



## ODIHAM COTTAGE HOSPITAL Befriending Service

Reg charity no: 1068721

Thank you very much for your enquiry concerning voluntary work for the Befriending Service. Please find attached some information that will tell you a little about becoming a befriending volunteer with us.

The West Hart community benefits greatly from volunteer befrienders supporting people with life limiting illness and/or palliative care needs. We therefore look for a good cross section of people with a variety of skills and interests.

Befriending is a 'professional' relationship made between the volunteer befriender and the client and each befriender is trained, supported and monitored by the OCH Befriending Manager.

Due to the sensitive nature of the work not all who apply will be suitable. We therefore ask each applicant to complete and return the attached application form to myself at OCH.

On receiving two references we will then invite you to come in and discuss your application in more detail. If accepted and following a Disclosure & Barring Service (DBS) enhanced check, you will be required to attend a 3 day training course, together with regular ongoing supervision meetings.

With best wishes

*Una Tilt*

Una Tilt  
BEFRIENDING MANAGER



## AIMS OF THE OCH BEFRIENDING SERVICE

Working in partnership with St. Michael's Hospice and supported by the Rural East Integrated Community Care Team, the OCH Befriending Service aims to enhance the quality of life for adults living with a life-limiting illness and/or palliative care needs, i.e. the most vulnerable groups, within the West Hart community.

The service offers patients/clients the opportunity to reduce social isolation and to form a trusting relationship with volunteer befrienders, which in turn may enable the patient/client to:

- acquire a greater degree of self-confidence and emotional growth
- enhance their capacity to make use of their own resources, as well as resources available to them within the community, i.e. other voluntary organisations/statutory agencies
- cultivate and maintain relationships with others

## What is expected of a Volunteer Befriender?

- attend regular support & supervision sessions
- respect and adhere to policies and procedures
- be reliable, consistent and dependable
- understand and maintain confidentiality & boundaries
- provide written report of each client visit and feedback any issues
- be accountable
- No imposing of own values, beliefs, or opinion

## What qualities are essential?

- warmth, an ability to engage in relationships
- non-judgemental, accepting a person for who they are
- respecting others as being of equal worth
- good interpersonal skills, in particular listening skills
- an ability to handle a level of stress
- ability to work on own/use initiative/common sense

***"Friendship is a private, mutual relationship.  
Befriending is a service***

**Befriending Service**

Odiham Cottage Hospital  
 Buryfields  
 Odiham, Hook, RG29 1NE

Tel: 01256 393609

[www.stmichaelshospice.org.uk](http://www.stmichaelshospice.org.uk)

Email: [och.befriending@stmichaelshospice.org.uk](mailto:och.befriending@stmichaelshospice.org.uk)



Charity Number: 1002856

The OCH Befriending Service is a partnership between Odiham Cottage Hospital and St. Michael's Hospice. The service supports those in the West Hart community (Odiham, Hook, Hartley Wintney & Old Basing) who are living with a life limiting illness and may be lonely and/or isolated.

## VOLUNTEER BEFRIENDER APPLICATION FORM

### Personal Details

Surname:	Dr/Mr/Mrs/Miss/Ms/other:
Forename:	Date of Birth:
Address:	
Postcode:	
Home Telephone:	Mobile Telephone:
Email address:	
Do you own your own car?	Do you hold a current full UK driving licence?
Emergency Contact Name / Relationship to you:	Emergency Contact Telephone Number:
Current or previous occupation(s):	
Have you suffered any bereavement within the last 2 years?  Yes / No	Do you have any medical conditions that we should be aware of? ( <i>Volunteers are not required to complete a medical form but we ask that you provide any relevant information</i> )  Yes / No

## Volunteering at Odiham Cottage Hospital / St. Michael's Hospice

Why do you want to become a Volunteer Befriender?

Do you have any experience of Befriending / working with adults or other volunteering?

What are your hobbies and interests?

What are your preferred days and times to volunteer?

How did you hear about the role of Volunteer Befriending?

## References

Please give the names of two people from whom references can be obtained. These should not be relatives and preferably should have known you for at least 2 years.

Name (Dr/Mr/Mrs/Miss/Ms)	Name (Dr/Mr/Mrs/Miss/Ms)
Relationship:	Relationship:
Address:	Address:
Telephone:	Telephone:
Email:	Email:

## Protecting Your Information

### How we use your information

The information you provide on this application form will be used to process your application as part of our recruitment and selection process and to create and manage your information on our volunteer records.

Information shall be stored on the St Michael's Hospice internal database and your contact details will be shared with managers and team leaders. We will never sell your data to a third party.

### Keeping you informed

We would like to keep you informed of our work through a variety of means. In order to comply with recent GDPR legislation, please indicate how you would like to receive updates and information from St. Michael's Hospice.

Please ensure you tick all relevant boxes.

Contact Method	Voluntary Service		Hospice News & Events	
	Yes	No	Yes	No
Email				
Phone				
Post				
Text/SMS				

We often take and use images for publicity, would you be happy for us to take and use your images whilst you carry out your volunteering with us in this way?

Yes  No

## Other Information

Due to the nature of our work, we are exempt from the 1974 Rehabilitation of Offenders Act, and you are therefore required to declare if you have any criminal convictions whether or not they are 'spent'. Your declaration will be treated in strict confidence and will be considered only in relation to this application. Please provide any details on a supplementary sheet and attach to this form.

The Befriending service role requires you to undertake a criminal record check via the Disclosure & Barring Service.

Signature:

Date: