# Volunteering and early child outcomes: Implementation Framework

# Introduction

There were two main aims of the evidence review. The first was to review the literature to discover which models or methods of volunteering are successful in contributing to the three ABS development outcomes. The second aim was to create a framework and tools to help use the findings from the evidence review in practice to develop and deliver volunteer projects.

This section of the report presents that framework and tools along with suggestions on ways to use the tools and some worked examples. The evidence review section should be read first before using the framework. The framework uses the main learning points from the evidence review but does not reiterate the sources or the reasons why these points are important to include. Therefore, the understanding gained from reading the evidence review is important in order to make sense of the framework.

#### How to use the Framework

Key points within this section will reference the relevant pages in the main evidence review and will be shown like this,



will mean that the evidence relating to this point can be found on page 24 of the evidence review report.

Some sections of the framework pull evidence from a number of different places in the report in those instances the pages are not referenced as it would make the framework more difficult to use.

The framework does not introduce any new evidence around volunteering, it simply presents it in a way that can fit more easily with the service design process and implementation planning.

# Framework – A Formula for Success

The framework draws on learning from implementation science and fits with the ABS Service Design process.

Work in implementation science has created what is known as the 'Formula for Success'. This says that to achieve significant health and social outcomes for a population a number of elements within a formula need to be in place. The formula highlights that having a volunteer programme which has shown to be effective is not sufficient to achieve the outcomes.

The formula is shown in Figure 1.

Figure 1: Formula for Success

# Effective Intervention

# X

# **Enabling Context**



# Effective Implementation



Socially significant outcomes

#### Effective Intervention

An intervention that actually works. An intervention, that when delivered properly, will help families achieve the outcomes and goals.

The intervention can be a volunteer programme, project or service.

For an intervention to be put into practice it must have a description of what the volunteers will actually do with families, parents and children, how volunteers will work, and how delivery of the intervention will be assessed.

## **Enabling Context**

The context or environment has to support the delivery of the intervention.

The context or environment includes many elements. For example, attitudes of professionals to volunteer programmes, the fit of volunteer programmes with other services, and the way volunteer and other services and funded and commissioned.

### **Effective Implementation**

An effective implementation plan sets out how you will put the intervention into practice in the local context. It includes:

- What you will do and how you will work with other professionals and stakeholders in the wider context to make the changes that need to happen to support the delivery of the programme.
- How the programme will be run and what will be needed organisationally to deliver the volunteer programme successfully.
- How you will monitor progress and think about improvement over time.
- How volunteers are recruited and trained.

Although each element is set out in turn, this should not be a completely linear process. The review of each element should inform the others. For instance, you may start by choosing a particular intervention because it has a good deal of high quality evidence for its effectiveness. However, on reviewing the local context it may become apparent that it will be difficult for it to support the delivery of this intervention. When creating the implementation plan it then becomes clear that the time and resources required to change the context to one that is more hospitable is beyond the available capacity of the ABS team. Therefore, it may be wise to choose a different intervention which you are more certain can be put in to practice successfully.

What follows looks at each element of the formula in turn and presents tools to incorporate learning from the evidence review to design an intervention, understand the local context, and create an implementation plan.

# Effective Intervention

Choosing or designing an effective intervention is the first part of the Service Design process. It begins with the creation of a Theory of Change.

The question then is, are there volunteering programmes which can be effective in achieving ABS outcomes?



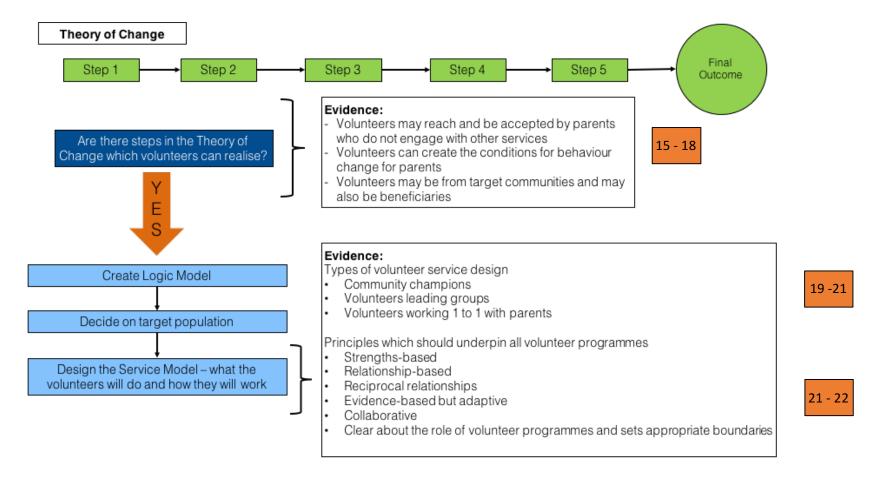
There is evidence of direct impact on ABS outcomes for a number of volunteer programmes. There is also evidence of indirect impact, meaning that there is evidence that volunteer programmes may impact on intermediary outcomes within a broader ABS Theory of Change.

