact on other staff in their Trust. For example, a lunchtime feeding volunteer commented:

'Generally, it is the higher management that seem to have made that offer of giving their time at lunchtime. I was surprised - pleasantly surprised that volunteering was something they felt they could do.' (Physiotherapist)

In one example, the senior management commitment involved more training:

'Our Chief Exec, he's doing a course to enable him to go and work as a healthcare support worker down on the wards, which is just brilliant!' (Head of Non-clinical Education)

Although the majority of volunteer experiences were positive, there were challenges identified by individuals. Some volunteer roles had moved online during the Covid-19 pandemic, which brought problems with IT connections. Associated with this was a belief that supporting clients online was a barrier to communication. They were, for example, unable to read body language

and had to deal with such issues as poor audio quality. Work-life balance issues also emerged for some who were trying to balance home life, volunteering and work. For example:

'I think maintaining a balance in general has been tricky. It can be difficult to manage the balance between volunteering, paid work and then your own life – particularly volunteering with something that's all-consuming like during Covid. Then it can be difficult to manage. I was frequently working long hours...'
(Workforce Resourcing Manager)

Despite the challenges, what became clear throughout the interviews was the way in which individuals spoke of their sheer enjoyment of their voluntary tasks, the positive feelings that volunteering creates, and that such tasks buttressed or even restored their self-esteem:

'I don't think there's anything more rewarding than helping to change someone's life, building a mentee's confidence' (Project Manager)

'It's meeting the kids, that's got to be number one, the fact that you hope you leave an event having inspired someone'. (ICU Consultant)

'To then give my attention to someone and let them know that it's alright and that I want to be there, I have chosen to be there, not being forced to be there.' (Head of Education)

For the volunteers we interviewed, the impact of volunteering went beyond learning and skills gain. Some individuals found their anxiety was reduced, others valued the opportunity to try out new ideas, and for most, there was an overwhelming sense of sheer enjoyment in undertaking their voluntary tasks. Senior managers particularly gained insights into operational and patient-focused activities, with opportunities to reflect on policy implementation.

Case Illustration 3: Nichola Langdale, Head of Education, Learning and Development



'I am in a senior paid role, but my voluntary role is to help with lunchtimes. We take dinners out to everybody and then come back and regroup and then we have a conversation about who needs assistance feeding. So, I've helped all sorts of people – maybe they can't use their arms but their ability to swallow is fine, or they're in a low mood and just need encouragement...So I'll feed them, as much as they want and then stay and chat just to keep them company. It's my favourite bit of the day because my job can be stressful.'

When I started they sent me a 'how-to' guide, an electronic induction pack and some FAQs and were clear with me about what the role was and not to go beyond that. I was given a point of contact. Normally we would have had a face-to-face induction but with Covid that was harder but they

were willing to offer me something more bespoke because I do have a clinical background.

When I worked as a nurse we didn't always have the time to sit and feed somebody and talk with them for very long, but with this role you can have the time. Everybody's really clear that I'm there only to help people who can't feed themselves but are safe to be fed. You develop those softer skills – it's a good opportunity for me to talk to staff as well. I'm developing skills that I didn't think I'd ever get the time to be able to use again and investing that time with patients and in supporting colleagues. I just love it, I absolutely love it.'

Findings: The Climate for Volunteering and the Management Context

We asked the interviewees to reflect on how the organization supports their volunteering, bearing in mind that some employees volunteer within the service, some outside and some in both contexts. In some instances, support was indirect. For example, a coaching training course for the employee's substantive role provided knowledge and skills that were used in the voluntary role outside of the service. NHSHEE employees mentioned what are known as ABCDE days, where individuals may use a day to volunteer, which is usually a one-off (episodic) event. It was interesting to hear that not all the employee volunteers used those days and one interviewee remarked that using volunteering days was easier for non-clinical staff.

A number of points emerged around the role of the manager and the climate for volunteering. These included the need for clarity about the voluntary role itself and the way in which volunteers are managed. One interviewee spoke about going into a role never having been a volunteer before, and her introduction to the role being limited to being 'given a handbook and a code of conduct.' Some interviewees made the point that there should be greater clarity concerning role expectations. Having a clear explanation of expected tasks, responsibilities and boundaries was essential because it gave the volunteers a sense of purpose and confidence. One issue expressed by volunteers, especially those deployed on busy wards to help with tasks such as feeding or helping with communication, concerned not wanting to get in the way or add to staff's workload:

'Sometimes the difficulty is to know what to do, and you don't want to bother people all the time...so for example if a patient asks for a walking stick, I don't know if its okay for them to have it – they could be a fall risk...you want to be as helpful as possible and not cause problems. So much depends on how well you've been briefed...' (Executive Team Member)

Not only is there the issue of briefing and educating volunteers appropriately, but the interviewee raises issues concerning assumptions made about the motivations of volunteers. The interviewee quoted above spoke about 'the assumption in all my (voluntary) roles is that I'm training to be a nurse' (the interviewee is in a non-clinical role) and with this goes an assumption about the kind of knowledge that the volunteer brings with them. The point was also made that

there is room for a better understanding, not only among managers, but also among staff in general about what volunteers are there to do – not only the benefits they bring in terms of freeing staff up to concentrate on other critical tasks, but also the challenge they present in ensuring they are welcomed, appropriately briefed, trained and supported, especially in the context of a busy working environment.

The experience of being an NHS employee and volunteering within the service also raises an important distinction between clinical and non-clinical staff. For non-clinical staff volunteering in a clinical setting, there is a degree of anxiety while staff learn about how those settings are run. Conversely, a clinically-trained employee volunteering but not performing a clinical task, already had confidence in the patient-facing environment. This suggests that it is important for managers to treat volunteers as individuals, not a homogenous group, and to ensure that all volunteers are supported appropriately. For example:

'I have a clinical background...induction was tailored...they are very clear and if you need anything at any point to just get back in touch.' (Head of Education)

A number of volunteers observed that roles could be physically or emotionally tiring. Although the tasks being performed were described as relatively simple or procedural, long periods of time standing, or having to concentrate intently, left some volunteers feeling exhausted. This is an aspect of managing volunteers that may be overlooked when creating voluntary roles and these aspects of voluntary labour may perhaps be taken for granted by the employing organization.

We found evidence of the need for a greater level of professionalisation in terms of the managing the process, especially in relation to internal voluntary roles. For example, some volunteers spoke about the difficulty they had experienced in accessing information about the kind of internal voluntary opportunities that were available. One volunteer was very clear on this point: such roles need to be properly and openly advertised. As far as managing the internal volunteering work schedule is concerned, one interviewee offered the following:

'It would be nice to be offered different kinds of opportunities. My volunteering is very much directed in terms of lunchtimes, and I understand that's a particular service need. But it would be good to be offered some different things, say signposting on the main desk...they could do a bit more in terms of opportunities where you could mix and match, and maybe get a newsletter about things that are going on - these are all the places that have been helped, this is how many hours have been volunteered this month and so on...' (Senior Manager)

This latter point links to the value of celebrating employee volunteering (and not just those who volunteer into the service from outside) and the better promotion of employee voluntary effort. The volunteers we spoke to said that even comparatively small examples of recognition would be appreciated. One interviewee mentioned the policy that some Trusts have of giving people time to volunteer which in their opinion was 'not loudly promoted.'

'In my Trust when I worked as a nurse we actually celebrated volunteers a lot, but that doesn't happen everywhere...I think a Trust should recognise this sort of social responsibility...in industry it's very much celebrated as part of what a company does and they are proud to say so' (Vaccination Supervisor)

One of our interviewees spoke about a very proactive approach taken in their Trust to publicising volunteers' successes. The interviewee in question was asked to write a blog about their volunteering experiences which was published on the Trust intranet. A newsletter is also produced on a regular basis and shared among the volunteers (both internal and external to the Trust). The interviewee also took part in a video interview about their role which was used as a promotional tool within the Trust.

There were mixed views on the value of including recognition of voluntary effort in formal processes such as **appraisal**. Some volunteers felt this was important, and a few commented on the positive way this could assist in formally recognising the value of internal volunteering, especially in circumstances where transferable skills were gained and used in both voluntary and paid roles. Interviewees commented:

'My volunteering hasn't been raised by my manager (in appraisals) but I've raised it as, you know, one of the ways I'm fulfilling the corporate objectives – it's not my day job but it's linked, it's still a job in the NHS.' (Executive Team)

'I would be prepared to talk about (volunteering) in my appraisal actually to say it's been really good in terms of my personal development and what I have learned from it. It was a unique experience.' (Senior Manager)

For one or two their volunteering actually formed a part of their work objectives especially, for example, in roles such as NHS ambassador where substantive posts had an educational remit as a key component. One commented on the lack of senior management interest in volunteering, which might be contrasted with the interviewee from another Trust who pointed out that a considerable number of senior managers were very actively involved in volunteering themselves on wards. For some there was also a perception that such activities are personal - 'for my benefit not theirs' – this was perhaps more evident among those who volunteered externally than those who volunteered within the service, with one commenting: 'it depends how socially involved your manager wants to be with the rest of your life.' Generally, the organisational support might be summarised in the following comment:

'I think we need to see volunteering as something that you have to spend a little bit of money to make work. It's free but it's not free; you've got to look after volunteers to make it work. (Vaccination Supervisor)

One of our questions concerned the extent to which there might be a blurring of roles between the volunteer role and the paid role. Some studies in the not-for-profit sector have found that paid workers in not-for-profits donate their labour or are in a situation where they find it impossible to separate their unpaid work from their paid work (Knutson and Chan, 2015). It has been suggested that employees in other sectors may be performing voluntary activities but that it is much more likely to occur in not-for-profit (and by extension public sector organisations) because of shared values and personal commitment. Most interviewees responded that blurring was not a significant problem. One interviewee commented:

'Our Trust is really good at ensuring volunteers don't replace paid staff... a request will come in for a task and my line manager will say, 'no, that's a paid role'. We look at roles carefully and sometimes we have a lot of discussion in the team (Planning Team Member)

However, the same interviewee did point out that blurring could easily occur and gave the following example:

'We've got some people who work in a paid role with end-of-life patients and now they're going to volunteer and I think they may struggle to know where the boundary line is...' (Planning Team Member)

Case Illustration 4: Lizzie Smith - Regional Director



'I had a simple role, it was stewarding for the vaccination centre. The way it works is that you help people to move smoothly through the process. Obviously, we have to be mindful of infection control and we don't want people bottlenecked so we have to do quite a bit of queue management. And we have to be prepared to answer questions and reassure people... In my paid role I'm involved in planning things at a strategic level, so seeing how things work on the ground it's really, really valuable. So, I could see the support that volunteers need, but also you do

feel vulnerable as a volunteer. My biggest fear was being in the way. I don't want to be adding to clinicians' problems.

I think the volunteering helped with my paid role to the extent that it helps you get a couple of layers beneath what people are actually going to be delivering on the ground and once you've got a model up and running – such as the vaccination model – you can see how its working and how it might be made to work more smoothly. And I think I brought some knowledge of the difficulties in planning to the role as well because I would talk to other volunteers. And you realise that a lot of people in operational jobs never get the thinking behind things properly explained which can lead to some frustration. So I think I took in the ability to share some of the big picture stuff that helped people not feel quite so frustrated, because things that seem like simple problems on the ground can be logistically and strategically really difficult issues.'

Conclusion and Recommendations

Our study found evidence of learning and career development benefits from employee volunteers whether they were engaged in intra-organisational volunteering (within the NHS) or whether with external voluntary organisations of their own choosing. In many cases employees reported that there were tangible benefits for their substantive roles. For example, the opportunity to test ideas out and make use of them, where appropriate, in their paid roles. These findings support evidence drawn from a wide range of employee volunteering studies that volunteering enhances employees' mental and physical wellbeing, resilience and development.

