



Embedding & Evaluating the NHS Volunteer Responders Scheme Integrated Liverpool City Region Volunteering Platform

Chris Martin and Dr Rolf Herbert



Introduction

TeamKinetic is working on behalf of Cheshire and Liverpool CVSs and Volunteer Centres (VC) with Sally Yeoman, Cheshire and Merseyside Health & Social Care Partnership Seconded and Voluntary Sector North West (VSNW)

The key outcome of this work is to explore how Liverpool City Region CVS/VC could integrate their TeamKinetic powered volunteer support platform with the NHS Volunteer Responder Programme and other digital volunteer services to provide a more resilient sector response in the future.

This paper seeks to establish that combining the benefits of NHS Responders, a well funded national volunteer program, with a localized digital service such as TeamKinetic, offers the capacity to unlock local networks and partnerships, making volunteering more attractive and accessible to a wider and more diverse audience, whilst providing a lasting civic legacy for the Liverpool City Region.



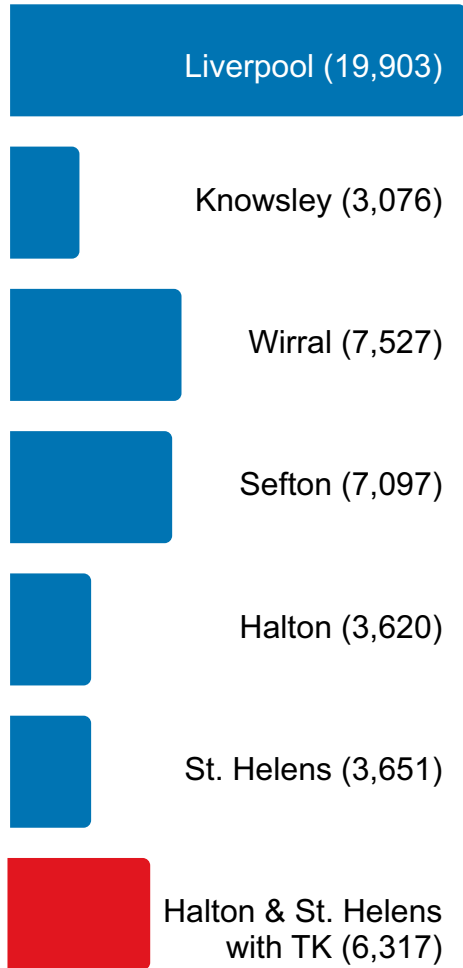
Aims of our work

To understand the role of NHS Responders and the TeamKinetic powered Liverpool City Region CVS/VC systems in the local response to COVID 19.

To explore and understand the requirements for integrating local Liverpool City Region CVS/VC volunteering systems into a single platform that offers the most sustainable and resilient service for the people of the Liverpool City Region. To outline the scalability and interoperability requirements of local CVS/VC volunteering systems across the Liverpool City Region, to integrate with the NHS Volunteer Responder Programme.

What was done, and by whom during the local response to COVID 19.

Completed Tasks



The following data has been collected via the NHS responder application and TeamKinetic between April 2020 and March 2021.

TeamKinetic was initially only operational in Halton and St Helens, but the data clearly demonstrates that its performance is comparable to the other Liverpool City Region areas that were only served by NHS Responders. It is important to note that some CVS's used different systems or processes entirely to mobilise local volunteers.