You may wish to use and adapt an existing volunteer programme or develop a new volunteer programme model within the Service Design process. Like all interventions as part of ABS, they should be based on a Theory of Change. The evidence review has revealed how volunteers could realise intermediate outcomes in the theory of change, how volunteer programmes should be designed depending on the desired outcome and the target population, and a set of principles that should underpin all volunteer programmes if they are to be successful.

## Using the evidence review to design a volunteer programme service model

Figure 2 shows a flowchart based on the service design process incorporating the key learning points from the evidence review which are pertinent to this.

Figure 2: Flowchart based on Service Design process



Service Model

In order to be able to plan implementation and to measure progress, the service model must include:

- Clear description of essential components of the service
- · Operational definitions of essential components how will the essential components be performed
- Defined methods to assess performance of practitioners
- Who will deliver the service

#### Evidence:

Elements to consider:

- Suitable frequency of contact with volunteer and parent(s)
- Flexible ending of support
- Manage the ending of support from the start

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# **Enabling Context**

Consider the local context before moving into implementation. Your implementation plan will need to include methods to work within the context and to adapt the context to become more enabling.

Understanding the local context helps when working out how volunteer programmes might need to be shaped or adapted to fit locally; when planning what will need to be done in order to get a volunteer programme up and running; and when thinking about how easily a programme might be sustained and scaled.

There are many aspects of the context that need to be considered when planning the implementation and delivery of any intervention and it can be difficult to make sense of them all. Some factors in the environment will be helpful and some will cause challenges. Being able to use the enabling factors and mitigate the challenges is what will make a programme deliverable and sustainable.

# Understanding the local context

We have created two tools for describing the enabling and challenging factors in your local context.

- 1) Circles of Influence (Figures 3 and 4) this provides a way to visually represent the different aspects of the local environment. Starting with other individuals that will work with the volunteer programme, to the organisations delivering services, to local policy, and through to national policies for health and social care.
  - Analysis of contextual factors (Table 1) this provides a template to add a more detailed description and analysis of the key contextual factors identified in the Circles of Influence.

# 1) Circles of Influence (Figure 3)

#### How it works

Figure 3 shows the child and parent(s) at the centre with the contextual layers/circles wrapped around. The circles can influence each other. The closer the circles are to each other the more influence they can exert. So in the figure, the child and family are influenced most by the volunteer programme and least by local and national policy. Equally, the child and family have most influence over the volunteer and the programme and least over national and local policy.

It should be noted that this does not mean that children and families can not directly influence local policy. That level of influence is at the heart of the ABS work. However, ensuring that influence takes much more time and work to create than is required for the parent to influence the way the volunteer works.

## Creating a local visual context (Figure 4)

Each of the circles should be populated with factors which could affect the delivery and sustainability of the particular volunteer programme.

For instance, if the programme relies on midwives to refer expectant mothers then it is imperative that midwives see the programme as worthwhile and therefore will refer expectant mothers. If not, then it doesn't matter how effective the programme is, if no one is referred then it can't work. So 'Attitude of local midwives' would be put into the Practitioner/Other services circle.

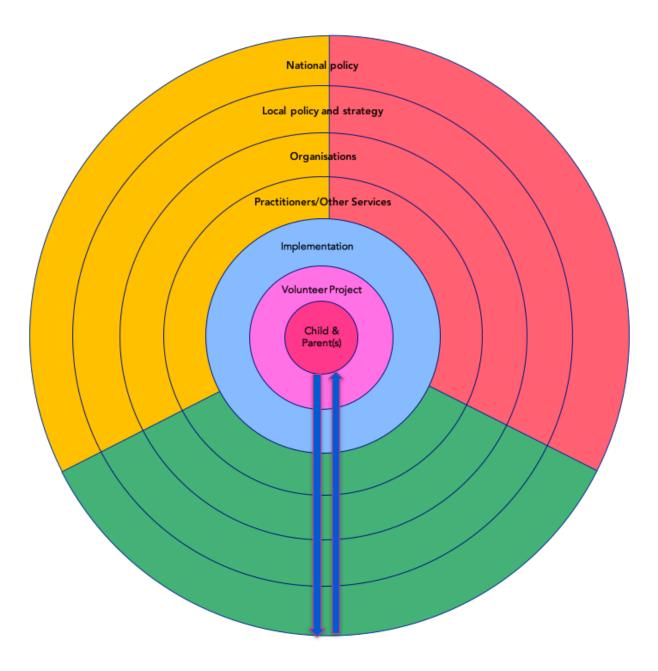
The way programmes are funded is very important. If funding for a volunteer programme is only for 1 year and further funding based on unrealistic outcome measures, it doesn't matter how great the programme or how keen the midwives, funding will be stopped after 1 year and the programme won't be delivered. Therefore, 'length of contract' and 'expected outcomes' would be put in the Local policy & strategy circle.

