

Risk assessments

risk assessments which is time consuming but we feel we are prepared. More than one risk assessment needed as we operate in different buildings and each needs its own - but also trying to keep a common

Online check-in and chat calls - all staff, vols and clients: 200+. Transferred online via Teams for F2F. 'Dial Zoomers' - social club one p/w. Training provided - specialist mental health support

In terms of risk assessment we have done this thoroughly. It's more about managing people's anxieties now.

Group 1

Supporting the wellbeing of staff/volunteers

We haven't had volunteers back yet as we've prioritised staff. Some volunteers don't want to come back to f2f activities.

We created a wellness action plan and carried out H&S assessment with people, including on work station. We try to keep connected by having a hello chat at 9.45 on zoom every day that people can opt in or out of. 1/3

On Mondasy we have a work check in for project updates. We have set up a Zoom link where you can be connected to team members as if you were in the office and you can put music on. 2/3

We also use <https://www.teamflowhq.com/> which is a virtual office space. You can go into the kitchen etc. 3/3

September officially but have allowed staff to return to office if they needed for their wellbeing for a few months now. We are also encouraging the head office staff encouraged to test out what coming back feels like in this

NCVS are doing a staff survey to gauge staff feelings about returning to the office and if there is anything further they need to be more effective/productive whilst WFH

Running activities/services safely

We are retaining safety measures as for the people we work with the risks have increased now that legal req have come off

We have not mandated vaccines or tests but we are encouraging people gently to have these. Our staff who are working on site can have the tests them for free.

Communicating effectively

I have been on maternity leave throughout the pandemic. Our organisation is not as good on social media and the comms methods don't seem to work too well for some of our staff and volunteers. 1/2

I have personally felt engage thanks to online activities. 2/2

We have made sure communicated to staff ahead of gov't announcements to show we are thinking ahead of time. Challenge is to make sure staff feel informed throughout.

Communicating too much can also be a problem as people disconnect. We have kept in touch with zoom meetings, but some people don't have access to technology. 1/2

Our organisations has had no comms with volunteers during the pandemic which is now a challenge as we need to re-engage them.

We have used facebook groups and whatsapp groups to keep people engaged. Using a variety of communication channels has worked very well.

we have worked around this by creating telephone circles where small group of volunteers together who can share the communications with each other. We have also made 1:1 calls throughout the pandemic. 2/2

Risk assessments

Decided to continue with the same restrictions as before. Using a church hall instead of their original building.

Divide over how people approach the vaccines, abiding by distancing, and adhering to the rules.

Different comfort levels too - some people are very comfortable, others are anxious and cautious.

It's hard to manage the risk when you don't legally have to enforce it. We can recommend, but not enforce. People don't follow guidance, which isn't helpful.

Receiving a lot of guidance from the local authority (and nationally).

Taking decisions to 'not' go back to face to face delivery, depending on case rates. Fear of passing covid on to vulnerable users. Discussed with staff and made the decision.

Not getting clear guidance in terms of what risk should be assessed.

Supporting the wellbeing of staff/volunteers

Running activities/services safely

Restarting f-2-f fundraising activities at festivals (large scale, public events). 'If you're comfortable, do it. If not, don't apply.'

Recommending use of lateral flows, etc, but not enforcing around people's clinical status (eg, vaccinated or not)

If an event is taking place on private property, can the venue mandate the use of face masks, etc?

Local authority has made the decision to not have large scale events, etc.

Venues are open, so there is low-level f-2-f activity. Small scale, outdoor activities. Adapted events to reduce 'mass gathering' and get people moving rather than congregating.

Group 2

Communicating effectively

Risk assessments

Return to office
sept, schools return,
uni's opening - lots
of worry lots of
effort and another
lockdown in oct

**people
refusing
to attend
to office**

**talk to them
-address their
fears**

Group 3

Running activities/services safely

Most on-board
w/online approach.
People want
online/hybrid in
future. more
attendees. Bought
higher level of zoom.
have to offer
bi-lingual -
simultaneous
translation.

mental health
charity - people
want service, to see
people but anxious
to come in in
person. Anger about
limited opening up.

Supporting the wellbeing of staff/volunteers

Online check-in and
chat calls - all staff,
vols and clients: 200+.
Transferred online via
Teams for F2F. 'Dial
Zoomers' - social club
one p/w. Training
provided - specialist
mental health support

Staff survey - how feel
wfh, hybrid, office?
Core concerns -
cleanliness, commute,
social distance?
Communication
w/teams, manager,
productive,
equipment?

Things not able to
solve - new staff
w/son from nursery,
new to area.
Situation untenable
- sadly moved back
to L'pool from
s'hamp.

equipment, ad hoc
opening of office,
Staff well-being
programme e.g. team
cooking, team socials,
reg. meetings. New
starter meetings
w/each area of org.
individual team
meetings. All staff
lunch weekly - b/o

**Aiming to
explore
well-being
with staff in
121**

**have used
allotment for
staff get
together -
usually a
project**

100+ staff, weekly
staff meeting - key
challenge in
inducting new staff,
immersing new
staff, support new
starters.

Clusters of new
starters - cohorts of
new recruits, longer
inductions with
teams; informal
teams catch ups tea
& chat;

Risk
assess/questionnaires
to be as safe as poss.
In office 50% of time.
Keeping
communications
open.

Risk assess - asking
directly about
concerns 121; their
concerns/anxieties/wf
h -

Communicating effectively

Service users -
newsletters,
team photos,
light hearted,
maintain
engagement.

The way we
have
embraced
teams/zoom
has been
impressive

**Lots of service
users not
online - sent
newsletters by
post**

**Difficult
discussion?
call or have
face to face
conversation.**

breakdown of staff
relationship,
requiring
intervention.
Written word, tone.