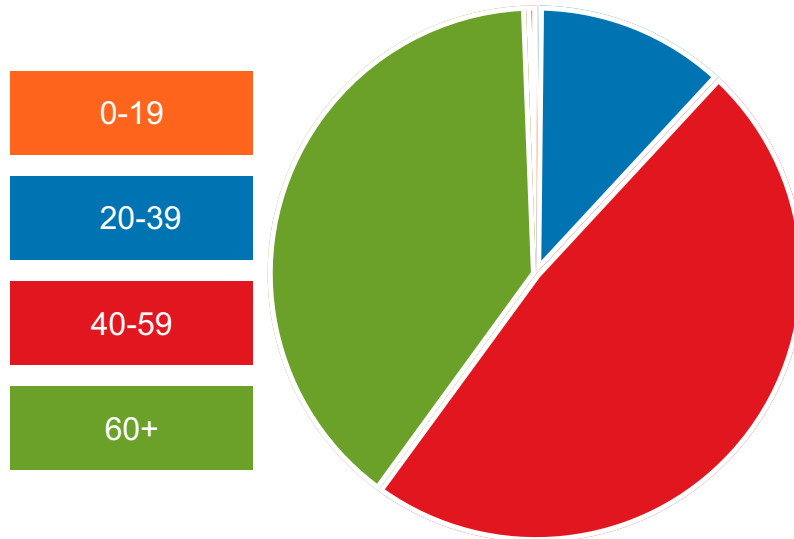
The data in NHS Responders was stored by Local Authority area, whereas the TeamKinetic data was based on the work of Halton and St Helens VC's and so not directly comparable to any Local Authority Area. We have however used postcode data to effectively place TeamKinetic volunteers in Local Authority Areas.

The graph shows that the VCA performance was similar to NHS Responders in terms of tasks completed during the period for the same geographic areas.



Volunteer Ages

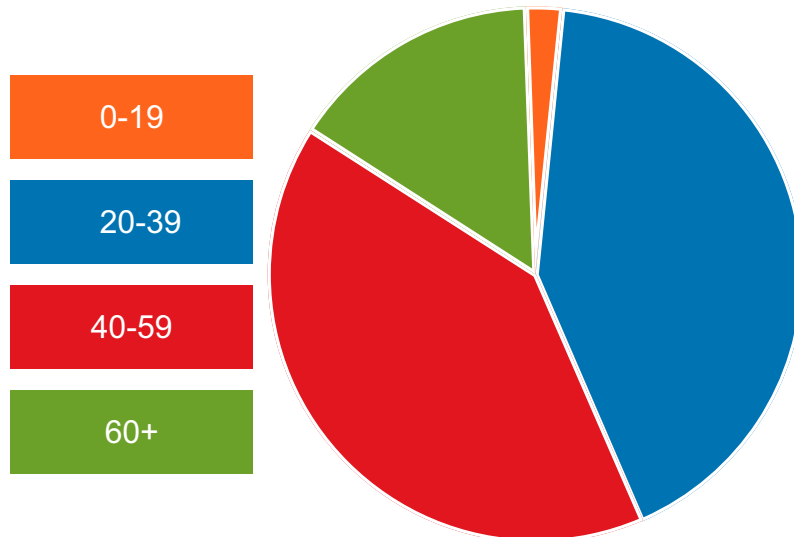
Age Groups - TeamKinetic



Locally each borough deployed different tools to register an unprecedented number of people who wanted to support their local communities through the pandemic. Specifically St Helens ran the #StHelensTogether campaign to direct registrations to the TK site.

Across all boroughs over 6000 volunteers were recruited and deployed locally to support similar roles to those of the NHS Responders.

Age Groups - NHS Responders



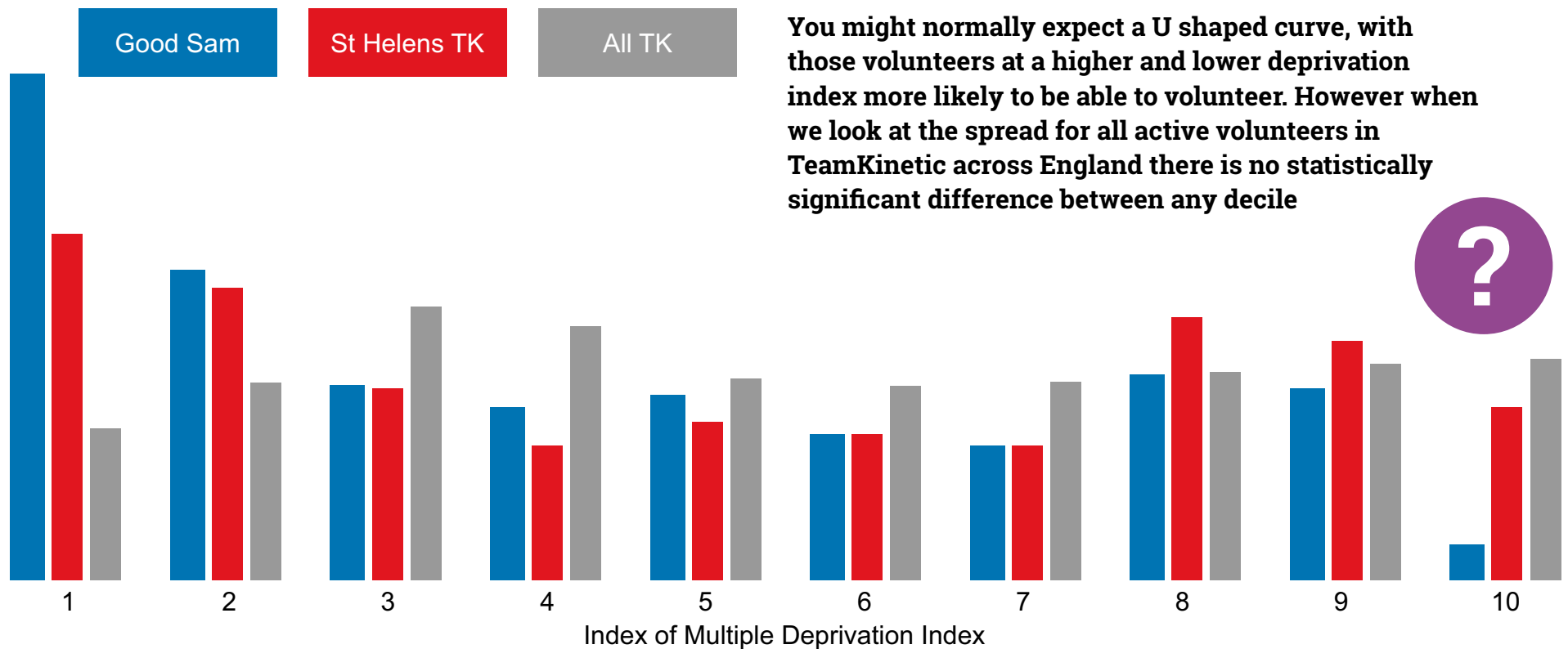
Although similar for the 40-59 age group, NHS Responders recruited more young volunteers and less older volunteers perhaps as a result of the placement of the national campaign



Volunteer Deprivation Indices

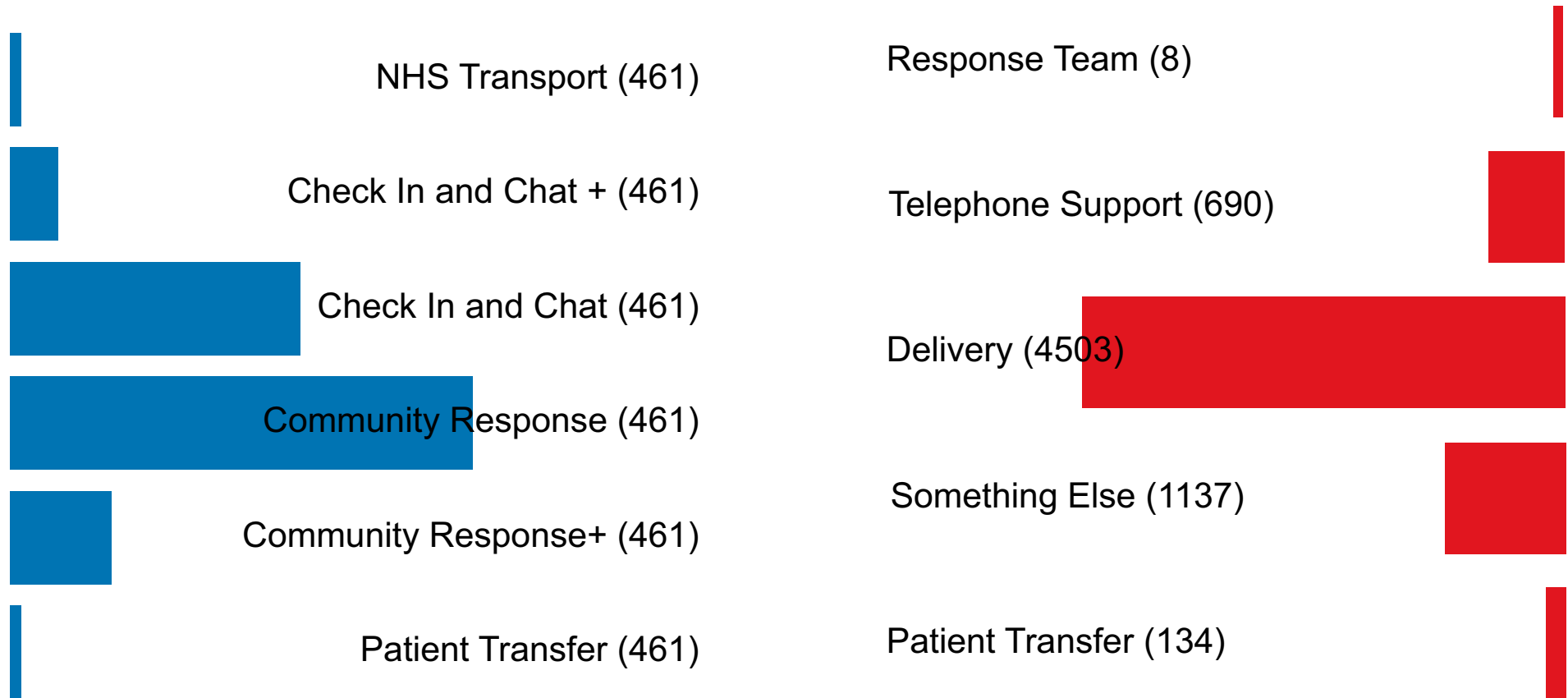
It is clear that, with the exception of the very lowest and highest deciles, for the most part the socioeconomic status of the recruited volunteers is very similar for both the NHS Responders and Halton.

So the Halton and St Helens VCA decile spread is more normal, with the NHS Responders volunteers recruiting a higher percentage from the lowest decile. Both sets of data show a higher concentration of lower decile volunteers than the historical TeamKinetic data. This could be linked to a higher percentage of jobs of people in these deciles being furloughed and so having time available to volunteer.



Tasks Completed

Although the task names were not aligned, community response is similar to the TeamKinetic delivery task and check in and chat is the same as TeamKinetic's telephone support



In both systems the majority of tasks undertaken were for delivery to recipients homes of supplies and medicine and telephone support. The least common tasks were those for patient transfer and transport.



Integrating local Liverpool City Region volunteering systems into a single platform that offers the most sustainable and resilient service for the people of the Liverpool City Region.

Creating a Joined Up Approach

In response to the findings in 'Transforming Volunteering across Cheshire and Liverpool City Region, Creating a Joined up Approach.'

The following work has been undertaken to integrate local Liverpool City Region CVS/VC volunteering systems onto a single technology platform.

The project objectives were:

- **To support the strengthening of volunteer management and coordination capacity, working through the leadership of local volunteer centres, CVS's and local infrastructure organisations.**
- **To transform spontaneous offers of help into the appropriate parts of the VCFSE sector offer, by creating new connections and providing practical help to keep individuals and groups engaged.**



TeamKinetic was initially deployed to Halton and St Helens VCA in January 2020 and since then has been deployed across the Liverpool City Region CVS/VC network.



Deploying TeamKinetic

Each organisation has undergone an independent implementation and each now has their own independent version of TeamKinetic optimised for their specific requirements.

Each TeamKinetic application has been brand matched to the organisation's specification and will act as their local 'Front Door' for volunteer involving organisations (VIO) and volunteers.