One finding of note is that many employees found opportunities for themselves (especially those volunteering outside the service) or else came upon opportunities within the service almost by accident. Several interviewees alluded to the apparent difficulty of finding opportunities or information about volunteering, especially within the NHS. There were exceptions to this – for example those undertaking ambassador roles did comment on the ease with which they were able to access those particular opportunities. Some volunteers spoke about how professionalised their particular Trust's approach was to the business of recruiting volunteers, with clearly defined job descriptions and person specifications for specific voluntary roles, properly constructed job adverts and interviews. One volunteer obtained her role as the result of an all-staff email asking for volunteers for very specific time-limited tasks.

In their review of volunteering literature, Rodell et al (2016) suggest that if organisations clearly support volunteering activity through visible activities such as recognition and advertising volunteering roles, this may lead to increased numbers of employee volunteers. Evidence from our research suggests that employee volunteers would welcome more proactive support from the organisation.

Volunteering can be part of employee development. Managers may view the formal PDR system as a way to facilitate discussions about volunteering and development, but such discussions should remain wholly optional. This project found that skill gain was not a principal motivation for staff seeking out voluntary activities or tasks. Care should also be taken to avoid what has been termed 'voluntolding' or 'forced volunteering' (Keleman, Mangan and Moffatt, 2017). This is employer-driven volunteer work in which employees have no choice over the kind of volunteering they are obliged to undertake, something which has been said to have occurred in some corporate employer supported volunteer schemes.

It is worth noting that when asked how they would encourage other people to volunteer, invariably the interviewees gave a variation upon 'just try it'. Volunteering offers a way for those who are more senior managers to engage with staff and patients. Through volunteering, policy makers gain operational insight and may experience the impact of policy in action. There are opportunities for different generations of employees to learn about their different experiences and expectations. Moreover, as Pelozo, Hudson and Hassay (2009) have observed there is additional value in giving people opportunities to undertake quite different work from their normal activities. This may lead to improved employee well-being and more positive feelings toward their substantive job.

Our observation is that a distinction could be drawn between organisational citizenship behaviours, some of which may be characterised as instrumental, and how the employee volunteers interviewed for this report perceive their volunteering. In many cases, those interviewed here are undertaking volunteering activities within the service for what might be

seen as traditional, altruistic purposes. Provided volunteers are managed appropriately, we conclude that the experience of employee volunteering across all levels of NHS employees can produce positive outcomes. The service benefits directly from patient-enhancing activities such as helping with feeding, supporting clinical staff and the work in vaccination centres. Indirectly, there is positive publicity gained by the engagement of NHS staff in external volunteering roles such as mentoring and acting as ambassadors. Therefore, Trusts should consider how they might best encourage and support clinical and non-clinical employees to engage with volunteering, particularly within the NHS. We offer the following suggestions in no particular order:

Recommendation 1 is to focus on **role clarity**, ensuring that managers and frontline staff are made aware of **how to make best use of employee volunteers in the service**.

- ✓ The interviews reported here suggest that where employee volunteers are deployed within the service, assumptions may be made about their skill and knowledge levels, **especially assumptions of prior clinical knowledge and experience**. Some interviewees perceive that staff who work alongside them do not always fully understand their volunteering role and purpose. Interviewees commented that they didn't want to add to clinicians' burdens, and one way to avoid that is to ensure that volunteers are given clear tasks, appropriate training and support, and that other staff are briefed as to the role of the volunteer.
- ✓ For all volunteers but particularly for internal volunteers, there should be **an emphasis on role-specific induction** into a voluntary role. This should carry with it the importance of managers not making assumptions about an employee's levels of prior knowledge. Obviously, the length and depth of the induction or training is dependent upon the particular role/activity, but we would suggest that induction should be tailored wherever practicable.

Recommendation 2 is that there should be **a more consistent approach across NHS Trusts** to helping employees find volunteer roles. The **development of a Trust policy on volunteering** might help to facilitate this.