**So easy to
read things
into emails
that aren't
there.**

Risk assessments

Concerns about funding with lack of fundraising

Running activities/services safely

No requirement to socially distance but anxiety meaning that people don't want to come back. Be clear about measures e.g ventilation; staggered working day

No enforcement; encouraging vaccine and trying to find out if people have had both vaccines; turn away those with symptoms; encourage testing and having testing on site.

Group 4

Supporting the wellbeing of staff/volunteers

Concerns about beneficiary wellbeing; using local networks for support.

Issues with clients and staff; serious deterioration in terms of mental health; reassurance and good communication

re-engagement; majority of issues was to do with anxiety; particularly older; reassurance, personal contact, plurality of offer. Phased return for the staff; individual contact; unsure about what to do; provide encouragement. Fear

Internal mental health and wellbeing support e.g trained counsellor; mental health first aid

Communicating effectively

Risk assessments

Individual Risk Assessment by phone or Teams

Do we carry one doing individual risk assessment

blended working, home & office

Alarma risk assessment - general health, covid age risk assessment, occupational health team, for volunteers to be placed

Dignity at work - people can make their own decision on vaccinations - Share at dignity at work policy - Lorraine

Freedom day has created confusion, most orgs taking a cautious approach

Group 5

Running activities/services safely

Planning face to face training later in the year

Cautious approach to face to face, running activities outside but keeping people in bubbles of 6

Still wearing masks, washing of hands, not using mini bus

Still working to and taking the approach as though no one has had the vaccination, both Staff and Volunteers.

Introduced a Volunteering Safe Operating Policy and Procedure, (VSOPP) which any volunteering wishing to volunteer with us has to read, agree to and acknowledge.

introduced Safe Systems at Work documents for each activity sessions. (SSOW) which are regularly review and amended with updates.

Planning F2F events in September & October but mainly outside events

Supporting the wellbeing of staff/volunteers

zoom invites to meetings for both staff and volunteers. Volunteers, part of certain projects that were deemed as vulnerable, were kept in contact with via phone and text messages on a weekly/fortnightly

Line Managers/Staff, 1:1 and team zoom meetings and telephone calls on a fortnightly basis. Included general chat and peer support, this even included staff team what's app groups being created. Still ongoing.

Communicating effectively

Sent out regular email updates to our volunteers, plus this information was also put on our volunteering pages on our website.

Those volunteers and members with no internet or email access where sent all updates via postal service.

zoom invites to meetings for both staff and volunteers. Volunteers, part of certain projects that were deemed as vulnerable, were kept in contact with via phone and text messages on a weekly/fortnightly

Regular newsletters mailed out to all volunteers and members of the trust, with both general information and covid updates.

Our project officers and reserves officers sent out additional information and updates to their teams.

Risk assessments

Hybrid working - concerns around developing risk assessments, as we don't have a lot of in house expertise on this area.

We had a face to face fundraising cycling activity, where we had to do a whole host of risk assessments. We just had to consider any and all issues that could go wrong. Traffic light systems can be useful.

Had some services which continued during lockdowns. Had host of risk assessments. Did have visits from police and local authority, but the risk assessments covered such a range of issues. It was worth it.

Concerns over relaxing this extensive risk assessment process as risks change. How do we move to a more proportionate process?

IOSH Managing Risk training was helpful, gave standardised templates.

Importance of managers and management engaging with staff and volunteers. Giving guidance and support, but being led by needs and feelings of people on the ground.

<https://www.hse.gov.uk/simple-health-safety/risk/risk-assessment-template-and-examples.htm> - risk assessment templates from H&S Exec

Group 6

Running activities/services safely

Supporting the wellbeing of staff/volunteers

Very slow return to work process. Have a lot of space, but CEO got pinged on day one. Managing holiday is difficult at the moment, allowing people not to come back to office for now.

People's reticence to return to work and to volunteer, and to engage with fundraising activities.

Organisations needing to build their own rules and guidance for staff and volunteers. We need to give guidance and standardisation, as with the lifting of restrictions this is more about individual concern and safety and perception of risk.

Recent question from trustees to ask if staff have refused a vaccine. But managers not asking staff (human rights and control). Uncertain territory.

Have a wellbeing Slack channel where staff share resources. Have twice a week short sessions to have a cup of tea and some informal conversations.

Staff formed a wellbeing group, had mental health first aid. They send out regular information and support for other staff, and have made themselves available for informal support and care.

Benefits of homeworking and volunteering are important. how we foster this to help staff and volunteers feel free to engage in the ways they want to

Wellbeing of senior leaders and boards is important, and isn't often covered in standardised approaches.

for one organisation that it would be difficult under employment law to mandate staff vaccination for their staff. Discussing compulsory lateral flow tests, as this is more clear and less controversial in this

Several organisations have experienced that this has dwindled over time. Some orgs are having to find alternative approaches to socialisation.

Communicating effectively

Risk assessments

When to wear a face mask and when not? What to insist on and the circumstances for this?

Time frames for reviewing - what would be helpful? Monthly?

Expectations to restart and impatience sometimes from volunteers/staff

Running activities/services safely

Push from above to get activities running again safely

Funders need to be flexible - groups may not be able to meet funders outcomes.

Group 7

Supporting the wellbeing of staff/volunteers

Reluctance of volunteers to return - decline in recruitment. how to inspire and motivate volunteers to return/change roles, come to volunteer for the first time?

Hard to plan and prepare eg for what seems like far ahead June 2022 but requires preparation - how to do this in uncertainty

Communicating effectively

What is the big fear? What is the impact of this?

Sense of feeling not doing enough justice to the work and activities we are trying to do.

Mixed appetite for returning volunteers? Treating as pilots and restarting modestly?