The members of staff at each organisation have been trained on how to make the most of their TeamKinetic system and how to start to enroll their Volunteer Involving Organisations (VIO) partners on the application.



Each of the applications have been developed to allow the seamless sharing of opportunity information and volunteers between their TeamKinetic systems, creating a large opportunity pool for volunteers to explore.



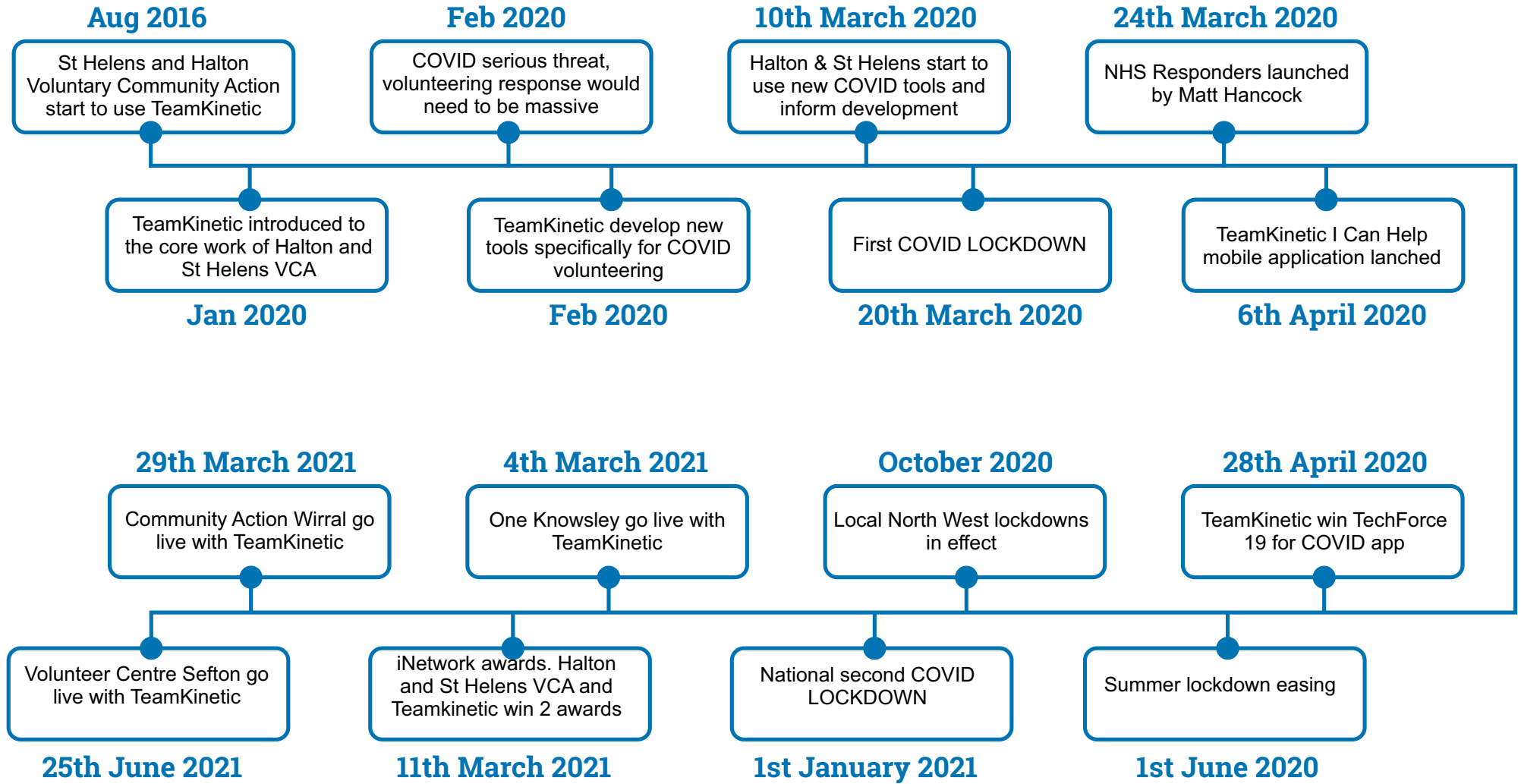
Outcomes of TeamKinetic Deployment

TeamKinetic have created a digital platform connecting into and strengthening existing locality arrangements. This work has been led by local infrastructure organisations complementing the existing local 'front door' approaches.

The outcome of this work has resulted in improvements in the following areas for all the CVS/VC organisations involved in the project:

- The digital facilitation of locally led volunteering by allowing VIO's to create their own profile, tasks and opportunities. This is all enabled through local ownership, data, insight and intelligence.
- A platform that will enable interoperability of technology, that is a methodology to create strong linkages into nationally prescribed infrastructure through the development of partnerships e.g. the NHS Responder Scheme or Doit.org.
- More resilient volunteering infrastructure that meets the highest standard of data governance and security, that has enabled the development of partnerships across sectors and geographies.
- Created localised capacity for peaks in demand based on always available website and combining the opportunities of all CVS/VC organisations across the Liverpool City Region.
- Seamless data sharing and real time insight has enhanced shared ownership in decision-making.

Timeline



The Scalability and interoperability requirements of local CVS/VC volunteering systems across the Liverpool City Region, to integrate with the NHS Volunteer Responder

Making the case for an Interoperable Liverpool City Region wide service with the NHS responders

National response - NHS Responders

Strengths

- Significant initial investment
- NHS brand Attracts huge numbers of volunteers
- National awareness
- Initially very accessible to register
- Brand recognition

Limitations

- Not specifically tailored to local need
- Short-term nature or call for help
- No local/human contact
- Poor communication and expectation management
- Limited audit trail
- Easy to register, difficult to start volunteering
- No obvious interoperability with existing systems

Local response - TeamKinetic in partnership with CVS/VC

Strengths

- Utilising existing volunteer relationships
- Knowledge of communities
- Trusted
- Existing digital systems in place
- Speed/agile response
- Strong communication and reporting
- Long-term support to volunteers

Limitations

- Short-term investment
- Lack of scale
- People were not aware of the service or how to access it as a volunteer
- Inconsistency in reporting and approaches across CVS areas
- Gaps in support
- Not always joined up

Through extensive stakeholder engagement we have identified the key strengths and limitations to the two approaches.



Interoperability

The case for interoperability, as supported by the NHS's own evaluation of the responder program, is that the longer-term sustainability of the NHS Responder service will be through:

- **Better two-way communication**
- **More local and flexible ownership**
- **Wider promotion of other volunteer opportunities**
- **A shared database of volunteers.**

Additionally since the initial lockdown in March 2020, lots of volunteer organisations that delivered some of the “short term offers” of NHS Responders ie. check in and chat, face to face befriending etc had to stop because usual delivery methods contradicted government COVID safety rules and guidance. This impact has meant it has taken organisations longer to recover and restart, but which is now happening. There will inevitably be local services restarting which will help form that transition from NHS Response to local restart. In combination with the above changes, they will help fill in the gaps that are now appearing in volunteer roles.

To achieve all these outcomes will require much greater integration with existing local services and infrastructure organisations.

The NHS already has extensive guidance on Standards for General Interoperability (SGI) and the use of Open APIs. These standards can act as the foundation of this work and provide strategic leadership alongside operational and policy advice.



What Volunteers Want

1

Individual volunteers should retain control of their own data and should be able to share or keep it private as they see fit, and do so in a clear and transparent manner.

2

Volunteers should be able to easily switch between services and systems making it as easy as possible for them to offer their time to volunteer with the least amount of personal administration.

3

Volunteers should be able to search to find appropriate opportunities and tasks easily from a range of sources, and be able to volunteer with minimal barriers that are the result of different systems and technology.

What is Required To Satisfy Volunteer Wants

Each volunteer must be identified by a globally unique identifier (GUID) in each VMS. There must also be a unique identifier that is public, generated externally from each VMS; usually an email address.

There should be a good overlap of mandatory fields for each VMS; these usually include email address, name, birthdate, address and/or location, and gender.

The email address is used to identify the same volunteer in each system and the GUID can be used in subsequent queries if required. It is advantageous to be able to identify a matching volunteer using multiple fields.

Services such as Single Sign on powered by OAuth 2.0 can enable simplified user experience, but require a central authoritative signing agency, this could be Google, Facebook or a Volunteer Passport service for example.

Once matched, the GUIDs from both VMSs' are attached to the volunteer record to allow definitive identification in the future.

A true two-way flow of data and updates from one VMS to the other is usually precluded by concerns over trust delegation and security, but with the correct API support and data sharing agreements in place, it is possible.



What Service Providers Want

1

To be able to create tasks and opportunities in the application that works best for them but to reach the largest suitable audience.

2

To not have to manage multiple accounts in multiple systems

3

To allow consistent tracking of 'their volunteers' allowing for transparent monitoring of the volunteers activity across multiple platforms.

What is Required To Satisfy Service Provider Wants

Task or opportunity data must share at least some common fields, in order to be interpreted correctly by the consuming API. This would need to include the basic task or opportunity information, such as: name, description, location, availability. It is also likely metadata would be included; about how many tasks are available, contact information, hours logged etc.

It may be desirable to query one VMS for hour logging history or completions by a previously identified volunteer. This requires tasks to be linked to volunteers and this data to be available via the API.

There is potential to reduce the technical and financial burden by utilising a middleware service such as Zapier. The owners and developers of the existing APIs make them accessible via Zapier, where anyone with the required access can create actions consisting of an event occurring in one application, which leads to a resulting event on the other application, without any knowledge of the involved APIs.

For instance you may select the event 'NEW OPPORTUNITY CREATED' on one application and link it to the event 'CREATE NEW OPPORTUNITY' in the second application. This would result in the information exposed about the newly created opportunity being sent to the second application which uses it to create a matching opportunity in that application.

Using automated middleware reduces the technical burden of building bespoke middleware, but still relies on the investment of each VMS to create the API and the Zapier integration.



Technical

Interoperability will depend on a well structured and well documented, publicly available API; this is required for all the involved Volunteer Management Systems so they can talk to each other. Creating and maintaining a good quality API is a non trivial technical task.

Keeping data secure, whilst at the same time accessible is always challenging, and the model of trust and the scope of exchange must be carefully considered.

Defining the correct permissions from disparate applications would require pre-agreement of a flattened simplified permissions structure. So when applications are talking to one another a volunteer entity only has permissions to carry out actions in a pre-defined domain, e.g. update profile, join and leave opportunities, but not to edit opportunity data for instance, which would be reserved for administrative users.

Risk and Considerations

Compliance

Security of individuals data and GDPR compliance poses a significant risk to establishing an environment where service providers can work together seamlessly. Having pre-drafted data sharing agreements and sector best practice shared standards would be essential.

Trust

Recognition of individuals qualifications and experiences between different service providers would require agreement and trust.

We are already exploring a federated trust model with Lancashire and Cumbria CCG's, NHS partners and local government services which provides a framework for partners to engage and helps alleviate some of these issues. This approach requires local leadership and oversight to ensure partner organisations meet their required levels of compliance.



Scope

The scope should be designed to limit the data routes and requirements to their absolute minimums.

All technology providers would be required to ensure they maintain these data routes in accordance with a service level agreement as changes will result in a breakdown of the link.

Working with an organisation such as the Open Data Institute who can facilitate and document requirements might ensure this can be done effectively.

Commercial

For a project of this nature to be successful it would need all partners to be fully engaged in the process and maintaining this service will result in ongoing costs and considerations for future product development.

It would be unlikely that any technology provider would choose to engage in developing an interoperable service and we suggest it would require a mandate that makes a minimum level of interoperability a condition of service in all contracts.

