**Date: 28/10/2020**

**Duration:** 01:14:43

**Interviewer:** \*Project introduction\*

Okay, yes. And you have read the participant, the participation information sheet, urr do you have any questions before we start?

**Participant:** No, because I suppose in many ways I’ve been a student on the other end of it, I’ve been, you know, I’ve undertaken research and been in your position in other fields so, not really.

**Interviewer:** Okay, thank you. So, urr, for start, urm, I would like to know a little bit about your group, can you tell me the name of the group?

**Participant:** Okay, so it’s the, urr, urr, basically we call it [GROUP NAME ABBREVIATION] but it’s [GROUP NAME]. Urm, I established this group four years ago, urm, in association with [COUNTY NAME] fire and rescue service who came to talk about resilience anyway. Urm, and urr, urr they were, urr they were, I think following an initiative which was known as ‘[NAME OF INITIATIVE 1]’

**Interviewer:** What if.

**Participant:** And I, I thought that urm, having a resilience group in the parish - within the parish where people could volunteer easily because it was in there, urm int their sort of local environment it’s what they what they knew, urm and I felt that they might be confident in helping others urr following adverse situations. Like floods or fires and so on. So, urm it’s called [GROUP NAME], from your perspective.

**Interviewer:** Okay, and when did it start, how many years ago?

**Participant:** Fits four, four years ago.

**Interviewer:** Four years ago, okay. Urm and you were involved, and who else?

**Participant:** Okay, so I established it urm, to start with nobody else was involved and I, but before starting I consulted urm former colleagues in the [ORGANISATION NAME 2] in the urm and [ORGANISATION NAME 1] and [ORGANISATION NAME 3]. Because obviously we are a parish council, which is, you know, the lowest tier in the, in urm, in coun- in local councils. I suppose [NAME OF INTERVIEWER] it might be easier if I were to say that my background is many years with [CHARITY NAME 1]. These days I remain their president for [COUNTY NAME] but urm, I, I, I, have I was employed by [CHARITY NAME 1] for many years. And therefore, I believe very much in the business of convergent volunteering. Urm, the, what I mean is if an incident occurs, people will come forward.

Urm, my idea with urm doing urm, what I did, was to… set a base, set a, shall we say a base or a foundation to start with. Because I have a feeling that were there to be urm, a flood for example such as I experienced in [VILLAGE NAME] in 2012, urm and when I was still employed by [CHARITY NAME 1] and we asked to provide volunteer assistance at that time because, urr [VILLAGE NAME] actually is one of those places where you have a lot of laying water. There’s a lot of underground rivers and so on and so forth. Urm, and at that time of course I had, I didn’t really have much to do with the community and I was, obviously concentrating on the , on the volunteers that I was working with at that time. But it occurred to me even then that we can – sorry about my dog.

**Interviewer:** It’s okay.

**Participant:** We could get more capacity if if we let people know that if they wished to come and assist, urr that they could come forward confidently and we wouldn’t, you know, we wouldn’t undertake a myriad of urm checks on them we would obviously, urm wish to ensure that you know, that they would be urm suitable that we wouldn’t be urm placing anybody in danger that you know who perhaps couldn’t cope with that situation they were offering to assist with. Urm, so that was what was in my mind at the time. And, at, funnily enough, when I was still working, I actually did a paper on convergent volunteering and I was looking to see if I could find it to share with you. But urm, that’s my, my thinking is if you if you have, if you see an accident in the street, people will come forward, it’s just, it’s human nature. Not everybody, it’s about people having the propensity to walk forward and say what can I do. And that’s what’s happened this time during COVID-19, although we had the foundation that I originally created if you like, including [NAME OF GROUP MEMBER 1] who simply came forward and offered his services when he retired and now, he’s actually [OFFICIAL POSITION]. Which is an interesting one because he came forward first to offer his urm, expertise that he had gained in the [INDUSTRY] as a [NAME OF ROLE], a [NAME OF ROLE], and now his volunteering has, well shall we say, urm its… well, really urr urr become very urr full on. But urm, so that’s why I did it really, because I had this feeling that people, if something went wrong people would come forward.

And I want to say, that during this period of COVID-19, yes I’ve got the foundation of the old, of of of the original members, of the original volunteers, but I have had a number of people coming forward and offering assistance, people for example from the hospitality sector whose businesses could not function during lockdown, and I was absolutely delighted that they and their families came forward to offer assistance. O- other, urm other examples is in recent time we’ve had somebody whose wife passed away and she was actually a, quite a, urr, urr, ur a senior councillor who’d been a councillor for a number of years and he’s been quite distraught of course in the normal way. But now he’s come forward to, to offer assistance. So, it’s, it’s that kind of thing that, you know, that has, has I think, borne fruit for us. Because urr, yes, we had a foundation, so they had something to join. So I, I would, this is what I say to other and other groups of urm, urr people thinking of urm undertaking a similar initiative; if you’ve got something to start with, you’ve got some structure,. So that’s helpful.

