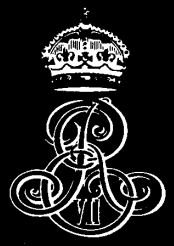

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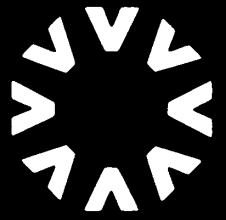

Project Paper 29 December 1982

# Mobilising Voluntary Resources

## The Work of the Voluntary Service Co-ordinator

by
Pat Gay and Jill Pitkeathley

A Study Published jointly by King Edward's Hospital Fund for London and The Volunteer Centre

*King Edward's Hospital Fund for London* is an independent charity founded in 1897 and incorporated by Act of Parliament. It seeks to encourage good practice and innovation in health care through research, experiment, education and direct grants.

*The King's Fund Centre* was established in 1963 to provide an information service and a forum for discussion of hospital problems and for the advancement of inquiry, experiment and the formation of new ideas. The Centre now has a broader interest in problems of health and related social care and its permanent accommodation in Camden Town has excellent facilities for conferences and meetings. Allied to the Centre's work is the Fund's Project Committee which sponsors work of an experimental nature.

The purpose of *The Volunteer Centre* is to encourage voluntary action in the services provided for the community by government and by independent organisations. In practice, its main effort has been in the fields of health, the personal social services, education, the police, prisons, and the probation and aftercare service. But the Centre aims to embrace the entire spectrum of voluntary action, whether it is carried out within the statutory services or within voluntary organisations, by self-help groups, or informally by individuals.

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# MOBILISING VOLUNTARY RESOURCES
## – the work of the Voluntary Service Coordinator

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by Pat Gay and Jill Pitkeathley

Foreword by Professor Adrian Webb
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## FOREWORD

As constraints on public expenditure intensify so does the search for alternative resources. Inevitably, attention is turned to the question: how can voluntary resources be mobilised? However, we ought not to think of voluntary work merely as a source of extra hands in hard times: intrinsically it is part of the wider framework of providing care for people in need. It can also be a means of self expression and fulfilment for the 'workers' and of companionship and support for the 'helped'. At best, these distinctions can lose their apprently hard edge in relationships of inter-dependence and reciprocal help.

This report is a study of the work of voluntary service co-ordinators: people, either paid or unpaid, whose function it is to mobilise voluntary resources. By studying these workers in one county, Berkshire, the authors have been able to look at the job as it exists in a wide variety of settings, both statutory and voluntary. One of their conclusions is that the effective mobilisation of voluntary resources often depends on the appointment of someone with this task as their specific remit. It is crucial that those who publicly urge that greater use be made of voluntary resources should also recognise the necessity of providing the means to achieve the end: effective voluntary work does not come entirely free. The work of the voluntary service co-ordinator can be crucial to the scale, continuity and 'quality' of volunteer work. This report is therefore a timely and welcome source of information on an important topic.

The Volunteer Centre, in jointly publishing this report, would like publicly to acknowledge its appreciation of the support given by The King's Fund. The financing of this report is but one tangible example of a continuing pattern of close working relationships which began in 1973 when The King's Fund provided the newly launched Volunteer Centre with its first offices and 'home'.

Adrian Webb

# FOREWORD

## CONTENTS

## SUMMARY

**Aims of the Study:** to gain a complete picture of the function of Voluntary Service Coordinators (VSCs) working in Berkshire and of the networks which existed between them. To focus on the actual practice of individual VSCs, paid and unpaid, and the interaction between them. Also to gain some insights into what professional workers who came into contact with VSCs thought about the usefulness of their work.

**The interviews:** these were carried out in Berkshire with 63 VSCs – 41 were paid and 22 unpaid. They were from the health service, social services, probation, education, voluntary organisations and counselling and advice agencies. The definition of a VSC was 'anyone who as part of their routine activity regularly recruits and/or places those who deliver voluntary care'. 20 men and 43 women came within the definition, their median age was 48, although a quarter were under the age of 35, and between them they were in touch with around 6500 volunteers. 45 had academic qualifications of some sort, 24 had university degrees but few had had specific training for their jobs.

**Doing the job:** 6 main tasks were identified, recruitment, selection, placing, training, support of volunteers and administration. The VSCs gave most importance to support and administration.

**Achievements and innovations:** four categories were identified,

i changing attitudes,
ii fundraising,
iii tangible achievements, ie starting community services, group homes etc.,
iv changing procedures.

There was a strong emphasis on the VSC's role as innovator and originator of ideas and as key worker in making them into practical realities.

**Analysis of function:** There were five essential components: administration/management; personnel work; social work; community

development work and entrepreneurial activity.

Four case studies were compiled to illustrate the management, social work, community developments and entrepreneurial models. The VSCs also appeared to be more like each other in terms of their work than like others in their organisations. The term 'social entrepreneur' would capture the essence of the function of a significant number of the sample.

**Qualities of a VSC:** The qualities which the VSCs thought essential to success in their work were grouped under four headings:

i personal qualities
ii people skills
iii cognitive attributes
iv political skills.

The range of skills they thought were required were predominantly social in character but with some knowledge of theory, organisational ability and communications skills figuring as well.

**Influence:** The VSCs exerted a range of influence disproportionate to their relatively low status – this is evidenced by their ability to change attitudes and influence the allocation of resources. Boundaries: Boundaries which which exist for VSCs may be actual or perceived: actual in the case of accountability or the limits set by the trades unions, perceived in the case of the attitudes of professional workers. VSCs felt they must recognise these, deal with the anxieties about them and reduce them by a process of education.

**Networks:** The networks involved in the working processes of the four case studies already referred to were detailed, and local, regional and national forums recorded. The need for and importance of contact with colleagues doing the same type of work was highlighted.

**What do co-workers think of VSCs?:** General anxiety was expressed by the VSCs about what others thought about their work, and five case studies are presented of what other workers said about it. Each case study consisted of a

verbatim report of the opinions of three or four co-workers. Of the five studies, two were of hospital VSCs, one of a community development worker, one of a volunteer co-ordinator in the community, and one of workers in a hospital where there was no VSC.

The future: 71% thought there was an unlimited pool of volunteers but this was thought to be strongly conditional on having someone to organise it.

**Commentary:** Definition of the VSC as a social entrepreneur who is the business of mobilising the resources of the voluntary sector in meeting social need. The need for it to be recognised as a separate occupation, though not as a profession also emerged.

**Recommendations**

Recommendations are made about the occupation of voluntary service co-ordinating, the appointment of VSCs. Maximising their effectiveness in the various elements of their function. Support for the VSCs is suggested through the establishment of forums. It is also recommended that steps be taken both to incorporate study of the VSCs' work into the training programmes of relevant workers, and to promote public recognition. Finally a replication of the research in other places is advocated.

**Acknowledgements**

The study was funded by King Edward's Hospital Fund London and managed by The Volunteer Centre. As well as these, many other people have been helpful to us in the course of this study and it would be impossible to name them all. However, we must particularly record our gratitude to our research consultant Stephen Hatch, to Sandy Duncan and to Mavis Wood for her endless patience with the typing. Our thanks too, to all members of our steering group for their wisdom and their humour.

Most of all we wish to thank the voluntary service co-ordinators themselves, for their time, their interest and their stimilating ideas, which made interviewing them such a delightful experience.

Pat Gay Jill Pitkeathley

## The Steering Group

Because of the wide range of interests represented in the proposal, it was necessary to bring together a group of people who could contribute their own perspectives and experience. A steering group was set up consisting of:

| | |
|---|---|
| Chairman: | Mary Thomson, OBE, formerly first director of The Volunteers Advisory Service at the (then) London Council of Social Service, Honorary Consultant to The Volunteer Centre, |
| Members: | Sandy Duncan, Development Officer, Health Services – The Volunteer Centre<br>Russell Frank, Director of Social Services for Berkshire (retired August 1980)<br>David Hands, Assistant Director, King's Fund Centre<br>Alex Limentani, Senior Registrar in community medicine Oxford Regional Health Authority |
| Research Consultant: | Stephen Hatch, The Policy Studies Institute |
| Secretary: | Mavis Wood, The Volunteer Centre |

Four meetings were held during the course of the study and all members were available in a consultative role.

# CHAPTER 1
# INTRODUCTION

## Background

In his paper to the Downing College Seminar of July 1977,[4] Professor Abrams, in discussing community care and the part to be played by families, neighbours and volunteers, said 'A particular possibility here would seem to be exploratory research into the optimum role of the volunteer organiser or organising agency. Although clearly called for in the Aves Report [2] (1969) little has yet been done to produce any sort of rubric for the work of volunteer organisers.'

At the same conference Professor Donnison spoke of the settings for research work [4] . . . 'Research in this field is usually most effective when those who do it are engaged for part of their time in relevant practical work or social action.'

It was with these two statements and our own total of 15 years experience as voluntary service co-ordinators in mind that we asked for support to make a study of the function of the voluntary service co-ordinator.

In the previous ten years there had been a rapid increase in the number of people involved stimulating and supporting voluntary work and the importance of the voluntary sector had become more widely acknowledged. Many people who wish to become volunteers do so through the agency of co-ordinators of voluntary service, both paid and unpaid.

In the space of ten years, there had also been a rapid increase in the number of voluntary service co-ordinator (VSC) appointments. In 1980 there were 322 [8] paid appointments in the Health Service in the UK, 470 [7] in social services departments [17] and 235 volunteer bureaux. It seemed an appropriate time to try to take stock of this new occupation.

We studied the previous work which had been produced about the work of VSCs. In 1971 the King's Fund published Jan Rocha's study of Voluntary

Service Organisers in Hospitals.[11] The 'Taylor' Report of 1975, *Training for Voluntary Service Co-ordinators*,[14] discussed the training needs of VSCs in the Health and Social Services and identified certain common elements within the various jobs studied. This report also clearly indicated the emergence of a new and identifiable occupation: 'It is clear that there is a task to be performed in the whole range of health and social services both statutory and voluntary, by a person who can be called a Voluntary Services Co-ordinator'. In 1976, the 'Pivot' report[1] discussed the nature of the role of the VSC in various agencies, outlining in general terms the kind of work undertaken. In 1976 *Creative Partnerships*,[5] a study of voluntary and community involvement in Leicestershire, identified further the role of the VSC in various agencies and stated, 'It is now becoming clear that the role is a far more complex one than was originally perceived and has far more wide ranging consequences than have yet been clearly understood'.

In order to further understanding of what a VSC actually does we wanted to gain a complete picture of the function of VSCs in a specified area, and of the networks which existed between them. We were especially keen to leave the concept of 'role' behind and concentrate on what they actually did. The aims of the study were to focus down on the actual practice of individual VSCs, paid and unpaid, and to plot the network of inter action between them. We also wanted to gain some insight into what professional workers who came into contact withe the VSCs thought about the way they functioned.

In the following chapters we seek to say who the VSCs are and what they do. We then turn to the nature of their work, the context in which they operate, and conclude by identifying the conditions that seem to be necessary for making a success of their job.

We intended to carry out this research in Berkshire as a matter of convenience. We live and work there and our long experience as VSCs in the area was likely to be of value in the study.

## A Profile of Berkshire

The Royal County of Berkshire has a population of 670,000 and covers an area of roughly 90 miles long from east to west, and 35 miles wide from north to south.

**FIGURE 1 MAP OF BERKSHIRE**


The county's most populated areas are in the east, bordering the outskirts of London, and along its northern fringe. There are three main centres of population:

**Reading,** in the north, has a population of 140,000 of whom 14,000 are from ethnic minorities. The range of work in the town includes banking, insurance, electronics and brewing. Even during periods of economic recession, unemployment has remained relatively low.

**Bracknell New Town** forms the centre of an area which has had the most rapid growth in the county. Formerly a quiet market town, it now has a population of 60,000 and the industries attracted by its development include head offices of many national and international companies in computers, plastics and precision light engineering.

**Slough**, in the east of the county has a population of almost 100,000 and became part of Berkshire in 1974. Over the past ten years, its population has grown rapidly as families from Greater London have moved there, including a high proportion of immigrants.

Population growth in Berkshire has come along the major communication lines which traverse the county from east to west. To the south and west, the county remains predominantly rural in character and faces the problems common to such areas — transport difficulties because of reduction in public services, and inadequate access to other services.

The voluntary tradition in Berkshire is strong. There is an active Community Council, Councils of Voluntary Service in Reading and Slough and branches of all the major voluntary organisations.

**VSCs in Berkshire**

The idea of appointing VSCs was taken up early in Berkshire. The first posts were established in the Health Service in 1968. Two VSCs, then called Voluntary Help Organisers, were appointed to two hospital groups, one general, one psychiatric, in the west of the county. By the early seventies, the departments had expanded to include six more half time appointments, each based on a specific hospital and responsible to the original post-holder. No such appointments were ever made in the East Bershire Health District, partly because of Trade Union opposition, but mostly by accident of personality since the administrators in post were not convinced of the value of VSCs.

Berskshire Social Services Department appointed its first four VSCs, then called Area Volunteer Organisers in 1972. At first there was strong emphasis on recruiting volunteers for specific tasks, but throughout the seventies the community development aspects of the work grew stronger and within three years, the Area Volunteer Organisers had changed their titles also and became Community Development Officers.

At the time of the appointments of these Area Volunteer Organisers, Reading was a separate authority from Berkshire, with its own social services department. The then Director was opposed to the idea of separate volunteer co-ordinating posts, believing this function to be an integral part of a social worker's job. As a consequence, no such appointment was made in Reading and this remains the case, since by the time Reading and Berkshire were integrated, no money for an extra post was available.

There are eleven volunteer bureaux in Berkshire and the first of these was set up by the area volunteer organisers/community development officers to take on the aspects of their work which were directly concerned with volunteering. Unusually by national standards, none of the volunteer bureau organisers is paid more than an honorarium, but in Bracknell there is the additional post of volunteer co-ordinator. This post was set up in response to the recommendations of a working party whose membership came from health service, social services and the voluntary sector. This working party recommended that this pilot post be set up, based on the volunteer bureau, but with the additional responsibility of co-ordinating all voluntary activity in the area. The post is funded jointly by Health and Social Services for three years initially, and the funding has recently been extended for another two years.

Since there is a total of 235 volunteer bureaux in England and Wales, Berkshire has considerably more than the average although it is nearer the average in terms of specialist posts in hospitals and social services departments. A factor which may influence this might be the relative prosperity of Berkshire compared with some parts of the UK. Of the economically active and retired males in the county 7.8% are in the 'professional' socio-economic group, compared with 4.8% nationally; and 5.9% are unskilled compared with 7.6% nationally.

This relatively high level of affluence could be said to affect the way the voluntary sector operates and this point should be borne in mind when making generalisations. Our intention is to provide the findings of an in depth study of one county by presenting a complete picture of the work of voluntary service co-ordinating in one county.

**Pilot Stage**

The definition of who is a VSC is open to many different interpretations. Should we, for example, have included Territorial Army Commanders, Brown Owls and Honorary Treasurers in our definition? Eventually it was decided that for the purposes of this survey a VSC would be defined as 'anyone who as part of their routine activity regularly recruits and/or places those who deliver voluntary care'.

In order to test the validity of this definition, we undertook a pilot study. The area chosen for the small pilot study was in the south of the county an overgrown village, basically rural in character, with a mixture of old, modern and council housing. It appeared to have a strong tradition of volunteering and a well established volunteer bureau which had been functioning for six years. In order to test our definition of a VSC, we felt it necessary at this stage to interview as wide a range of people involved in voluntary work as possible.

Accordingly, we asked the volunteer bureau organiser to supply us with a list of people in the area who she considered were involved in some kind of organising capacity with volunteers. The list included scout masters and vicars as well as day centre organisers, teachers, health visitors, meals on wheels organisers and one community development officer from Social Services. Twenty one interviews were carried out in all. A full report of the questions we asked and the answers we received will be found in Appendix I.

The result of the pilot study was that our agreed definition was adequately tested and validated. Only two of the twenty one people interviewed were found to be VSCs as we defined them.

The pilot study also served to test some of the questions we wished to ask in the mainstage enquiry and led to some modifications to the interview schedule. We expanded the number of questions relating to influence and networks and asked more searching questions about the VSCs' background and the personal qualities they thought necessary for the job. We were warned by the richness of the responses in the pilot study to expect extremely long interviews in the main stage. We were not disappointed!

## CHAPTER 2
## WHO ARE THE VOLUNTARY SERVICE CO-ORDINATORS?

Once we had completed the pilot stage and were certain of the validity of our definition of voluntary service co-ordinators, we were able to move on to the mainstage. The interview schedule we used will be found in Appendix 2.

We took great care designing this schedule, aiming to lead the respondents easily on from one stage to another. We asked them about themselves first of all, then about their working situation. From here we progressed to a discussion of their work in its wider context. Finally we asked them to speculate about the future.

From the evidence of the pilot stage it was clear that if we were to get anything approaching a complete picture of the VSC function, we would need to study the work of both paid and unpaid co-ordinators. An examination of a list of agencies in Berkshire produced the names of 63 people who came within the terms of our definition, 41 of whom were paid and 22 unpaid.

Since the extent of the network between agencies was one of the aspects we were interested in exploring, a wide range was represented. Our 63 VSCs represented the following agencies:

| | |
|---|---|
| Hospitals | 6 |
| Community Development Officers (Social Services) | 5 |
| Adult Education and Youth Service (eg adult literacy, community service in schools) | 5 |
| Probation Service | 4 |
| Voluntary Organisations (eg Red Cross, WRVS) | 18 |
| Counselling and Advice Services (eg marriage guidance, youth counselling) | 8 |
| Volunteer Bureaux | 11 |

| | |
|---|---|
| Councils of Voluntary Service | 2 |
| Community Council | 1 |
| Race Relations | 2 |
| Special Category Hospital | 1 |

Some of the respondents in this list did not spend all their time as VSCs – probation officers, for example. We took great care to ensure that their responses were in terms of their VSC function and it was our impression that they were clearly able to respond in this way.

From our interviews we wanted to be able to build up a very comprehensive description of the sort of men and women who worked as VSCs in Berkshire. By collecting simple data on personal characteristics we would be able, for example, to see how much truth there was in the idea that VSCs are mainly women, predominantly middle aged, and without much in the way of formal qualifications. In the event the data threw up some very interesting and perhaps unexpected results.

**Sex**

We interviewed 20 men and 43 women. 21 women and one man were unpaid. Perhaps a surprising fact is that in the paid sector almost as many men as women were employed, 19 men and 22 women.

**Age**

A very wide range was represented – from 23 years to 70 years, with the median age 48. Broken down into 3 groups, 17 were between 23 and 35 years, 33 were between 36 and 55 and 13 were between 56 and 70 years. Table 1 shows the breakdown between paid and unpaid people.

**Table 1** Age of VSCs

| | 23 – 35 yrs | 36 – 55 yrs | 56 – 70 yrs |
|---|---|---|---|
| Paid | 11 | 24 | 6 |
| Unpaid | 6 | 9 | 7 |
| Total | 17 | 33 | 13 |

An interesting feature of this table is the number of younger people, five women and one man, who undertake unpaid VSC work. It is also noteworthy that roughly 1/3 of the paid people were in the youngest age category.

**Salary**

The salary range of the Berkshire VSCs was between £3200 and £8500 pa, but this included some people whose work was not wholly devoted to the voluntary service function (probation officers for example). For those who were entirely concerned with the VSC function, the top salary was £7000.

**Hours**

Of the 41 paid people, 13 were part-time – usually 19 or 20 hours. It is well known that part-time workers in many jobs put in more time than they are paid for, so we asked our VSCs how many hours a week they worked on average. Almost all the respondents reported that they worked more hours than they were paid for, sometimes as many as double the number. Only 5 of the 41 said that they worked the actual number of hours they were paid for. In any week the total paid hours were 1133 and an additional 363 hours were worked unpaid, an average of 9 hours per head per week. The unpaid people worked a total of 355 hours per week – an average of 16 hours each. Even allowing for a certain amount of exaggeration about extra hours it if fair to say that a significant amount of 'voluntary work' is represented by these figures.

## Fringe Benefits

All the paid people received mileage allowance or equivalent and this facility was available to many of the unpaid people though not everyone claimed it. Although reimbursement for telephone calls was available as a matter of course, here again many did not claim it even though they used their home telephones for much of their work.

## Length of service

17 of our 63 VSCs were the first person to be appointed to the post, 11 paid and 6 unpaid.

We have grouped the length of tenure into four categories. These periods could be thought of as corresponding to different phases in a career. 0 – 2 years – the first flush of enthusiasm and breaking new ground, 3 – 5 years a period of consolidation, a 6 – 10 year tenure would perhaps reflect a levelling off of performance and over 10 years might be balanced between the benefits of experience and the possible effects of boredom. Reference will be made to this later in the light of VSCs comments on other aspects of their work.

**Table 2 Length of Service**

| How long | 1st postholder | 0–2 yrs | 3–5 yrs | 6–10 yrs | 10+ yrs |
|---|---|---|---|---|---|
| paid | 11 | 24 | 7 | 7 | 3 |
| unpaid | 6 | 8 | 6 | 3 | 5 |
| Total | 17 | 32 | 13 | 10 | 8 |

It will be noted that half of our sample had been in post less than three years.

## Qualifications

The standard of qualifications we encountered was certainly impressive and the range extremely wide. Among our respondents were a former concert pianist, a glass-blower's apprentice and a youth worker with an MA in Comparative Philology! One of our local universities (Oxford) was represented four times.

Only 12 out of the 63 had no qualifications at all. 24 had at least one university degree and 45 had professional qualifications (teaching, nursing, the ministry and social work etc). A further 9 had clerical or secretarial qualifications. These answers have been multicoded as some people had more than one type of qualification.

Table 3 shows the breakdown between the paid and the unpaid. From this it would appear that those with high qualifications were likely to be paid – a highly predictable situation.

It could be said that the high level of formal qualifications in this sample did no more than mirror an area where many professional people choose to live and to whom work of this nature is likely to have a strong appeal. However, it is worth noting that most people felt their qualifications were helpful in the job and furthermore no one expressed the view that they were over-qualified for the work they did.

**Table 3 Qualifications**

| | Degree | Prof. qualification | clerical/sec. | nothing |
|---|---|---|---|---|
| Paid | 21 | 29 | 2 | 6 |
| Unpaid | 3 | 16 | 7 | 6 |
| Total | 24 | 45 | 9 | 12 |

multicoded

## Background

One of our respondents said, 'everything one has done in the past is useful. It enables one to understand the present'; and someone else said, 'it's built up a knowledge base'. These two comments sum up the feelings of the VSCs about their background which as well as the concert pianist and glass blower's apprentice already mentioned, included a traffic controller, a journalist, a hoover salesman, a researcher in genetics, and a travel agent. 'Just a housewife' and nursing were strongly represented.

In response to the question 'anything you had to unlearn?' several respondents mentioned the differences they had had to learn about in dealing with volunteers and not paid staff. 'You have to remember to ask – not delegate or tell', and 'it's hard to realise at first that they are volunteers and not colleagues and that they have limited time'.

## Training for present job

As might have been expected in an occupation of such recent origin training of a specific kind was hardly ever available either for the paid or unpaid VSCs, and a total of 28 had received no training of any description. 17 had been away on some sort of residential course – 5 were Volunteer Centre courses – 8 had attended training days or conferences and 19 had received some kind of training by their own agency.

**Table 4 Training**

| | Day/Conference | In-service | Residential Course | None |
|---|---|---|---|---|
| Paid | 7 | 11 | 15 | 14 |
| Unpaid | 1 | 8 | 2 | 14 |
| Total | 8 | 19 | 17 | 28 |

multicoded

Almost all the respondents felt that the job would be a difficult one to learn about in any structured way and that the major part of their learning had been in actually doing the job, some expressed the need for knowledge of specific areas. 'I wish I knew more about fund-raising', 'a social work background would have been useful', 'I need more knowledge of legal things', 'perhaps personnel or psychology would have been useful'.

'Building up a jigsaw of knowledge' and widening their circle of contacts was widely felt to be by far the most important element, and personal qualities rather than qualifications or training were what they felt were required to do this. We will be reporting later (Chapter 6) about the qualities that the respondents felt were important in achieving success.

## VOLUNTEERS

An analysis of the data we collected on volunteers showed that our 63 VSCs had currently approximately 6500 volunteers on their strength and it was estimated that these contributed 22,985 hours per week, averaging 3.5 hours for each volunteer.

The tasks they undertook covered an enormously broad range and depended on their own skills and experience, the area in which they lived and the people with whom they worked. The range of activities within one organisation might be wide too. A volunteer in a hospital for example, might be serving in a tea bar or sitting with the dying. Volunteers attached to a volunteer bureau might be helping with home decorating or befriending a recently discharged patient. 50 separate activities were mentioned. A complete list will be found in appendix 3. Transport services figure most frequently, no doubt reflecting both the lack of public transport in rural areas and the fact that 70% of households in Berkshire have a car, compared with 60% nationally.

40 beneficiary groups of this voluntary work were mentioned and this list will be found in appendix 4. It included adult illiterates, prisoners' families, ethnic minorities and widows. The biggest consumers of voluntary help nationally are the elderly, and Berkshire is no exception.