Your knowledge of the current state of each of these factors will determine where in each circle they are put. If they currently pose a challenge then they go in the red section of the circle, if currently enabling then green and if somewhere in between then they go in amber.

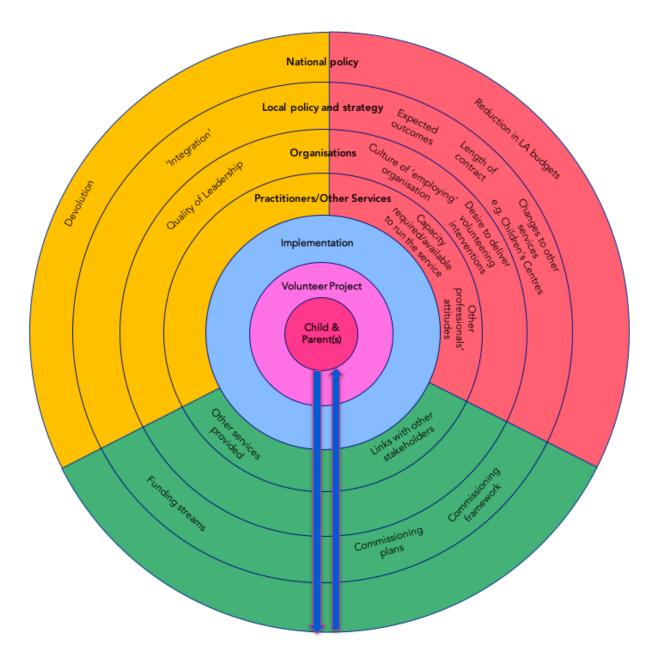
Figure 4 gives an example of how that might look.

When using this tool, you may want to add other layers that you feel are relevant to your local context and are not currently included in this version.

Figure 3: Circles of Influence – drawing your context







# 2) Analysing the contextual factors

The next stage is to describe in more detail each of the contextual factors identified in the circles of influence. The more comprehensive the description and analysis the easier it is to think about how to use the enabling factors to support the volunteer programme and what will need to be done to mitigate the challenges.

Table 1 shows a brief example of what this might look like using the factors from Circles of Influence in Figure 4.

Please note that the examples are fairly extreme and are based on experience across many local authorities, CCGs and provider organisations. It is not designed to reflect any one area.

Both these tools can be revisited over time to identify changes in the context and to see progress where factors were challenging at the start but have been shifted to now become enablers.

Table 1: Contextual Factors description: worked example

Contextual Factors					
Level	Factor	Description			
National policy	Devolution	The local area has been granted 'devolution' status so has the potential to move budgets between health and social care and to change the way services are commissioned which may enable smaller organisations to deliver services more easily. These organisations may be better suited to delivering volunteer programmes			
	Reduction in local authority budgets	Children's services budgets have been reduced. This has led to a reduction in preventative services and a focus solely on statutory services and on children on the edge of care.  There is low morale in children's services staff and a resentment of other services and ABS who appear to be very well funded.			
Local policy and strategy	Funding streams	ABS has good funding streams with money available for a number of years to develop new programmes and ways of working			
	Commissioning plans	There is an appetite for volunteering programmes and these have been factored in to ABS commissioning plans			
	Commissioning framework	There is a move to a new commissioning framework which brings providers together as an alliance. This would enable smaller providers to be part of an alliance and be able to deliver volunteer programmes.			
	Integration	The move of commissioning of the 0-5 Healthy Child Programme to local authority has meant that discussions have begun about bringing together commissioning of all 0-5 services. This could make it easier to commission volunteer programmes that have both health and social outcomes.			
	Length of contract	New programmes are funded as 1 year pilots with further funding only available on the basis of 'outcomes'.			
	Expected outcomes	The outcomes are medium to long term and therefore unlikely to be seen within 1 year. This model does not allow sufficient time for the development and implementation of programmes.			
	Changes to other services	The providers of children's centres have recently changed and the new organisations are still working on implementing the new model of service provision.			

Contextual Factors					
Level	Factor	Description			
Organisations	Quality of leadership	There are some members of the leadership team in the statutory organisation who do understand, to some extent, what is required to deliver a volunteer programme. They are also willing to learn.  Leadership in a number of smaller local organisations is good and could deliver volunteer programmes well.			
	Culture of volunteer 'employing' organisation	As the system currently stands, there is an expectation that a volunteering programme would be delivered by a large statutory organisation with no experience of delivering volunteer programmes. It has a very hierarchical and blame culture and staff morale is low.			
	Desire to deliver volunteering programmes	There is no real desire to deliver a volunteering programme and no understanding of what it would entail. However, members of the leadership team feel that they should be the organisation to be commissioned to do this programme.			
Practitioners/ Other services	Other services provided	As part of ABS there are a number of other services being planned or delivered that could work well with this volunteer programme.			
	Links with other stakeholders	Within the ABS programme there are good links across teams and services which would support the delivery of a volunteer programme.			
	Capacity available to run the service	There have been budget and staff cuts within the statutory organisation which means there are very few managers and they are extremely stretched. It is likely that the volunteer programme would be added to an existing overstretched manager's portfolio.			
	Other professionals' attitudes	Within statutory organisations whose budgets have been cut, there is a very poor attitude to volunteers. There is a sense that volunteers are seen as a cheap way to provide services and that professionalism is being undermined.			

# **Effective Implementation**

Once the service model is described and the context reviewed for enabling and challenging factors, an implementation plan can be created.

The implementation plan should include everything that needs to be done to deliver the chosen programme in the given context.

Learning from implementation science has identified three core components for successful implementation. All are equally important and can reinforce each other and also compensate for each other if one is weaker at some point.

These components are:

- 1) Competent Delivery of the volunteer programme itself
- 2) Organisational Ability to provide what is needed to deliver the programme
- 3) **Systems Leadership** to ensure that the context enables delivery and sustainability of the programme.

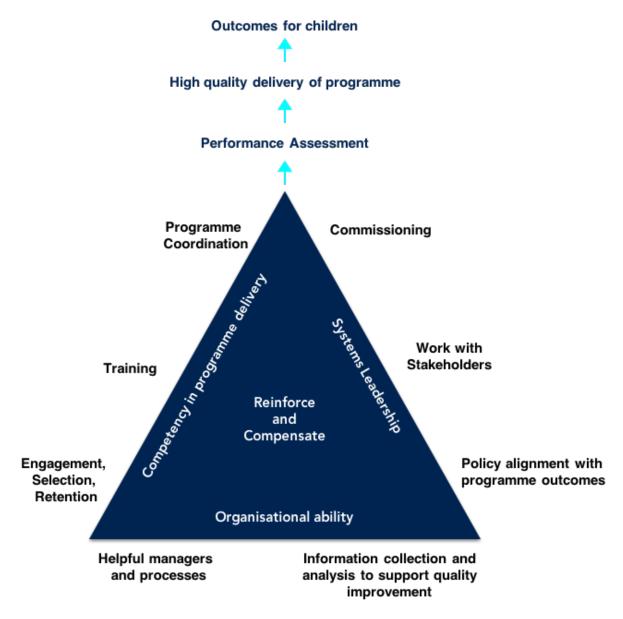
Quality of programme delivery and the three implementation components should be assessed in order to monitor progress and be able to make improvements. If all are working well then this should result in high quality delivery of the volunteer programme and the expected outcomes for children and families.

Each of three implementation components includes a number of specific elements which are described in Table 2 and illustrated in Figure 5.

Table 2: Key elements within each of the core components required for effective implementation

	Components					
	Competent Delivery	Organisational Ability	Systems Leadership			
Elements	Programme coordination  A person or team of people who will run the programme on a day to day basis and lead the programme within the provider organisation.  Programme coordination will perform a number of roles which are vital to the success of a volunteer programme.	Helpful managers and management processes and structures  - These are important in order to establish a hospitable organisation for the programme and for its implementation to be effective.	Commissioning to support delivery and sustainability  - The way services are commissioned and the way commissioners work with providers has a huge influence on whether a volunteer programme will succeed.			
	Training  Volunteers will need to learn about the programme, how to deliver it, and how to work with parents.	Information collection and analysis to support quality improvement  - An essential element for establishing the programme, reviewing the quality of implementation elements, and assessing intermediate outcomes. For instance, the data might show a greater drop-out rate for volunteers working within a particular venue. This may highlight the need to work with staff at that venue to help them support volunteers more positively.	Positive work with other stakeholders and the local context  This describes the ways that the challenges within the context can be mitigated and overcome and how the enabling factors can be used.			
	Engagement, selection and retention of parents and volunteers		Policies which align with the programme  This includes policies around commissioning and contracting. For instance, do they support small organisations to bid for and deliver services?  It may include policies around safeguarding. Do they work to allow volunteers to work with vulnerable families?			

Figure 5: Implementation plan components and elements



The implementation plan should describe 'what good looks like' for each of these elements and a plan for how that can be achieved.

The literature and evidence review has much to offer on what each of these components and elements should look like for the successful implementation of volunteer programmes.

The learning from the evidence review on each of these elements is collated in the tables below. Each of the points in the tables are included because there is good evidence that these are important for successful delivery, or there is consensus across a number of volunteer programmes that these are key to success. For more detailed discussion and sources refer back to the evidence review report.

Note that the points taken from the evidence are not an exhaustive list of everything that needs to be included in the implementation plan. They are just those points that have been included in the published literature and for which there is good evidence.

# Organisational Ability

# **Helpful Managers and management processes**

Understand the role of the programme coordinator and what is required

- Flexible working
- Sufficient capacity
  - o Realistic number of volunteers per coordinator

Provide support for safeguarding

Provide good quality, regular clinical supervision for the programme coordinator

All programme costs are recognised and provided

Volunteer expenses paid promptly or upfront if required

#### **Protect volunteers**

- Lone working policies

Use a recognised volunteer governance structure

- E.g. Investing in Volunteers



Provide a suitable base/office space

- Sufficient desk space
- Sufficient storage space
- Ability to book rooms for meetings
- Private space for supervision
- Accessible and acceptable to volunteers

Provide all equipment that is required

- IT
- Phones

# Information collection and analysis to support quality improvement

'Just enough' data collection

- Sufficient to be able to look at progress and improve the programme and its implementation but not too much to become onerous

#### Realistic

- What can be measured
- What is possible to collect

#### Measure

- To aid quality improvement
- To measure impact
- To deliver with fidelity to the service model
- To measure implementation elements

#### Determine

- How information will be collected
- How data will be analysed
- How analysed data will feed back into the quality improvement cycle

Review and reflect on information collection and use

# Competency in programme delivery

# **Programme Coordination**

# Project coordinator is vital

#### Coordinator role

- Recruit volunteers
- Train volunteers
- Build trusting relationship with volunteers
- Supervision of volunteers
- Debriefing sessions with volunteers
- Network with other professionals

## Coordinator skills

- Safeguarding
- Supervision
- Builds good relationships
- Models the underpinning principles of volunteer programmes

## Supervision of volunteers

- Must do if volunteers doing 1 to 1 work with parents
- Include safeguarding
- Include setting and maintaining boundaries

# Administration support

- Dedicated to just the volunteer programme
- Good organisational skills
- Good communication skills with volunteers and parents
- Works to match parents to volunteers quickly

#### **Training**

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### Enable volunteers to build mutual respect with parents

# Strengths - based

- Builds on volunteers' strengths and abilities
- Increase volunteers' confidence

## Collaborative with volunteers

Teach skills for the role not just knowledge

Suited to adult learners

Provide social opportunities for volunteers

Provide expenses

Provide childcare

Use easily accessible and familiar venue

#### Include:

- Safeguarding
- Setting and maintaining boundaries
- Help volunteers to build resilience in parents not dependency

# Align training with parent recruitment

- Ensure short time between training and first volunteering experience

Provide regular on-going training after initial training sessions

Accreditation of training offered

### **Engagement, Selection and Retention of parents and volunteers**

#### **Engaging Parents**

- Explain clearly what the programme entails and that they are volunteers **not** professionals
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- Use informal ways to engage
  - Opportunities to meet volunteers face to face in a variety of community settings
- Use formal ways to engage
  - o Referrals/notifications from professionals
- Use acceptable venues to meet volunteers
  - Not necessarily Children's Centres
- Programme brand identification
  - o Warm
  - Positive
  - Normalising

#### **Retention of Parents**

- Volunteers need to be:
  - o Reliable
  - Consistent
  - Non-judgmental
  - Strengths-focused
- Programme coordinator 'matches' volunteer to parent
  - Transparent process
  - o Do not match if already know each other or live very close to each other
- Same volunteer over the period of support
- Suitable frequency of contact
- Volunteer and parent are clear about their relationship with each other and the boundaries

#### **Selection of Volunteers**

- Ongoing process of recruitment
- Multiple methods of advertising opportunities
  - Leaflets
  - o Local media
  - o Online media
  - o Social media
  - Community groups
  - Existing volunteers
- DBS checks for volunteers
- Interview for volunteer roles
- Select for right qualities and ethos in relation to proposed roles:
  - Empathy
  - o Enthusiasm
  - Communication skills
  - (Languages spoken if required)
- Clearly define the role to potential volunteers
- Provide a taster course
- Offering a range of volunteering roles attracts different types of people
- Personal approach to potential volunteers by the coordinator
  - o If want specific types of people, e.g. asylum seekers
- Recruit people from a range of different life stages
- Specify a minimum expectation of volunteering after training