**Interviewer:** Hmm-mmm. And has anything changed since it start?

**Participant:** Oh yes, oh absolutely so, what, I mean, what changed I suppose was the fact that we had had some experience. So, the individuals, urr… I need to say very quickly, that once we urm, once we… assembled, you know quite, quite a number of people, so initially we might have had about twenty people, and this is well before – I’m talking now within the last four years. We then decided that we would have some training awareness sessions and so on and so forth. So, what has changed is that people are aware of the place that they would take, or how they would operate within a urm, if if they were called out to assist. But that’s quite different from this time, with COVID-19, because before… everything that we have assisted with has been at the behest of another organisation. So, at the behest of the county council. In COVID-19, I decided that it was something we could do. And noticed that there was a gap and people were struggling to obtain medication. And the other thing, I suppose, was a urm, a bit of luck for for me, was that the NHS had put out a request for volunteers. And people mean people enthusiastically responded. But actually, I think that perhaps the NHS couldn’t cope with the, the volume of people that came forward. So, I had already started to put out a similar invitation in our local free magazine. Urr, we have something called [INVITATION NAME]*,* which communicated to everybody that we were looking for more capacity. Because although we had Capacity, urr, not everybody is available every day, and this is after all a volunteer initiative.

So, what has changed in your – in answer to your question is that the the original foundation group have received training. The second, the second urm group of, who’ve assembled haven’t had training, but they’re confidently going about their business and using there, skills form their professional life to… to contribute to the work that we’re doing?

**Interviewer:** And what is your role in the group?

**Participant:** My role. My role is coordinator and urr, also, facilitator. So, I facilitate the training along with [NAME OF GROUP MEMBER 1], because both of us have this background of facilitating and instructing colleagues and volunteers and staff. So, we’re able to urm, establish a training programme. That’s generally, and up to now and of course remember the new, the newer additional folk have not received the training. So, my role now with them, is to, as soon as we get a request from either a pharmacy or from urr a patient, urm, then urm I will need, we need to allocate the task, so I will allocate the task. Urm and once, once I’ve allocated the task, the individuals’ responsibility is to come back to me and keep me informed as to urr the progress and the completion of the task.

**Interviewer:** And how does the activity that you do in the group relates to other things that you do with your life?

**Participant:** Well I still, although I’m I, I remain the president of the [CHARITY NAME 1], I also volunteer on the, the [CHARITY NAME 1] Volunteer – we have a urm… a helpline for our volunteers, our [CHARITY NAME 1] volunteers who are working in the field. So, if you like, our communication skills are similar because it’s all about welfare.

**Interviewer:** And for how long have you been involved in other-?

**Participant:** [CHARITY NAME 1].

**Interviewer:** Yes.

**Participant:** Forty years.

**Interviewer:** Forty years, okay.

**Participant:** So, I was very young, working in hospital. So, urr, it’s a way of life.

**Interviewer:** Okay. So, you were saying that new people joined the group since COVID starts, urr, can you explain me a little bit more about the group, how how the group changed if anything changed with COVID. For example, what type of activities are you doing now?

**Participant:** Okay, so we we are not undertaking training urr because the active the the activities urm, the COVID-19 requests are daily, so if you like they’re training urm on the on the on the – they’re training whilst undertaking their tasks. But there is also a case of sometimes briefing and debriefing them because, you know, occasionally people are upset for example patients are upset, worried about their medication, worried about their conditions and so on. So, the, the volunteers will talk, will wish to talk about, their experiences with the with the beneficiary.

**Interviewer:** And how many people are involved?

**Participant:** Now? We have around forty people.

**Interviewer:** Forty. And all of them are active helpers?

**Participant:** Yeah. They’re all standing by you can’t use them all the time and that’s another thing, urm, it’s very important to keep people involved. So we send them updates all the time and we make sure, we make it very plain that obviously we’re not going to get forty requests a day, urm… so, urm its also urr about keeping people urm motivated.

**Interviewer:** Mmm. You said that you do collect, you collect prescriptions urm, and what else, what kind of a-?

**Participant:** Urr, okay, so essentially urm, just to take you through that, that scenario. Either a pharmacy will ring up or a urm, a a a patient will ring up and say, “I am, urr, not able to go out, urm I’m shielding, can you help me please I have medication, and urr medication to collect.” And normally this happens every month with the same people, once they feel confident that you can help them, urm and that you know, a volunteer comes to the house and so on and so forth, they come to us for repeat prescriptions as well. So, throughout COVID-19 it was very, sorry throughout the lockdown pertaining to COVID-19 it was urm, you know, really really very busy. It has petered off at the moment, but urm, it’s starting to come back.

Other, other examples of how this service affected others in the family other than the beneficiaries themselves, was we also got calls from [CITY NAME] which is you know, some distance away from from obviously from where we are, urr from worried, from relatives, children from the ben, the ben, the older beneficiaries, urm, asking if we could help urm with various things. So not only with collection, regular collection of medicine and delivery of medication. Urr, but also staying in touch with the relative. Urrm so, urm… a group, a group like ours urr obviously attracts urm people with urm, how can I put it? With with urr interests of this type – interest in helping people. So urm, one or who people urr, we have for example. Urr, one or two people who were involved in counselling. So, when I say counselling I’m talking about psycho-social support. Urm, others are retired nurses, others are urr I don’t know they’ve been salesmen in their lives, but they’ve got good communication skills.