We asked for a breakdown of the ages of the volunteers. The number in the middle range 26 to 55 is almost twice as large as the younger group and older groups put together, and there was the expected dominance of female volunteers, almost three to every male. However, the VSCs did report that some changes were becoming evident in the traditional 'middle aged female' image of the volunteer. More young people were being encouraged to volunteer through schools and technical colleges and the newly retired were providing a growing source of male volunteers. Although unemployment was not particularly widespread in Berkshire when this survey was carried out, several VSCs reported an increase in the numbers of those out of work who were offering themselves as volunteers.

**Summary**

So how does our data measure up to the idea of the VSC that was sketched in at the beginning of the chapter? The overall picture to emerge is that while twice as many women as men served as VSCs, in the paid sector the numbers were almost equal. Clearly an explanation for this lies in the greater availability of women, particularly during the years of economic inactivity when they are bringing up their families, rather than the nature of the work itself. The median age of the VSCs was 48, confirming the middle aged image, although a quarter were under the age of 35.

Perhaps an unexpected finding was that the VSCs were so highly qualified and that they regarded their academic training as important to the job in providing them with a mastery of time and talent. The lack of specific training for the job is also noteworthy. Using unpaid hours as an indicator of dedication to the work, it is plain that this group of men and women was highly motivated.

In the next Chapter we will be focussing on the day to day activities of the VSCs. Chapter 4 looks at their function in the wider context of achievements and innovations and Chapter 5 draws these two elements together.

# CHAPTER 3
# ACTUALLY DOING THE JOB

When asked to comment on this study, a university lecturer who specialised in teaching a post-graduate social work course said, 'VSCs are just administrators, what more is there to say?'. The central concern of this research was of course the function of the VSC and a detailed examination of their working life would enable us to state with some degree of confidence not only whether the VSCs in our sample were 'just administrators' but also 'what more was to be said' on the subject.

If we were to arrive at anything like an accurate account of the VSC function we needed to give our respondents an opportunity to report on their activities in a way which would be factual and precise as well as capturing its more qualititative aspects. We were, of course, already aware of the wide variety of tasks likely to be undertaken and we were able to specify in advance some common features. It seemed that the various tasks could be accommodated under six broad headings: volunteer recruitment, volunteer selection, placing volunteers, training and induction of volunteers, support of volunteers and administation.

In designing questions we had to bear in mind the possibility that people might feel they were being asked to 'give an account of themselves', with the attendant danger that they might feel defensive or exaggerate. We hoped to avoid this by starting on more neutral ground by asking about working conditions. This not only produced interesting information in its own right, but led very naturally into component questions about the job itself.

An account in these terms alone would not give anything like the complete picture we were hoping to build up and we felt that we could complement the more factual information by asking the VSC, later in the interview, to talk about what they saw as their achievements and innovations in their jobs.

The connection between working conditions and status is well known — the size of the desk and carpet increasing as people progress up the scale.

As VSCs we have had considerable experience of our own and our colleagues' working environments. This led us to expect that in visiting our sample we would not be in the realms of rubber plants and Wilton carpets, and this was indeed the case.

The VSCs we saw, whether in the statutory or private sector were mainly accommodated in old houses, huts, portakabins and the like. The standard of the offices was on the whole adequate, but threadbare, while at least two were distinctly depressing in aspect. These two were a converted police cell and an office with peeling paint, holes in the carpet and with an unrivalled view over a rat infested grain merchant's yard. It is acknowledged that a pleasant working environment is of great importance, so it seems that a better balance should be struck between lavishness and necessity than was evident in this last example.

It would seem that it is a fundamental necessity for all VSCs to have a separate office (especially as privacy is essential during interviews) a telephone, and basic office equipment. This was available to 46 of our sample while 6 had to share an office with one or more co-workers – not actually other VSCs, resulting in considerable difficulties, particularly when interviewing potential volunteers. For example one hospital VSC shared an office with a part time social worker who insisted that she should always have the office to herself on the days she came in. This arrangement placed severe limitations on what the VSC could do.

11 people, the majority of whom were unpaid, worked from home. 2 of the paid people also did so, though they did have access to an office.

**Accessibility**

Clearly, being accessible to the general public is a key factor in a VSC's work and the majority felt fairly satisfied about this. 15 thought that they were not sufficiently easy to get to, and of these several expressed themselves very strongly, even angrily, on the subject. 'I'm not visible enough – I ought to be in the main street', 'I would say I am very isolated – I'm separate from the main stream', and certainly they felt it had a detrimental effect on the quality of the service they could provide.

Accessibility, of course, must also take account of convenience, public transport and availability of parking. If the interviewer's experience was anything to go by, members of the general public may give up in despair either because they cannot find the office, or cannot park if they do.

The VSCs we interviewed were generally placed no better and no worse than many other workers in the middle reaches of the public sector, although because contact with the public is essential a case could be made for the necessity of maximising their accessibility.

**Tasks**

We will refer in Chapter 4 to the fact that job descriptions were couched in broad and vague terms, which allowed a wide scope for discretion in interpretation on the part of the postholder. The VSCs certainly saw their jobs as covering an extensive range of tasks. However, the list of activities did seem to be contained within the six categories mentioned earlier, indeed this was the only way we felt we could contain such a vast amount of detail in a form which would allow for comparability. Not all VSCs did all of these things, but within the terms of our initial definition, all respondents were involved or had been involved, in recruiting and/or placing volunteers, although not all of them were actively engaged in doing so at that moment, for example people reported that they had their full quota of volunteers for the time being. We should point out that for some of the respondents, for example organisers of school community service and probation officers, the VSC function occupied only a part of their time.

**Ranking**

As it was our prime task to examine both the nature and the extent of the VSCs' work we felt we could tackle the subject by using two approaches. Firstly we could discuss the various aspects of their job as they saw it, and secondly we could ask them to rank the various components in order of the time they spent and the importance they attached to it. To facilitate this, we explored each item in turn and discussed it at some length. When we had completed all six items, we handed them a set of cards, one to each heading and asked them to place them in order.

However, it did not prove to be easy either for them or for us. Some experienced difficulty in distinguishing between tasks, for example 'You can't do anything until you've recruited, so although I don't think it as important as some other things, I'll have to put it first'. Or, 'You've got to have good administration or you can't operate at all'.

Clearly, this survey was not of the simple cat-food ranking variety, and our respondents often quarelled with and questioned our categories. This seems reasonable enough since there was undoubtedly overlap and a passive acceptance by a group of peole of this calibre was not to be expected. However, having stated these reservations, it is true to say that the approach we adopted worked very well.

In asking for rankings both in terms of time spent and the importance attached to the particular task we were concerned to show among other things whether the VSCs were forced to spend time on tasks they considered to be less central to the total job.

It was not possible for all respondents to do this ranking, either because they were too new in post, or because they felt there was too much overlapping and they could not disentangle the many strands. We are therefore reporting the ratings of 50 respondents. Included in this number are people to whom some items did not apply. For example, there were volunteer bureaux organisers who recruited but did not train or the case of some of the VSCs who did not attempt support.

**Recruitment**

Under this heading we covered numbers, methods and sources. 29 out of the 50 were actively recruiting volunteers, and of these 5 placed it first in time and 5 first in order of importance. The word recruitment may conjure up an image of the active pursuit of volunteers, backed up by press and publicity campaigns. The majority of the VSCs had tried this method at some stage, but had almost universally found it disappointing. 'All that press advertising brought me no people', and 'Mass media is good for increasing clients – not very good for recruits – 40 came through the radio (programme), but none

were selected'. If the time taken to interview these 40 is taken into account the VSCs' wariness may be well understood. Although it may be the case that using the media has the hidden benefit of creating a 'climate for volunteering', no one mentioned this possibility.

The press was used in two distinctly different ways – either as straight forwardly advertising for volunteers or as a news item or feature article, although no-one was enthusiastic about these means of recruiting. A well-designed leaflet, however, might bring results provided its location was carefully chosen. Doctors' surgeries, Health Centres, libraries and adult education centres were mentioned as the best places.

Public speaking as a means of recruitment was at two different levels. Firstly at a public meeting, usually as a culmination of local publicity at the start of a new venture. Volunteer Bureaux usually recruited their founding members by this means, as people tended to be carried along by the enthusiasm generated at these meetings. The other public speaking the VSCs did was of the 'guest speaker' type – this might be sandwiched between the jam and Jerusalem at the local WI, or at a conference perhaps with an audience of several hundred. Although this kind of public speaking did not often bear immediate fruit in the shape of armies of volunteers, it could serve to raise the level of consciousness about volunteering. This might come to fruition months or even several years later. One volunteer said when she offered her services 'Oh, I heard your colleague talking about this five years ago and here I am at last'.

Some VSCs reported that volunteers 'just arrived' in their offices – sometimes as a result of asking other professional workers (for information), especially health visitors. Sometimes they had been sent by their General Practitioner or psychiatrist for therapeutic reasons. 'Go out and do some voluntary work' seemed to be increasingly common advice – particularly as a hoped-for remedy for depression.

Some VSCs found it necessary to employ a direct approach in order to recruit. One Community Development Officer on a housing estate literally went up to people in the local shops and asked them to help. Another said 'I just badger people. I grovel to any group of people, church, school or WI'.

On their own these methods of recruitment accounted for relatively small proportions in the total picture. By far the most frequently mentioned and successful method was what might seem to be the most passive – one volunteer bringing in a friend 'The best recruiting sergeants are the volunteers you've already got'.

'A lot by word of mouth – they bring their friends'.

'Best resource is people who recruit by word of mouth'.

'Main recruitment is by word of mouth'.

'Mostly word of mouth – it's a chain reaction and most effective'.

'Word of mouth' was the phrase which occurred frequently and appeared to be a very effective method of recruitment for most co-ordinators.

From the VSCs' reaction to this question, it was evident that their initial expectations had been different. 'I expected they'd all come flocking through the door after the advertisement in the (local) paper!'. Whatever they had originally anticipated, the majority came to realise that volunteer recruitment was largely by means of existing volunteers bringing in their friends, with other methods acting as a booster. (The situation was of course different where new enterprises were starting off). If present volunteers are the most fertile source of new recruits it would seem that a prime task for VSCs is to ensure that, as far as possible, volunteers find fulfilment in their work so that the self-generating processes may continue.

This 'word of mouth' method has of course, a payoff in that friends of existing volunteers are likely to be similar to them and therefore some preliminary selection has taken place before the new candidate actually comes forward. The other side of this is that the word of mouth method does not extend the range of the type of volunteer recruited.

**Selection**

Under this heading we covered administrative arrangements, interviewing techniques, length of interview and any other selection procedures.

We identified four selection strategies. At the simplest level there were VSCs who took on almost everyone who came their way, and agencies which operated a clearing house function like the Volunteer Bureaux.

Next in order of complexity were the procedures consisting of an interview by the VSC, usually lasting about half an hour. By this method people could be matched to tasks, and this was particularly the case where the volunteer would be working in a fairly structured environment, for example a hospital.

The third method was to use a two stage interview system, where the VSC would see the prospective volunteer and send him on to meet another worker who might have a particular task in mind.

The most complicated procedures were used in selection for the counselling and advice services. Some of these were more sophisticated and protracted than most selections for paid work, and could consist of an initial interview followed by a commitment to a 17 hour training course over a 12 week period, culminating in a final selection day when the would-be volunteer would be observed by several assessors, and might not be selected at all.

Without exception then the interview formed the essential core of the selection process, although in some cases there were other stages to be gone through.

**The Interview**

Interviews were mostly conducted in the VSCs office, although some visited people at home. The advantages of the first were seen in terms of a measure of the volunteer's motivation, since they had at least made the effort to come, but the VSCs who favoured home interviews felt that by seeing him in his own setting, certain extra insights into the volunteer were possible.

There was an obvious correlation between the time and effort spent interviewing and the nature of volunteers' work. The more taxing volunteers work was to be, the more the VSC found it necessary to find out about their motivation, background and experience.

Some of the unpaid VSCs were reluctant to use the formal title 'interview' and liked to emphasise the relaxed nature of their contact with the volunteer – 'it's just a chat' and almost all commented on the informality of the interview. However informal though, there was a certain pattern in the ground covered. 'I want to know their motivation and what it is that caused them to volunteer just now, their family and work commitments, the interests they could share, their hobbies. I ask if they have any previous experience of voluntary work and any relevant employment experience. One other thing – have they a car and can they drive?'. One VSC said 'The basics of the interview are: motivation, character, reliability, experience, whose idea was it?'.

**Rejection**

Of all the tasks a VSC is called upon to perform, rejecting volunteers was the most universally disliked, although all accepted that it was their responsibility. There was a variety of feelings on the subject. At one extreme were VSCs who said they'd never rejected anyone, although as one Age Concern Organiser said 'obviously if it was the Hunchback of Notre Dome swinging an axe, I'd have to!'. At the other end of the spectrum were organisations to whom many more applied than were expected; one agency for example had 120 applications in a year, but accepted only 28.

It appears that there were three elements underlying the rejecting process.

1 The nature of the task the volunteer is going to perform.
2 The amount of day to day control the VSC would have over the functioning of the individual volunteer.
3 VSC's own credibility in the eyes of other professionals.

1 The VSCs we interviewed were in contact with an enormous range of voluntary work for which differing amounts of ability were necessary. Clearly the skill and commitment required by a Marriage Guidance Counsellor is of a different order from that required to help serve lunch in an old people's club. This is not to undervalue serving lunch to old

people, merely to say it is of a different order. The wider the range of tasks the VSC had within her purview the less she was likely to have to reject.

2 The next element in rejecting was the amount of day to day control the VSC had over the volunteers. Factors involved in this were whether a volunteer would be working with individuals or groups, whether the volunteer would have direct contact with clients, and how much support the volunteer would have. One VSC said, 'Sometimes I give them a chance if I think they can become more sensitive – if I think they can learn from the group and I can keep my eye on them'. I don't turn anyone away – because I have a degree of supervision and I can tell how they are getting on. I do absorb everybody'.

3 A VSC's credibility is established only through the volunteers and it was natural that this was an important element in whether they rejected anyone. Most felt that they were themselves under critical scrutiny or had been at sometime, because of suspicion from statutory agencies and people in general (see Chapter 10). If a VSC is to be successful in changing attitudes and establishing her own credibility, she has to be able to 'deliver the goods' in terms of the volunteer effort. This would be particularly true for first post holders or when fairly new to the job. Once the idea was more firmly rooted the VSC could afford to take some risks. One VSC said, 'I wouldn't take them if they were entirely hopeless, but I would feel able to go to colleagues and say "I'm not sure about him, but can you give him a try and come back to me if there's any difficulty?" I couldn't have done this earlier or when ward staff still have to be convinced that volunteers could make a useful contribution'.

**How do the VSCs reject volunteers?**

Getting volunteers to select themselves out was the most common method of rejection: 'they phase themselves out'. 'If you judge their temperament right you can get them to opt out'. 'Eventually they see for themselves that they are not suitable'. The most frequently expressed concern was that volunteers' own problems might obstruct their contribution, or be a positive disadvantage to the client.

Two types of diversion were encountered. Some VSCs diverted volunteers to another task 'Mrs . . . wanted to cuddle babies, but I persuaded her she'd be more useful on the tea bar'. This was possible for VSCs who had a range of tasks available but others would have to send them on to another agency. This would seem to be an obvious means of rejecting, but in fact relatively few seemed to use this method – only 16 of the total number did so. 'I might suggest they do other things, but I wouldn't spend a lot of time on it'. 'I never do send them elsewhere though I've no objection in principle'. 'I don't send them elsewhere because they'd be too hopeless for anyone if I turned them down'.

Occasionally the VSCs felt they had directly to reject the prospective volunteers. 'Sometimes you have to be blunt – it's very unusual'. 'We just send them a letter – we don't have to explain'. Even where the direct approach was employed the VSCs wanted to let volunteers down as lightly as possible. 'I let them know it's no rejection of them as people', or 'we inform them by letter and offer interviews to discuss why – it's the best of not very satisfactory alternatives'.

Some VSCs felt this responsibility to volunteers more strongly than did others, and undertook to go on seeing prospective volunteers. 'If I don't, who else will?'. 'I get them to come back and have another chat with me'. This might eventually bear fruit in developing a good volunteer or might result in the experience of one VSC who was called at the weekend to the rescue of a volunteer who had taken an overdose.

Rejecting prospective volunteers was found a difficult, if not the most difficult part of a VSC's job. Some found it more acceptable than others, but all were conscious of the delicate nature of this transaction and the possible damaging effect on volunteers. They were aware that rejection might be even more difficult for a volunteer to accept than someone being turned down for paid work, since people who offer expect to be accepted. This may be especially true of uemployed people who may well feel, 'is there nothing I can do?'. VSC's feelings about rejecting volunteers were summed up by the man who said, 'You just have to accept there is no way you can make rejection acceptable. It *is* rejection and *you* have to cope with it'.

## Placing

The definition of a VSC which we tested out in the pilot survey included both the recruiting and placing function, and in the course of the maintstage interviews we further defined 'placing' to include those people who matched volunteers to tasks or 'slots'. 25 of the 63 VSCs ranked placing, and this small number is explained by the fact that many of the VSCs were recuriting volunteers for one type of work only. For example, the Citizens Advice Bureaux were concerned with training volunteers for a specific task and therefore no matching was necessary. In contrast was the hospital based VSC who had a broad range of tasks available and would spend some time matching up the volunteer to the task. They did not always find this easy.

'Sometimes I've got six holes and six volunteers, and I can't fill one hole', and a good neighbour organiser said: 'What we try to do is make an assessment and then I try to follow-up visits to see if I've made the right match'. Usually the VSC relied on his/her own judgment to decide where to place the volunteer, but occasionally it was done by observing the volunteer's reaction to a particular situation; 'I take them round the wards and watch how they cope with some of the patients – it's the only thing to do'.

Of the 25 VSCs who ranked placing, six put it first in order of importance, and two in terms of time. The sentiments of these two were expressed by one VSC like this: 'I'm under pressure with high numbers but placing has got to be a priority or the whole thing can break down'. Several of the VSCs who did not rank placing so highly expressed the view that, as in many situations in life, there was a degree of luck in placing volunteers.

Some of the VSCs felt strongly the necessity to place volunteers as soon as possible after interview, and a sense of failure if they did not do so. The phrase 'kept on ice' came up at least twice. 'You can't keep them on ice too long' or 'you can't afford to have volunteers on ice'. Their feeling was that volunteers would lose enthusiasm if not placed fairly rapidly, and the VSCs felt it was their responsibility to keep this enthusiasm alive. 'You've got to strike while the iron is hot, otherwise volunteers easily go off the idea. Either they are the sort of people who've made a big effort to come to see

see you and then feel easily rejected if you can't place them straight away, or they are the other type who are so busy and involved that they'll soon find something else to do'.

Two different factors were taken into account when placing volunteers – the situation in which they would work and personality, both their own, and those of the people with whom they would be in contact. 'Matching' was the key word – matching to the task or matching to other personalities. Sometimes this was fairly simple: 'I mean if you want a driver who can help disabled people in and out of cars, you know you can't have a decrepit volunteer who only has a bike – so in that sense the matching is done for you!'

Usually though, it was necessary to match on both task and personality levels. A hospital VSC said 'The staff must see a need in particular areas – you've got to look at the need – it's not just that you (the VSC) see a need – the staff must see it too'. A volunteer bureau organiser stressed the importance of being aware of these two levels. 'Sometimes you see a volunteer who would be super at a particular job, but then you think who she'll be working with and if it's instant personality clash – forget it'.

This emphasis on compatability of personality was a common thread in the answers of the VSCs and applied equally where the VSC was in direct contact with the client, as in the case of a good neighbour organiser, or where the VSC was acting as a referral point, as in the case of a volunteer bureau organiser. In either case the VSC saw it as her function to effect the introduction and to make a judgment about how well personalities would get on together. Again, the need for 'a little bit of luck' was acknowledged – 'Sometimes with all the care in the world, I end up just introducing them to each other, crossing my fingers and praying'.

**Training**

A few years ago mentioning the concept of training volunteers to VSCs or to certain professionals was guaranteed to provoke strong reactions. Training was clearly a threatening word, evoking images or half-trained amateurs

taking over professionals' jobs and much talk of 'a little learning being a dangerous thing'. This thinking appears to have changed, at least among this group of VSCs. In some cases the training was compulsory for all volunteers. Where it was not, the reactions we encountered were not aggressive or defensive, but rather sheepish or embarassed. This arose from a feeling that they were not as active in this respect as they felt they should be. 'I should get round to organising some more' — or 'It just gets left I'm afraid, because I'm so busy'.

Although only 28 ranked training in order of priority, almost all had been involved in it at some point, even if they were not at the time of interview. Of the 28, 3 put it first in time and 4 put it first in importance.

Only three people reacted negatively to the word training. Two said, 'I don't believe in it' and one 'We must never call it training — it's preparation'. Even these three however, had been involved in some kind of 'preparation' at some point. For the counselling and advice agencies, training was compulsory and being accepted for voluntary work was conditional on its successful completion. Some of this training was extremely demanding in terms of time, and personal commitment.

'Our initial training is 100 hours and a residential weekend'.

'Our selection takes a year — after two interviews and 50 hours training'.

Whether optional or compulsory, the training mentioned by VSCs as being available to volunteers could be regarded as structured, semi-structured or informal.

(a) Structured training

The aim of this was essentially to give information, for example a course at a local technical college where 'The volunteers are basically learning about the nuts and bolts of local government' or 'They learn the structure of the organisation and what's available'.

There might be opportunity in some of these courses for questions, role play and so, but emphasis on personal growth was more likely to be found in the semi-structured model.

(b) Semi-structured training

The guiding principle of this type of training was 'simply drawing on existing skills'. Its aim was to enable the volunteers to realise their own potential and to allow them to perform their tasks more competently and confidently. Within the semi-structured model, a wide range of training procedures was to be found, from an intensive residential weekend including role-play and encounter work to a less demanding 'just a group getting together for a chat'. It was very difficult to disentangle this model from the support function and it will be referred to again later on.

(c) Unstructured training

This third model might perhaps be more accurately described as induction. It usually involved the VSC explaining the nature of the work to the volunteer during the interview, giving him relevant information and arranging a personal introduction to fellow volunteers, staff or clients.

We said earlier that we did not encounter either aggressive or defensive attitudes to training among the VSCs. We found though, that they themselves did encounter these attitudes among professionals with whom they worked. One Community Development Officer for example said, 'The social workers still regard volunteers as meddling amateurs who may nick their jobs'. They (the social workers) could therefore be suspicious of any attempt to train volunteers and might see in it a danger of producing mini-professionals. 'You can't blame social workers – their profession came under threat before it was fully established – it's bound to be hard for them to accept the notion that volunteers can do something as well as them – they are always worried that you might think volunteers can do *everything* better than they can'. This attitude was not encountered among all professionals. Indeed, some encouraged training, though one probation officer had some thoughtful remarks to make about why this should be so. He felt that they were not motivated by the desire either to extend the volunteers' range, or, to improve their confidence, but to safeguard their own status. 'I wonder – is the emphasis on training volunteers a way of reinforcing our own professionalism – of safeguarding our own standards – so no one can say 'any fool can do that job'?

**Support**

It is reasonable to suppose that some volunteers may be more likely to be in need of support than people in paid work. For those in paid work a salary, status and reasonable working conditions may make up for any deficiency in the supportive framework of their working conditions. A volunteer has no reward in salary, often very little in status and frequently works in difficult situations. It is perhaps not surprising that the VSCs seemed to feel more deeply about the issue of support for the volunteer than any other section of this question. 37 felt able to rank support and of these 15 put it first in importance and 13 put it first in terms of time.

Support was interpreted as being both at an individual and at a group level and it appeared that it could be broken down into five separate components. These ranged from simply keeping in touch through affirmation and recognition, confidence building, and monitoring, to counselling of volunteers.

a. Keeping in touch

This was perceived to be the basic element in support. The VSCs were concerned that the volunteers should feel they were accessible. 'I go to them and they ring me up constantly'. 'My door is always open' is a phrase which occurred five times. The 'keeping in touch' might be personally or by telephone or letter, and often involved exchange of information. This might be telling volunteers about tasks, personalities and organisations and might involve producing a newsletter. We were given several examples of these and they ranged from a single broadsheet to some quite sophisticated journalistic efforts.

This type of information giving is not normally thought of as 'support' but it was mentioned by the VSCs in response to this question.

b. Affirmation and recognition

'Most of the time the volunteers just need confirmation of what they are doing, but a pat on the back is needed occasionally'. There were different

ways in which the VSCs gave this confirmation and 'pats on the back', and the common factor in all of them was helping to make the volunteer feel valued.

Regular meetings were held, parties were given and sometimes the two were combined. 'The thing to do is to have an AGM with a good speaker and the most important thing of all is to follow it with a good buffet'. 'The volunteers are very chuffed to be asked to a party at the hospital and I think it's important to say "thank you".'

As well as these group activities, many VSCs liked to telephone individuals to assure them 'that they are doing OK'. However, this was an area of guilt for some of them. There was never enough time to do as much of this informal contacting as they would have liked: 'You can't do as much as you ought to do and want to do, and you hope the volunteer will phone and have a chat and not let things build up'. 'I would like to do so much more'.

Because of the demands of their time the VSCs were grateful to find ways of giving a lot of support for a minimal outlay of time. Several of them referred to this as 'the showing the flag technique' – 'I turn up to all the meetings'. 'I show my face – if only for a short time'. 'They notice whether I'm there or not, and are not slow to mention it'.