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### **Retention of Volunteers**

- Make clear with potential volunteers what the role will be and level of commitment required
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- Opportunities to sustain social relationships once training is finished
  - o Group supervision sessions
  - o Social events
  - o Group meetings
  - Opportunities to volunteer in pairs
- Enable the volunteer experience to fit with the individual's motivation to volunteer
- Individual supervision with volunteers
  - o Reflective practice
  - Support personal growth
  - Emotional support
  - o Help deal with feeling of rejection if a parent doesn't want to see the volunteer
- Provide opportunities for mutual support between volunteers
- Methods to receive feedback from clients on the impact of support
- Give positive feedback from other services and professionals
- Provide employment opportunities

# Systems Leadership

## Commissioning

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Choose a provider who has the organisational abilities

Facilitate links between volunteers and professionals

Model the principles which underpin volunteer programmes

- Strengths-based working
- Relational working
- Collaborative

Understand volunteering programmes and what they require

- Sufficient time to set up and recruit volunteers
- Sufficient funding
- 3 years funding at least
- Not a substitute for professionals

Plan an appropriate scale

- Not too big, too soon
- Programme must be able to:
  - Support all volunteers
  - o Balance parent referrals to volunteer numbers
  - o Be sustainable

Set realistic goals

- Choose indicators which show progress towards goals in the first 1-2 years
- Be clear on what the programme is actually able to achieve

#### Work with stakeholders

Create good relationships with key professionals as need their support for the programme to work

 Involve professionals very early on in the planning of the programme and the steering group

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- Be clear on the role of the volunteers and the training they receive
- Clearly articulate the boundaries of volunteer programme
- Volunteers have shared desire to support families
- Volunteers can assist in the achievement of professional goals
- Involve key professionals in the training of volunteers
- Provide clear referral guidelines for the programme

# Creating an implementation plan

Creating an implementation plan is complex. As you can see, it requires bringing together knowledge and understanding about the volunteer programme itself, the analysis of the local context, and the learning from the evidence review on what is required for successful implementation. It should be clear about what good looks like for each of the components and elements for successful implementation. It should then describe what needs to be done to achieve 'good', how it will be done and by whom.

# 1) Mind-mapping the plan

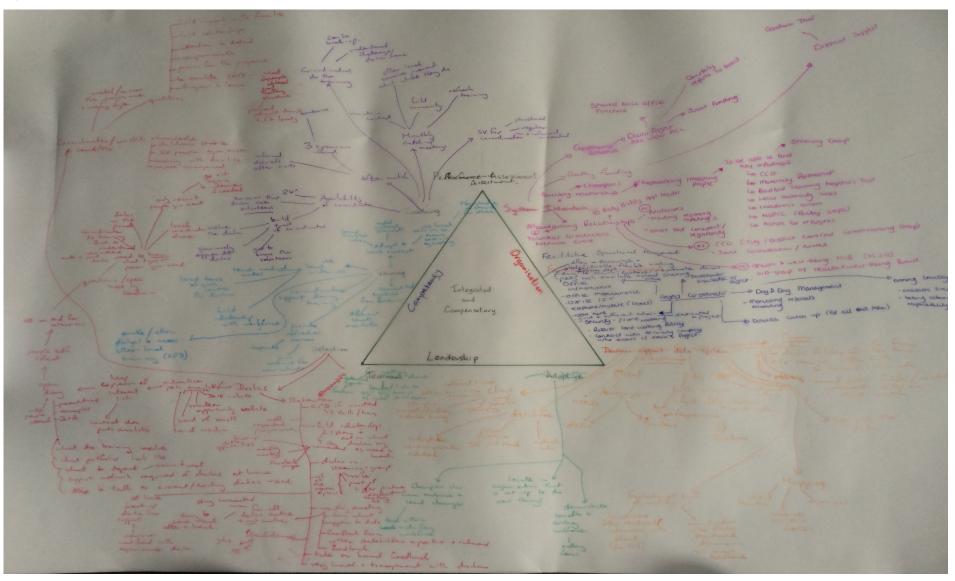
In order to start making sense of all that the first step of creating the implementation plan can be to use a mind-mapping approach.