So, what I’ve been able to do, is that where relatives have been really really worried about their urr, their their their parents for example, their elderly parents for example, is to set up something where… around, for around about six weeks, one particular volunteer will simply telephone urm, the par, a set of parents for somebody, and just have a chat with them. And I think, the only thing is, what I’ve had to do is to make sure that it will just be for six weeks. Because obviously I, I don’t want to impose too much on the volunteer because it’s often difficult to maintain these conversations if it goes on too long. Urm but some of the things that they’ve been able to do is to urm, volunteers will sign post the recipients of the call and urm, let them know what other urm opportunities there are for them. So, for example there’s other, there are more formal charities aren’t there like [CHARITY NAME 2] and some of the things that they do. So, urm, we, you know we’ve done that as well, we haven’t just left them. But urm I think that is, it’s not only helped the, you know, the beneficiary themselves, it’s also helped the family.

**Interviewer:** How?

**Participant:** Urm, well because the families are away, you know they couldn’t visit their elderly parents because of the traveling and because of the lockdown and so on and so forth. So, the next best thing for them, was to ask if somebody could at least communicate and then we can of course communicate with the family and say, with the, the family member urm and urm … I suppose reassure them. Because very often, when they’re speaking to their their parent, their elderly parent, they’ll say, “yes I’m okay, but I, worried about my medications or they’ll talk about that and we can help with that.” But hearing that they’re play from a third party, I think that was a help to the, a reassurance to the family. And we’re still doing that for some people.

**Interviewer:** Okay. What kind of resources do you have?

**Participant:** Okay so, resources, resources**,** urm, I have, we have set up, for example, in the Parish office urm, we’ve set up urm radio communications just in case urr we’re ever in a scenario where we’re not able to communicate by telephone and so on an so forth. I mean we’re not using that now obviously but, it could be in adverse weather and if there were for example power outages and so on and so forth. So, we would have a form of communications. We also do have high-vis jackets with a logo, which I could show you one if you like. Would you like to see it?

**Interviewer:** Yeah.

**Participant:** Excuse me.

**Interviewer:** Okay.

**Participant:** There you see, you see [TOWN NAME 1].

**Interviewer:** Mmm-hmm.

**Participant:** And here you see ‘[NAME OF INITIATIVE 1?]’ because the incentive came from that first meeting with the fire service and what if and I think ‘[NAME OF INITIATIVE 1]’ is a very good strap line. Because what if something happens, urm so that’s what I’ve I’ve done.

**Interviewer:** Mmm, seems great. So, you had it since the beginning you start?

**Participant:** Yes, that’s right, and… because obviously for beneficiaries, this identifies people as, you know local people who are volunteering in a safe and organised way.

**Interviewer:** You think that is important?

**Participant:** I think, I think so because… urm, sometimes older people can be rather suspicious and rightly so. Urm, they they worry about ask asking volunteers to come. Generally speaking, all out volunteers have been received very favourably and without any concerns and so on. But often if people for example if people are suffering from dementia, they are even more urr concerned about strangers and so on and so forth. But urm, some some benefits, if you like, of a local initiative is that people are familiar faces. So for example where you’ve got, I’ve got one volunteer who, urm, he, [OCCUPATION 1] and he’s known to people and urr soon as I say it’s, and and his business if called [NAME OF GROUP MEMBER’S BUSINESS], and as soon as I say, “its [NAME OF GROUP MEMBER 2] from [NAME OF GROUP MEMBER’S BUSINESS] who will be bringing your medication,” they’re absolutely delighted. So, I think there’s, there’s something around if, if a community can can create an initiative, there’s something around urm, it’s two way really. For the beneficiary they feel safe if you like and supported, by their local community. Urm and then, for the individual, the volunteer, that they too feel that they’re doing something for their own. Beyond, something beyond their family.

**Interviewer:** I see, and how did you get that people involved?

**Participant:** Okay. So, two- I suppose really, a lot of use of urm, posters, putting poster around. I also did urm, put it in the free magazines and so on, the local magazines. But then, I got the idea that if I did a video, and also did as twenty minutes, urm… introduction to the idea that I was, at the very beginning, that I was wishing to to urm set up. I know that if I invited them into the Parish council office, they would be unlikely to come or be interested. So I also contacted a lot of local groups and local organisation and asked whether I could have twenty minutes of their time, so together with a few other people and now [NAME OF GROUP MEMBER 1], urm, we do go to places and we will do a presentation, for twenty minutes, and provide a video urm, and… and actually, if you like, actively recruit people, either to our group or actively try to encourage others to also try and establish groups in our neighbouring parishes. Urm and we have been asked, following that, to provide urm training for their little groups and they’ve started to establish some of those groups. And now it means that we’ve got some additional capacity because we, we can ask them if if we, urr need if we need people in their particular villages and parishes. And that does happen. So, not only am I getting requests for urm, assistance for urr obtaining medication in [TOWN NAME 1], we’re getting it in the neighbouring villages as well. So, I can either use our own people, or I can contact those people to whom we also gave urr urr an awareness training.

**Interviewer:** What kind of, what kind of groups are those?

**Participant:** Urr they would be… they are… very similar to ours but they’re they’re not very established. They’re at the beginnings. They’re looking at what we’re doing and they’re thinking it’s a good idea. But we also invite them into our training now so that, we, we’ve got a big hall, so when we’re actually doing a training session – although as I said before, we’re not, we’re not doing it at the moment during COVID-19, because we’re on an initiative we’re being used at the moment so, you know, it doesn’t feel like it’s a time for training. Unless we do a Zoom training or something, which we may well do.

**Interviewer:** But for, for the activities the things that you do since coronavirus, how did you get people urr, the new volunteers in the group? It was like that as well?

**Participant:** It was, it was, the… yes, some of them have simply heard word of mouth because word of mouth is also, is also urm successful. If a new volunteer is, feels that their time is being used and it’s worthwhile, urm, they will then share it with others. And urm, so, I suppose, don’t forget that, I’ve already said that, there was , there was a volume of people who never got asked to help when they volunteered for the NHS, so we got those anyway. Then, then we we’ve got the ones that have saw the invitation to people that I put in the free magazine, and and also from from the talks that we’ve been giving around other parishes as well. And the fact that we let them in for, urr, our training, let them come into us for our training as well.

**Interviewer:** And how do you identify people that needs help?

**Participant:** Okay, so, urm, up to now, so before COVID-19 there were for example urr, evacuations. So, one evacuation was a fire, urm involving serval flats, what, and we were asked if we could help with the evacuation process. Urm and that was also receiving them – like this was something like six o’clock in the morning, it was very cold, there were around about thirty people who needed assistance and some people urm – and again, funnily enough, medication seemed to feature in that activity as well because people hurried out \*barking\* – my dog.

**Interviewer:** It’s okay.

**Participant:** People hurried out of their apartments without their medication. Urm, so, urr once again we were able to negotiate emergency medication from the local hospital and so on and so forth. You know, there were people, again, older people, because this is a typical coastal town and urm they were urr, you know people who had, were suffering from urr cardiac problems and so on and so forth, so we were able to urm if you like prevent the situation from getting worse urm, by, by helping to obtain their their medication. Urm, because there was no chance of them going, it was quite a serious fire, urm and there was no chance of them going back to their properties. So, it was an apartment block and a couple of shops – it was quite a big fire.

And, urm, on another occasion the other the other way that we’ve used our volunteers urm, - sorry, I’ll just say that in in a reception centre which is what I was refereeing to just now, I’ll just cover that. How the volunteers were using their skills is they were talking to people. They were talking to people, making them tea, that sort of thing, giving them something to eat. Urm, and just generally communicating with them and finding out whether they were warm enough and so on and so forth, so really kind of humanitarian skills really.

Then, more recently, before COVID-19, there was a, a very large fire at an amenity tip urm and… there was a need to communicate with people with asthma living in the surrounding area, or people who had respiratory problems, and so and so forth. So once again our volunteers used their communications skills, they were really simply knocking on doors, giving out paperwork and just making people aware that young children and anybody with with with respiratory issues needed to be careful, keep the windows closed that sort of thing.

**Interviewer:** Okay, so you already knew who, who might need help during this time?

**Participant:** Ah, yes sorry I didn’t answer your question effectively, sorry.

**Interviewer:** No, that’s okay.

**Participant:** Yeah. So, for the, the first one, urr where we were called out for the evacuation after the fire, urr we were actually asked by [DISTRICT NAME] district council to help. And urr, urm, they have a urr resilience manager, but they, they don’t actually have capacity, they have somebody who manages urm and obviously there are social workers, but there were two social workers at the evacuation centre, but I was able to muster a a number of people for for urm, you know, assisting, as I say simply putting people at ease, urm, and urm and directly, urm providing any help that was needed to people while they were in the evacu-evacuation centre. But that was at the behest of urm, district council. Which is the local authority which is directly above us.

And then, the second time around it was at the behest of urr [COUNTY NAME] Fire and Rescue. So, we have, if you like, communicated that we are that we exist urr urm to, to all these, if you like, stake holders.

**Interviewer:** How do you think it is the relationship with the local council?

**Participant:** I think, I think urr they are supporting and urm, urr they seem very impressed with what we’re doing. And urr, I think they wish that more, more would, more urm… parishes might be interested or or encouraged urr to urr undertake a similar initiative.

**Interviewer:** And urm, do you have any relationships with official bodies for example, or charities?

**Participant:** Urm, okay, so relationships. Urm… I suppose that relationships are with local business and I also make a point of for example, where we’ve been asked to, to do this telephone support activity- so, at the end of that six weeks I’ve made a point of letting formal charities know that, urm,… you know we have been undertaking this a-a-activity, and urr, you know, could we, for example, make a referral to them. So yes, definitely with [CHARITY NAME 2] I’ve I’ve I’ve thought about doing doing it in other ways.