They felt this helped to make the volunteer feel his contribution was valued and being noticed. 'The main thing is for volunteers to feel they have a friend at court'.

c. Confidence building

Giving support to the volunteers was seen to be crucial in building their confidence. This was important both for the way they performed at the present time and for their future development. 'You must allow freedom to express themselves and allow space for it – but also contain and guide it'. 'You've got to plan new things for them'. This development was not limited to their future voluntary work, but to their lives as a whole. 'You've got to bring them on gently and not let them be swamped'. One VSC said she felt

the voluntary work helped rebuild the confidence of young mothers who had been at home with children for a long time, so that after a year or so doing voluntary work they often came to her to say they were leaving to take up a part time job, 'I've got a job now and I never thought I could cope', was how one of them expressed it.

We previously referred to training as a means of support and this was particularly useful in the area of building a volunteer's confidence in himself and in extending the range of the work he could do. As we mentioned in the previous section, the training could be on a variety of levels – from the simple chalk and talk lecture of one of two voluntary organisations, to the demanding personal growth workshops of some of the counselling services. As well as the learning which took place at these training sessions, they also provided an opportunity for the volunteers to meet each other and this was seen as a very important element in support. 'I'm not sure it matters what the speaker says – the important thing is for them to meet each other and feel part of a group'.

d. Monitoring

'Support is crucial – we stand or fall as an organisation by the quality of our volunteers' work and this is the only way we monitor'.

The interlocking processes which occur in any organisation need to be monitored in order to check whether or not they are working satisfactorily. In a commercial organisation monitoring can take place by looking at charts and graphs as well as by contact with personnel. In a voluntary enterprise, the monitoring takes place by the VSC keeping a watchful eye on the situations and the individual. Failure to keep this watchful eye resulted in the sort of situation described ruefully by a hospital VSC: 'If they (the volunteers) let things fester they stop coming – it's bad for the hospital and there's nothing you (the VSC) can do about it. Lost volunteers mean that ripples extend into the community from that failure'.

The need to be vigilant was also expressed by a community development officer: 'I'm always around – I never leave things, if everything is ticking over nicely you never know when things are going to go wrong, so I try to make

sure to pick things up before they do'.

As well as monitoring on the operational level some VSCs were concerned to monitor the volunteers' personal progress. This was done by personal contact, either by 'just being there' or by allowing volunteers time for group discussions, case conferences, or to meet with each other. Several of the VSCs felt that in an ideal situation, time would be allowed on a more generous scale for this function, so that they would be able to take initiatives in encouraging the volunteers' personal growth. As it was they felt they responded only to problems, rather than in a positive planned way. The community development officer quoted above said he was always on the look out for problems, but the majority felt as this volunteer bureau organiser said 'I haven't time to go out looking for problems — I just deal with those presented to me'. Another volunteer bureau organiser said she would like the volunteers to demand more of her in terms of support — 'I would like the volunteers to be more aggressive in their demands on us but you don't hear from the wretched ones. It would be so much more helpful if they shouted'.

e. Counselling

There was general acknowledgement among the VSCs that volunteers were meeting their own needs in doing voluntary work, and it was therefore inevitable that some would need help over difficult patches. These could be in connection with the work itself: 'The work can be very stressful and you've got to give them a chance to off-load' and 'I try to give individual support by spending say half an hour a week with individuals to give them a feeling they are wanted and to pick up problems'.

The problems picked up of course were not always in connection with the work but might well be problems of a personal nature. It is well established that people often embark on voluntary work as a form of therapy, and it would not be surprising therefore, if some volunteers needed a higher degree of support on a personal or counselling basis than workers in other settings. Particular examples would be the newly bereaved or recently discharged psychatric patients.

Only a small number of the VSCs — principally those in the counselling

agencies – had specific training in counselling work. For the majority their counselling role was summed up in the phrase 'I'm just a listening post'. 'I just give them my time' – 'I'm their shoulder to cry on', 'I just nanny them a bit' were different ways of expressing the same function. The importance of privacy and confidence was stressed and one VSC who shared an office with a colleague said 'I have to arrange to have the office to myself if it's likely to be an emotional interview – people don't open up with someone else in the room'.

Not all VSCs felt that this part of the support function was one they should take on. This was either because they felt it should come from elsewhere 'I can't take that on – the social worker must do it' or because they felt it was not necessary.

If it was perceived to be unnecessary it could be because of the nature of the work, 'We are not doing that sort of work on the whole – where you get into personal distress – we are essentially good neighbours and what support do they get?' or it could be because the volunteers were not considered to be in need of this kind of support. 'They've got full lives most of these people, you know. We don't have the type that needs molly coddling' or 'All my volunteers are mature people'.

VSCs holding this point of view were very much in the minority however, and the great majority felt that they must be available to the volunteers when they were needed and were prepared to give them considerable amounts of time. Another element of support that was mentioned was that offered by the volunteers themselves. This was particularly evident when new ventures were getting off the ground.

The support function then was one which was taken very seriously by the VSCs interviewed. Their degree of commitment to their supportive role varied of course. A volunteer bureau organiser said, I expect them to get support from the agency I send them to – but if they don't – they come back to me of course – who else is there?' and the hospital VSC who was called to the volunteer who had just taken an overdose, said 'Of course she rang me – there isn't anyone else'. 'There isn't anyone else', and 'who else is there?'

form an interesting common theme. It would appear that many professionals working with volunteers have not as yet recognised and understood the input required from them. As a consequence, the burden of support falls very heavily on the VSC and it can be time consuming task.

However, the number of volunteers requiring the special kind of close support referred to above is likely to be small, and the majority 'jog along with the odd phone call and pat on the back'. Those who do need close support are likely to be extremely taxing on the VSC emotionally as well as in terms of time, and this was reflected in the emotion with which they described it to us. 'There are a few who need you so much you feel drained, but mercifully not many'.

**Administration**

In this section we covered clerical work, record keeping and meetings. The questions about fund raising and contact with superiors will be dealt with separately.

All the VSCs interviewed had some sort of administrative structure to their operation, however informal it might be. While some operated from their sitting rooms and declared 'It's all in my head you know', and others operated fairly sophisticated office procedures, all agreed that there was a need for some form of record keeping even though it might be sketchy. 18 thought record keeping was very important, 31 that it was important and only 13 that it was not important. 23 of the 63 interviewed had no clerical or secretarial support and therefore had to do it all themselves — or find a willing volunteer!

40 VSCs said they had help of this kind, though the other people who had full time secretarial help were those whose VSC function formed only part of their work. The remainder had help which ranged from two hours per week to half a secretary. We were somewhat surprised by the fact that this apparent dearth of secretarial help did not appear to cause much inconvenience. One man said wryly, 'Well, at least I don't send out too many memos — I've no-one to type them'.

VSCs have frequently been referred to as administrators. In advertisements for VSC posts, administrative ability is often given equal weight with more personal qualities such as initiative and skills with people. It was perhaps predictable then that administration was part of the job most frequently identified as relevant. 45 out of 63 ranked it and of those more than half (24) put it first in time and only three last in time. 'You've just got to know how to run an office' '50% of my time is spent in meetings'.

The attitude of some VSCs to administration was fairly disillusioned. 'I have a marked objection to administration, but you are judged in a social services department by the amount of paper you generate', or 'Our planning is great from meetings – actually getting on with it is another matter'.

It is interesting to note however, that attitudes to administration were as likely to be positive as negative. 'Very precise records because we're a registered charity and it involves money'. 'You owe it to volunteers to be efficient – anyway I like order in my work'. Or even more positively: 'I make no apology for spending my time in administration, I was once told 'the care of our clients will only be as good as our management' and administration is part – a very essential part – of management'.

We were, in fact, surprised by how unapologetic these VSCs were for spending a large amount of time in administration. The attitude of many was summed up by one, 'It has to be someone's job – why shouldn't it be mine?'.

## CHAPTER 4
## ACHIEVEMENTS AND INNOVATIONS

As we indicated at the beginning of the last chapter, if we were to get anything approaching a full description of the VSC function we would need to look at both the day-to-day operation and the longer tem aspects. This chapter attempts to focus on achievements and innovations.

An analysis of their achievements could be expected to give an insight into what their perceptions of their functions in the wider context were, and the difference, if any, from what the expectations of the appointing committee had been, as indicated by the job description.

Though there was a separate question about innovations, the respondents did not make a clear distinction between innovations and achievements and the results have therefore been analysed together.

We could have expected that the questions 'have you made any innovations of any kind?' would produce a wide range of answers. Many of the VSCs were first postholders and 32 of the 63 had been in post under 3 years.

Qualitative answers like 'change of attitudes is the principal thing'. 'My achievement has been the trust of very many young people', were more often given in response to the question about achievements while the innovations question produced answers of a more concrete kind, like 'I set up an office', 'I started a day centre staffed by volunteers', 'There was a need for a parents' support group, so I set that up'.

38 of the 63 had originally had a job description, but despite much rummaging through files, only a few were able to produce one for us. 'I haven't seen it for years,' or 'I'm in the process of rewriting it for the Management Committee', were typical remarks. In the event only 10 job descriptions were collected. Most of these mention specific tasks like recruiting and training volunteers, but for the most part they were drafted in very general terms, like 'establishing and maintaining liaison', 'stimulating and assisting co-operation',

'promoting and assisting the best possible use of community resources' thus leaving the postholder a wide range of discretion in interpreting the job.

The richness of the information we were given about achievements and innovations required us to attempt some kind of categorisation. It was difficult to select appropriate categories because of, inevitable overlapping, but we finally arrived at four headings: 1. Changing attitudes, 2. Fund raising, 3. Tangible achievements, 4. changing procedures.

### 1 Changing attitudes

Although perhaps appointing committees would not consider attitude changing as a primary function of the VSC, the VSCs themselves considered it as their most important achievement. 46 of the 63 mentioned 'attitude changing', or something closely akin to it. 'People are sympathetic to the idea now', and 'I've proved the need', were the kind of replies we received. When we were given answers like this, it was not enough simply to record that they had changed attitudes, it was important to probe further and ask for examples of where this had happened. Our community relations officer for example said 'There was an almighty political upheaval (when he was appointed) — it's a very different situation now from when the leader of the Conservatives said 'over my dead body will the council give money for this sort of thing'. Now the Conservatives support me fully — there is complete trust between us. I brought about this change of attitude'.

It is important to point out again here that half the respondents had been in post less than three years and that the changing of attitudes would often be a necessary preliminary to any more tangible achievements. We would not wish to give the impression that every VSC had been successful in changing attitudes as a matter of course. We were given realistic accounts of failure to do so 'Every time I think I've got somewhere, something happens and I realise I've got nowhere'. 'In five years I made no impression on her whatsoever, I had success with other people but not with her and she was the one that mattered'.

## 2 Fundraising

The meaning attached to fundraising is self evident and in this category we included getting money from local authorities and other public funds, as well as that raised through jumble sales and the like. Curiously, only three people mentioned this as among their achievements at this point although it was frequently brought up in answer to a later question specifically about finance. Fundraising seemed to be such a run-of-the-mill activity that they scarcely felt it worth a mention under achievements.

## 3 Tangible Achievements

To qualify for inclusion in this category an item or activity had to be something which was not in existence before the arrival of the VSC, or an extension to existing provision. In this category are included the provision of group homes, community centres, building up volunteer teams, counselling services and a survey of community needs. 56 tangible achievements were mentioned and the increase in local services attributable to the intervention of the VSC was remarkable. It does not take much imagination to see the relief given to relatives by having a day centre where psycho-geriatric patients can be cared for, the help given to young mothers by a summer play-scheme, or the extra dimension added to a blind person's life by having a talking local newspaper.

## 4 Changing procedures

This included office procedures, communications systems, changes to constitutions or referral systems. 21 people mentioned these – mostly in terms of making themselves or the volunteers more widely known and understood. Since many of these were administrative procedures, they have already been mentioned in Chapter 3.

We felt it was not sufficient just to ask the VSCs about their achievements without considering where the ideas originated. We hoped to establish this by asking 'In your work, where would you say the initiative for the various tasks arises (or arose in the first place)? Although we were seeking to find out who established the need for the performance of tasks, the VSCs answered in terms,

both of 'who decides what should be done?' and 'what methods they employed to ensure that the ideas became practical realities'.

**Initiatives**

Identifying the source of initiatives in their work would help us to build up an understanding of the VSC function. The most striking thing about the answers was the instant categoric response 'Me' 'So much of it is me. I seem to be central' 'I dream it up' 'I identify needs on my own initiative' 'With me myself – entirely left to myself'. Of the total number, (63) 27 answered in variations on a theme of 'me', and of the 41 paid people no less than 22 answered in this way. When they replied to the question, the VSCs did not necessarily distinguish between 'who decides' and 'the methods' they employed, but for the sake of clarity we are attempting to disentangle these two elements.

**Where the ideas originated**

Some of the VSCs reported they did not use initiatives at all, and acted only in response to a specific instruction on request. 'I don't initiate anything, we get requests from health visitors' 'We should always be asked – we never offer' 'We just respond to requests'.

In these cases no further discretionary processes were required from the VSC, and they would simply carry out the instruction or request of whoever had asked them. This would include Meals on Wheels organisers for example, who might make marginal alterations at the request of headquarters or some volunteer bureau organisers who said they simply responded to requests from social services.

The next category, representing the largest number, was where the VSC identified a task as a result of situations coming to their attention through exchanges of ideas. A need might surface in the community which they could come to know about through meetings, conferences or discussions, or they might read of schemes being set up locally or nationally which they saw as relevant. These sorts of situations are summed up in phrases like:

'from me picking up ideas', 'an ex-patient came one Friday afternoon and said, "I can't get through the week-end", and I was determined to create a facility for him and people like him, and by the following week-end I'd started a Friday Club'. 'I see the need — cross fertilisation comes from group meetings'.

There was some evidence that the volunteers came up with ideas themselves. One probation officer said 'One woman volunteer came to me and said that we needed somewhere for the unemployed lads to go during the day. She thought a drop-in centre would be one solution. I agreed and we went ahead and got the thing going'.

A third source of new ideas came from the VSC scanning the environment, seeing a need no one had yet identified and either meeting it through her own action — 'When I looked at under-achievement in schools (for ethnic minority children) I realised we could start a scheme for a homework group, which meant getting kids here after school, and teachers to give coaching for their difficulties', or alternatively by activating someone else to do it. 'I sow the seeds then stand back and let people in villages do it' from a community development officer.

**How the ideas become practical realities**

When thinking about the methods of acting on initiatives it is important to bear in mind that this may sometimes mean *not* taking action. For example, one VSC said that he would not take on any scheme involving volunteers which he knew could not succeed because failure could discredit the agency, and another reported that he had 'killed an idea dead' because he personally found the concept unacceptable.

Having taken on the idea of the need, by whatever means it had arisen, VSCs had a considerable range of discretion about how they should meet it. A lot was said on the lines of 'I don't ask but tell', and their control of the situation seemed considerable. 'The committee decides what to do. They see the needs. But really, if I'm honest, it's me — I know the best means of achieving my objective and I manipulate the situation'. 'I think most of the

pushing has been done by me, but I wouldn't like the group leaders to realise it. I plant seeds and ideas, cunningly and deviously, leaving people to think they've done it themselves'. 'I act on my own initiative on a day to day basis. Also my own initiative for other things which I put before the Management Committee and I've always got what I want'.

In order to illustrate the interplay of the identification of needs and their ultimate realisation as a new service, we are quoting one of the examples we were given:

In one social services department regular meetings with community development officers were held for health visitors, community nursing staff and sometimes the general practitioners. As a result of one of these discussions the plight of families coping with incontinent patients at home came sharply into focus. The problem was how much strain families could reasonably be expected to cope with. If it became too severe the only solution seemed to re-admit the patient to hospital, although he might require nothing in the way of treatment. Admission to hospital seemed a rather unnecessary way of freeing a family from the burden of changing clothes or linen several times a day: a sledge hammer to crack a nut.

It was realised that if a reliable scheme could be operated to help the families in some way, to have the washing taken away and returned promptly, they could be enabled to continue caring for their relatives at home – something that the majority preferred in any case.

After some false starts the VSC succeeded in persuading a hospital laundry to undertake to do the washing and a rota of volunteers was organised, one to take the washing to the hospital, and another to return the clean linen in due course.

The VSC reported that the scheme had been in operation for over a year – the clients had been most appreciative and no major difficulties had arisen at all. The VSC hit upon a scheme that was simple, efficient and effective. This is an excellent example of looking hard at existing facilities (the hospital laundry) creating a new one (the volunteer drivers) and combining the two to

produce an ingenious and practical solution to a particularly difficult problem. It is clear that a service of this kind will not come into being and be maintained over time without the existence of a VSC, since such a task does not come within the remit of any one other group of workers.

It would appear that VSCs regard both taking up new ideas, wherever they originated, and working to make them a practical reality, as a very important part of their function. Indeed their enterpreneurial skills as a group is of a kind more commonly associated with the more go-ahead sectors of industry, where material rewards are greater, than with the middle range of the public sector.

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# CHAPTER 5
# AN ANALYSIS OF FUNCTION

The last two chapters have focussed on the VSC function, firstly at what might be regarded as the basic level and secondly at the wider implications. It would seem that this is the appropriate point to look back and decide to what extent the university lecturer's view that VSCs are just administrators and nothing else was borne out by what 63 people involved in this work told us about their jobs.

What emerges very clearly is that they were indeed administrators, but the problem is beginning to answer the question of what more there is to say, lies in deciding where to stop! From what we were told, it would appear that there are five essential components, administration, personnel work, social work, community development and enterpreneurial activity. These were found in varying degrees, wherever the VSC was located and whatever proportion of time was being spent on the VSC element of the work.

## Administration/Management

Administration is of course open to many interpretations. At one end of the spectrum it may be defined as work in a hierarchial structure typically involving standardised procedures and not calling for the exercise of judgment or initiative. Tasks would tend to be routine and would include such things as record keeping, dealing with correspondence and relevant clerical activity. At the other end of the scale an administrator would have a good deal of freedom of action, autonomy, authority and control over the work of others, in which case he would generally be thought of as a manager. The jobs the VSCs described to us embraced some or all of these characteristics, and a certain amount of paper work and office based activity was, and indeed had to be, undertaken by everyone. All the other functions needed at least a minimum of administration.

### Personnel

A manager in a commercial employment agency would expect to recruit, interview and assess potential employees and effect their introduction to would-be employers. He would ideally have a thorough knowledge of his area, know of sources of workers, be conversant with all the employers in the district and be aware of the type of staff they required. In addition, many would encourage the staff they have placed to come back if there were difficulties and attempt to sort them out. Personnel officers in companies would reckon to do all or any of the tasks outlined above, as well as dealing with induction and offering advice on a wide variety of problems. It is clear that for many of the VSCs their function was similar to a combination of both these aspects of personnel work.

### Social work

As a minimum definition social work could be said to be assisting people in problems of social functioning. In looking at what many of these VSCs did, it is difficult to specify exactly where the personnel function ended and the social work element began, and a significant number had no hesitation in mentioning that they considered counselling as being an important part of what they did. Volunteers would certainly acknowledge the significance of this factor in their voluntary work. In addition to this, some VSCs would also be operating in social work terms by assessing client's circumstances and determining the contribution that could be made from voluntary resources to the maintenance or improvement of social functioning.

### Community development

This was universally perceived as part of the VSC function. Even those who were firmly located in an organisational structure, for example in a hospital or in a probation department saw community development as figuring prominently. Community development officers, of course, were by definition expected to work for this end, but they did also have a personnel function in recruiting individuals to groups and supporting groups rather than individuals, and in supplying the expertise for entrepreneurial and social work activities.

Although we are aware that in other parts of the country community workers may adopt a militant stance, none of the community development officers interviewed worked in this way. While in theory CDOs expected that once they had activated community groups they could withdraw, either partially or wholly, and move on to the next objective, in practice this was not always the case. CDOs had to keep in close touch with groups and often had to act to save the organisation from collapse. Other VSCs in the community development field were more likely to stay on hand and neither the groups nor the VSC would expect to withdraw to any great extent from a project.

**Entrepreneurial activity**

While personnel and social work might be regarded as obvious parts of the VSC's work, the presence, let alone the extent of the entrepreneurial element may come as a surprise. Indeed that it surfaced at all was as a result of analysing the responses to questions about innovation, achievements and where the initiatives arose. The range and variety of schemes and projects that were mentioned was large, and great ingenuity and savoir faire were required for these enterprises to materialise and prosper. The VSCs had to display a wide diversity of talents in selling their ideas, gaining whatever approval was necessary, in raising money and finding premises. Some had an uphill struggle to achieve their objectives, and succeeded by badgering reluctant officials, harnessing local resources and overcoming obstacles of varying degrees. Some or all of these experiences would be familiar to anyone setting up a new enterprise.

**What did the VSCs have in common?**

We have set out earlier the type of agencies for which these 63 VSCs were working. They were obviously very diverse in character, objectives, philosophies and in the groups they served. Clearly, they were all in the business of recruting and placing volunteers or they would have been excluded from our sample by our original definition of a VSC, but how homogeneous were they as a group?

One way to consider their homogeneity would be to decide whether their work more closely resembled that of their fellow VSCs than that of the other workers, if any, in the agency. From what they told us it would seem that their activities were more closely akin to their other VSCs than to other colleagues. If a comparison is made between the hospital VSC and members of nursing or para medical staff for example, or between CDOs and social workers, it will be apparent that VSCs do form a homogeneous group. The case of probation officers is somewhat different. Probation officers identified more closely with other POs until their VSC function was taken into account, when they could more readily be classed with other VSCs. One probation officer said, 'There is so much to be done in probation that we couldn't offer the service we do without volunteers and the VSC aspect reflects this and is important'.

This seeming lack of colleagues within their own agency doing the same kind of work had important implications. It means that the VSC is in a relatively isolated position in his day to day activities and must rely on people outside the immediate organisation for understanding and support. No doubt it was for this reason that the VSCs attached great importance to the opportunities they had to meet fellow VSCs and share ideas and problems (see Chapter 9 Networks). The importance of providing opportunities for exchange of this sort is often not recognised by appointing committees but such opportunities can play a crucial part in overcoming the isolation felt by VSCs if they found themselves working in a situation in which they have little in common with other workers in their organisation.

The VSCs then were working at the margins of occupational systems and acted as brokers, both between systems and invididuals outside. They combined the tasks of administrator, manager, personnel worker, community developer, social worker and entrepreneur in varying proportions, but the entrepreneurial element was almost always present and the term 'social entrepreneur' would best encapsulate their function.

It is necessary to stress that no one individual VSC conformed precisely to the pattern we have outlined and there is, of course, considerable overlap between the categories. The VSC function would be located rather along a

continum and to make this more explicit, we are presenting four case studies which show the different emphases placed on the particular elements. Each of the case studies shows the element most prominent in the working style of the VSC concerned.

Since recruiting and placing the volunteers was common to all the VSCs (see our original definition) we are not presenting a separate model for the personnel function.

## CASE STUDY 1

**Management Model**

**Director of a Counselling Organisation. Unpaid, part-time. In post 4 years.**

He was in his late forties and was a university lecturer. Married with 3 children he had left school at 18 and had gone into the Royal Air Force to do his National Service. After that he went on to do an Economics degree and worked in personnel with a company for a while before becoming a university teacher.

He had been director of the Counselling Organisation for 4 years and a deputy director for 3 years before that. His appointment was regarded as something of a watershed for the organisation. The previous director had been retired and had given a great deal of time to the job, taken most of the decisions himself and had been something of a 'one man band'. When this Director took over he was concerned to change that image. When he took over the job he wrote his own job description and also a job description for 9 others — deputy directors and those with special responsibilities. He gave an average of 10 hours weekly to the job and had a great deal of autonomy — being responsible really only to the National organisation of his Association.

'Although I'm given almost total authority by our constitution I wanted to show that this is really a management job and could be done even if he had a full time job outside as I have. I wanted to show that you didn't need anyone with unlimited free time because that limits so much the type of person you can have. What I tried to do was create a situation in which anyone with the right ability could do it'. This involved setting up a new structure and delegating much more responsibility to deputy directors and to others in support roles with the volunteers. This group met with the Director each month and he expected that most of the ideas would come from this meeting. 'They come up with ideas and initiatives and it's my job to decide priorities and how to put these ideas into practice. I think it's very important indeed that as the manager I give equal attention to each part. I mustn't seem more interested in the supportive work than in fund raising or training for example. To manage well is to ensure that all elements of an organisation feel equally supported. My skill is in managing and therefore I spend most of

of my time doing this – administration, going to meetings, etc. There are other people on my team who have greater skills in training or counselling and I take their advice'.

## CASE STUDY 2 — Social Work Model

**Hospital based VSC. Paid ½ time. In post 6 years.**

She was 46 years old, divorced with 3 teenage children. She had left school at 17 and originally trained as a librarian. When her children were growing she worked with the Pre-School Play Groups Association and in recent years had been a tutor for various causes.

Her appointment was to 2 small hospitals, one geriatric, one general. When first in post the emphasis had been very much on bringing volunteers in to the hospitals basically to help the staff. She had always encountered considerable resistance from the nursing staff and relations with them remained strained. 'Somehow it's never worked with the senior nurses — they've never taken me seriously — never really seen what it's all about. Basically the problem is that we have different ways of looking at what voluntary help is all about. As they see it the reason for its existence is to help the staff, whereas I see it as just for the patients and secondly for the volunteer only 3rd for the staff. That's the basic dilemma and I haven't solved it in all these years'.

