



Hospital Scout Groups

A guide to Hospital Scout Groups and Sample Documents for use when starting one.



Contents

	Page Number
What is a Hospital Scout Group?	3.
How to start a Hospital Scout Group	4.
What to do next.....	5.
Meeting format.....	6.
Sample documents supporting Hospital Scout Groups	7.
▪ Scout District/Hospital Authority agreement form	8.
▪ Hospital Scout Group Risk Assessment	10.
Existing Hospital Scout (and Guide) Groups	15.
Useful resources.....	16.
Acknowledgements	18.

What is a Hospital Scout Group?

In a majority of hospitals there are no organised activities for the young patients to do in the evening, indeed in most cases during the daytime only a limited amount of education is offered plus play therapists.

A Scout Group (or a Scout and Guide Group) within a hospital paediatric ward can offer so much:

- It enables young people (if already members of the Association) to continue to pursue their hobby.
- It is a valuable tool for growing the Movement by providing an opportunity for non-members to sample what Scouting has to offer and if they wish an opportunity to try and locate them into a local Group when they leave hospital.
- It gives the young patient something to do one evening a week. It will also give mum or dad who may be staying with their child in hospital an hour or so to themselves!
- It gives hospital staff the opportunity to have a break for an hour or so from those young patients who attend the meetings.

Around the country there are very successful Scout or Scout and Guide Groups in hospitals, where they specifically serve the young people whilst they are in the hospital's care.

Young people from the age of 6 upwards (5 upwards for joint Scout and Guide Groups) can come along to the weekly meetings, whether they are or are not members of the Scout Association. If they enjoy their time with the Group and wish to join a local Group when they return home, the hospital Group will try to introduce them to a suitable local Group.

Within a hospital Scout Group leaders may come from a number of backgrounds. Some may be attached exclusively to the hospital Group whilst others may contribute as part of a rota from local Groups. The key to all hospital Scouting is flexibility!

How to start a Hospital Scout Group

The setting up of a Group within a hospital environment requires detailed planning. Where possible it is far better to look at a joint Guide and Scout Group. This will provide a wider base from which to draw support and, because some of the hospital patients may well be members of Girlguiding UK, it will offer something members of both Associations are familiar with. However, this will require a willingness by both the Scout and Guide Commissioners to see it succeed!

Before starting a Group you will need to prepare and get agreed all the paperwork for starting the Group. This will include:

1. The Agreement between the Sponsoring Authority and the Scout (and Guide) Group.
2. The Constitution for the Hospital Scout (and Guide) Group.
3. Registration of the Group by The Scout Association (and Girlguiding UK if applicable).

Decide how the Group will be funded - both for the start up and long term - maybe a grant from both the Scout and Guide Counties could be arranged.

In the early stages you need to discuss the project with the following people:

- The Scout Assistant County Commissioner (Special Needs) (and Guide County Adviser for Special Needs) or equivalent nominated person.
- The Scout (and Guide) County Commissioners.
- The Scout District Commissioner (and Guide Division Commissioner), in which the Group will be located.
- Approach the Hospital Authorities and see what their reaction is. Whilst everyone else is enthusiastic they may have many reservations that you will have to overcome.
 1. Set out on paper what you are proposing to do. Ensure that within that letter you let them know exactly what you expect from them (and also what you are not looking for!)
 2. Hospital Authorities are interested in the facts that the Group will be run by authorised volunteers, has good child protection policies in place and training schemes.
 3. Particularly mention finances. It is unlikely that the NHS Trust which controls the Hospital will be able to financially directly support you, although they may be able to suggest external sources you could approach for funds and grants.

What to do next

Leaders and others helping with the Group who are new to The Scout Association (or new to either The Scout Association or Girlguiding UK in the case of a joint group) **must** obtain a full CRB clearance. It is recommended that Leaders who were checked under the old Scout Association CE system also obtain a CRB clearance when they start volunteering with a hospital Group, at the discretion of the District Commissioner. Leaders who have already obtained a CRB clearance through The Scout Association do not need to complete one again. If the hospital authority wishes to obtain its own CRB clearance this must be done **in addition** to that which is done by The Scout Association, not instead of.

For Groups based in Scotland, the Disclosure Scotland guidelines should be followed.

In the case of joint Scout and Guide Groups all Leaders should be familiarised with both Associations' child protection policies: Girlguiding UK's 'Safe From Harm' and The Scout Association's 'Young People First' (The Yellow Card).