Duplication and Error Mitigation

Invariably data will be duplicated and data drift will increase between volunteer accounts on each service. Volunteers may register with different email addresses, or work addresses and mobile or landline numbers.

It is impossible to exclude all duplicates when adding or matching volunteers, so a formal deduping process must exist.

This process may not involve the APIs at all and be a purely administrative task, or the APIs may be used to highlight potential duplicates for later audit.

Without a full two-way data flow, data drift will occur as volunteers update or edit their profile information. If a volunteer has been previously matched and their GUIDs recorded, data drift becomes less of an issue as it is always possible to resync the accounts via their GUIDs. If a volunteer has not been previously matched then data drift will lead to more duplicates being added.

Conclusions

The data shows that there was a high level of Volunteer recruitment and task requests in the Liverpool City Region with NHS responders alongside the individual CVS / VC support and deployment of local volunteers. The conversations with stakeholders about the positive and negative aspects of the program have been very clear, if the sector is to move forwards then the resultant services must work effectively with local agencies and infrastructure.

The TeamKinetic powered Liverpool City Region CVS/VC system demonstrated that local organisations can provide a comparable level of technological sophistication with the added benefits of local knowledge, partnerships and experience.

Both services provided essential support across the communities they were deployed in, but moving forwards, having digital services that are interoperable will ensure the best outcomes for volunteers, service providers and service users.

This report has highlighted some of the opportunities, costs and risks to scalability, and interoperability between local CVS volunteering organisations across Liverpool City Region to integrate with the NHS Volunteer Responder Programme model.

These risks and costs are not insignificant and would require commitments from all parties involved. This work would involve the long term collaboration of stakeholders who may not share the same commercial and operational goals, and would almost certainly require oversight by a trusted arbiter to ensure fairness and compliance.

The potential benefits to volunteers and service users are also quite significant, with the initial set up cost off-set over many years and many volunteers. The benefits of a combined local and national approach are many. If the barriers to achieving this can be reduced, the resultant eco-system it would foster has the potential to unleash a wave of positive social action and improved civic resilience.

We have explored the requirements for integrating all the local Liverpool City Region CVS/VC volunteering systems into a single platform that offers the most sustainable and resilient service for the people of Liverpool City Region and demonstrated the benefits of this approach.

The next phase of the project will see all organisations work together to establish the basis for a federated trust model. This work will explore issues around data ownership and data sharing, opportunity and opportunity provider standards and develop a new reporting platform.

The development of a single digital Liverpool City Region wide offer for volunteering that is still led by local infrastructure organisations complementing the existing local 'front door' approaches, will provide a better experience for organisation, service users and volunteers.

Recommendations

1

GoodSam and other volunteer management systems are required by their respective commissioners to be interoperable, to implement this would require:

- **A standard paragraph should be drafted and included in contracts with all IT/software providers**
- **Good Sam and local system providers incorporate Standards for General Interoperability (SGI) as outlined by NHS England**
- **The API documents that will allow for being interoperable for each provider (local and national) should be publicly available and published online**
- **The data should include a unique identifier (email address) and be linked to tasks undertaken by volunteers**

2

NHS funding should be made available for the development of middleware for local volunteering software and GoodSam that:

- **meets the Standards for General Interoperability (SGI) and any above requirements**
- **is used in a minimum 10 local authority areas**



3

Permissions are built into systems:

- **New volunteers in any system are asked to give permission for their email address to be passed to local volunteering systems and used as an identifier as a requirement of signing up**
- **Current Good Sam and TeamKinetic volunteers are asked retrospectively as a condition of continued use of their apps to share their email address where appropriate.**
- **The volunteer should retain control over their own data and who its shared with.**



4

If there are going to be multiple parallel systems operating (national and local), a mechanism for reconciling data (to address duplication and error checking) needs to be built into and offered by all parties involved including Good Sam.



Huge thanks and appreciation goes to everyone at:

**Community Action Wirral
Halton and St Helens VCA
Liverpool CVS
Sefton CVS
One Knowsley
Voluntary Sector North West
Vs6 Partnership**