'For a couple of marvellous years we had a super nursing officer at the geriatric hospital and things really moved then — I felt we were on the same wavelength. Mostly though I feel I'm flogging a dead horse with the nurses. I don't feel I've done much attitude changing — they still don't really see that the patient needs more than to be clean and fed and that volunteers can provide the extra dimension'.

The VSC was responsible to the Unit Administrator, though there was a District VSC who was there in an advisory consultative role. The relationship with the Administrator had varied over the years as there had been 4 different post holders. The VSC had always sought the opportunity to move into different areas of work, such as working with staff in a local health centre and starting groups for ex-patients or those recently bereaved. This extension of her work beyond the hospital had been encouraged by two of the

administrators and discouraged by the other two. With the present administrator, the VSC felt encouraged and supported yet always aware that she must somehow 'justify my existence'. She felt the administrator wanted to encourage the new developments but had a hard time selling the ideas to the nursing staff at the hospitals.

The VSCs strong feeling that voluntary work was a two way transaction and the volunteers often received as much benefit as the patients, was shown by the amount of time she spent interviewing prospective volunteers. She liked to go to see them in their own homes as she felt she could more easily assess them there. She found quite a large proportion of these who wanted to volunteer had some kind of personal problem – perhaps they had recently been bereaved or had been through a period of depression. The VSC found they often unburdened themselves to her and the initial interviews could last up to two hours. Very often they were looking to the voluntary work to be some kind of therapy and she felt it important to help them to understand that they might not yet be emotionally ready to undertake any voluntary work.

'The problem is – if they didn't off-load to me – they'd be doing it in the surgery or taking up a Social Worker's time, or even be in a psychiatric ward, but is this really my job? I believe it is – because many of these people eventually turn out to be the most marvellous volunteers but other Health Service Staff might not see it that way'.

CASE STUDY 3 — Community Work Model

**Community Development Worker**

Aged 48, the Community Development Officer had left school at 15 and had worked for many years in a semi-skilled occupation, until he was offered a scholarship as a mature student when he was in his 30s. In addition to his university degree he had a diploma in social studies and after graduating he had been an estate based community worker in a new town in the Midlands. It was this experience that had moulded his perspective of community development work and accustomed him to working on his own, with the result that he had not become client orientated. However, in his present job he did have a number of volunteers on his books, some inherited from his predecessor, although he had reservations about what they could achieve. He was sceptical of sending them along to other organisations because all too often no preparation was offered and the arrangements broke down. He knew of many cases where volunteers had been unfairly exploited in the past by social workers who 'worked the volunteer to death and when it got to the interesting stage or good results were being achieved, they called the volunteer off'.

While he did undertake the work of providing volunteers when social workers asked for them, his preferred approach was in terms of developing groups within the community. To him this meant a commitment to identifying issues which demanded action on the part of the community by and for itself. As an example, when the local council wanted to sell of a parcel of land that had previously been designated for community use, he called a public meeting, was instrumental in the formation of an action committee, recruited a volunteer lawyer and helped the group to raise money for legal fees. So active did the group become that not only was the council forced to back down on the sale, but the Action Committee got the council to agree to the land being used for the building of a village hall — a development which had been long overdue. He described his part in the process as that of suggesting ways of going about things and working from the inside of the situation. 'You can either demonstrate outside the Town Hall or be ultra respectable — the latter course of action may carry more weight'.

He felt that on the whole social workers were not in sympathy with his point of view because the time scale was a long one, and social workers would rather have effort directed towards something immediate and tangible like a play group that would relieve pressure on casework. In his terms a group once activated would come to see for itself that a playgroup was necessary and the thrust would come from within the community itself. With regard to fund raising he was very definitely of the opinion that his role was to find the relevant information but get the group to get grants from the social services and elsewhere because it gave confidence and reinforced its autonomy.

The CDO's image of community work was one where he acted as 'animateur', keeping a low profile and withdrawing from the situation at the earliest opportunity to leave the natural leaders to emerge.

The CDO had some very interesting things to say on the subject of self help groups and these are being quoted in full as a conclusion to this case study.

'Self help and community groups are inward-looking and they don't see themselves as part of the wider community. There is no network of any consequence between the various groups. They might be OK at raising a donation for Kampuchea but they wouldn't want to know about, say, the mentally handicapped down the road'.

'In a way a community worker is in a position to make a vital contribution in forging a sort of awareness of the totality of the community. In his person of course he does because he's on the committees of many different organisations and of course there's some interchange going on at that level but in general community groups have little to say to anyone else. It's like what Che Guevara found: once those Bolivian peasants had got their bus they couldn't have cared less about a revolution'.

## CASE STUDY 4 — Entrepreneurial Model

### Secretary of Voluntary Organisation

This paid full time organising secretary of a voluntary organisation had previously worked as a day centre organiser. She was now in her late forties, and on leaving school at 17 had started to train as a nurse, but left to get married before completing her course. Her husband was in the Forces and she had travelled widely with him on overseas tours for many years. She had done voluntary work as an army wife and this had given her experience of fundraising, of mixing with all sorts of people and, she said wryly, that she had done 'literally everything' in her time.

This was a newly created post and her job description was phrased in the vaguest terms giving her a good deal of freedom of interpreting her work, being responsible only to her management committee. She had not had any training of preparation for the job, nor had she ever attended any courses for VSCs. At the outset she had of course to set up her office system, get to know the area, recruit volunteers and generally lay the foundations. However, she had seen herself primarily as a provider of new services and described herself as being willing to take risks and make snap judgments, while keeping her fingers crossed.

'I dreamed up a day centre for the mentally infirm — I saw the need because the mentally infirm cannot be integrated into activities like lunch clubs and regular day centres'. She had negotiated with the local council for the use of one of their flats, had furnished it, recruited a team of volunteer drivers to bring old people to and from the centre, and yet others to work in the centre. Work among the mentally infirm is no sinecure, it is physically demanding, often unpleasant and little is given back to the volunteer in the way of recognition or friendship. An enterprise of this sort is crucially dependent on the skills of the organiser.

As soon as this project was well under way, she became convinced of the great value a talking local newspaper could have in enhancing the quality of life for blind people. A scheme of this kind had been in operation in other places so the idea itself was not new, what was novel was the way the idea was put into practice. Such an enterprise requires money of course, and her first priority was to raise £3000 from the Jubilee Fund for the purchase and installation of the necessary recording equipment in a local comprehensive school. Here she got together a group of VIth formers and made them responsible both for the recording of the weekly newspaper and the sending out of over 70 cassettes a week to blind people in the district.

In the 18 months of her appointment she had raised a total of £14,000 to meet the costs of many projects and £1000 had been paid to volunteer drivers as she had exceeded her budget by this amount.

The next enterprise to be mentioned was a holiday scheme. Again, something of this kind operates in many places, but in this case a register had been drawn up of places suitable for holidays for people with varying degrees of handicap, and escorts were also provided where necessary.

She had under consideration a scheme for hospital visiting and was also in touch with the medical social worker about a new idea for ensuring liaison with the hospital so that the needs of hospital patients about to be discharged could be assessed, and a volunteer network for the short term care of those who needed it could be set up.

While all these new ventures were being developed, the day to day work of the organisations proceeded and 3000 people a year received some kind of service from her office.

This VSC had been remarkably successful in the short time she had been in post, and particularly so in her entrepreneurial function. The factors which could be said to have contributed to success in this field were her lively yet unassuming personality, her vision, her ability to communicate ideas, her life experience in a variety of settings and the energy to bring ideas to the realm of practical realities.

## Commentary on case studies

It is important to recognise that these four VSCs were not solely concerned with the function we have reported here. The management element was seen by the subject of Case Study 1 as the most important part of his function but he was of course also concerned to a greater or lesser degree with the other elements we have identified. For example, he had been involved in raising money for a new building, he was actively involved in support groups, he took part in community group meetings, and participated in selection procedures for his own volunteers. The management function was the strongest element but by no means exclusive.

The same applies to the other three case studies — the function we have identified is paramount but does not exclude the others.

# CHAPTER 6
# QUALITIES OF A VSC

In Chapter 3 we gave detailed information about the kind of tasks VSCs were doing. If anything more than a bare outline was to emerge, we needed to put qualitative flesh on these quantitative bones. We felt we could achieve this by asking the VSCs later in the interview about what qualities they themselves thought were necessary for success in their work. Since the question came at about two-thirds of the way through the interview, a good rapport had been established, people were generally relaxed and their answers were flowing well.

There was an interesting common thread running through the reaction of respondents to this question, and they often answered at two levels. An immediate answer – mostly humorous, followed by reflection and a considered reply. For example, the answer of one citizens' advice bureau organiser was 'Great stamina and a cool head. Seriously, they are the same qualities I look for in a volunteer. A non-judgmental approach and an interest in people as individuals. They must have social awareness'.

Fifty three qualities were mentioned in all, although inevitably there was a certain amount of overlap between them. The single most frequently mentioned was 'a feel for people', which occurred 19 times. Next in order of frequency was 'organisational ability', 14. At the other end of the scale, 2 people mentioned the importance of having a supportive family and one woman thought it was essential to belong to the WI!

Because the list of qualities mentioned was so large and varied, it was necessary necessary to group them under a small number of headings before we could attempt any analysis. The four headings we have chosen are: 1 Personal, 2 Skills in dealing with people, 3 Cognitive attributes and 4 Political skills.

A perusal of the full list of qualities which appear as Appendix 5 may well suggest alternative categories, but on balance we feel the range was most adequately accommodated under these headings.

For example, 'tolerance' has been listed under personal qualities, but it might just as well have appeared as a learned skill, it is certainly concerned with people and has even a political connotation. On balance however, we feel that it approximates more closely to a personal quality than to the other three, and of course there are other examples of where the same qualities could fall into any or all of the other categories as well.

**1. Personal qualities**

Qualities in this group were mentioned more than twice as often as any other – a total of 98 times. Enthusiasm came first, followed by patience, tolerance and commitment. Also included were a sense of humour, flexibility and adaptability, tirelessness and confidence. The range was from the inspirational 'you need vision', said by a probation officer and echoed by four more people, to the more down to earth like 'having guts' and 'being level headed'.

**2. Skills with people**

'Feel for people', was the single most frequently mentioned quality by 19 out of 63 people in fact. Being friendly (6) and possessing qualities of leadership (6) came high in the list, while supportiveness (5) and being accessible to volunteers (3) also appeared. The ability to delegate (3) and the need to confront difficult situations with regard to volunteers' work (2) figured in the replies. Two people mentioned that they felt classlessness was a necessary quality on the grounds of needing to appeal to volunteers across class boundaries.

**3. Cognitive**

While it could be expected that personal qualities and skills with people would figure strongly in VSCs perceptions of the qualities needed for success, it is perhaps surprising that they felt the cognitive dimension was only slightly less important than people skills. Organisational ability (14) was the second most frequently mentioned quality overall, while communication skills (7) and a good theoretical knowledge (7) (of local community or local

government structure for example) were also highly rated. Since counselling skills have to be learned, they appear in this category rather than under people skills, and six people mentioned these. The need for objectivity (3) and a belief in the concept of volunteering (1) indicated a slightly different perspective on the part of those VSCs who mentioned them.

**4. Political**

One VSC said 'I spend most of my time creeping and crawling and being awfully nice'. Behind this humorously cynical remark lies more than a grain of truth, and the qualities required for this are reflected in this last category. Being pragmatic (4) and tactful (4) and 'knowing when to say "no", turning down things you know you can't succeed in', were mentioned. 'Eating humble pie' (3) being devious (2) and scrounging (2) were also thought of as necessary qualities. Although one respondent thought it was important to have 'no strong political or religious feelings', it was nevertheless apparent that many felt it important to have their political antennae well developed.

Although we were asking about what qualities were necessary for success in an objective sense, it was apparent that many were in fact discussing themselves. At times they became self conscious about this and as one man said, 'If only I had them all'. Perhaps VSCs can take comfort from another man who said, 'No one could have them all – if you've only got half you can do the job'. Although these views were expressed by people over the whole spectrum of agencies and not all the qualities instanced would have equal relevance to all jobs, nevertheless to a greater or lesser degree, at least some of the skills from all four of the categories would appear to be required.

This question was highly successful in providing information which nicely complemented and confirmed the data of Chapter 3. While the overwhelming impression was that VSCs felt that the work demanded a variety of skills – predominantly social in character, the domain of theoretical knowledge, organisational ability and communication skills figured almost as Predominantly.

# CHAPTER 7
# INFLUENCE

We are not unaware of the dangers inherent in attempting to tackle a subject like the exercise of influence. Objective assessments of the influence that groups or individuals exert are notoriously difficult to examine but we decided nevertheless, with some trepidation, to attempt it.

We have already referred in Chapter 4 to the fact that 46 of the 63 respondents mentioned 'attitude changing' as their most important achievement and implicit in this is the notion that they had influenced attitudes at different levels. Given the opportunity to discuss the matter of influence in more detail, we found that 80% of respondents claimed to have influence when policy was being formulated with regard to volunteers and volunteering. Of the 13 people who said they felt they had no influence, all were working in very restricted areas where voluntary work had been carried out in the same way for some years. 'Influence? good heavens, no – I just do the job'. 'No, my work is too specialised – it doesn't apply to anyone else'. 'No I'm too out of touch and old fashioned'. Two newly appointed VSCs did not think they had any influence at that point, but confidently expected to do so in future. 'It's too early for us but we will next year'. 'Not a lot as yet, but I will in future if I do the job well'.

Among those who answered 'yes' many different degrees of opinion were to be found. From a view like 'No-one interferes with me so the answer is "Yes" ', to 'I've influenced everything'. It was our impression that many people had never before given any thought to the issue of the influence that they might have. One respondent said 'Do we seek it? – I'm not sure that we do'. We felt this was right – they did not seem to go out to seek it, but exercising influence turned out to be an integral part of their function. You cannot change attitudes and introduce new ideas without exercising influence on those who are involved with them. 'They take note at the very least'.

'I suppose so – we know a lot and are independent'. 'None at all – may be that's not true – I influence a little bit what's done with volunteers'. They appeared to exercise influence in a low-key way, and though some claimed influence in terms of their own personality, 'Strictly speaking in theory no, but purely personality wise, I have influence', the majority would claim that their influence was exercised through a group or committee or through the structure of their organisation. 'I don't have influence personally but through the headquarters I do'. 'Yes, but not personally, through the group collectively or headquarters'. 'Yes, in many ways I influence policy by getting the management committee to take a long-term view'. So what they were reporting was a ripple effect. Some felt the ripples stopped at department level, others fanned out wider to management committee or headquarters level – 'I feed in my views to county level'. Others felt their influence was channelled through an intermediary body of other organisations. 'Not personally but I participate in VSC meetings and through that I have influence'. 'We are a self-help group but we have people with clout on our committee and they spread influence elsewhere through their own contacts'. Still others felt that their influence could be felt nationally – through the Volunteer Centre. 'OK I'm small, but if the Volunteer Centre takes notice of us, may be we feed things in and that affects policy. I'm small and parochial but they are powerful'. 'The Volunteer Centre has an influence through their contacts and research and through them I do'. Set against this would be the rather disillusioned VSC who said 'We have influence locally – we can say what volunteers can and can't do, but nationally you've got to be joking – there *is* no national policy on volunteers'.

**How do they influence?**

'By talking to people we can influence policy' said one respondent and talking to people was the most important way they influenced policy. 'The committee' was where it mostly happened, either their own committee or other organisations' committees: 'I'm at all meetings and sub-committees'. The important thing was to be represented on committees – the VSC might be there as an advisor or as a member or to represent a specific group or point of view, but the important thing was to be there: 'I have a lot of

influence in day to day policy. Advising and influencing through giving my opinions to the committee'. VSCs could also exercise influence through inter-departmental meetings.

One or two VSCs mentioned the press as a potential influence, 'I can go to the press and complain if they (the committee) don't take up my suggestions and they know that'. The only other mention of bringing influence to bear that was seriously put forward was by example. 'Every Citizen's Advice Bureau is as good as its organiser. They (social services) thing I'm OK – I have influence'. 'My influence is very specific. It's only about training but we do it well, it's powerful'. 'I'm allowed a strong voice, partly as a result of my position'.

Many VSCs had had to overcome a considerable amount of mistrust initially, but they reported that this often disappeared as a result of their success, They take note of me now – they take me seriously'. Reference to the case studies will provide other examples.

As we said at the beginning, to assess influence is a difficult task. On balance though, we feel that the claims of the VSCs were feasible. We are able to say this, other things being equal, from a basis of our own knowledge of the area, and the work.

It may seem strange that this group of people of relatively low status was exerting a degree of influence disproportionate to their position – this was particularly the case with regard to finance.

**Budgeting and Fundraising**

In the present financial climate, gloom and doom prevails at every turn on the subject of money, and these are frequently reports the press of severe cutbacks in expenditure and consequent curtailment of services. It is perhaps surprising therefore that money, budgeting and fundraising did not on the whole appear to present a great problem to the VSCs. It looked as if they dealt with what is often regarded as a major difficulty in a matter-of-fact way. 'I can usually get money. I'd like more of course, but I manage'.

All the VSCs were in some degree responsible for money management however small. The sums which they needed for their operation ranged from £40 to £19,483 per year, and the means of dealing with money, went from a cash box in the sideboard to complicated accounting procedures requiring a treasurer and annual audit.

When talking to VSCs about money, we were covering budgets allocated to them and funds which they might raise. The VSCs who raised some or all of their funds and those who did not were split 50/50. It might have been expected that fundraising would be more in evidence among the unpaid VSCs, but as 17 of 31 who did raise money were paid this is not the case. 'We have a council grant of £11,500 but it doesn't cover it so we have to do some fund raising as well – the usual donation boxes, sales, etc'.

As a group the VSCs did not talk about budgeting and working out estimates, they talked instead about 'getting money'. The means of 'getting money' could be either tapping into resources which were available, statutory or charitable, for example 5 per cent of probation budget was allocated to the Voluntary Associates Scheme, or metaphorically rattling a collecting tin, or a mixture of the two. The VSCs seemed to have considerable skill in these areas, particularly relating to knowledge of local sources and a strong streak of pragmatism in how to manipulate the system. 'I have a vast network of contacts – I can get virtually anything I want'.

**Fundraising**

Thirty one VSCs did some or all of their own fundraising and we were struck by the size of the sums they raised, the flair they displayed and perhaps most of all the matter-of-factness of their approach to it. 'If I want £1,500 for holidays (for clients) I just go out and get it'. The way they went out to get it included bazaars, endless jumble sales, donations from interested organisations, shops, sponsored walks, swims and silences. The top amount raised £600.00 p.a. (for the region) and sums of £5,000 to £10,000 seemed to be fairly run of the mill. At the other end of the scale, 'Each volunteer raises £10 a year. Some write a cheque, others hold a bring and buy'.

Just as important as the ability to raise funds by these means was being able to 'tap in' to the system. 'There is money around the place – you've just got to know how to get it'. And know how to get it they did. They showed as much ingenuity as many a captain of industry. 'You must put up your request for money on a day when they've got masses of other business – then it'll go through on the nod'. 'I can't ask for money for my project because it's not popular – other people think it's a frill, but I manipulate the system and no-one notices'.

The VSCs had considerable experience at raising money from other charitable trusts, £40,000 from a famous national body down to £15 from a league of friends.

Not all VSCs saw it as any part of their function to raise money at all. 'We must have regular grants – we are a service organisation for other organisations and it would therefore be difficult to raise funds – we can't be expected to'. Two had professional fundraisers, 'We aren't skilled in it – you should get someone who knows'.

**What was the money spent on?**

With the exception of one person who was expecting to have to raise her own salary in future, all the VSCs had enough money to tick over on salaries, telephone, etc, but where they had to use their ingenuity either to raise funds or to 'tap in to the system' was in the developmental aspects of their work. If they wanted to extend their range of activities, encourage new projects or set up new schemes they had to get more money. Since no project can operate without at least minimal financial input, this is implicit in the nature of VSCs jobs. We were given examples of what they did with their 'acquired' money from whatever source. One organisation funded four salaried posts, a school which required gardening tools to use in the volunteers gardening scheme raised £200 by a sponsored walk, and the Jubilee Fund provided the facilities necessary for setting up a 'talking local newspaper' service for the blind, while yet another organisation bought two houses to use as group homes for discharged psychiatric patients.

Not only was cash in evidence, but donations in kind – one house for battered wives was well furnished by the VSC asking for carpets and furniture among local tradespeople.

Far from being gloomy about finance, the VSCs took a very positive attitude to the present financial problems. Firstly, having to look for a multiplicity of sources of finance gave more freedom. 'Agencies should look to a diversity of funding – if we only got money from the County it would restrict what we can do. Remember he who pays the piper calls the tune'. Secondly, the view was widely held that the present cut backs could encourage initiative and new ways of looking at problems. 'This could be the biggest opportunity the voluntary sector has ever had'.

People working at this level in other kinds of work would not normally expect to have so much to do with money. Not only were VSCs exercising considerable influence and skill in getting money, they also had a good deal of power in deciding how it was spent.

# CHAPTER 8
# BOUNDARIES

In the previous chapter, the impression may have been given that the VSCs had a completely free range, but of course this was not entirely the case. In this job, as in any other, boundaries do exist. They may be of a tangible nature – concerned with competence or accountability, or they may be boundaries created by the attitudes of other groups of workers. The 'attitude changing' we referred to in a previous chapter frequently included success in pushing back or eliminating boundaries.

'I'm very conscious that in every department we are only allowed in by the good offices of the professionals'.

Because we were conscious from our own experience as VSCs that this was a commonly held sentiment, we decided to ask a question which would test the VSCs feelings on the subject. This was the question relating to the work boundaries of the professionals and included subsidiary questions about trespassing and limitations on volunteers' work.

It was apparent that many of the questions in this survey were being asked of the VSCs for the first time, but this was certainly not the case with this question. It was clear that all the VSCs had thought about it before and at some length, and only three people had no response. Even where their experience was wholly positive, they were aware that this could be an area fraught with difficulty.

'Professionals appreciate us, because we do not overstep peoples' boundaries and always work closely with others'. 'I've had no serious difficulties, neither have the volunteers. The best volunteers are aware of where boundaries might be and of not trespassing'.

## What were the boundaries?

Working at the interface between many different professions as VSCs do, the boundaries which had to be taken into account could be very many indeed, not simply between professional, non-professional and volunteer but many subdivisions within these groups. A hospital VSC for example, had to take into account not just differing attitudes of professionals and non-professionals towards volunteers, but the differing attitudes to each other of occupational therapists, physiotherapists, administrators and nursing and medical staff, as well as technicians, cleaners and porters. A VSC in that setting had to be in possession of detailed knowledge of these boundaries before introducing a volunteer or risk an inappropriate placing. For a volunteer bureau organiser the knowledge of boundaries would be at an organisational level but just as essential.

These boundaries fall into two separate categories — what we might term the formal and the informal. The first group would be the legal and qualification boundaries — the power vested in local authorities to make a section order on a psychiatric patient or the competence of a nurse to administer drugs. It is interesting to note that very few of the VSCs responded in terms of actual boundaries and when they did it was in terms of accountability.

'The voluntary associate may do case work but the probation officer must remain in charge as he has accountability'.

With the informal boundaries however, it was a different matter. We received detailed and clear responses from many VSCs on this subject. This was both because they were anxious — either extremely so or just wary, and also because they had given the subject a great deal of thought. We identified two situations where informal boundaries were likely to exist. The first was where there was doubt about the competence of volunteers and the second was where there was a perceived threat to the professionals.

**Volunteer competence**

The VSCs were aware that some professionals had misgivings about the way volunteers operated. 'Volunteers can become emotionally involved and people were getting upset. Therefore the professionals distrust outsiders'. 'They certainly do not involve us unless they can help it, because they mistrust us'.

The VSCs were well aware that the volunteers had to prove their competence to the professionals. 'After some time the social workers saw the importance of what we did and how well we did it'. 'The other volunteer bureau had done the ground work and now people know what we can do. The professionals have been trained to use us'.

**'Threat' to the professionals**

The anxiety about volunteers' competence was one aspect of the perceived boundaries, but greater anxiety seemed to stem from what was universally termed the 'threat to the professionals'. 'I do see boundaries in the functions of doctors, social workers and nurses and in general if you even look over the fence they feel threatened'. 'Our very existence is a threat to some professionals'. 'The threat' whcih volunteers posed was expressed mostly in terms of status and self-esteem. 'As long as we defer to the professionals as the experts it's OK'. There was no doubt as to which group of professionals felt most threatened by volunteers and this was the social workers. An examination of the reasons (as given to us) for this, might throw more light on the subject of relationships between professionals and volunteers. It was in fact summed up by one VSC 'Voluntary work properly used is the biggest tool the professional can have – basically it's the untrained social worker and the less able social worker, of which there are only too many, who won't use volunteers. They're the ones who create professional boundaries. It's fear for their own jobs'. As it was, the fear was for loss of esteem and status on the part of professionals who might have spent many years acquiring qualifications. It required some considerable degree of self-confidence to be able to say as one probation officer did, 'I'm quite clear that lay people can do some things better than I can – let's use them for that' or 'We're not in competition really, we rely on voluntary help and couldn't do without it'.

As a profession, social workers seem to lack this self-confidence and perhaps that is the reason they came out as easily the most threatened group. There may be reasons for this: the profession is new, its own boundaries are not precise, the volunteers may be going into situations without day-to-day supervision and the definition of a social worker's role may be inadequate.

It should be stated that, of the agencies we were dealing with, social service departments were the newest in having contact with volunteers. It was our clear impression that the longer a scheme had been going, the more acceptable it became, and the further back the boundaries were pushed. 'There is a gradual changing of attitudes now we have shown we can be of help'. 'There are areas of friction between professionals and volunteers but these areas of conflict can be reduced when volunteers have shown their worth'. There is further reference to social workers' attitudes in Case Study D.

**VSCs function**

A lot of the foregoing relates to attitudes and this in turn to the personalities involved. The emphasis on the VSC function was very strong. We could identify three main strands in the VSC function vis a vis professional boundaries.

**1. Recognition of Boundaries**

The VSC had to identify what boundaries existed in the field of work and which had to be taken into account in the working situation. These might be formal or informal boundaries and some of the latter might be created by personality. 'You've also got to cope with individual personalities for example, people in voluntary work who think they know everything'.

Whether they were formal or informal, the VSC had to be aware of their existence and that they might indeed come from volunteers as well as from professionals. 'It can be the other way round — volunteers don't always take kindly to professionals. They can be resentful and suspicious'.

Having identified the boundaries which exist, the VSC had to choose whether or not to talk to the volunteer about them. A balance must be struck between preparing a volunteer for the situation he might encounter and possibly prejudicing him against the people he may be working with.

**2. Allaying anxieties**

The VSCs saw this as an important part of their role. 'Statutory and voluntary sectors can have a productive partnership but the voluntary sector must demonstrate this'. 'I've had bad experiences with volunteers myself so I know their (the professionals) fears – we have to dispel those fears'.

These anxieties might be either about the volunteers competence or about the possible conflict of interest between the two different groups. Anxieties about the former could be dispelled by what was several times called 'delivering the goods' – in other words running an efficient volunteer service. 'It took a long time for them to trust us, but general practitioners and psychiatrists now refer clients to us because we can and do deliver the goods'. 'There's no problem now – if they ask me for a good volunteer, they know I'll deliver the goods'.

The anxieties about the conflicts between statutory and voluntary workers were allayed by a process of building up trust. Emphasising that 'professionals and volunteers are just not in competition' as an important part of the VSC function. It seemed that once an understanding of the complementary nature of the volunteer contribution was understood by professionals, and once fears about its being supplementary to their work were diminished, the more ready professionals were to enter into the 'productive partnership'.

Those VSCs who reported this 'working together' were strongly representative of those who had been in post for over three years and gave emphasis to the fact that it takes time to build up relationships and trust. Time alone though will not produce results and the third part of the VSC's function which they discussed in relation to boundaries was one of education.

### 3. Education

Another part of their work which helped reduce and push back the boundaries between the volunteers and the professionals was the process of education. 'Initially social workers see volunteers as odd job men, but if volunteers can demonstrate that they can take work forward, some social workers come to the view that the volunteer has a special contribution to make. It should be emphasised more in social work training that no one of us has all the answers, but that by working together we can find some of them', or 'If I were running a course (for social workers) I'd emphasise the volunteers' importance as a matter of principle'. Getting to know the personalities involved was seen as a good way of 'dispelling the inevitable inter-agency fantasies which are bound to exist'.

### Summary

The VSCs then, saw themselves as having these three functions where inter-professional boundaries were concerned, recognising them, dealing with anxieties about them and reducing them by a process of education. It was not enough though for the VSC to recognise this function – it was important that it was conveyed to the professionals in an acceptable way and the terminology used to describe how they did this adequately emphasised the care they felt they had to exercise. 'As far as VSC areas of limitation are concerned, I carefully tiptoe whereas I'd like to bulldoze'. 'You've got to have really good relationships and be very careful not to tread on toes'. 'They can be touchy, I never overstep the mark'.

As well as allaying anxieties and pushing back boundaries, it was necessary also for VSCs to accept what volunteers are allowed to do. 'At the moment it's my interpretation of voluntary work, tempered by staff and by volunteer's expectation. I want to alter boundaries but I'll accept that some limits will always be there'.

# CHAPTER 9
# NETWORKS

There were many advantages in drawing our sample of VSCs across the range of agencies which were involved in recruiting and placing volunteers, not least in that it allowed us to discover something of the networks operating between the individual VSCs in different agencies. The networks of course did not stop there, but fanned out to include contact with a multitude of other organisations both statutory and voluntary, local and national.

In order to understand the base from which each individual established these networks, we included a question relating to his position within his own set-up. We had already asked the VSCs to talk about their innovative role and now we were asking them to set the context within which this innovation took place. We asked them about the structure of their organisation in theory and in practice. We needed to know to what extent they were bound by formal rules and what range of discretion they had, both in everyday matters and in long-term policy formulation. We wanted to know where they had to go for decisions, to whom they were responsible and accountable, in short what were the constraints on them in doing the job. Our shorthand for this section was 'the constellation' and part of the information we were seeking was the position the VSC occupied in his own and neighbouring star systems. We wanted his estimate of whether he saw himself as pole star.

There seemed to be very few constraints on the way the VSCs operated. Three were too new in post to be able to make an assessment but the remaining 60 universally reported total freedom in day to day matters.

'It's all done on a personal basis – I have total discretion in every day matters'. 'Day to day I have total discretion'.

Though they all reported wide discretion in day to day matters, discretion at policy making level is different and it was at this level that any differences showed between one VSC and another.

However, even at the policy making level, many of the VSCs appeared to retain considerable autonomy and 24 out of 60 reported total discretion here also. 'The volunteers see me at the top with a huge range of discretion. I don't need to ask the management committee because there is usually a precedent, I might wish to inform them'. 'The committee only *thinks* I go to them for decisions. The former secretary said "You've got carte blanche" and I use it!' 'I'll do anything that needs doing and justify it afterwards if it makes sense to do it that way round'.

Some expressed their feelings very strongly. 'The constitution gives me almost total authority. I've never avoided the fact that I am in charge. People are looking for direction'. 'In fact, I am in the risk business with exciting opportunities for creative and innovative work which are boundless. If you have got the perception and tenacity and are prepared to take the comeback, "go on and do it" is my motto'.

It might have been expected that the unpaid people would be less constrained by formal arrangements and this proved to be the case, though only marginally so. Of the 24 people who reported complete autonomy even at the policy-making level, 10 were unpaid (representing half of the total of unpaid VSCs) and 14 were paid (representing one third of the total number of paid VSCs).

In addition to these, some other VSCs also reported that 'they did it their way', but as a matter of course expected (and got) 'a rubber stamp' from elsewhere, usually from a management committee. 'The management committee is a rubber stamp. I never have any trouble from them'. 'Usually it is a rubber stamp — 50% of the management committee do not know what it is about anyway'. 'Policy decisions would be taken higher up in theory, but in practice I put an idea forward and it goes through 8 times out of 10', — not quite a rubber stamp!

The opinions of 25 VSCs remain to be accounted for and these formed a group which either needed or sought the support of another person or group. Sometimes their reasons for seeking support were ones of expediency. 'I

need approval for spending over £300' or 'If I needed money I would go to the co-ordinating group who would take it up with the area health authority or the Director of Social Services. However it would misleading to assume that most VSCs thought their management committees were ineffectual, and committees or superiors were often regarded in a positive way by this group. Their attitude was well expressed by an organiser in a voluntary organisation who said, 'The management committee functions as a watch-dog and liaison group and other organisations are represented on it. It is a means of giving a balanced outlook – stops overlapping and diffuses information. I need the support of the committee – otherwise I feel isolated. I feel the need of the approval of the Committee – otherwise the buck stops here'.

Indeed one or two felt they would like the management committee to take a more positive role. 'I would like them to contribute ideas and initiatives' and 'I would like then to be more decisive'. As they were often a 'one man band', the majority of VSCs did not occupy a formal position in a hierarchy, but nevertheless they were part of some structure. Two main structures were identified, the management committee or the department within a larger organisation. Even where this organisation was strongly hierarchial like the health service or social services departments, the VSCs retained a marked degree of freedom. This was both of action and freedom from constraint. The over-riding impression which came out of the answers to this question about the VSCs position in their own organisation was that they all had a considerable degree of autonomy. They achieved this either by working within the system or by actually manipulating it. It was this autonomy which gave them the freedom to take the initiative which was so apparent in the discussion about influence and achievements. At the end of the day though, for most VSCs there was someone to whom they were finally accountable.

Having discussed their position within their own structure we broadened the discussion to take account of the contacts they had outside their own organisation.

The information we received is highly complex and we are presenting it in two stages. The first is to refer back to the four individuals whose work we detailed in Chapter 5 and look at them, this time in terms of their working networks, and secondly a discussion of more general points.

## CASE STUDY 1

**Management Model**

**Director of Counselling Organisation — unpaid**

He had held this position for four years and was a university lecturer by profession.

He had regular contact with social services and youth services, twice a week on average. He usually spoke to the director, deputy director or equivalent. They were all dealing with the same clients and he had never experienced any difficulty about confidentiality.

He was in contact with group practices 'whenever necessary', concerning individual clients. He usually spoke to a doctor, a social worker or to a community nurse — rarely to a health visitor.

He had very little contact with local councillors but wanted to foster these contacts and had asked them to a social function recently.

His other regular contacts were mostly with counselling and advice agencies, though his organisation was a member of the Voluntary Service Council, and he received news of other voluntary organisations through this.

He was concerned that his organisation must be seen to be independent — never too strongly identified with one group or another, because it was essential that they must identify first and foremost with their clients. He occasionally attended the Annual General Meetings of other voluntary organisations and regional and national meetings of his own organisation.

## CASE STUDY 2

## Social Work Model

**Hospital based VSC. Paid half time**

Regular meetings and telephone contact with District VSC and with VSCs working in other hospitals in the area. She had no regular pre-arranged meetings with the nurses or the administrator in her hospitals but could see them when she wished.

She was a member of the management committee of the volunteer bureau and about to become its chairman. There was a local inter-disciplinary group which met regularly and which she always attended. Churches, voluntary groups and statutory services were represented at this meeting. She also attended the three times a year meeting of the Association of Volunteer Co-ordinators and had been its treasurer for two years. She also met the local community development officer often, and had contact at the Health Centre in her area with health visitors and district nurses.

Part of her work was running two stroke clubs and she had weekly contact with speech therapists and occupational therapists.

She found this network absolutely crucial to her working life. 'You can feel very isolated in this job unless you are in contact with other people who have the same aims'.

## CASE STUDY 3 — Community Development Model

**Community Development Officer. Full time paid**

This particular community development officer had rather less in the way of networks than other community development officers in the sample, and a reference to his view of community work will indicate that this would be consistent with his thinking.

His fullest contacts were with the action committees of groups he had formed for the community hall development and playgroup schemes.

However, he did have interactions with local councillors in the bargaining for the land and subsequent developments with voluntary organisations like the Lions and Round Table for manpower and money. He found the youth and community services a helpful source of willing hands when required, to help in one-off situations. His recent efforts to get a volunteer bureau established had brought him into contact with the group practices, but through HVs and patients as the doctors themselves had not expressed any interest. His contact with the hospitals was mainly to do with one-off requests, for transport or a hospital visitor.

While acknowledging the value of a network of contacts, this community development officer felt that it was less vital to his function than did many other VSCs.

## CASE STUDY 4 — Entrepreneurial Model

**Voluntary organisation based. Full-time paid**

The Organising Secretary of a voluntary organisation who was the subject of this case study had been in post for only 18 months, and as the job had been newly created she had had to build up her networks from scratch.

She reported close links with the social services department and she said that the social workers regarded her as a fully fledged partner. This had not been the case at the outset and she had had to work hard to develop her contacts there. She was satisfied that these interactions were worthwhile. The volunteer bureau was in the next room and she had frequent and friendly daily contact with the organiser, and she was one of those who told us that volunteers were exchanged between them.

Her own management committee included representatives of the Red Cross Mind and other local organisations and although her contact with them was on a slightly less informal note, she nevertheless felt she could go to any of them as the occasion demanded. She in turn served on other committees, of the Blind Association for example.

She had negotiated with the local council for the use of one of its flats as a venue for her psycho-geriatric day centre, and she had also established good relationships with officials in the housing department. Regular, though more modest contacts were also in evidence with the group practices through the health visitors, and she was in the process of extending her network to include the medical social worker at the hospital. This was likely to become a close link as she hoped to start a scheme for the community care of discharged elderly hospital patients. Cordial relationships had also been developed with schools through their community programmes and they had proved to be a fruitful source of funds and help, particularly with the talking local newspaper. This VSC said, 'you've always got to cope with individual personalities in a job like this', and it is important to bear in mind that the successful management of relationships is essential if the great benefits to be derived from operating within a network are to be reaped to the full. An entrepreneur would be expected to use any and every means to further his ventures and the network would provide an important resource, which in this case was fully exploited.

**The overall picture**

It was clear that the networks within which these and the other VSCs operated were as wide and as deep as the circumstances of their work demanded. For example, one VSC wanted to start a day centre but could find no suitable accommodation. After attending a working lunch at which a variety of interests were represented, the warden of an adult education centre offered help, both in the form of an excellent room, finance and access to people who could help. Another VSC, this time hospital based, met a ward sister at someone's farewell party, and in the course of conversation about retirement in general, came to a mutual decision about the need for a social club for geriatric patients.

We were able to identify four different sets of relationships which constituted the network. These were based on a common interest, local circumstances, peer group contacts and national or regional contacts.

The first of these, the relationships based on community of interest, tended to be the most intensive. 'Extensive interests because of a cluster around issues of housing for example, or the physically handicapped. The depth of relationships with both statutory and voluntary organisations is built through a community of interest and rubbing shoulders. We build up muscle in certain fields through being flexible and persuasive'. 'I know the people with whom I have interests in common and would exchange information and needs. I would expect to set up co-operation and schemes together'.

While these relationships based on mutual interest could be very intensive they could be subject to change and might eventually take a less prominent place in the network once the problem that brought them together had been solved.

Another part of the network was the local element – what was termed 'knowing the patch', in terms of being able to identify the needs of the local community.

One volunteer bureau organiser said 'I know people here at all levels – that is

essentially local knowledge', and another said, 'I know everything that is going on here through the doctors and the church'.

When appointed, VSCs were aware of the need to know the patch and would usually see it as their first priority. 'I think I have contacted every voluntary organisation and every statutory one in the 12 months I have been here. It was the first thing I had to do'.

Knowledge of the area was often given as reason for being able to get things done. 'You see I know everyone and I always contact a *name*'.

A considerable amount of cross fertilisation of ideas occurred as a result of the networks which arose from what we might term 'VSC group' contacts. The contacts could be based on common local interest, common subject interest, or both. As well as departmental and inter-department meetings, we were told about regular community lunches, study days, problem solving meetings and social occasions at which the VSCs regularly met others in the field. 'I have been to those local lunches – they are very interesting and they help'. 'I always go to community council meetings – it is good to meet others with the same interests'.

The group meetings might be locally based or they might be on a regional or national level. There existed a regionally based association for VSCs and 8 of the sample (principally health service) attended regularly and several others more or less frequently.

This was the Association of Volunteer Co-ordinators (AVCO) which had grown out of a regional group of the National Association of Voluntary Help Organisers (NAVHO). In 1977 the VSCs who used to attend the NAVHO meetings decided to break away and form a separate organisation as they were keen to encourage a wider range of membership than NAVHO was committed to at that time.

The two major national bodies in this field are the National Council for Voluntary Organisations, a co-ordinating body for voluntary organisations which provides a wide range of services and also acts as spokesman to

government on issues of policy which affect these organisations, and The Volunteer Centre, a resource agency on volunteer and community involvement which is mainly funded by the Voluntary Services Unit at the Home Office and is concerned with volunteers in the statutory services, voluntary organisations and in the informal or private sectors. Both national bodies were mentioned occasionally; The Volunteer Centre was mentioned nine times – the majority being favourable. 'The Volunteer Centre is good – it works well through people. We were not keen on it at first'.

**Quality and range of contact**

We were interested of course not only in knowing how extensive the network was, but also in the quality of the interactions which took place. 'I am linked in a multiplicity of capacities', said one VSC and this multiplicity extended to the quality of contacts. They ranged through 'ringing up to arrange a driver for Monday' to very intensive relationships based on searching for personal growth or solutions to problems. 'The quality of contacts is good, by and large. Mostly casual and informal, but I have some formalised ones too'. 'Some are formal, some are informal – the quality is high in terms of trust'.

As well as a wide range of quality of contacts – there was a wide range in the level of contacts. The VSCs felt themselves free to make contacts at whichever level was appropriate to the problem in hand. 'A great range – from directors to caretakers. You have to be able to contact everyone and relate to them'. 'So much range and so much contact, from titled ladies to ex-convicts'.

People used their common sense, local knowledge and political nous in deciding which level to approach and also in what to do if they did not like a decision. One volunteer bureau organiser said: 'I would try to find someone else but you would have to be careful, because it would not be likely to improve relations locally if they thought you were going over their heads'.

In general though, the VSCs did not get into this situation because they made their initial approach at the most appropriate level. One VSC said (of not

liking decisions): 'This does not happen. My background is pretty important in that I know where to go. I know what level to go to for what'.

As well as information about what the networks were, we were able to form impressions of how they arose, because of the examples we were given.

For some VSCs a network of contacts was already in existence when they were appointed. 'Some of my contacts are historical – I inherited some from the previous post holder' and some brought their contacts with them from a previous job. 'I used to be a social worker and I brought those contacts with me'. Whatever the state of play when they took up the appointment, all VSCs would set out either to renew the contacts which were there or to make new ones. There was no question of building up a network which then remained static – the VSCs continued to make new and varied contacts in response to the different situations they encountered in their work.

For example, one youth worker had had no contact with local councillors and indeed had not seen them as a relevant part of his network, until the lease expired on his premises. After that he was in constant touch with council members in the search for somewhere else, and he commented that he now regarded local councillors as part of his network.

Sometimes the network was expanded by responding to an outside stimulus of some kind. An Age Concern VSC reported that she would never have dreamt of including an electricity board official in her network until some of her clients started to receive heavy electricity bills. She contacted the relevant official for advice, and knew that after this she could talk to him at any time.

Contacts were not always made on the VSCs' initiative. 'The speech therapist (whom the VSC had not met before), heard of the idea at a conference in London and asked me to help'.

Through this contact a wide range of others were opened up and this was often the experience of the VSCs.

The biggest single factor in setting up and expanding networks was the VSC group meeting of whatever kind. This was widely recognised by VSCs. 'I always try and go. The speaker may be a trial, but you always meet interesting people'. 'A lot of meetings go on here. I go anywhere I am asked -- you never know what useful people you might meet'.

It might be expected that personalities would be important in the quality of the network and there were many examples quoted — summed up in the phrase 'We just get on well together' but it was perhaps surprising that the VSCs felt personally supported by the network. It gave them confidence and stopped them feeling isolated. 'As regards the quality of our interaction, there is someone in that organisation and we support each other — it may be casual but it is there'.

**Trades Unions**

Because of the very nature of the work in which they were involved, VSCs could be expected to regard Trades Unions as part of their network and we included a specific question about this. It emerged that VSCs fell into three distinct groups when it came to talking about Trades Unions.

The first group consisted of more than half of the VSCs who reported no contact with Trades Unions. 'No contact' was interpreted in three different ways. Firstly there was a group who could not understand what relevance it had to them. 'Good heavens, no'. 'You must be joking'. 'I never thought of it until I read something from The Volunteer Centre'.

Secondly was the situation where the VSCs had not got round to it yet, and they often felt guilty or neglectful when this was the case. 'Not at all — I suppose I've just not got round to it'. 'We often talk about it but don't do it. We neglect trades unions as a source of support and recruitment'.

In this group there was no apparent antagonism but trades unions were clearly not on top of their priorities. The second group had had some contact with the trades unions and they could be described as having a neutral attitude. It might be a case of armed neutrality: 'I keep out of their way and I'm careful

not to tread on their toes, therefore I don't have any aggro. The most important thing is not to be seen to be strike breaking!'. It might be simply a question of keeping a distance so as not to 'rock the boat'. This feeling perhaps reflected the VSCs attitude to trades unions as a delicate flower and a situation so new that the ground rules have yet to be laid.

Last, there was a group of VSCs who took a more positive attitude and more actively participated. This participation might be pragmatic or it might be guided by principles, but it was more often the former. 'I have a member of the union on my committee so it's OK'. 'The trades unions vary like any situation. I have good response from the General and Municipal Workers' Unions. It boils down to relationships with that individual personality. That is the key to your successes – not just contact for problems when they arise – I talk personally about other interests, in cricket for example'.

When it was guided by principles there was usually a strong sympathy for trades unions point of view. 'You always get the spectre of cheap labour therefore you've got to be sincere and tactful'. Or more actively 'I ran a course for them and recently had a student here'. 'Trades union representatives on committees ought to be a resource – local members could be called on. After all, active trade union members are concerned for their fellow men and hopefully could be useful in community as well as political terms'.

A hopeful note indeed, and we encountered only three VSCs who expressed antagonisms – and even one of these had offered to give a talk for trade union members at one of their meetings.

It is important to point out the difficult position of VSCs in times of strikes or industrial action, since while they themselves might not be antagonistic to trades unions they had to take in to account that their volunteers might well be. 'I would say the people I deal with (ie volunteers) are not in sympathy with trades unions. For myself, I think trades unions fear the use of volunteers rather than professionals, as this means a loss of jobs'.

In a time of dispute the VSC is often the member of staff who is in contact with members of the public and may find the position very difficult to maintain. There may of course be, and often is, a conflict between VSCs personal opinions and the opinion of the managing or employing authority. Witness one who said 'At the time of the strike I felt every Colonel Blimp in the county was on my phone offering to help me break the strike'.

It is perhaps misleading to place too much emphasis on the fact that more than half had no contact since in the context of some jobs, in voluntary organisations for example, it would not be expected. Naturally, most attention was given to unions in the health service where they were strongest, and VSCs at the sharp end appeared to have made a start to thinking in a positive way.

**Summary of networks**

It might perhaps be expected that one of the results of the extensive and wide ranging network within which VSCs operate might be that they would pass volunteers on to each other. However, this rarely appeared to be the case. An explanation for this may lie in the fact that volunteers feel a loyalty to one agency. They may be involved with several different organisations at the same time, but there appeared to be little movement as a result of the VSC network. This is not to imply that volunteers always arrived at the right place at the first attempt – they might already have applied to several agencies.

Establishing and maintaining their network was a crucial part of the VSC function. It was the launch pad for much developmental work they wished to undertake. As well as providing the basis without which developmental work could not take place, there was a spin off in the form of support for the VSC, which led to increased confidence. The need to draw support from each other was very strong and found expression in the VSC group meetings which had been established.

## CHAPTER 10
## WHAT DO CO-WORKERS THINK OF VSCs?

Almost at the end of the interview we asked our respondents what they thought the staff who worked with their volunteers felt about the way VSCs operated. We have recorded what they *thought* co-workers felt.

It is not to overstate to case to say that the majority of VSCs thought their co-workers had very little idea about their function. One said 'It (the attitude) varies very much, from very supportive through gruding acceptance to nothing at all'. This does indeed reflect the range, but there was a much greater emphasis on the lower end. 'I'd be surprised if they thought at all'. 'They wouldn't be aware of what I do'. 'God; I don't know if they take me seriously', 'I don't think they think about it. I honestly don't'.

Comments like these reflected those co-workers who did not think very much about the VSC function, but there were those whose opinion was thought to be actually disdainful. 'Staff feel it's complicated and unnecessary'. 'They think we have lower status and are certain we produce work of inferior quality'. 'Some think I'm an upstart and an alien'.

Two VSCs reported ruefully, 'They think I'm mad'.

It would appear from our respondents that gruding acceptance came when co-workers had had some experience of the tangible benefits that could be gained 'I think all parties appreciate the work openly – I'm quite happy. I've had a lot of stick over the years but now my work is appreciated'. 'The (social work) students who came to us were surprised at our level of know-how and skill and that's helped a lot'. 'I suppose they see the need for voluntary help and someone to shout at if it doesn't work. I hope they'd see it as helpful and on the whole I think they do'.

Apart from one VSC who said 'They are grateful for all we do', the above statement represented about the most positive feeling that was expressed. However, this was balanced by less favourable comments, for example:

'I think fairly low. I think they think they could manage without volunteers. Some are most appreciative but not the majority'. 'The occupational therapists are happy. I'm a to and fro link. As far as nursing staff are concerned it's a one-way street and I feel in the way'.

A feeling emerged from some respondents that fellow professionals or co-workers respected them as persons, rather than in their role as VSC. 'People take me seriously because I've been a social worker — I'm not just a housewife — I have an advantage'. 'In social services, I'm there and they see my work and respect me'.

When we encountered VSCs who had been in the work for some time and been able to demonstrate the effectiveness of the contribution that they could make, they thought the opinions of co-workers had improved accordingly. 'I would have thought that they (co-workers) were practical people who would be pleased to see this post, if they felt they could rely on the service and the right calibre volunteers and be confident of the standards. To their eye this type of work is still new and there isn't a feeling of total confidence yet, and to be honest there are times when we are not giving a uniform standard'. 'I think to a certain extent there is a feeling that it's a frill but those people with good experience of volunteers recognise the worth of the VSC. I'd like to hope the former category are a decreasing number'.