This is a helpful methodology for a number of reasons:

- Creating an implementation plan is not a linear process. As implementation is discussed, ideas will be generated which may fit into different components and elements of the implementation model. A mind map lets you easily keep track of where all the ideas should go.
- It allows you to keep adding to different aspects of the plan as the discussion progresses. For instance, you can add detail of 'how' you might achieve some of the crucial aspects of implementation identified in the evidence, e.g. adding to the 'selection of volunteers' part of the plan by including: who will interview the volunteers; what questions will be asked; what answers would you want to demonstrate the qualities you are looking for.
- It provides a visual representation of the plan which can make it easier to see connections between the different components. For instance, as you expand on what helpful management and processes would need to look like, it may become clearer how the commissioning process might work in order to contract with an organisation that could deliver that model of management.

Figure 6 shows an example of how this might start to look. It starts by using the triangle diagram from Figure 5 which includes all the key elements for successful implementation. The mind-mapping is then used to describe what each of those elements will look like and how they might be achieved locally for the chosen volunteer programme.

Figure 6: Example of a whole implementation plan mind-map



# 2) Stages of creation of an implementation plan

The first iteration of the implementation plan mind-map will probably contain the 'WHAT' of the plan. These are your initial ideas about what good will look like and what you will need to do. For example, the programme coordinator will need to be notified of all pregnant women in the ABS area.



The next step is the 'HOW' of the plan. As you work through the plan over time each 'WHAT' will require a detailed 'HOW'. Using the example from above, HOW could the programme coordinator be notified of all the pregnant women locally? The detail can then be added to the mind-map, e.g:

- a discussion with the lead midwife on how this could be done
- a process for midwives or administrators to pull data off their system
- a secure way of transferring information to the programme coordinator
  - a way of getting consent from parents if that's required
    - information governance processes being followed
      - policies and procedures in place to store data



The final step is the 'WHO' of implementation. WHO will actually do all the work and tasks required within the implementation plan. The programme coordinator may do a lot of the implementation work. However, it is vitally important that there is another person or team with the dedicated capacity, skills, and appropriate level of influence in the organisation or system to deliver aspects of the intervention plan before the coordinator is recruited or that fall outside the coordinator's sphere of influence.

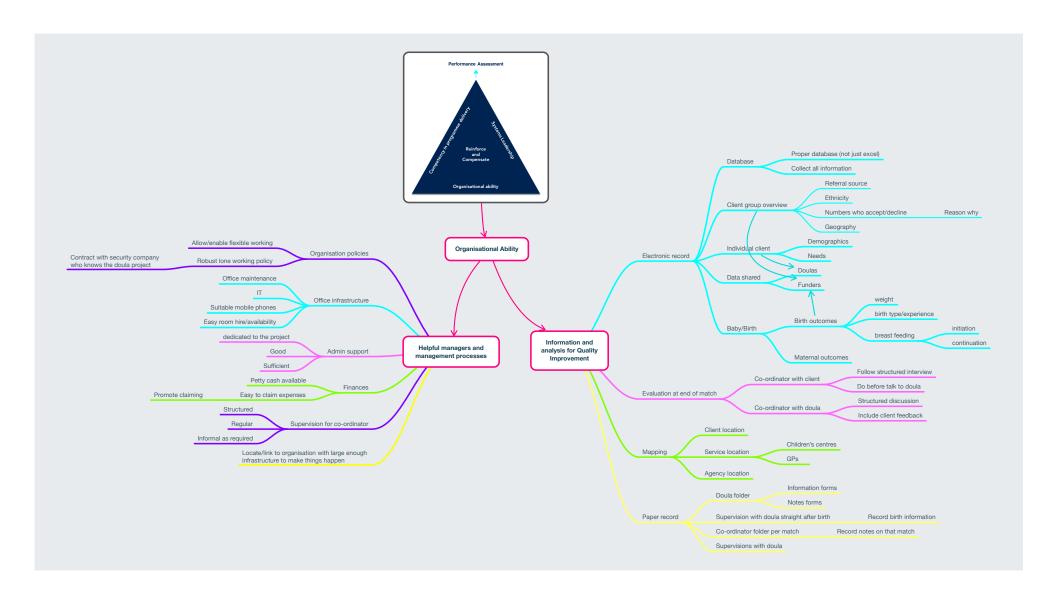
Figure 7 shows the detail of the start of a mind-map exercise. At this stage it includes mostly the 'WHAT' of the plan. The example uses a volunteer Doula project.