Leaders should attend an Induction Course (covering such topics as fire regulations, security, health and safety risk assessment, lifting and handling, confidentiality, infection control, hospital familiarisation and the hospital's child protection policy). This might be run by the hospital authority or (in agreement with them) by the Group.

Leaders may have to complete a Health Assessment Form. If necessary the hospital may then update Leaders' immunisations or recommend those that will need to be discussed with their GP.

A method of recording the attendance of patients at meetings will need to be established, the Hospital Authorities in particular will be keen to approve this. This might be through recording the patient's details in a logbook or parental permission forms may need to be produced so that every person attending your Group meeting has permission to be there. A suggested format could ask the following details:

- Name of young person
- Date of Birth
- Home Town or Village
- Whether a member of The Scout Association or Girlguiding UK
- Any other relevant information we should know (this gives the parent the opportunity to advise you of such things as communication methods / epilepsy / asthma / allergies etc)
- Permission (or not) to photograph their child at the meeting

You will need to discuss with the hospital authorities who may give permission for the patient to take part in the Scout Group activity, if the parent or guardian is not available.

Meeting Format

The format of your meeting will vary depending on the circumstances that your leaders find themselves in. Where you can gather two or more young patients together try to have a formal start and end to the meeting. Give them scarves to wear during the meeting to help them understand that they are part of your Group. These may not be appropriate if you are visiting one patient at their bedside but a badge or certificate for the young person to keep at the end of the meeting will be welcome in all instances. Some form of recording their achievement will prove helpful should they be returning or joining a local Group following their discharge from hospital.

Meetings should encompass the Purpose of The Scout Association and provide challenges for the young people. Activities will have to take into consideration the different requirements of long term (chronic) and short term (acute) patients, and also particular Hospital/Ward specialities including ward working practices and routines. Pitching a tent in the middle of the ward could prove somewhat challenging for the ward staff too!

You will need to decide on a mechanism for any young person who wishes to continue their contact with Scouting when they leave hospital. Obviously those who are already members of the Movement will be able to rejoin armed with all their new experiences. For those for whom this was a first taste you may want to provide some further contact, either locally through the District Commissioner if known to you, or through the Scout Information Centre at info.centre@scout.org.uk or telephone 0845 300 1818.

It is also useful to know of the other Hospital Scout Groups so that if patients are transferred to another hospital supporting one of these Groups Leaders can share appropriate information about the young person.

Sample Documents Supporting Hospital Scout Groups

The following suggested models provide good examples of an agreement form, a constitution and a risk assessment document. You may find these useful so please feel free to download and circulate when drawing up your own. There will be local circumstances to take into account. The documents cover a wide range of eventualities so will need adapting to your particular needs. You will find that discussing these with Leaders, Commissioners and the hospital authorities will give you a sound basis from which to build your own documentation.



Anytown District Scout Council Agreement Form

Between Anytown District Scout Council and Anytown General Hospital.

1. To establish a Scout (and Guide) Group for young people attending the Paediatric ward of Anytown General Hospital.
2. Address of meeting place: Paediatric Ward
Anytown General Hospital
3. Hospital Manager responsible for the trial: Insert name, title and contact number
4. Scout Leader responsible for the trial: Insert name, title and contact number
5. Name/telephone number of contact/s if different from 3 above:
6. Anytown Scout Council will:
 - Provide one designated coordinator
 - Provide Criminal Records Checks (CRB) on all Leaders and helpers prior to their commencement at the hospital.
 - Inform the ward manager or representative of the names of the Leaders or helpers attending each week.
 - Ensure all Leaders or helpers will be in uniform or a recognisable sweatshirt.
 - Be responsible for leaving the playroom in the condition it was found in.
 - Supervise all new Leaders and helpers for a period of 2 weeks following the hospital induction course.
 - Regularly assess and monitor the trial.
 - Complete a Scout Association "Risk Assessment"
 - Not knowingly allow Leaders or helpers of the Scout Association to bring infectious diseases into contact with the patients.

6. Anytown General Hospital will: -

- Provide an induction course for all Leaders and helpers covering Fire Regulations, Security, Health and Safety, Confidentiality, Infection Control, Lifting and Handling and Hospital Familiarisation.

- Not knowingly allow Leaders or helpers of the Scout Association to come into contact with anyone with a potential or known infectious disease.
- Inform parents and guardians of the facility and obtain a verbal consent for their child to take part in scout activities.
- Promote and support the aims of The Scout Association.
- Regularly evaluate progress of the Group

Signed.....

General Paediatric Manager

Date

Signed

Project Coordinator

Date.....

Signed.....

Ward Manager

Date

Signed

District Commissioner

Date.....

Hospital Scout Group risk assessment

Date:

Assessor:

STEP 1	STEP 2	STEP 3 (AND 4)	STEP 5
HAZARD	WHO MIGHT BE HARMED?	IS THE RISK ADEQUATELY CONTROLLED, OR IS MORE NEEDED?	REVIEW AND REVISION
No definition of areas of Responsibility	Patients, Leaders, Helpers & Hospital Staff All Involved	<ol style="list-style-type: none"> 1. Controlled formal agreement between Hospital Trust and Scout Group/District/County 2. Hospital Trust to define the line management for the Scout & Guide Group within the Trust. 	End of six month trial period or sooner if applicable
Influence on patients by persons unknown to them.	Patients, Leaders, Helpers & Hospital Staff All Involved	<ol style="list-style-type: none"> 1. All potential Leaders and Helpers will be subject to a criminal records check and Scout Association adult checks. 2. All Leaders, Helpers and visitors will display some form of identification. 3. All Leaders and Helpers will carry the Scout Association 'Young People First' yellow card. 4. The Hospital Authority will ensure the Group are aware of current hospital child protection policies at all times. 5. The Hospital Trust will ensure that all Leaders and Helpers are provided with and attend the Trust's mandatory training (simple form). 	End of six month trial period or sooner if applicable, then on annual basis or when Scout Association and/or Hospital Child Protection policies are updated.

STEP 1	STEP 2	STEP 3 (AND 4)	STEP 5
HAZARD	WHO MIGHT BE HARMED?	IS THE RISK ADEQUATELY CONTROLLED, OR IS MORE NEEDED?	REVIEW AND REVISION
<p>Influence on patients by persons unknown to them. Cont/</p>	<p>Patients, Leaders, Helpers & Hospital Staff All Involved</p>	<p>6. The Hospital Authority will obtain prior verbal parent or guardian consent. The Hospital Authority and Scout Group to agree how this will be recorded and communicated to the Group Leaders.</p> <p>7. Patients will not be made to take part.</p> <p>8. Leaders and helpers will never be alone with young people, and an agreed procedure for escorting to and from wards will be clearly established.</p> <p>9. The Hospital Authority and the Group will agree methods of identifying people who may enter the area in which the Group is meeting and how to remove those who do not meet the acceptable criteria.</p>	<p>End of six month trial period or sooner if applicable, then on annual basis or when Scout Association and/or Hospital Child Protection policies are updated.</p>

STEP 1	STEP 2	STEP 3 (AND 4)	STEP 5
HAZARD	WHO MIGHT BE HARMED?	IS THE RISK ADEQUATELY CONTROLLED, OR IS MORE NEEDED?	REVIEW AND REVISION
Potential parental or guardian concern	As above	<ol style="list-style-type: none"> 1. As Above 2. Procedures to be agreed for the identification of unknown adults entering the area in which the Group is meeting. 3. Procedures to be agreed for the removal of inappropriate adults from the Group meeting area and protection of the young people. 4. All Group Leaders to be aware of controls in order to reassure parents. 	As above
Contact with infectious disease.	Patients, Hospital Staff Leaders and Helpers, Parents or Guardians, Hospital Visitors	<ol style="list-style-type: none"> 1. Each leader or helper will attend an induction session organised by the Hospital Authority prior to commencing any activity, which will cover infectious and protective precautions. 2. All Leaders must properly wash their hands on arrival at the hospital using anti-bacterial or similar cleansing soap, they must also wash their hands again at the end of the meeting before leaving the hospital. 	As above