- ✓ There are clearly some Trusts where internal volunteering appears to be managed in a highly professional manner, by a voluntary services team which does not confine itself to external volunteers coming in to the service. There also appear to be inconsistencies in terms of time off for voluntary activities, with some Trusts having a clear policy and practice (for example use of A, B, C, D, E days). Interviews suggest that others appear to have a limited or no specific policy at all relating to employee volunteers. **A model Trust policy developed and disseminated by HEE might be a valuable contribution towards broader consistency across NHS Trusts.**
- ✓ In some Trusts, employee volunteers are actively sought and supported in their roles. It is suggested that volunteering teams who don't currently do so, might be encouraged to broaden their approach to encompass staff who may not be aware of the range of voluntary roles available. The NHS Ambassadors web-based volunteer register is an example of making volunteering roles easier to find, particularly for busy employees. It is acknowledged that broadening the reach of volunteering teams may have resource implications.

Recommendation 3 suggests that Trusts should **recognise and support the contribution made by employee volunteers**.

- ✓ It may also be helpful for Trusts to generate and share case illustrations of successful employee volunteer activities. Marketing, HR and communications teams could assist in helping to publicise success stories.
- ✓ In their research into corporate volunteering, Pelozo and Hassay (2006) found that one way in which companies facilitated volunteering was through allowing flexible scheduling, and specifically allowing for voluntary activity during regular working hours. This helped to ensure that family and personal time during weekends and evenings was not unduly impacted. Flexibility might be particularly relevant to volunteer roles that are supporting patient experience.
- ✓ There appears to be limited quantitative information on how many staff are engaged in volunteering activities across the service. It is suggested that some work be done to **ascertain numbers of employee volunteers**, especially those engaged in internal volunteering.

Recommendation 4 is that managers should consider the **value of including discussions about voluntary activity in PDRs and appraisal discussions**.

- ✓ Managerial support at all levels is an important factor, especially in relation to voluntary activities conducted within the NHS. Conversations about volunteering will allow for opportunities to discuss the learning, skill and career development benefits of such activities. However, managers must remember that this is voluntary activity and avoid any kind of prescriptive approach.

Recommendation 5 is the creation of **communities of practice** to capture and share learning experiences.

- ✓ Volunteering can be viewed as a form of collaboration and a source of social learning. In particular, the value of 'insider knowledge' brought to, and developed by, employee volunteers within the service is not yet recognized and fully shared.
- ✓ An opportunity to reflect on and discuss their volunteering experiences can transform implicit learning into explicit knowledge. One route to capturing and sharing experiences is through the creation of **communities of practice for employee volunteers**. These might be local, face-to-face communities or perhaps regional or even national online communities of practice. To support their creation, Trusts might seek out the expertise of existing volunteers, for example the digital champions.

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Appendix: Volunteering Roles as Described by Participants

Lunchtime support on wards (food distribution and feeding assistance)
Vaccination centre (stewarding and other support roles)
Village first responder
Patient support (food distribution, reading, conversation)
Prince's Trust mentor
England Athletics Youth Panel
Freedom Speak Up Champion
Church volunteer
Green Champion
NHS Ambassador (Inspiring the Future)
NHS Ambassador (Primary Futures)
Pankhurst Trust coach/mentor
Nightingale hospital set up
Royal Voluntary Service (check in and chat)
St John's Ambulance
Pilates instructor (staff wellbeing)
Community resource centre administrator
Nature reserve guide
School governor (Inspiring Governance Programme)
Parent governor
Church regional youth leader/Lay Ministry
Take and deliver staff lunch orders
Youth Voice Panel
Trussell Trust Food Bank
Smart Works coach/mentor
Voluntary organisation Chairman
Breast feeding support to parents
Non-Executive Director in a Community Trust
Hospice Trustee
Leisure Trust Trustee
Health Centre blood clinic
Digital Champion (patient support)
Bereavement befriending service
Anthony Nolan Trust campaigning

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