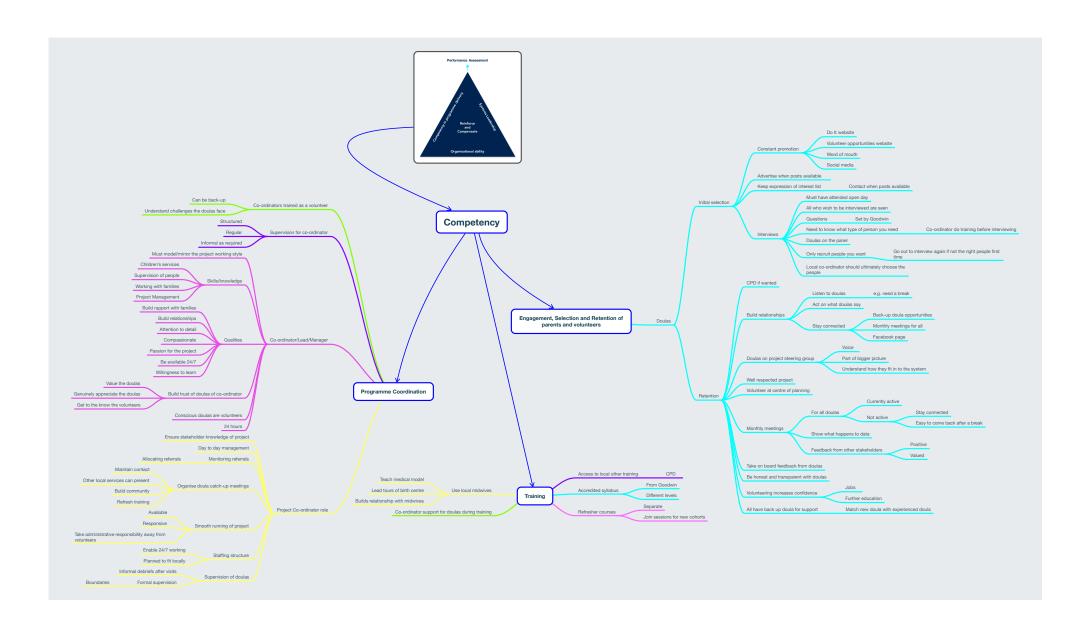
# 3) Creating a project plan

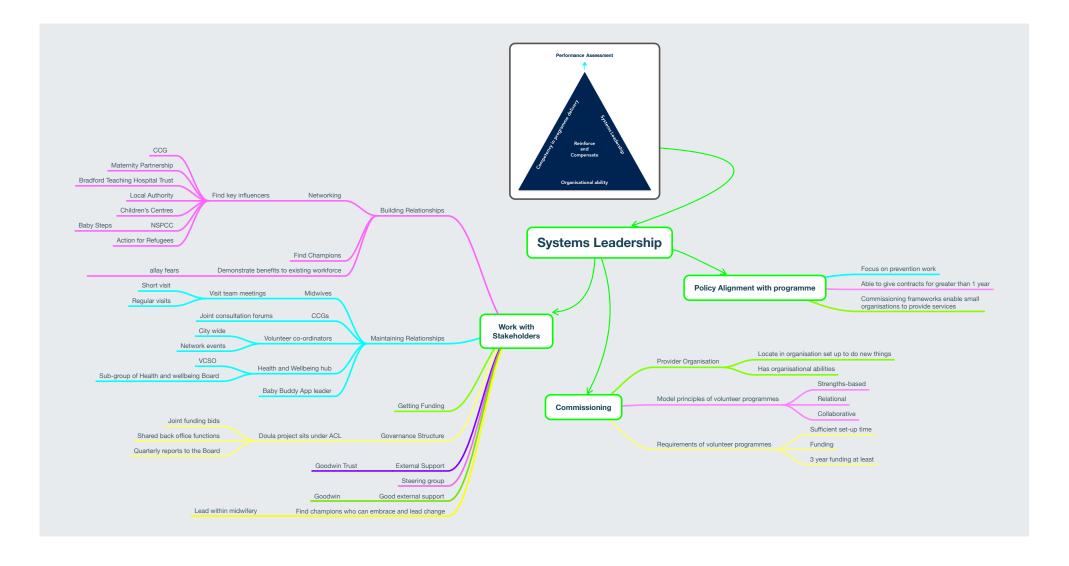
The complexity of creating an effective implementation plan means that it is difficult to go straight to the creation of a traditional project plan. The mind map can enable that complexity to be managed to create a plan where no crucial elements are missed.

Once the mind-map is complete it can then be translated into the project plan or checklist and a timeframe added.

Figure 7: Mind map example components







# Conclusion

Reviewing the context for enabling and challenging factors, and the creation of a well thought through implementation plan with dedicated capacity to delivery it are often overlooked when thinking about delivering a new programme or service. As a consequence, many new initiatives and programmes do not succeed in achieving the outcomes they intend or they are not sustained beyond 1 or 2 years. Evaluation of implementation has highlighted again and again that this is why new programmes fail or do not last. This implementation work has taught us a lot. The challenge now is to... implement it.