It emerged again, as in response to other questions that VSCs saw it as their role to educate their fellow workers from an initial negative reaction, through the grudging acceptance stage to a full and positive acceptance.

'It's a thin line — you have to be careful you have to educate people to change'. 'I think it's an important resource and through my work so do my colleagues. I'm a senior after all'.

One VSC expressed the need for his job thus: 'Staff are still suspicious — without me they'd have little confidence in volunteers. That's why it's vital to have paid organising staff. The statutory people identify with me as their colleague and that helps their acceptance'. These comments are strongly in line with those reported earlier about changing attitudes.

## Case Studies

Built in to the original research design was the idea of interviewing professionals who worked with volunteers, to gain insights into their ideas about VSC function. We hoped to get an idea of how they saw the VSCs work, whether they regarded the VSCs contribution as important to their own work, and finally the state of their relationships and the quality of their interactions with both the volunteer and the VSC.

Our 63 VSCs were such a diverse group that it would only be profitable to focus down on those whose working situation lent itself to an investigation of this kind. Accordingly we chose four different VSC situations and conducted interviews with co-workers in each case. Additionally, four interviews were conducted in a hospital without a VSC, in order to get a picture of a similar situation where staff were operating without one.

A check list of topics covered in these extended interviews is in Appendix 6 and the interviews are presented here without further comment, and without editing.

CASE STUDIES

### What professionals think

Five separate VSCs have been selected and for each of them three or four interviews have been conducted with other professionals who are assumed to benefit from their work.

### Case Study A

This was a paid VSC attached to a volunteer bureau in a new community. Interviews with

1 Medical social worker in a local hospital
2 Health visitor
3 Day centre organiser
4 Social worker

**Interview 1**
**Medical social worker, local hospital**

She had been in post for one year and have previously worked in a hospital where there was a long established VSC post.

'Well, to be honest, I was really amazed when I came here and found there was no voluntary services organiser – I'd been so used to it before. It's not something you'd ask about of course – at your interview or at first, but I remember a colleague bringing a problem to me, and I told here to go to the voluntary services organiser and she said there wasn't one. I suppose I just thought all hospitals had them.

I got to hear about the existence of the VSC at the volunteer bureau through transport – somebody requested transport from them. They have invited me to one of their monthly meetings, but I haven't had time to go as yet.

At my previous hospital I suppose I had contact with the VSO about every other day – and you'd see her at coffee etc. I believe she had Head of Department status, so you'd see her at meetings and she'd be consulted. You see that's what's difficult here – you've got to have someone doing the organising or else you can't have volunteers. You can't expect nurses to do it – look after them and interview them. But of course if people haven't worked with volunteers before they don't really think about how they could help.

Anyway, I think things have improved since the VSC is available in the community. At least we've got someone to ring about transport problems – or if you've got a family needing support you can ask for a visitor. Mind you, I don't think we do it as much as we might simply because we are not switched on to the idea.

One or two of my colleagues have their own 'hotline' to people in the community who will help – with discharged patients for example – but mostly we would contact the volunteer bureau if we contact anyone, that is – the majority of the time we don't need to.

The volunteers I worked with before, I knew had been vetted by the VSC and I'd have some personal contact with them – now I don't and you've got to be careful what you say about a patient of course. Not that I've had any problems really – just once when a woman came to work on a children's ward and we later found out she had a child who died there. Usually these things can be resolved. I think my colleagues at this hospital are a bit over anxious – seeing problems about having volunteers in the hospital when there aren't any. I think there has been some trade union resistance here too. Of course it's understadable – they fear their jobs are in jeopardy. Of course that isn't the case, but you can't deny volunteers are a help and staff are bound to use them in any way they want to if they are short-handed.

Basically here we only think of volunteers as a last resort – mostly for transport or the occasional visit. If you have a VSC nearer at hand you can plan things more. She can also be at your meetings.

That's why you need status – I don't know what the grade of the VSC at ..... hospital was, but she was definitely a head of department and that's important, she was present at meetings and any problems were ironed out. There were some people once from a pressure group and they were really just putting over their own ideas – not really wanting to help the patients. With the situation here – if you had any probelms with volunteers, I don't know that we'd go to the co-ordinator and tell her – we'd be more likely just to let it drop and not ask volunteers again. I suppose I see this VSC as a filler of gaps and solver of my immediate problems, rather than sort of an in built into the system. For example we still have to liaise directly with the Red Cross and Womens Royal Voluntary Service – I don't see her doing that for us. I'm not saying she couldn't – just that I don't see her in that way.

I suppose the training a VSC needs varies according to the situation. In a hospital they should have knowledge of procedure and of course in a social service department knowledge about social work. I think I've heard somewhere that they should have a degree in public or social administration, but I shouldn't think it's necessary. What they must have is the right personality – be able to mix and above all, *tact'.*

PS The following week the medical social worker rang the VSC at the volunteer bureau and arranged to go to one of her meetings.

**Interview 2**
**Health Visitor**

Based in a local health centre. Six years in post.

'I think I just heard about the post from the VSC herself — or was it from the Nursing Officer — I've no idea really. We used to ask the volunteer bureau, but since there's been a paid VSC they've been a bit more organised and we ring up with our problems.

She holds informal meetings, I believe, and I've been to one, but I have a clinic on the day so it isn't possible really. I mostly ask about transport but they've been very helpful about some immigrant families too, and they help at clinics. Most of the ones at clinics I got myself and I've know for years.

I think volunteers are essential. Without them people would have to find their own transport or we'd go hairless. Only yesterday I had an urgent need for a volunteer driver and the VSC found me one just like that.

One of the great difficulties I see about volunteers is that they can be unreliable — so many are available only for a short time. That's not a criticism — one understands. But some of the older volunteers never let you down — it's a generation thing.

I've no personal experience of this but I've heard of cases where health visitors felt they were being told what to do — where the volunteers didn't understand their role. Some of my colleagues would be very selective about who they asked to help because of this problem. We are grateful for the help but occasionally we'd like the medical side to be our job — perhaps sometimes they overstep the boundaries.

Personnaly I'd go to the VSC about this — I'd gauge just how much I could say — I wouldn't make trouble and I'm sure she'd deal with it.

The doctors in this practice have no idea that volunteers exist — they just wouldn't think about it — wouldn't even dream of *beginning* to think about it.

I think it would be helpful if VSCs could be attached to a health visitor for a while to see the problems because they don't always know what we are up against. But of course you are right up against confidentiality. Patients do often confide in volunteers but we can't break confidentiality ourselves. I would tell the VSC if I thought a problem might come up but I probably would avoid using a volunteer if I thought it involved breaking confidence.

I've no idea how the VSC post is funded – haven't a clue. Social services has something to do with it I think. I shouldn't think she has much influence on decisions – I can't imagine people taking much notice of what volunteers say. If any of them criticised here they'd be out on their ears. Even the GPs don't know what we do, so volunteers certainly don't. We could learn from volunteers I think, though, if they were tactful enough not to put our backs up.

I can't imagine there would ever be Trade Union problems – surely everyone wants the best for the patients'.

**Interviews 3 & 4**

The other two people interviewed – a senior social worker and a day centre organiser reported that they found the VSC post very useful. They had infrequently, informal contact with the VSC but both said they would phone her if there was any problem – either if they felt she could help or if there were problems with volunteers. Both however, were anxious to point out that they retained the right to select their own volunteers and that the VSC was only the referring agency. They both also said that by no means all their volunteers were recruited through the VSC – 'I found a lot myself you know – in fact the ones that stay are usually mine'.

The day centre organiser said 'Though I don't use her much myself, I know other people are always ringing to get help – it's part of the local scene'.

The overall impression left by these four people was that they found the VSC a useful addition to their working lives – though not in any way crucial. This was somewhat in contrast with the opinion of the VSC herself – who had reported that she felt she was now indispensible and indeed had given me the names of these four people – the ones she felt most benefited from her work.

One explanation for this may be that much of her work in fact went unnoticed by the other professionals – once a regular volunteer activity was established for example, it might tend to continue with no further input from the professional.

Another explanation might simply be time. This VSC had been in post just over a year, much of which had been spent in establishing relationships, and it may be that her feeling that she was 'the hub of things' could prove to be true when these relationships were more strongly established and the VSC work more recognised by the other professionals.

**Case Study B**
**Acute District General Hospital**

Interviews with two sisters and one social worker. 34,000 patients are seen each year at this clinic.

VSC in post eight years.

**Interview 1**
**Ward Sister**

'The VSC is very important to the work of this department. She has great gifts and I'd like to see her at Buckingham Palace – she is one of life's givers.

Before her appointment we didn't have any volunteers and it's made a tremendous difference. I really don't know how we could have expanded. Nothing (with regard to volunteers) has gone gravely wrong – we had difficulty with one particular boy who thought he knew it all, but that was very minor.

Without the VSC we were so pushed, the patients were not getting the attention some of them needed, for example you might need to send someone across for X-rays and a volunteer would go with them. We're such a busy department that we desperately need spare pairs of hands.

We would just not have the time to do anything about having voluntary help. We have good liaison. I know her so well – she leaves us to get on but she's always there if we need her but it's true to say we've never had real problems. The friendly basis she operates on is ideal. In this clinic there are 9 doctors, 3 secretaries, 1 sister, 2 staff nurses, 2 SENs, a receptionist for four hours per day and four or five testers, so you can see there's a lot of staff but they're all concerned with their bit of the patient, not the whole patient.

As far as work boundaries are concerned, it's a difficult question because sick human beings are frightened – the nurse does the injection, the doctor diagnoses, the tester uses apparatus and so on – the limitations are there

because it's a specialised field. In teaching, medical students are given very little insight and I think the presence of volunteers and seeing what they can do makes them a little wiser and that there is something more in making people healthy.

I see the volunteers as an essential part of our team at everyone's beck and call, there have been no complications of any sort – they're most willing and we treat them as one of ourselves – a solicitor in his late 20s, school kids and one or two older people – all sorts. We have only one rule for volunteers and that is that they don't look at the patient's notes. They are our extra pair of hands, doing clerical work, answering the phone, getting tea, fetching X-rays. I don't like to think of them as gap pluggers, although I suppose they are in a way but paid people wouldn't be free to dodge about always doing differing things.

They are a positive benefit in a very busy department you need at least one extra pair of hands in each clinic. I'm saying what a great help volunteers are, but of course none of this could happen without our VSC. She's a very exceptional person'.

**Interview 2**
**Ward Sister**

'This is a men's acute medical ward and we are very busy all the time. Before the VSC was appointed we had no extra help at all. They certainly never consulted us at the ward level before they made the first VSC appointment.

I have been greatly helped and I have frequent and informal contacts with the VSC more on the level of chatting about what's going and any problems we may have.

We seem to have good and super people as volunteers and they save the nursing staff on non-nursing duties. Some pateints are here for as long as six months – a lot of long stayers and I can tell you it does the patients good because volunteers have time to chat which the nurses certainly haven't – we're very often short handed. Volunteers help also with things like helping to shave. I'm particularly grateful for eveing helpers – they even give a hand in bed making, they do flowers and menu cards and a host of small things as well as being a friendly face around the place. I think volunteers often have more to give to the patients than we have because they might be in the same sort of job. The majority do have regular visitors which makes it all the more important for the others to have someone to call their own.

I do think that volunteers complement staff and our VSC is very hot on making that plain to both the staff here and the volunteers. How the role of the volunteer develops resides in the ward itself. If you bother with the volunteer and try and help them they become independent and feel wanted and they are part of the team.

There is the big advantage to having the volunteers selected for you – with a hectic nursing schedule like we have here we'd never get around to finding volunteers, let alone making sure they'd fit in OK.

We have no definite line of demarcation in what volunteers can and can't do. It depends on the person as to what they undertake. We had someone who

came in every Friday for six years and they did minor nursing duties – you've got to take people on their merits. Some are squeamish and wouldn't like to do something like cleaning dentures. It's very much a case of doing what jobs are there – we've no job list.

I can't think of anything our VSC could do that would improve the service. We're very well looked after. She has emphasised that it's what we put in the way of welcoming the volunteer that we get out of them.

I think a little preparation and a rundown on how a ward works is useful but basically it's (the VSC's) judgement of people, her handling and assessment and the insight which she has.

We wouldn't be without our VSC I know it sounds repetitive but it's good'.

**Interview 3**
**Social Worker – in post 2 months**

'I have been in post for only two months and so I haven't a lot of experience of this hospital's VSC. My previous job was in a social services department and I'll be able to make some observation about the general idea of having a VSC around and perhaps it will turn out that I can spot some parallels.

Of course I can't comment on anything like how this department functioned before she was appointed or how if at all volunteers were involved.

My main contact so far with the VSC is for volunteer drivers. The situation is that one of my areas of concern is with mothers and babies particularly mothers of premature babies. Basically if we couldn't lay on reliable transport the mothers would not be able to visit so frequently. Without their service there might be difficulties in bonding and there is thought to be a connection between a lack of early bonding and child battering later on. The precise reason is to assist in bonding and I encourage the mothers to come once a day, so you can say at any one time there are four or five referrals, mostly for mothers from country districts where public transport is so limited. If the visiting is to continue for some weeks and it often amounts to that sort of time scale, then even with a reasonably good public transport system the mothers might be inclined to miss coming, particularly if there are other kids in the family to be cared for. Of course once the pattern of daily visits is broken there is a tendency for gaps between visits to develop – with the best will in the world. It would be very worrying if this happened, because apart from anything else the mothers get to know each other when they're on the ward and that's a good thing.

This transport system is wonderful. They (the drivers) all come through – and these volunteers get to know the mothers in much greater detail than I do.

The VSC is part time of course but they have an Ansaphone in the office and that is crucial to the efficient operation of the system. I suppose I do treat the VSC as a service provider.

Though not a vast amount of work is done. I wouldn't envisage doing it. She gets to know her volunteers and matches them to the job they're to do. Her's is a specialist role and I see it as quite distinct from what I'm doing. I don't think boundaries come in to it, volunteers can be useful – they can be manipulated by patients and need guidance – this does not refer to the drivers but I suppose it could happen that a driver got put upon.

Speaking from rather limited experience I'd say this (the VSC post) was an extremely useful to my work and as I said earlier that there seems to be a link between early bonding and later child battering and therefore anything that encouraged the mothers' visiting is to be welcomed.

As far as a more general view of working with volunteers, I can draw on my experience in my previous job (in a different part of the country) and that experience showed how important the VSC is in ensuring that volunteers are properly managed. Volunteers need guidance or they will find themselves floundering around in other peoples' problems without the training and know how about handling this. It all depends on the VSC and her/his ability. What happened my last job was that the volunteers were judgmental and interfered with my clients. For example, it was necessary with some families not to be constantly on call, but this was frustrated because the volunteers who became involved did such things as giving home phone numbers and didn't mind if they were rung up at midnight thereby allowing the client to manipulate them and the situation. One of the volunteers made a fuss over the home condition of one family and demanded that the children be taken into care. This is clearly not on, it is for us with our training and professional judgments to make that kind of assessment.

The whole trouble was that the VSC was a 23 year old ex-secretary who did not know how to manage the volunteers. She thought that she could "do good" through volunteer involvement. She was judgmental and had failed to clarify her function'.

**Case Study C**

Combined interview with the physician superintendent, senior social worker, senior nursing officer. Discussing unpaid VSC who has been in post two years in a specialist hospital.

'We've had a League of Friends for years and they did a great deal in the way of fund raising, but when Mrs. A. became secretary she wanted to increase voluntary activity. She suggested starting a panel of visitors and the social work department and the medical superintendent gave the scheme their blessing, and co-operation by meeting Mrs. A. to discuss problems and devising the best method of preparing the volunteers. They had to be aware of the difficulties of befriending our sort of patients and the fact we needed to encourage a healthy suspiciousness. One patient suggested to the volunteers that he might help with disguises.

The other big difficulty is with the confidentiality angle and of course the security angle. I'm saying all this to show how difficult it is for Mrs. A. to get to grips with introducing volunteers. I am aware though, how good it is to have outside help with activities like sport and art classes, and even the magazine that she's got going, and of course, all this helps with the image.

She had been able to improve existing facilities like the Tea Bar by recruiting good people, and it's amazing when you think of it how successful she has been in getting her visitors panel together. All the recruits attend meetings with the social workers before starting. For example, some of the brighter lads can charm birds off trees and it's only too easy for a volunteer visitor to become emotionally involved. By having a really committed social work interest, problems like this can be managed and not get out of hand.

Since Mrs. A. has been here she has stretched the League of Friends a lot. She is extremely efficient and has a scheme for relatives to visit, this involves having a team of drivers to take people to and from the station and also a number of local families who will put visitors up over night. It all takes a lot of organising. It's the personality of the organiser and the fact that she's worked professionally in hospitals herself that makes her accepted by the

staff. She is the main link in all aspects and people know about her because for example, she presented the prizes for the art competition we had here. This hospital is always under fire from one quarter or another, so Mrs.A. is part of our battle-line as it were. She knows the importance of local involvement and her (local) knowledge is very valuable.

She is providing a service that the social work department can't provide — we can't provide befriending in the way a volunteer can. Just chatting can strike chords. For example, one voluntary visitor found that one patient was very keen on scrambling (motor bike), which we didn't know about, so there is a positive feedback. Also the relations feel they can speak more freely — it's the ideal situation with Mrs. A.

We couldn't say she has influence, but she's got a lot of things going which wouldn't have happened without her. Our focus is on the patient, we put our heads together in an informal way and that's how I see things shaping up in future. We should seize every opportunity to project a positive image'.

## Case Study D

Social Services department reporting on a community development officer, in post two years.

### Interview 1
### Senior social worker in post three years

'I'm going to start by using the example of community work as we used to do it in Coventry, where in practice we tended to use the contrary approach. If anything the national bent is against a separate community worker: it is seen more as a team responsibility. This is not a pleasant fact for the community development officer. How it developed in Coventry – where they don't have community workers any more – was that projects arose out of the team situation that was allocated to the community worker. For example, a voluntary visiting scheme for the elderly and handicapped became part of case work with referrals to and from the team. The benefits of doing it this way is that you don't get a "them and us" situation. In general, community workers don't have Certificate of Qualification in Social Work and the social workers feel they (the community workers) are not qualified.

Volunteers are a small part of community work and coming back to the point of social workers' awareness, I think there is preciousness on their part – it's an emergent profession and they think too narrowly and this creates a barrier between social workers and community workers – it's fair to say though, that it applies to both.

It's true there are boundaries and the best example I know of where volunteers and professionals worked together is from the mid 60s. In a Children's Department I worked in, the volunteers worked with problem families and were trusted by the professionals, but this wouldn't happen any longer. We were dead lucky to get accomplished volunteers who were in many instances better qualified (in a formal sense) than the social workers. We had a magistrate, a lecturer in social administration, a sociologist and so on, and they were of a better calibre than the professionals working for

money. Nowadays of course, these people would be working for money themselves and not available to the voluntary sector. The main plank of success is identification by the VSC of the work to be done and concentrating on supporting this.

My present contact with the community development officer is rather patchy – it's very necessary to be in constant touch, but I can't put my hand on my heart and say I do as much as I would like.

A very valuable example of the work that's going on is a project in the Highlands housing estate. This is vitally important for the social services department and the community's well being as a whole. This is a council estate which had become the dumping ground for bad tenants and created social problems all the time. The place was in a shocking state, with broken paving stones in the road, repairs to houses were not carried out and there was an air of neglect with old cars abandoned and weeds everywhere. A Community Association was formed by our community development officer and the spirit improved tremendously among the tenants. The housing department are now offering things – material – the spirit is great in that estate as a result of self help and the social problems changed within six months. But clearly, it does need an eye kept on it – it could fold up just as quickly. The two volunteer bureaux and the support are the important things.

It's difficult sorting out personality and style – if you look at the qualifications (of community development officers) in the country, none have qualifications in community or social work, but altogether they bring a lot of life experience. I've tried to allow each to do what he is best at. Ideally the community development officer should identify his work with the help of the team.

Where are the volunteers? Other than one or two (visitors) to residential homes and good neighbour schemes, volunteers are not used other than through the volunteer bureaux – not on casework. It's a pity that the social workers are not really for it. What has set social workers back is the Public Enquiry – that has done more than anything else to stop the use of volunteers – social workers are just not prepared to take risks.

The first thing is for community development officers to get some professional training by which I mean some study of social administration and sociology – if they don't, they don't know how things work and are at a disadvantage from day one. Even the Social Admin Diploma doesn't give an understanding of how local government works at a basic level and if they don't understand the interlocking functions they're lost. I don't know whether any of the community development officers would know how to go about getting an urban aid grant. It's a double bind. The department recognises their limitations and don't fully trust them, and if they are not prepared to do anything more than routine things they won't get backed up.

The fieldworkers are not doing as much with the community worker especially the thick ones – the duller social workers are not capable of understanding the wider context – the brighter social workers – the minority – will, of course take on anything.

We've been doing intermediate treatment work with probation workers over the last three years. It took this amount of time for one social worker to become interested and now seven have all of a sudden realised the help it can be and it's taken off – there are two groups and a third to start and volunteers are being taken in, but we need to learn from probation how to do it.

As far as trades unions are concerned, the only experience I have had is through my own involvement with British Association of Social Workers. (BASW).

I would say the influence of the community development officer is negligible. They don't know how to play the system (within the department) it's a pity, they're their own worst enemies'.

**Interview 2**
**Two social workers**

(Both in post for two years, and with no Community Development Officer attached to the division).

'I'm not sure you need different, specialising that is, community development officers in the department. The problem is that community development officers are out on a limb – they've a more radical approach to their work. Community development officers start things like play-schemes and they do have flexibility, but it's difficult to feel they're part of the social work team.

I think the use of community development officers is that they are somebody to keep contact and liaison with groups and the community in general. At the moment I feel we split it up too much and specialisation is totally wrong.

Having said that, a community work input is required and there's no reason to believe that social workers couldn't do it as part of their job but social services is rife with wheeler dealers, so it doesn't happen that way.

There has been some use made of volunteer in intermediate treatment groups but there has been a certain amount of opposition because of confidentiality, so it didn't really get going.

Volunteers have to be supported. If you could start by working with a client, and then put guidelines and drop out leaving a volunteer to carry on that would be OK. Another point which is a bit different is that having volunteers can be more democratic as it's difficult for a client to complain if they disagree with you (the social worker) or feel hung up, but they can say something to the volunteer.

It seems there are a lot of people (social workers) who will admit that they aren't right all time and we would try to be flexible and work more with community groups. If a group if formed, say, of people with similar problems it needs resources and I think a social serivces department has a

part to play there. But self help groups often come into being, grow up, flourish and then just wither away. Someone should be there to work with groups.

What individual volunteers can do is Intermediate Treatment and families in one to one situations it is successful if expectations are clearly defined before they start. As far as families are concerned, volunteers can give more time than we can'.

**Interview 3**
**Senior social worker**

(In post two years. No community development worker attached to the division).

'In terms of local social provision there has been a piecemeal rise of voluntary organisations and groups – they came into being in dribs and drabs and as a result the department isn't as aware of the voluntary sector as it ought to be. We don't liaise with the voluntary sector anything like as much as we should.

I would say community development officers as a group are good, but as there are so few of them it's really only tokenism – the posts we've got (in the county) are used as tokens, a sort of lip service to the idea.

Even though we don't have a community development officer or such we recognise that we should have contact with voluntary groups. I see these contacts as very important because social workers are only looking at individuals and families and they don't see the totality of the street or the district and therefore they're missing out on the structural dimension.

Apart from (self help) groups, volunteers are very useful in working with families in trouble and with "at risk" kids. What would be ideal would be for the social worker to cut down on the length of his involvement by transferring to a volunteer at a certain point. One area we havn't done much in this way is with non-attendance at school.

The issue of support for volunteers is one we haven't tackled – so many cracks you have to paper over. The problem is that very often professionals are sceptical about what volunteers can do and when they (the social workers) are in stressful situations with the client they forget the support that volunteers need.

It makes sense for volunteers to work in a one-to-one situation simply because social workers haven't got the amount of time to devote, but at the same time you have to bear in mind that clients demand an anonymous service

and a lot of clients would see us as abandoning our responsibilities if we leave them to volunteers. How society sees our role -- we're viewed as having power and a magic wand which of course we haven't got, but what we do have is a body of knowledge and skilled practice. A major element in working with clients is to support them. Social workers say to clients "you must solve your problems within yourself, I can't do anything for you without that". But that's pie in the sky really because clients have to be supported, with the support being gradually withdrawn before you can get to that stage, and as the social worker phases out the input, the volunteer can move in and give support at a less intensive level. It's here that working together (with the volunteer) you can get the client to a state where he can become independent and raise his morale. The important function for the volunteer is to be a leaning post not a mattress to lie on – and it is a crucial fact that the volunteer must understand his role in these terms. Some families are unable to make progress with their problems because they are used to the pressure of the social worker telling them what to do.

Of course they will lack confidence in such circumstances.

So the whole of issue of community development officers seems to have got a bit lost, but I think exploring volunteers' roles may have something to say in your study'.