Urm, also yes, one other. Urm… it’s now called the [CHARITY NAME 3], the [ABBREVIATION OF CHARITY NAME 3], it used to be the [FORMER CHARITY NAME], but now, obviously, it’s urr, it’s it’s for both ladies and gentlemen so to speak. So, they, between us I think, urm, they have referred to us and in turn we have referred to them.

**Interviewer:** Okay, and your group has official recognition? For example, if if the group tried to be an official recognition as a company or as a charity group? Urm did you did you ever thought about that?

**Participant:** I I have to say I haven’t considered it. Urm and one of the reasons I haven’t considered it is because I, I suppose I’m particularly kept it light touch, so that people feel urm, that they are not obligated and that they can come into the organisation, not organisation, we’re not an organisation, but come into the group urm, and and they can have time out easily and so on and so forth. So urm, yes. Although I think it will be very nice to be formalised I think that one of the, the urm, plus points of our, urr of this particular initiative is that people feel free to come and go as urr, as time permits.

**Interviewer:** Mmm, yes, yes, I see. Urm, and you are connected with national networks?

**Participant:** I, yes, through, through the county council, urm, so urr the county council will for example have, urr, the lead, the lead urm, officer for resilience in the county council will be, will attend the resilience forums urr, for example, therefore the county resilience forums. So, in that regard we are connected although we, although we are invited by the county council to attend their events, that’s as high as we go.

**Interviewer:** Okay. Urm sorry I’m still in this because we are very interest in issues in organising, but can you tell me little bit more how do you communicate with the people in the group? For example – and also outside of the group? Do you have social media for example?

**Participant:** I, Yes, yes.

**Interviewer:** Okay.

**Participant:** So, we have social media. Urm, and and we use, we use social media, we used it at the very beginning of lockdown for example to let people know what we were doing. That way, not only potential beneficiaries were urr, became more aware of what we were doing, but that also brough about additional local volunteers coming forward. So social media and also posters and also urm, urr, urr local urm, magazine which are sort of free and therefore monthly they’re they’re dropped into people’s houses and things.

**Interviewer:** When you say social media, Facebook? What?

**Participant:** Yes Facebook, okay.

**Interviewer:** Okay, thank you. Now I would like to ask your opinion about urm, you talk about a little bit your own motivations to get involved to set up the group, urm, but how about the motivations of other active participants? What is your, what… do you, what do you see as their most important motivation to get involved?

**Participant:** I think that the very fact that its local.

**Interviewer:** Local.

**Participant:** That is a big motivator. Urm, and I I see the difference with working with, urr people in the local area to the sort of work I was doing professionally which was drawing on volunteers who needed to travel for example urm, when you don’t have to go too far, you are less likely to have urm, you know, sort of… shall we say issues at home which prevent you from taking time out to volunteer. Urm, so, urm, I I think that urm… everybody - and that’s another thing, people are familiar with their own patch. Urm and so they’re more confident about easily, you know, take take taking on tasks urm because they know where they’re going, they know how much time they’re going to be spending for example. So, they’re confident to volunteer.

**Interviewer:** And what about helping their neighbourhoods? DO you think that was a motivation?

**Participant:** In actually helping it it, I see what you’re saying. I think that urm… clearly volunteering is not for everybody. Bu those who have an inclination to do it, urm, will do it more confidently in a in an area that they can identify with. Don’t forget that, \*coughs\* sometimes, urm… people have been in the area for a long time so they feel almost like a duty you know; “I know this area and I’m younger and, you know, and I feel that I can contribute in some way to to to this area.”

In addition, for example, we’ve had people come in who are fairly new to the area and a way of becoming part of the community is to volunteer. Urm, so, urr this I think has also been a benefit and a useful tool.

**Interviewer:** And since COVID would you say?

**Participant:** Since COVID, I think that urr, the, the urr… the the urr…, encouragement , if you like, has been one of I have to say, humanity from a sense of humanity from from the community, from these people. Urm, they they simply want to do something. And it’s easier to do it if it’s on your doorstep.

**Interviewer:** So, do you think that was also related to a way of coping with the situation?

**Participant:** … Absolutely. Urm, an example of that is the man I told you about whose wife has passed away. Urm, and I’ve had this experience professionally as well where volunteers will come forward urm, where they themselves previously were cares in some way, and they’re no longer caring because you know, the the people they were looking after – might be their partners might have passed away that sort of thing, urm, and urm, the feedback from people like that -. So, yesterday, the man whose wife passed away he, his he he did his first task yesterday, and he was so urm, satisfied with the way that he used his time, that he was able to help somebody. So it was almost as though he was able to, he felt he was redundant urm, because he no longer had anybody who needed him and then he really helped this person who was getting extremely upset about not getting her medication in time and so on and so forth.

