# Hear Together: Volunteering Policy

**Welcome to Hear Together and thank you for volunteering with us!**

**About us**

The Hear Together charity was established in April 2020. We are all about helping children and adults to live well with hearing loss. We do this by providing community hearing aid support for adults, and opportunities for d/Deaf children and their families to have fun and make friends.

**Purpose of this policy**

We truly value the support of generous volunteers like you. When you volunteer for Hear Together, you can feel reassured that you will be treated in a fair and consistent way. This policy explains how we will do this and what you can expect from us.

**Criminal Record Checks**

Some volunteer roles involve working with children or vulnerable adults. These roles will require a Disclosure and Barring Service check. We will organize this for you if required.

**Support**

You will be given a **Volunteer Leader**. This is usually the person you will work with when you volunteer. They will be your key contact and together you will agree how you will work and keep in touch.

Your Volunteer Leader will:

* Explain your role so you know what is expected of you;
* Organise any training that you need to fulfil your volunteer role;
* Be your first point of contact if you have any questions or are worried about anything to do with your volunteer role;
* Complete the **Hear Together Volunteer Agreement** with you.

This will help ensure that we are doing all we can to make your volunteering experience an enjoyable and meaningful one.

We want you to feel as involved as you would like to be. From time to time, we hope that you will join the rest of the team at a face-to-face meet up or you may want to take part in a different event.

**Expenses**

We value our volunteers and want to ensure that there are no barriers to volunteer involvement. All reasonable out of pocket expenses and travel, will be reimbursed if required. An Expenses Form must be provided to your Volunteer Leader with a valid receipt.

**Insurance, health and safety, and risk assessment**

Hear Together has valid public liability which covers you and the volunteering activities you will be doing. Please read any policy documents provided by your Volunteer Leader.

**Confidentiality**

Our confidentiality standards will be explained, and we expect you to maintain these standards at all times in your volunteer role.

**Equality, Diversity and Inclusion**

Hear Together is committed to embracing diversity and promoting equality and inclusion. We expect you to support this commitment when you are representing Hear Togetheras a volunteer.

**Resolving problems**

We hope that you will enjoy your time volunteering with us. However, if your role as a volunteer does not meet with your expectations or with the commitments we have made to you, we want you to feel comfortable about letting us know. First, talk to your Volunteer Leader who will try to sort it out with you. Alternatively, you can speak to Sarah Allen, Hear Together Co-ordinator.

**Volunteering whilst on benefits**

You can volunteer with us if you are receiving benefits. You will need to tell the benefits office about the volunteering before you start. We can give you a letter with this information. Tell them:

* how many hours or days a week you will be volunteering for
* whether you will be volunteering for the same hours and days each week, or whether they change
* what you will do in your volunteer role
* whether you will get any expenses

[Volunteering and claiming benefits - GOV.UK (www.gov.uk)](https://www.gov.uk/guidance/volunteering-and-claiming-benefits)

[How volunteering affects your benefits - overview - Citizens Advice](https://www.citizensadvice.org.uk/benefits/benefits-introduction/how-volunteering-affects-your-benefits/)

**Approval and Review**

|  |  |
| --- | --- |
| **Policy Owner**  | **Sarah Allen**  |
| **Effective date**  | **November 2023**  |
| **Review date**  | **November 2024**  |

|  |
| --- |
| **HEAR TOGETHER VOLUNTEER AGREEMENT** |
| **Your Name:** **Address:****Contact details:** |  |
| **Your Volunteer Leader is:** **Contact details:** **Alternative contact name & details:** |  |
| **Where you will volunteer** |  |
| **How often you will volunteer** |  |
| **How we will keep in touch (Please let your Volunteer Leader know as soon as possible if you are unable to volunteer on a planned date. For example, if you are going to be on holiday or if you are unwell)** | Phone callText messageWhat’s AppEmailOther |
| If you have any concerns related to your volunteering for Hear Together, please speak to your Volunteer Leader. Alternatively, please contact **sarah@heartogether.org.uk** |
| I have read the following documents and agree to maintain the policies and procedures in my volunteering role with Hear Together. Safeguarding Children\*Safeguarding Adults\*PrivacySocial Media\*Delete as appropriate | Signed:  |
| **Thank you from us all at Hear Together!** |