**Case Study E**
**Hospital with a VSC**

Acute General and psychiatric

**Interview 1**
**Administrator**

Four years at this hospital – one in present post

'Where I was before, that had a VSC – in fact several – I believe they even had their own set of offices. I'd been here a few months before I realised they didn't have one here. I didn't think about it before that.

Of course what happens is I've got the job by default. I didn't want to but the request from people wanting to do voluntary work are ad hoc so no one has responsibility therefore I do it. What I do is channel them to places I know will use them. Mostly the volunteers don't know what they want to do, and I haven't time to spend long with them and often it's just on the phone. Usually I send them to occupational therapy, that's where they use them. I did send some to physiotherapy for wheeling patients about and cleaning up, but none of them stayed.

They don't stay very long as a rule. Although we've got one voluntary secretary in casualty who works practically all the year. She's a fire eater by profession, and I suppose she's usually out of work – except at Christmas.

We tried to get Red Cross Beauty Care going in the psychiatric unit, but the nurses were worried about the volunteers getting thumped and you need a special sort of volunteer who can cope really.

The tea bars and trolley shops go along fine and they liaise with me about any problems. That's mostly the sort of thing volunteers do here. We have a 150 at their Christmas party but that includes all the people on the rota, plus the Leage of Friends Committee and the Hospital radio people.

The nursing staff here are not keen on volunteers. They just feel they make more work – showing them what to do etc. and they don't stay so what's the point?

You can't work round them and they get in the way. Attitudes in nursing hardened after Salmon – they need a voluntary services organisation to tell the volunteers what to do as they won't take the responsibility. There again we've had some terrible volunteers – you can't blame them for being wary. At my last hospital the volunteers were people who would be long term and the staff loved it.

The personnel department organises work experience here – not a lot though, and the staff aren't keen on that really. I once approached various voluntary agencies to get people to maintain the grounds but only probation showed any interest and their people were too young. Anyway, I suppose it would have caused union trouble.

The trade union business came to a head in 1979. They were out for a week-end and we had to use volunteers, but mostly they were staff. Most of the trade union people were quite willing but the porters are a bit sensitive – because they are all male. But I think things are getting better and I think they'd accept a VSC – after all they accept the work experience people now and attitudes are changing. Things are definitely improving, because we have more intelligent trade union reps – they can see volunteers are useful and not taking away jobs. I wouldn't consult the trade unions before we appointed a VSC – I'd tell them. I don't think there'd be any opposition – it would depend on the VSC's personality.

It would have to be a social worker type – say a social work assistant sort of person – with a more general interest in non-clinical care of patients. It would have to be a District post as there isn't enough to do in just one hospital. The voluntary agencies run themselves after all. It would be general administrative assistant grade, but the personality would be all important. Someone who was able to get on with everyone and keep as many people happy as possible. She'd have to be able to break down the barriers which do exist here, and be strong too – with some of those nurses, phew!

I mean if the porters asked her to get rid of a volunteer, she'd have to do it, and be tough enough – but at the same time not tread on anyone's toes – a tall order, isn't it?'

**Inteview 2**
**Senior Medical Social Worker – 18 months in post**

'Of course I definitely think we should have a VSC here. I think she could use the Union office as I never see anyone in it.

Of course having no VSC was the least of my worries when I moved here – everything was so different from the last hospital – there we had a really happy atmosphere and everyone worked together. Here the senior nurses are so anti *everything* and one of the things they are anti is volunteers.

What happens is that it takes so many phone calls to get volunteers going so you don't want to bother and it doesn't get done, and I suppose the patients suffer in the end.

Any VSC here would have to be a district appointment. They couldn't get one for each hospital and anyway, status is important. If it was a District Appointment you see there wouldn't be any problem about simply *imposing* volunteers. One or two sisters would go along and that's all you need.

Transport is what I'd like most – for visitors. We simply don't have enough. I keep suggesting we should have a VSC but it doesn't seem to be high on anyone's list of priorities. I suppose it's not on mine either'.

Two other interviews with senior nurses received very negative feedback on the subject of VSCs. The general feeling was that volunteers were more 'trouble than they were worth' and there were many complaints about their unreliability and the instability of their temperaments.

The social worker interviewed at this hospital said she felt the hostile attitudes to volunteers were present only among the senior nursing staff and not among the ward sisters or lower levels. However, it may be worth noting that when speaking on various training courses for junior nurses, the same suspicious attitudes to volunteers have in fact been encountered by JEP and colleagues.

## CHAPTER 11
## AN UNLIMITED POOL?

The interview was designed to lead the respondents through a progression of ideas. We asked them first to focus on themselves, then on their working situation, this led on to discussion of the job in its wider context, to the networks and finally we encouraged them to raise their heads and look into the future. In the final part of the interview we were asking them to give us what amounted to informed guesses about subjects which included: whether a pool of volunteers existed and what part the VSC had to play in the future. Depending on their answers to these questions, we went on to explore whether they thought that increasing the number of volunteers would merely be a process of turning informal into formal volunteers, or of moving them from one organisation to another.

This part of the interview was much relished by the VSCs and their delight in it is reflected in the richness of their responses. We are reporting as fully as possible and it should be borne in mind that these *are* speculations. The question was 'Do you think there is an unlimited pool of volunteers?

**Pool of volunteers:** Everyone had something interesting to say about the pool of volunteers and we have classified the responses as:
Definitely 'Yes'; 'Yes' with reservations, and definitely 'No'.

**Table 5 Pool of Volunteers**

| | Yes | Yes with reservations | No |
|---|---|---|---|
| Number | 24 | 21 | 18 |

Two examples from each category will serve to illustrate how the classification was made.

**Yes:** 'Yes, I am quite sure whatever job needs doing, there is a volunteer ready there who can do it. And whatever qualities they have got, everybody can be used'.
'Yes, it is an abolutely unlimited resource'.

**Yes with reservations:** 'It's not unlimited, but it's a bigger pool than people think'.
'Yes, in one sense. When you look at the enormous range of interests in volunteering you become aware of the enormous amount of talent and expertise'.

**No:** 'No. There cannot be, because I cannot get them'.
'No, a few months ago I would have said, "yes", but now people have to work for money'.

If we represent the numbers as percentages, 38% said they felt there was an unlimited pool, and 33% said 'yes' with reservations – a total of 71% – a striking result.

The emphasis on the need for a method of utilising this pool was very strong.

'It is not a limited pool as some think. What is limited is our ability to tap it. That is the limit. So many things are available in the community. We have a shortage of sophistication in tapping it'.

'I believe there is much more voluntary help available than we are making use of. A lot of people have a lot of time they would like to do something with. It has to be absorbing – there are so many new areas that we could start in, but it needs an investment of capital. There is no way of magically involving volunteers without professional input and support and management and if this could be considerably increased, it would yield results'.

The message which came out of these responses was that if you offer interesting projects – encouragement and support, you will be able to find

the right volunteers and to draw them from a wider spectrum of society than is the case at present.

'You will get working class men interested if you have the right community based project'.

and

'Think of all those depressed young mums – they could do so much if you had the organisation and someone to encourage them'.

29% of the sample said they did not feel there was an unlimited pool of volunteers. They did not feel they were in competition with other voluntary agencies, but rather that competition was presented by other factors – 'Women have to work nowadays – they are all off to part-time jobs'. 'You are in competition with peoples' hobbies and the telly'. It is interesting that the majority of the 'no' replies came from VSCs based in traditional voluntary organisations.

The VSCs we spoke to did not seem to feel that any element of poaching existed between one agency and another, confirming their responses in the section on networks. 'Lots of my people do things for other organisations but they do not stop doing it for me – they are just the type who do a lot'.

We were concerned to know whether the VSCs felt that an increase in organised volunteering might result in a diminishing of the informal volunteering which takes place within communities or neighbourhoods. Not one suggested that the informal sector would suffer as a result of having more organised volunteering. On the contrary, there was almost universal belief that formal volunteering encouraged informal volunteering.

There was a feeling that those who became formal volunteers were in any case the kind of people who were already good neighbours. 'Good neighbours make good volunteers'. Formal volunteering might well serve to make them more aware of problems in their own neighbourhood. 'Formal volunteering makes them *more* aware and they go and do more in their own neighbourhood'.

This could have repercussions in the future also. One teacher said 'I do think we give kids an idea about what is needed in the community, and that probably helps to make them interested in volunteering long afterwards'.

There was a strong feeling that formal volunteering taught the volunteer how to make the best use of his time. One VSC for example, reported that she felt volunteers could be frightened by taking on too much and of becoming over involved. If they learned to set limits by doing some formalised volunteering they would feel confident enough to overcome this fear. She said, 'Put it this way, if I go to see this old lady, I am frightened I will have to stay with her for two hours and if I have worked for the volunteer bureau, I have learned how to set limits and feel OK about leaving her after half an hour'. Organisation encourages people because it takes away that fear of abuse and getting too involved.

Although a few people were confident that double the number of VSCs would result in double the number of volunteers, on the whole they were cautious about this. Even the VSC who said: 'Yes, you absolutely would double it' went on to qualify this by saying that it depends on the quality of the organisation. 'Only if you can engage and enthuse them and give them opportunities'.

A very strong feeling emerged that the numbers of volunteers and the quality of work they did depended largely on the quality of the voluntary service co-ordinating. 'There is a fine balance between organising volunteers and extinguishing the voluntary element. The essence of volunteering is the fact that you have freedom to use yourself to help others in the way that they and you feel is best. This can be organised out and support is crucial. What is needed for volunteers is to be supported. This is what the organiser should do – not organise the initiative out of them'.

This is complemented by the view of the VSC who suggested that the function of the VSC is to be constantly aware of developments in society and to be flexible in his approach to them. 'I do not think there is a pool of people ready to take on tasks that social work agencies deem fit for volunteers. But there is a vast number of people who are willing to work out

the balance between what the State provides, and what volunteers can do. There are massive conceptual issues we do not touch on as yet. The thing there is a pool of, is good will'.

# CHAPTER 12
# COMMENTARY

One of the problems to be confronted before attempting to reach conclusions from the kind of material we have assembled lies in deciding on how reliable and factual the information is. In talking about their work people may tend, consciously or unconsciously, to emphasise the positive elements, give less prominence to negative experiences and possibly even to make doubtful claims. However, our conclusions are supported by three other sets of evidence.

Firstly, we were given very many concrete examples of achievement as well as of some things that did not go well, secondly we have a detailed local knowledge, and finally, many VSCs gave us documents relating to their work. We have collected numerous reports, rotas, newsletters, articles, leaflets and posters, and an examination of these provides confirmation of much that we were told.

**What is voluntary service co-ordinating?**

In Chapters 3, 4 and 5 we dealt at some length with the essential components of the VSC's work and from an analysis it emerged that the distinct functions of administration, personnel work, social work, community development and entrepreneurial activity in varying proportions came close to accounting for the total function. At this stage we are attempting to draw out some further points, for while the five components we have identified are present, the whole of the VSC function is greater than the sum of these parts. If we were to move on from the incomplete explanation provided by identifying these separate components, we needed to find a generalisation which would subsume them. The generalisation we were seeking had to accommodate the work of VSCs organising such desperate activities as delivering meals on wheels, tea bars in outpatients' departments, setting up clubs, counselling and charity shops.

From a minute inspection of the data from this group of 63 VSCs it became

clear that whatever they were doing and however they did it, they were all ultimately in the business of mobilising the resources of the voluntary sector to meet social need.

**Frameworks**

Our VSCs were located in a variety of settings, from hierarchial structures in social services departments to the one man offices of a volunteer bureau. It was strikingly the case that even those in a structured environment had the minimum of constraint. Obviously they had to be careful to see that formal arrangements were adhered to wherever common sense demanded it, over money for example, or drivers' insurances. We have already reported the success our VSCs claimed with regard to making their own decisions and the range of discretion within the short and long term aspects of their work.

As many worked directly to a management committee, they had no difficulty in making a direct approach if they wanted to.

It appeared that control of their work was only minimal, except for the community development officers who had a formal supervision. This generally low level of direction and rules meant a correspondingly high degree of responsibility and there was a universal awareness that they were accountable. To whom they were accountable naturally varied depending on the organisation which had appointed them. As far as the exercise of control over the volunteers was concerned, sometimes it was direct and sometimes medicated through other staff. Either way, the VSC, as direct arbiter was responsible for the effective operation of the volunteer force and the general running of projects.

In essence the VSC's were not limited in what they could do by formal rules, nor were they tightly managed. But their achievements did require the overcoming of informal constraints: they had to secure recognition for their own role and for the potential contribution of volunteers. Thus they depended on the nature of the exchanges they could make and their skill in negotiating the boundaries set by surrounding individuals and organisations. In other words they were operating within what might be described as 'negotiated

order'[13]. The implication is that success in VSC work depends on having considerable freedom of action plus entrepreneural qualities.

**Networks**

As all the VSCs we saw were 'one offs' in their agencies, it was to be expected that they would look for relationships with VSCs in other agencies. This was the only way in which they could share experiences, compare performances and establish common interests.

Berkshire does of course, cover a large geographical area, and it would not be anticipated that everyone would know everyone else, but certainly within small areas VSCs were in more or less close contact with their fellows, and they reported how greatly they valued this in terms of actual help and less tangible for encouragement and mutual support.

**A Forum for VSCs**

Their need for this support was very evident – particularly as many of them lacked what they regarded as adequate support in their working situation. The desirability of some kind of recognised forum in which the VSCs could discuss common interests and draw support from each other was clear, but this need may not always be recognised by those who appoint them.

Their inter-VSC contact was always mentioned in terms of mutual help and no one suggested that competition to get volunteers was a problem. This can perhaps be explained by volunteers 'brand loyalty' – in our experience people who volunteer for hospitals or probation or in the mental health field for instance, usually tend to be faithful to that agency.

Given that the nature of the work demanded that VSCs should look to the wider community, a comprehensive network of contacts was essential if they were to function at all, let alone effectively. It appeared that the networks were well developed and that informality in the interactions was the order of the day. The VSCs had no hesitation in contacting anyone they felt could be useful in whatever the circumstances were. Some of the relationships within

these networks were constantly being renewed and added to as the situation demanded. One of the situations which might demand it would be personal needs, for example. In the VSCs view, the network, its establishment and maintenance was of vital importance.

**An evolving occupation?**

Voluntary service co-ordinating as a job is of relatively recent origin and it is interesting to make an assessment of what has been achieved so far. There can be little doubt that the range and variety of the tasks the VSCs described to us have increased many fold in the past ten years. At the beginning there were few clear objectives and this was reflected in the broad terms set out in the job decription. As the organisational goals were not very specific, the actual postholders were able to make their own interpretations and it is true to say that many VSCs see themselves as oriented more towards the volunteers than the agency. The role is that of a generalist with some acquiring special expertise in relevant fields. What these specialisms are tend to depend on the circumstances of the individual's working environment. There is an analogy here with GPs who are mainly generalist but acquire expertise in certain fields.

From simply finding volunteers for particular jobs in their agency, many VSCs have moved to the wider arena of developing projects like day centres, play schemes, bereavement groups and stroke clubs to nominate but a few. Community development officers have gone out to stimulate groups to act for themselves, raising their level of consciousness by providing expert guidance. Although some VSCs do still conform to the more static traditonal mould, others have acquired a more dynamic image of what is required of them. At an earlier stage in the evolution of the occupation VSCs have been seen, and have seen themselves, as facilitators, matching the needs of the agency to the availability fo the volunteers. From the evidence furnished by our sample, it would appear that while still 'facilitating', many VSCs have moved forward to become 'animateurs'. The step has been from a concept of a more static performance to one more dynamic in character.

**Is voluntary service co-ordinating a profession?**

Fairly naturally there has been a good deal of debate over the years as to whether voluntary service co-ordinating is a profession. Established professions are characterised by the existence of professional councils through which their members are registered, by codes of practice and standards of education and training, and by disciplinary procedures for those who overstep the boundaries of good conduct. These characteristics are all central to the notion of professionalism. They represent the *ideal* base on which the organisation, membership, control of work and relationships with clients can be seen to rest. Using them as a rule of thumb guide, it might be though that occupations which are aspiring to professional status can judge their progress in terms of how close they come to fulfilling these criteria. Looked at in this way, voluntary service co-ordinating cannot claim to be a profession, and the crucial question is whether it is desirable that it should seek this status in the future.

In the view of some VSCs there might be some advantages in doing so, principally the establishment of a career structure. At present there is little hope of promotion for VSCs, and the majority who leave the job make sideways moves into other agencies or more rarely, into one of the few senior VSC positions. To have a recognised professional qualification might have some advantages in a wider context also. It would enable a minimum level of performance to be set and would ensure a more uniform standard in the quality of voluntary service co-ordinating. There is also the point that the public might have greater confidence in a group with a clearly defined set of qualifications.

Turning the occupation into a profession might have grave disadvantages though. It would almost certainly mean that VSCs would be drawn from a much narrower range of backgrounds than at present, and this great diversity of previous experience seemed to be extremely valuable to the VSCs we interviewed. It might also result in their having to operate in a more formal way and their freedom to innovate was one of the key factors in how they functioned. Weighing the advantages of professionalism on the one hand against the disadvantages on the other and coming up with the right answer is

a difficult exercise. Other professionals (notably social workers) have provided examples of the problems which can arise if the decision is taken too soon. Perhaps the VSCs would do well to take note of the warning given to a group of them by Dame Geraldine Aves ten years ago. 'Do not, I beg you, seek professional status before you are ready – you may lose the very things which are your strengths – your diversity and originality'.

We referred in Chapter 2 to the fact that VSCs thought the job would be difficult to learn about in any structured way and that the major part of their learning had been in actually doing the job. This is entirely consistent with the concept of their being social entrepreneurs. The key factor for success in this role is 'know-how'. While some elements of this can be taught, the greater part resides in the personality and relationships of the VSC involved.

**The Future**

A vigorous and healthy voluntary movement has several different functions in society as the work of these VSCs has shown. It is capable of providing the first line of care if the family or neighbours are not available, it can extend the care available by the imaginative provision of appropriate services; it can provide choice to the consumer and it can contribute to the emotional good health of the community by providing a means of self fulfillment for those who wish to give their services. The question that arises is 'by what means can these outcomes be best achieved?' as is already well known, a great deal of informal care is given by people simply offering to help neighbours and friends at all times and particularly when difficulties arise, and if this were the case everywhere and at all times, nothing further would be necessary. As it is, in the real world things just do not happen like this, for a variety of social and economic reasons.

No matter what the material resources of a society or what ideological orientation it has, statutory care is unlikely ever to be on a scale and of the quality that can meet all needs. The real question is what is the best way for the need for help on the one hand, and the offers of help on the other, to be brought together.

It has been suggested that there is no necessity for formal arrangements for this to occur. All that is required is for any member of the public who wishes to volunteer to go to anyone in the caring professions and offer their services. In this model volunteers would just present themselves at the hospital, social services department, school or other organisation and see whoever happened to be on hand, rather in the way vast numbers of people obtain paid employment by simply going along to a firm. The other method of linking helpers to the person in need is by having a network of voluntary service co-ordinators, such as the 63 we have been interviewing.

Of course we do know of numbers of people who have gone to a hospital ward, seen the sister and started on a long and successful career as a volunteer – nothing a VSC could have done would have made any material difference. However when considering the evidence gathered from the experience of our sample it would appear that the major advantages of the present VSC system are that there is a greater possibility of success both in terms of benefits for the individual volunteer and the wider community.

What is needed is a good matching of volunteer to task, something in the way of induction and most crucially a support function which ensures both that the volunteer will find self fulfillment and the client will be well served. None of these ends will be so satisfactorily achieved by ad hoc methods. There has to be someone at the inter-face between the voluntary and statutory sectors whose clear responsibility it is to ensure that they complement each other.

Some of the VSCs worked on the level of matching volunteer to task or acted as an agent of the statutory services, while others were working in a more dynamic and innovative way. However they worked, the common factor was that they were all to greater or lesser extent involved in mobilsing the resources of the voluntary sector in meeting social need. The overall benefits conferred by such enterprises as lunch, clubs, youth counselling, 'sitting services' and clubs for offenders cannot be overestimated.

## A separate occupation?

We are aware that many people would say that VSC activity such as the kind we have described ought to be part of the normal remit of some other workers. For example, advocates of the 'patch' system of organising social work argue that such social workers would be acting as VSCs implicity, since one of the important components of the patch system is the enlisting of local knowledge and resources in order to promote a greater degree of self-help. However, from what our respondents told us and our own experiences it would seem that where co-ordinating volunteers is only a part of the worker's function there is a considerable risk of its taking second place to whatever is the main job.

One of the probation officers in our sample pointed out that he was sure that the volunteers' contribution to the work of his department could be extended and improved if officers could give it a higher priority and more time. He could see no way of organising this other than by having a specialist post. Though an individual social worker, probation officer or nurse may be aware of the importance that should be accorded to mobilising volunteers they would be obliged firstly to fulfil legal or professional requirements, and this would inevitably result in the VSC element of the job being allocated a lower priority. A specialist post ensures that the holder's sole obligation is voluntary service co-ordinating with all that implies, unencumbered by other responsibilities. Moreover, having a separate occupation offers more opportunity for the objective assessment of needs, in the community and for ensuring that less 'popular' groups, like psycho-geriatric patients for example, get a share of what resources are available.

In any occupation, problems may arise from specialisation, there may be inflexibility of approach and narrowness of viewpoint. The nature of the VSC function as we have described it is so intrinsically generalist that the risk does not appear to be very great. For provision of the quality and on the scale that our respondents reported to take place at all, let alone be maintained over time or expanded, requires workers who squarely recognise this as their special province. Looking back on the views expressed both by the VSCs and their co-workers, clear majority thought that tackling this kind of

responsibility onto nurses, social workers or administrators would be unrealistic and short sighted. The first hint of this appeared at the outset from the pilot survey where health visitors for example stressed the fact that they simply had no time to take on anything more than the health visiting they were already doing, however desirable it might be. Later on (pg 52) we quoted the example of the community development officer who had organised a laundry service for incontinent patients and noted that it was unlikely that a service of this kind could come into existence without a VSC to initiate it.

The case studies (pg 101 to 126) gave many examples of co-workers underlining the necessity for separate VSCs, and the point was particularly well made by the hospital administrator in Case Study E (pages 123 to 125). Indeed this particular administrator appeared to have little idea about the function of a VSC. His statement that it would 'have to be a District post as there just isn't enough to do in one hospital' shows a marked lack of understanding. A District VSC appointed to hospital and community health services needs to be supported by hospital based posts if any successful voluntary service scheme is to be organised. Many district based VSCs have had the experience of trying to operate on too wide a front, with the result that success could be no more than superficial. This administrator was of course reporting on a very limited situation. His remarks would apply all the more strongly in considering the community at large. Moreover, the importance of all these elements is likely to increase in the future as the proportion of the elderly in the population increases and the special problems created by unemployment become more widespread and acute.

It may be asked at this point whether there will in fact be enough volunteers to meet this growing demand. Our question to the VSCs about whether they thought a pool of volunteers existed produced answers that are of course no more than informed guesses, though based on considerable experience. They seemed confident that, given sufficient appropriate VSC appointments, volunteers could always be found. Any fears that might be expressed on the score of merely drawing off people from the highly important activity of informal helping to become formal volunteers were firmly rejected. There was confidence that going through a VSC did not

reduce their ability to give informally, on the contrary, there was some feeling that it increased it.

**The future in the wider context**

At the moment the voluntary sector is rather grudgingly regarded as a second line, half-heartedly used to back up statutory provision, but it is becoming more widely understood and accepted that changes are needed in the way care is organised. It may well be that in future VSCs may have a more crucial part to play than is at present recognised, and that they are poised to make an even more important contribution to the meeting of social need.

In the last ten years VSCs have proved their worth by 'delivering the goods' and the voluntary sector would appear to be more active than ever. It should always be borne in mind that volunteering is a two-way process and that helping to alleviate the distress of others is often therapy for the individual. It seems unlikely that we can expect a return to full employment in the foreseeable future, and it may well be that for some people voluntary activity of some kind could take place of paid employment in contributing to feelings of personal worth. At the same time it is likely that the appeal of voluntary work will range more widely across the class spectrum.

From what we have learned from this study, it may well be that many welfare needs in the coming decades could be met by using a VSC as the first line organiser, calling on the statutory services as a backup when necessary, rather than the other way around as at present. Such a change of emphasis would of course require official sanction, and a greater public recognition of the worth of the VSCs contribution to society.

The voluntary sector is a large resource, the limits of which have not yet been reached. This study has led us to believe that the VSC has an important part to play in developing the capacity of the community to care for itself. From what the VSCs have told us it would appear that much more exists in the way of community resources than is at present being mobilised. As in the case of North Sea oil, which cannot be brought ashore without investment in rigs and personnel, so too community resources require investment if they

are to be actualised. Voluntary services co-ordinating is not cost free, and as well as financial input, a commitment to the idea of mobilising the resources of the voluntary sector on the part of society if required.

For the modest public outlay on these VSCs' salaries and small amounts of 'pump priming' money, there were already considerable benefits to the community, as reference to Chapter 4 and Appendix 3 on tasks will show.

# CHAPTER 13
# CONCLUSIONS AND RECOMMENDATIONS

By its very nature, a research project of this kind generates a large amount of information. We set out to examine the VSCs function in depth and this was achieved beyond our expectations. The range of agency and function was so wide that it might not have been possible to draw any firm conclusions. It is a tribute to the VSCs themselves that the quality of their responses was such that it became possible to identify what was common to their occupation. It emerged that the business they were all in was mobilising the resources of the voluntary sector to meet social need. This definition enables us to make the following recommendations.