**Interviewer:** What about feeling that the authorities weren’t doing enough?

**Participant:** Ah, you’re saying that urm–

**Interviewer:** If you think that this could have been urm a motivation to get involved.

**Participant:** You you, that the, the urm formal organisations the statutory you’re, you’re thinking that because- they want to to do it because they assume that there’s no formal help, or insufficient formal help from statutory organisations. No I don’t think so, I think it’s more more a case that they realise, and certainly within our training, that formal organisations, urm are called up to do far more in a in a situation like COVID-19, urm than than their capacity permits so therefore you have to create additional capacity. And I think that there is definitely an understanding of that and that is why people come forward who, with a variety of skills. Yes of course I mentioned that the retired nurses or urm, others will come forward. But even people with, who... who are confident they can do something simply because they are able to talk to people.

**Interviewer:** Mmm-hmm.

**Participant:** Out oldest volunteer that offered his services and we had to be very careful here, was nearly eighty, urm but urm I didn’t turn him down I I was just careful about what I asked him to do.

**Interviewer:** So, it seems like you have a very skilled group.

**Participant:** I think, it’s not so much a skilled group because they are… they come from, urm many different fields of work so for example I mentioned at the beginning we’ve got a chap who [OCCUPATION 1]. So, his skills are… communication stills, urm definitely because he welcomes people daily. And he is very successful when he goes out and delivers medication because he’s got the right touch to cheer people up, urm, and to engage with them.

**Interviewer:** Mmm-hmm.

**Participant:** So, I don’t think it’s so much the skills, I think it’s the ability and opportunity to engage with people. And I also think that the volunteers themselves, urr may feel more confident about the situation like coronavirus which is scary for everybody, but if they’re doing something and helping others, I have a sense that actually, it’s, it urm makes them feel better. They’re not just concentrating on fears and so on and so forth. They’re out and about and keeping busy.

**Interviewer:** Okay, I see, thank you. And how about problems, any problems that you and the group faced, urm?

**Participant:** Okay so one of the problems is if you take, if you say that you’re going to urm, provide say telephone support for six weeks, it’s often quite difficult for the volunteer to stop and yet they want to stop. That, that’s something that needs to be talked about. And also, there is a possibility that urm, the person the recipient of the calls might feel that they’re being abandoned. So, it’s something that we had to think very carefully about, how we approached that. I know it seems quite simple to set up, and and so on and so, but it could have been a problem. Urm-

**Interviewer:** What did you?

**Participant:** But it hadn’t been, but I’m only flagging it up that if somebody, if another person decided it was an initiative that they would easily be able to take, it’s something that would take a lot of thought.

**Interviewer:** Mmm, but what kind of things do you do to prevent that problem?

**Participant:** I think that urm at the very beginning, everybody has to know that there’s a beginning and an end.

**Interviewer:** Okay.

**Participant:** So you have to., you have to, you can’t just leave it open ended, because the person isn’t going to become a friend, they’re simply becoming a support and and a, somebody to chat to for a while.

**Interviewer:** And has involvement in the group meant a lot of time an effort for you and for others?

**Participant:** Yes, it its, it does take time, because sometimes the telephone can go all the time. Urm, and urm you know, it is, it is time consuming. Urm, and I would like to actually to answer another one of the questions that you pose. I think you said what, how, you know, what… I think what you were asking was what plans or progress can urm, urr can you have within the group? Well, there are some people that come in and they’re clearly urm, very, very organised, urm and they may be older but they’re less active. So, they are able to take on responsibilities as coordinators. And this actually is a very positive thing because very often somebody will say – like the older person that I mentioned, “I’d love to be able to help, but I can’t really, urr, you know, go about visiting people, I find it too exhausting.” So, urm, if they, if they have effective communication and listening skills, if they’re confident, and if you, if you know that there, they could be reliable, then they could be relief co-ordinators.

**Interviewer:** Okay, and have people drop out of the group?

**Participant:** Urm… there are some people who come and at and if they’re going to drop out, they drop out at the very beginning, they might come because urm, they simply want to engage with other people in the community and and it more social than, for the purpose that the group is meeting, so it isn’t necessary for them, so we’ve had one. I suppose we’ve had about half a dozen people who’ve come in the very beginning and then we haven’t seen them again.

**Interviewer:** Why do you think they didn’t came back?

**Participant:** I think that urm, well I think a range of reasons one of the one of the reasons might be that they’re worried about urm, simply being called to something without urm, a previous plan for example. Because you can never make a judgement on when you’re going to need people. Urm, so, urm you can stand -you can stand people by for example. I mean I will always ring up and say for example, if there is adverse weather, we have weather reports coming in from the environment agency for example. So I I can always ring and say… there’s reports of, urm adverse weather coming in, urm, would you perhaps think about it and let us know urm when you might be free in case there is any need for evacuations. Urm, but, urr,… routinely urm, other than for example a pandemic, emergencies will occur without warning, so people are a bit concerned about having to leave their homes and urr, free themselves up so maybe that’s why we might have lost some people in the past.

**Interviewer:** And during this year since the pandemic, have?

**Participant:** Urm, no, the only people who are less active, urm are those that have gone back to work. But no, but I have to say, that the pandemic urm and the work, if you like, that’s been undertaken in the community has been more of an inspiration. Urr and urr they’ll still say, “yes I am working now,” but I still, I’ve had lots of messages, “please keep me on the list.”

**Interviewer:** Okay, so and just a few people say that?

**Participant:** No, absolutely, all of them, everybody whose gone back to work has said, urm, urr, “please keep me on the list, I may not be as available as I was at the outset, put I still want to be involved.”

**Interviewer:** Urm, did you recall any other problems that the group has faced? Other than the one you already mentioned. For example, in terms of organising, communications?

**Participant:** Okay, there are times for example where things go wrong, and you have to accept that. So, for example you may ask somebody urr, to go to a pharmacy to collect medication, urr and the… the process between the pharmacy and the… medical centre, urr hasn’t turned out as was expected. So, the medication isn’t going to be there, it’s going to be delayed. Urr, so this impacts on the volunteer who’s used their time to go on that day and at that time and it also impacts on the patient who as far as he’s concerned, is waiting on the medication. Urm, so it is a problem, but it’s about diplomacy and urr, urr simply talking to all concerned. And urr, at times like that, I simply step in and get involved and calm people down and umm, you know, there hasn’t been, there hasn’t been any adverse outcomes from those sorts of things. But it is something that can happen, because… you can’t urr, I mean we, as a the organisers, we can’t guarantee that everything that’s planned is simply going to come out as it should be.

And the other thing is, that if you are, for example, responding to somebody who, urm, might have dementia and might be bit unsettled in themselves, understanding of, urm… receiving their medication at their home in a bag, given to them by a volunteer, urr, may not be urr as favourable as you’d expect it to be. So, they may be a bit cross and rude about it. But urr, it’s all about urr… even though I’m not doing formal training, when [NAME OF GROUP MEMBER 1] and I urm, allocate tasks to people, firstly we’ll try and match the needs of the patient with the volunteer that we send. So if we think, if we think that somebody is going to be a bit cross for example or a bit difficult to manage, then we’ll tend to send somebody a bit more experienced, or at least we will brief the volunteer. And, and and urr if we anticipate that there is going to be urr, urr a more shall we say, urr cross urr urr beneficiary than somebody who’s ever so grateful then we’ll, we’ll forewarn them.

**Interviewer:** Okay, and how about lack of resources or facilities, is that a problem?

**Participant:** Urm, no, I, I it’s never been on any request so that’s never been a problem. It’s more about urm allocating urm… effectively to the, matching people really, you know. We have one or two people who are a little bit eccentric and can be urr quite urr rude almost to the volunteer who’s doing his best, or her best. Urm, and urm, it it it really is about… it’s not just about communicating, communication skills it’s about urr making people aware that urr the beneficiaries might be urr grumpy, may not be that pleased. Even though you’ve done them a big favour, don’t assume, you know you can’t always assume they’re going to be terribly grateful. Because they might be terribly cross because they can’t – they feel urm, that they themselves ought to be doing it. So, in other words they feel urm, urm, irritated by the fact that they have to depend on somebody.

**Interviewer:** Okay, can you tell me a little bit more about the kind of things that you have done that might help the group to keep going. Urm, for example do you meet regularly?

**Participant:** No, we meet only to have training. So, I, I would always -normally, outside of COVID-19, the pandemic, I, I would have about six training sessions per year. And the training session will also include urr, for example we will do urr urr scenarios. So, we’ll do a presentation, but we’ll also do urm, tabletop exercises. So that people get to participate and urm we try to make them as realistic as possible so that the urm, the urr, table top exercises will take them through the process of what they are likely to encounter and how people for example are likely to respond to offers of assistance and so on.

**Interviewer:** And how about activities, well being activities, do you organise any of that?

**Participant:** Yes. So, urr urr we so far as I’m concerned at the moment, what we do is that we send out urr regular reports. Urr and you know, which are always very complementary to the group – which is an encouragement. And I think that urm, the feedback from from the the fact that we’re sending out regular reports urm, I think that’s quite important. Urr one person for example urr who in in urm… in the town has a urr a tea- has another café, but it’s a very different place, but its where older people come and congregate. Urm and we did give him an award, this person, an award of recognition for urm, you know, for for providing a meeting place for older and urm urr people who are vulnerable as it were.

**Interviewer:** Mmm-hmm, and were any of these strategic or just ad-hoc?

**Participant:** No that was urr urr we do something every year actually.

**Interviewer:** Okay.

**Participant:** We provide an award every year. And and it’s sort of- but its more from the parish Council rather than the resilience group. But the resilience group are involved, and they can make nominations.

**Interviewer:** Okay, I see. Okay so finally, I want to ask you if you learnt something from coordinating this group?

**Participant:** Have I learnt something? …Urm… yes I I suppose what I’ve learnt \*phone rings\* sorry a call.

**Interviewer:** I was expecting that if you want to.

**Participant:** I think what I have learnt is that it is easier to ask or to invite people to volunteer in their own neighbourhood where they live. Have have, I was, yeah, it was easier urm, and more successful to invite people to volunteer. Because it’s time limited, they know that it’s how how long it’s going to take them to get there, they know how long it’s going to take them to get back they know, rough – the only, the only unknown is how long they’re going to be there. But they can choose that themselves, and because you’re, you’re using urm, other, you know everybody is pretty much local, you know you’re going to have enough capacity. So, people can volunteer for shorter periods. So, I guess what I have learnt is that… local volunteering initiatives - \*phone chimes\* it’s definitely one of those. Local volunteering initiatives are easier to keep going and to operate than something which stretches over a wider field and where travelling is required.

**Interviewer:** Okay, and how about yourself. Did you feel that you learnt something in the process?

**Participant:** Myself personally?

**Interviewer:** Yes.

**Participant:** Urm, I’m I’m not sure because the thing is I’ve worked in the field of voluntary sector for so long that I half, I think that you learn something all the time as you’re going on urm, you learn more about, for example, people’s conditions. You learn to understand that urr just because somebody is, for example… has dementia, it isn’t always about forgetfulness, there are other issues. It, as I say they might be cross and appear not to be very grateful, so on and so forth. Urm, so, urm… it it helps you understand people urm and urm you know, what they might be feeling. They might… people often feel urm… urr, shall we say frustrated that they are not able to to go about their lives in a in a normal way. So just because you’re offering help, it isn’t always simply going to put a smile on their face. They may still feel urr irritated and frustrated because they simply want to do their own thing. And I think one has to understand this. And again, this is, this is the message that I provide to the volunteers. You must take people as you find them. And do the very best you can when you meet with them. Because they they feel just as cross about not being able to go out, and and they were about, worrying about, you know, whether their medication was going to come or not. Or they - we do, we do shopping as well by the way, we will obtain shopping for people.

**Interviewer:** And what else do you do? Shopping-

**Participant:** So so, it’s more or less, anything that needs urm obtaining from outside and urr, the only other thing that we’ll do at the moment is telephone support. But I a, for example in an emergency, urm, they, in a different kind of emergency, we would help with evacuation which means we would man rescue centres we help with with for example with urm, urr warning and informing such as we did at the amenity tip. But that would also be, for example if it was unsafe to go on a particular road. Because there is a tree down or something like that. So, it’s about warning people of any particular dangers.

**Interviewer:** Mmm-hmm, I see. And how do you see the future of this group?

**Participant:** I think, I hate to say this, but I think that COVID-19 has urm, raised… urr raised the awareness of the group. So, I actually think that certainly in the next, certainly for the next year so, it will definitely flourish. But I think also that the parish council itself has learnt a lesson. Because when I, when I initially floated the idea of establishing a group there were some people who said, “oh but you have emergency services to do that sort of thing! What do we need to do that sort of thing?” Urm, and I, I have to say that some of them said now lately, “well I didn’t think it was worth, you know, worth while doing this, urm, but urm, urm now I’m very glad that you did do it.” Or they say, “we did it”.

**Interviewer:** Laughs. Well, urm, it’s not so bad. And how do you see your role in the group in the future?

**Participant:** Sorry?

**Interviewer:** How do you see yourself in the group in the future?

**Participant:** Well urm, how do I see myself with the group in the future? I think that, there for me, for me, this kind of work is urm… it’s a reality its something that I’ve done for years. And it I have, if I have skill and expertise that I can do to help or to, to encourage urr I will continue to do so. So, so far as being the coordinator is concerned, I mean for example, until recently, until he was urr [MOVED] elsewhere to [AREA NAME], we had a young [OCCUPATION 2] who who joined our group and urr had he not been [MOVED] abroad, he would have been absolutely ideal to be a coordinator, so if there were others like him who could coordinate, it would mean that urm, I wouldn’t be spending as much time as as I am urm providing the coordination, because it’s just [NAME OF GROUP MEMBER 1] and I who are coordinating. But we have started to use some of the retired nurses and and ask them to stand by for short periods and so on as coordinators.

**Interviewer:** Okay, but do you feel that you have enough people to do what you do?

**Participant:** Urm, yes definitely, definitely.

**Interviewer:** Okay, well I don’t think I have any more question. I did a lot so, is is there anything that you want to add?

**Participant:** … I think the the the other thing, yes, there’s one other thing that I want to add actually which I should have said. When you asked me whether we are linked to other urm, statutory organisations, I did say the county council and we’re also linked to the district council as well because they all have resilience entities and so on. *But,* the other thing I would like to say is that urm, the county council or, I expect you’re heard this before in your research, urm, urr a number of local authorities have established hubs and a hub is a urm, urr if you like a urr urr a place to seek advice and so on a so forth. So, urr [COUNTY NAME] has a hub, and we will happily make referrals to them when people have issues and problems – talking now beneficiaries, urm where urr urr more urm urr professional urr you know professional expertise is required. Urm, it might be financial issues and so on and so forth. So, we somewhere to refer them to, but they in tern the hub will refer to us, make referrals to us. Urm, if it if if if the requests that they are receiving falls within urr, you know the the tasks that we undertake as a group.

**[Debriefing]**

**[End of Interview]**