1 In these terms voluntary service co-ordinating is an occupation in its own right, and should be recognised as such and not added on to the work of other professionals.

2 Overall it would appear that more VSCs should be appointed so that the resources in the community can be more effectively mobilised.

3 A recognition of the contribution the voluntary sector can make and is making should be built in to the training of professionals who are likely to be working in related fields.

4 Adequate opportunity should be afforded to VSCs to meet together and the idea of local or regional meeting places should be explored to the full.

5 If someone like our university lecturer quoted earlier, who ought to be in a position to know at least something about the work of VSCs can display such ignorance of their function, then the general public could not be expected to know anything about their work. Public recognition of the work of VSCs should be promoted.

6 The needs of the people and the resources required to meet them are not uniform throughout the country, and we are well aware that the findings

of our small study may not be applicable in other areas. We suggested in our proposals for this project that it might serve as a pilot for work elsewhere. We are now so convinced of the national importance of the sort of information we have gathered that we would strongly recommend that similar studies should be carried out in other places.

**At the end of the day**

We are leaving the last words in this report to one of the VSCs themselves 'The community is an unlimited resource you know. Every day people are retiring and you'll always have people who can't go out to work – perhaps because their children are young. Also you've got the younger teenagers and the unemployed and shift workers. It's not just moving the same people about – there are new people all the time. A lot of the community still see the Lady Bountiful thing, but we have a much wider class structure now. With all the publicity we have in the voluntary sector still only 45% or less know about it – there's so much room for expansion – if only there were more of us to do it'.

## APPENDIX 1
## PILOT SURVEY

There were two objectives in planning this small pilot study. The first was to test out our definition of what a voluntary services co-ordinator is: that is 'someone who as part of their routine activity regularly recruits and/or places those who deliver voluntary care'. We had arrived at this definition after much thought and wanted to ensure that it would allow us to include all VSCs in the mainstage.

Our second objective was to test out some of the questions we wished to ask in the mainstage.

Burghfield Common was the area chosen for this pilot. It lies a few miles south of Reading – an overgrown village – basically rural in character with a mixture of old, modern and council housing.

Burghfield Common appeared to have a strong tradition of voluntary work and has a well established volunteer bureau. This VB has been going for some 6 years and the present organiser – Miss Ruth Moore is the third incumbent. She was previously a Health Visitor in the area and is extremely well known – two of the respondents in fact referred to her as 'Nurse Moore'. When we were working on the definition of a VSC we had many discussions about whether the local scout master or the vicar was a voluntary service co-ordinator and we felt it necessary to interview as wide a range of people involved in voluntary work as possible. Accordingly we asked Ruth Moore to supply us with a list of people in the area whom she considered were involved in some kind of organising capacity with volunteers. The list included scout masters and vicars, as well as day centre organisers, teachers, health visitors, meals on wheels organisers, and one community development officer from social services.

21 interviews were carried out in all. 7 of our respondents were salaried – 4 clergy, 1 community development organiser and 2 health visitors. None of these regarded organising volunteers as any appreciable part of their duties. We will report of these separately.

14 interviews were completed with volunteers — all considered by VB to have some organising role.

NB In total we saw more than 20 volunteers, but an interview schedule was not completed each time, the questions being irrelevant in some cases.

**The questions and their answers**

**1 How did you come to be involved in voluntary work in the first place?**

All 14 of our respondents had been asked by someone they knew. The words they use included 'conned' and 'inveigled'! We anticipated that some people might have come into the work through the VB but this was not in fact so.

**2 Could you tell me a bit about the sorts of things your organisation does?**

These included driving, fund raising, committee work, keeping accounts, visiting, organising rotas etc.

**3a How many hours weekly do you spend on this work?**

| hours weekly | 0 – 3 hrs | 4 – 8 hrs | 8 – 12 hrs | 13+ hrs |
|---|---|---|---|---|
| | 6 | 7 | 0 | 1 |

This represented 66 hours weekly in total.

**3b How many people involved in helping?**

| 0 – 5 | 6 – 10 | 11+ |
|---|---|---|
| 2 | 6 | 6 |

These 14 people reported they were in contact with a total of 530 volunteers?

**3c Client referrals from?**

| VB | Group Practice & H/V | Clergy | Other | Just arrived |
|---|---|---|---|---|
| 2 | 9 | 1 | 5 | 3 |

These answers are multicoded.

**4 How do you get hold of people to help?**

| Go and ask them | They just volunteer | Advertise |
|---|---|---|
| 10 | 3 | 3 |

These answers were multicoded – there appeared to very little flow between one organisation and another. There was strong emphasis on personal contact and the need to ask people directly, rather than ask vaguely for volunteers. The respondents clearly felt that people reacted better to a specific request and were hesitant about offering themselves. One respondent said she would ask VB if she needed anyone but had not so far.

**5 How many recruited in last year?**

Very small numbers were involved – in the general range of 3 – 5.

**5a + b + c**

The volunteers appeared to be very stalwart, once recruited. They seemed to give up the work only if they moved away or died! There was virtually no flow between one activity and another.

**6 Do you know anyone else in Burghfield Common who is concerned with organising voluntary work?**

Ruth Moore was almost universally known. Only 2 others were mentioned. The Community Development Officer was not mentioned at all.

**6b + c What sort of things?**

VB was universally recognised as a transport agency but little else. 1 person said she would ask VB for getting a prescription picked up. All were satisfied with VB's role.

**7 Volunteer support**

This question was not very well understood. 2 people said they felt volunteers need a back up. 'If things get them down – they need to be propped up'. However the main problems they seemed to have had were in personality clashes which had needed sorting out'.

**8 Financial Aid. How do you get your money?**

| Multicoded | Grants | Self-Help | (including sales of work, concerts etc) |
|---|---|---|---|
| | 8 | 10 | |

**9a + b + c Any experience of trying to get grants?**

The majority had had no experience themselves but felt that if they needed to, they would approach their parish or district councillors. Several saw the CPs as the first people to ask 'They are the key' 'They know the area'.

All respondents set great store by the personal approach when it came to lobbying 'Get hold of someone you know', 'Keep it personal'. 'I'd ask the right person to dinner'. 'We are all friends here'.

**10 Contact and Networks**

Everyone knew the group practice and the councillors – had fairly regular contact and found it satisfactory. The Youth Service and schools were less widely contacted – 4 out of 14 had regular contact with the Social Services Department.

**11 Relationships with other people doing similar work**

For this group of people, their voluntary work seemed to have grown out of the relationships they already hand – rather than the other way around.

**12 Trade Unions**

None had had any experience of TU activities. They were anti TUs to a man. The mildest reaction was 'worried'. Mostly the anwers were in the range of 'I've no time for them'. 'Why do they interfere?'. One or two were 'Disgusted' and one actually said 'Hangings too good for them'.

**13 Do you think people like you have influence on policy?**

| Yes | No | Dk |
|---|---|---|
| 9 | 2 | 3 |

One respondent (the VB organiser) felt that her influence on policy was through the kind of research The Volunteer Centre did! The majority however thought that their influence was felt through their personal contacts with councillors and officers. 'It's because I'm known to the District Councillors'. 'They've got to listen to use because we put them in power'.

**Clergy**

4 interviews were carried out with members of the clergy. One, a Methodist minister, clearly gave the impression that the voluntary work his Church members undertook was confined to their own group 'Basically Methodists help themselves you know'. 'We wouldn't refer anyone anywhere – we help ourselves'.

The remaining 3 Church of England ministers, saw themselves as a channel through which volunteers passed. 'The Church is a reservoir and a line of communication for people to help each other'. 'We have a structure to support voluntary work but I don't support or organise it myself'.

One Church of England minister had been the original founder of the VB working in co-operation with the then CDO he had set up a steering group and been chairman of the Management Committee for 4 years. He had seen it as 'a public relations exercise to regain peoples confidence in the church'. He felt it had worked and that more clergy would be well advised to try it!

As far as their influence was concerned – all the clergy felt that they were thought of as reasonable men with a wide knowledge of the community. Two of them also expressed the view though that they might be a little suspect 'You can't separate a priest from God and that worries people'. 'Social workers can't forget that the priest used to do it all and they are threatened by us'.

**Health Visitors and Community Development Officer**

None of these found that the questions we asked had any relevance to their own activities. Each spent less than ½ hour a week in work that could be identified as organising volunteers. The CDO had recruited 2 volunteers in 2 years and had passed their names directly to the VB.

Both HVs and CDO had very close links with the VB and felt all organising, recruiting and selecting volunteers was done through the organiser. All those at the surgery including the GPs felt the VB was invaluable and could not image how they had managed without it.

All three felt that the only influence on policy they might have was through their immediate superiors. 'You may have influence at the grass roots level which may filter up the system if you're lucky'.

**The questionnaire**

The second objective of doing this pilot was to test out our questionnaire. If the pilot showed that our definition of a VSC was a reasonable one, then we expected that a certain change of emphasis in the questionnaire would be necessary. This had proved to be the case.

The new questionnaire is the result of the experience we have gained, together with discussion with the research consultant.

**Conclusions**

We have felt a little frustrated in the course of this small pilot study. The system of volunteering — the network — appeared to work so well in Burghfield Common that we often received responses like 'But I just know everyone', 'everyone knows who to contact', 'we don't have any problems here'.

Bearing in mind though what the objectives were, we feel that these have been achieved in spite of our frustration!

Of the 21 people we interviewed only 2 could we feel be considered as VSCs according to our definition. These would have been interviewed anyway within the terms of our definition.

We feel our agreed definition has been adequately tested and validated. With the agreement of the Steering Committee we would like to proceed to the mainstage.

## Conclusions

## APPENDIX 2
## FUNCTION OF VOLUNTARY SERVICE CO-ORDINATORS INTERVIEW SCHEDULE

(I'd like to start by talking about yourself)

1. First of all could you tell me if you had any training of any kind after you left school, or subsequently?

   Age on leaving school . . . . . .

2. What were you doing immediately before you started doing this work?

   (a) Are there any ways in which you think this background was useful to you in the work which you are doing at present?

   Cover: Anything that thad to be 'unlearned'

   (b) Do you think any other kind of background/training would have been more useful?

   Ask for examples:

3. How about any training/preparation you had for this job?

   Cover: Courses attended

4. Could be build up a picture of how you actually do the job? Let's start by looking at your working conditions:

(i) WORKING CONDITIONS:

Cover: separate office
clerical help
secretarial help
accessibility to working environment
Job description

(ii) VOLUNTEER RECRUITMENT (a) (b)

Cover: number of volunteers recruited/year
do they come from other VSCs
any turned down
why?
were they sent anywhere else?
methods of recruitment

(iii) VOLUNTEER SELECTION (a) (b)

Cover: interviewing
is a form completed
average length of interview
where – at home or in office
group interview
types of question asked

(iv) PLACING VOLUNTEERS (a) (b)

Cover: slotting into existing hole
creating slot for individual
existing pool of volunteers

(v) TRAINING & INDUCTION OF VOLUNTEERS (a) (b)

Cover: preparation
courses
'watch what Nellie does'

(vi) SUPPORT OF VOLUNTEER (a) (b)

Cover: own definition
how it's given
providing opportunities for
meeting fellow volunteers
recognition

(vii) ADMINISTRATION (a) (b)

Cover: clerical
records
meetings
appointments — liaison with staff/others
contact with superiors
fund raising

If we would sum up now. We've put the various headings on cards and I'd like you to (a) say what proportion of your time is spent on each task and (b) could you please rank the tasks in order of importance as you see it?

5. If has Job Description Q.4 (i): To what extent do you think the Job Description describes what you actually do in the job?

DNA . . . . . No Job Description

6. Could we move on now to think about what might be called the work boundaries of the people you work with who are in other professions.

Cover: trespassing
limits to areas VSCs can work in
limits to what volunteers are allowed to undertake

7. In your work, where would you say the initiative for the various tasks arises (or arose in the first place)?

Cover: who establishes/established the need for the performance of tasks
examples?
such as

8. We're trying to get an idea of where people who work as VSCs stand in their own set ups. Where would you say you stand in

..... (write in)?

Cover: theory/practice formal rules/negotiated order
fixed/floating
range of discretion everyday/policy decisions
where to go for approval
to whom responsible e.g. committee (details of committee's function)
superior officer (where is he in the hierarchy)

9. I'd like to talk now about the contacts you have with others who are working as VSCs/with volunteers in different agencies from your own. How about these contacts?

Cover: number of other agencies
type (i.e. statutory/voluntary/vol. org)
list agencies contacted in last 12 months
quality of contacts and their substance
examples
range of network: geographical/regularity/
organised/casual
who?
what level?
diagonal?
where would you go if you didn't like decision?

9a Details of contacts:

| | (i) | (ii) | (iii) Referrals from/to | (iv) Experiences |
|---|---|---|---|---|
| Social Services | | | | |
| Youth Service | | | | |
| Group Practices | | | | |
| Local Councillors | | | | |
| Voluntary Organisations (specify) | | | | |
| Other | | | | |

10. I'd like to move on now to the allocation of finance. If you need (or needed) money to carry out any part of your work, how would you go about getting it?

    Cover: actual mechanics (i.e. budget)
    own fund raising
    statutory/private allocation
    examples of influence on allocation
    estimate of last years expenditure
    what spent on

11. We've been talking about finance, how about policy making more generally. Do you think you have influence when policies are being formulated with regard to volunteers and volunteering?

    Cover: at what level – Dept planning
    CHCs
    DMTs

    examples
    what inputs
    any influence on other organisation's policy

12. Could we talk now about what contacts you may have with Trade Unions and professional associations?

    Cover: examples
    understanding established?
    at what level – district
    what use do you make of TU/PA
    contact regular
    liaison, attitudes

13. What qualities do you think are needed to make a success of this kind of work?

(a) Could you look back for a moment to the time when you started this job. Could you talk about what the achievements have been. (If less than one year in job – predecessor's achievements).

14. Have you yourself make any innovations of any sort?

Cover: where did ideas come from
examples
has appointment been a catalyst

15. We've been talking all this time about VSC function. What do you think the staff who work with volunteers feel about the way VSCs operate?

16. As you know there has been a lot of talk nationally about volunteers recently. Do you think there is an unlimited pool of volunteers?

Why?
'Would double the number of VSCs mean double the number of volunteers?
Why?

Cover: would it just mean turning informal helpers into formal volunteers?
or pinching volunteers from other organisations?

## FUNCTION OF VOLUNTARY SERVICE CO-ORDINATORS

AGENCY .....

TITLE .....

DESCRIPTION

**VSC** Age ..... sex ..... full/part time ..... salary ..... p.a. expenses .....

paid hours (av) ..... actual hours (av) ..... to whom responsible .....

1st postholder ..... when appointed .....

**VOLUNTEERS**

No. of volunteers .....m .....f ..... age grouping 16–25 ..... 26–40 ..... 41–60..... 60+ .....

Total hours per week .....

Tasks (services provided) .....

Beneficiary groups .....

Facilities for volunteers ..... (use of phones, clothing, lunch vouchers, etc).

Expenses ..... what expenses .....

think are needed to make a success of this kind

look for a moment to the time when

talk about what the achievement

was in job – predecessor's achieve

any knowledge of

ideas come from

assignment be a

been talking all this time about VSC

who work with

know there has been a

Do you think there

double the number of VSOs

numbers?

just

## APPENDIX 3
## TASKS UNDERTAKEN BY VOLUNTEERS

Advice giving
Anything
Attending courses
Befriending
Beauty care
Campaigning
Clubs
Committee services
Counselling
Court escorting
Day centres
Decorating
Education
Family casework
Gardening
Holidays
Hospital work
Laundry
Lectures
Lunch clubs
Meals on wheels
Mother and baby groups
Office work
Organising discos
Organising recreation and sport
Patients hairdressing
Playgroups
Practical help in work shops
Publicity
Refereeing
Shopping
Shopwork
Sitting services
Summer play scheme
Talking newspaper
Tea bars
Tenants association
Tracing relatives
Typing
Visiting
Youth work

# APPENDIX 3
# TASKS UNDERTAKEN BY VOLUNTEERS

Advice giving
Anything
Attending courses
Befriending
Beauty care
Campaigning
Clubs
Committee services
Counselling
Court escorting
Day centres
Decorating
Education
Family casework
Fundraising
Holidays
Hospital work
Laundry
Lectures
Lunch clubs
Meals on wheels
Minibus and lorry driving
Office work
Organising rallies
Organising recreation and sport
Painting / decorating
Playgroups
Prison visiting
Reading
Running
Shopping
Sitting
Social work
Teaching
Telephone befriending
Trading activities
Typing
Visiting
Youth work

## APPENDIX 4
## BENEFICIARY GROUPS

Accused persons
Adult illiterates
Children in hospital
Children in community
Community groups
Deprived children
Despairing
Elderly
Ethnic groups
Ethnic minorities
Ex-patients
Ex-patients families
Homosexuals
Hospital patients
Housebound
Immigrants
Married couples
Mentally ill ) hospital and community
Mentally handicapped )
Mothers and toddlers
Offenders
Overseas countries
Physically handicapped
Prisoners
Prisoner's families
Suicidal
Tenants
Young distressed
Young disabled
Young people
Young blacks
Widows
Witnesses

## APPENDIX 4
## BENEFICIARY GROUPS

Accused persons
Adult illiterates
Children in hospital
Children in community
Community groups
Deprived children
Despairing
Elderly
Ethnic groups
Ethnic minorities
Ex-patients
Ex-patients families
Homosexuals
Hospital patients
Housebound
Immigrants
Married couples
Mentally ill
Mentally handicapped
Mothers and toddlers
Offenders
Overseas countries
Physically handicapped
Prisoners
Prisoner's families
Suicidal
Tenants
Young distressed
Young disabled
Young people
Young blacks
Widows
Witnesses

## APPENDIX 5
## QUALITIES THE VSCs THOUGHT WERE NEEDED FOR SUCCESS

Sensible
Level headed
Balanced personality
Tolerate stress
Enthusiasm
Commitment
Tirelessness
Vision
Confidence
Guts
Tolerance
Patience
Compassion
Common sense
Enjoy it
Sense of humour
Determination
Flexibility
Self-discipline
Adaptability
Detachment
Friendliness
Feel for people
Reliability
Accessibility
Ability to confront
Ability to delegate
Classlessness
Leadership
Supportiveness
Objectivity
Good theoretical knowledge
Good counselling skills
Organisational ability
Communication skills
Belief in concept of volunteering
Eye for detail
Wisdom
Be able to eat humble pie
Humility
Tact
Belong to WI
Have no strong political views
Pragmatism
Be devious
Be able to scrounge

APPENDIX B

QUALITIES THE WISE THOUGHT WERE NEEDED FOR SUCCESS

Sensible
Level headed
Balanced personality
Tolerate stress
Enthusiasm
Commitment
Trustworthiness
Vision
Confidence
Guts
Tolerance
[redacted]
Sense of humour
Communication
Flexibility
Self-confidence
Adaptability
Objectivity
Approachability
Friendliness

Reliability
Accessibility
Ability to control it
Ability to delegate
Cleverness
Leadership
Supportiveness
Objectivity
Good reputation
Good communication skills
Organisational ability
Commitment to values
Belief in company
Eye for detail
Wisdom
Ability to

## APPENDIX 6
## VSC FUNCTION – OTHER PROFESSIONALS

### CHECKLIST

**Introduction**

As you know, a number of volunteers are at present working in your dept/ organisation/area and I'd like to ask you a bit on the subject of the work volunteers do, and in particular about the part played by the VSC/person who organises them.

1. VSC POST

   when established

   who did job before appt.
   recruiting
   placing
   supporting

   part you played in setting up post in first place

2. AT PRESENT

   what contact with . . . . . VSC

   frequency
   formal/informal
   quality
   examples

   how does VSC function help you

   what proportion of vols come through VSC
   does VSC arrange training for vols and vol. users

3. THE VOLUNTEERS

ever met any – comments
attitudes: gap plugger or function different
from but complementary to professionals

concrete info. on actual tasks
level of difficulty and responsibility allowed them

Value of volunteer force
positive benefits
services not otherwise provided
anything that went wrong
why? examples
what was done about it

4. VSC FUNCTION

VSC important for efficient involvement of vols.

(if there before VSC appt)

differences have a VSC post have made

Any problems arisen in any way from your point of view with working with VSC?

if would prefer direct dealings with vols.
advantages
disadvantages

What you expect VSC to do

day to day
long term

work boundaries of other workers in your org., setting limites to what VSC is allowed to undertake

where are limits set
who makes rules
work in practice

In thinking about the function of the VSC, what kind of background or training would be most useful

Where does VSC stand in the org.

hierarchial relationships
influence on policy
influence on finance allocation
authority

5. TRADE UNIONS AND PROFESSIONAL ASSOCIATIONS

contacts at your level with regard to vols.

6. FINALLY

Main achievements for org. of having a VSC.

where are limits set
who makes rules
work in practice

In thinking about the function of the VSC
training would be most useful

Where does VSC stand in the org

hierarchical relationship
influence on policy
influence on finance allocation
authority

TRADE UNIONS AND PROFESSIONAL

contacts at your level with regard to vols

FINALLY

Main achievements for org. of having a VSC

or setting limits, pro vary in your

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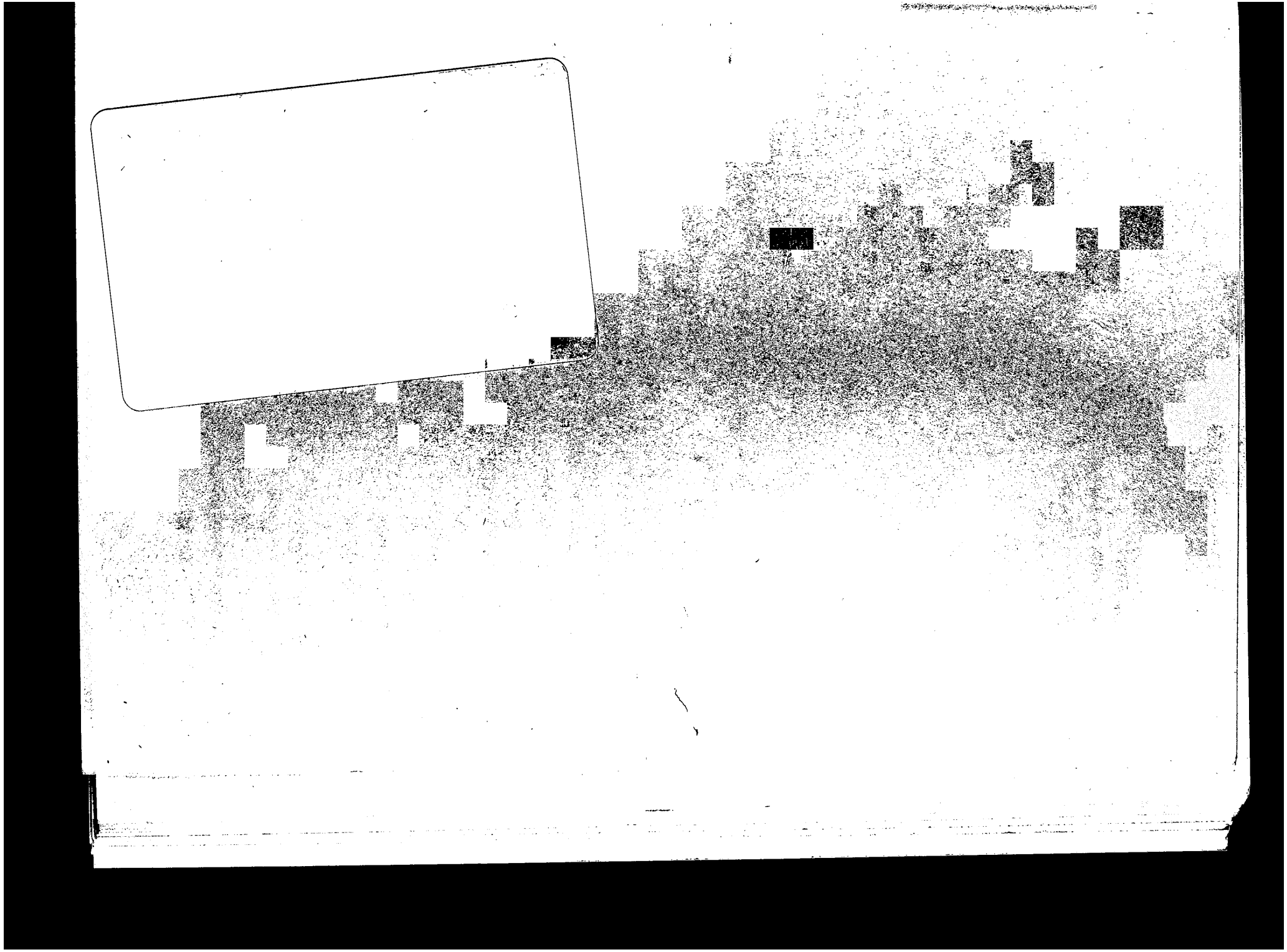

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Pat Gay and Jill Pitkeathley are also authors of 'When I Went Home', a book which explores the experiences of patients discharged from hospital, which was published by the King's Fund in 1978.