STEP 1	STEP 2	STEP 3 (AND 4)	STEP 5
HAZARD	WHO MIGHT BE HARMED?	IS THE RISK ADEQUATELY CONTROLLED, OR IS MORE NEEDED?	REVIEW AND REVISION
Contact with infectious disease. Cont/	Patients, Hospital Staff Leaders and Helpers, Parents or Guardians, Hospital Visitors	<p>3. All equipment should be regularly cleaned with antiseptic spray and scarves regularly washed. Where equipment is used with youngsters in isolation units, all equipment used with them must be cleaned after each usage.</p> <p>4. Strictly follow Hospital Code of Practice for infectious and protective precautions.</p>	As above
Potential injury to patients and Leaders	Patients & Leaders	<p>1. Hospital staff to advise Leaders or Helpers of any patient whose involvement is restricted.</p> <p>2. Hospital staff to advise Leaders or Helpers of symptoms to which a member of staff should be alerted (e.g seizures).</p> <p>3. Leaders not to lift any patient.</p> <p>4. Leaders and Helpers to keep contact telephone numbers for wards to hand at all times.</p> <p>5. Leaders and Helpers to have appropriate Emergency Aid certificates.</p> <p>6. Method of reporting to be approved.</p>	As above

STEP 1	STEP 2	STEP 3 (AND 4)	STEP 5
HAZARD	WHO MIGHT BE HARMED?	IS THE RISK ADEQUATELY CONTROLLED, OR IS MORE NEEDED?	REVIEW AND REVISION
Damage or injury to or by Hospital Equipment	Leaders, Helpers, Patients or Hospital Staff	<ol style="list-style-type: none"> 1. Controlled by all Leaders and Helpers attending the Hospital Induction session 2. Method of reporting to be approved. 	As above
Psychological effects on Leaders and Helpers of attachment, particularly with Terminally ill patients.	Leaders, Helpers	<ol style="list-style-type: none"> 1. Leaders to be made aware of any hospital bereavement counselling service. 2. Sensitive issues to be borne in mind when selecting Leaders/ Helpers for particular patients/Ward areas. 3. Group Leaders to provide support for each other. 4. Outside help to be sought where internal support is deemed inadequate for individuals involved. 	The support networks available should be evaluated if such a situation arises.

Adapted from: Five Steps to Risk Assessment.

Existing Hospital Scout (and Guide) Groups

(August 2005)

County	Group Name/Hospital
Avon	Bristol Royal Hospital for Children
Birmingham	Onaway (Birmingham Children's Hospital)
Cornwall	1st St. Piran's (Royal Cornwall Hospital)
Essex	Neptune Scouts (Southend Hospital)
Greater London Central	17th Holborn (Great Ormond Street Hospital) http://www.17thholborn.org.uk/
Norfolk	Norfolk & Norwich University Hospital
North Yorkshire	2nd Northallerton (Friarage) http://cira.tees.ac.uk/scouts/scoutInk/welcome.htm

Useful Resources

Development and Diversity

The Development and Diversity Department at Gilwell Park provides support for the development of Scouting through the Field Development Service, as well as information and advice on various areas of diversity, including special needs.

For more information, contact:

The Development and Diversity Department
Gilwell Park
Chingford
London
E4 7QW
Telephone: 0845 300 1818
Fax: 0208 433 7114
Email: development@scout.org.uk or special.needs@scout.org.uk

Or visit the web pages, which contain a range of further information:

Development: <http://www.scoutbase.org.uk/hq/development/>

Special Needs: <http://www.scoutbase.org.uk/ps/sneeds/>

Fundraising

The Fundraising Department at Gilwell Park answer fundraising questions and queries. They can give advice on a whole range of money-related issues, ranging from grants to gift aid and from leaving a legacy to loans. There are several funds administered by The Scout Association that can be used to support the development of hospital Scouting.

Contact:

The Fundraising Department
Gilwell Park
Chingford
London
E4 7QW
Telephone: 0845 300 1818
Email: fundraising@scout.org.uk
Website: <http://www.scoutbase.org.uk/hq/fundraising/>

Criminal Records Bureau (CRB) and Disclosure Scotland (DS)

Information and resources for the completion of Criminal Records Bureau forms in England and Wales and Disclosure Scotland forms for adults in Scouting is available from The Scout Information Centre:

The Information Centre
Gilwell Park
Chingford
London
E4 7QW
Telephone: 0845 300 1818
Email: info.centre@scout.org.uk
Website: <http://www.scoutbase.org.uk/hq/records/crb/>

Publications

The Scout Association produces a variety of general resources that will help you with setting up a Hospital Group. These are all available from the Information Centre:

The Information Centre
Gilwell Park
Chingford
London
E4 7QW
Telephone: 0845 300 1818
Email: info.centre@scout.org.uk
Website: <http://www.scoutbase.org.uk/hq/infocentre/>

Catalogue Number	Title
P1011000	Scouting Essentials
P1011001	Colony Essentials
P1011002	Colony Programmes
P1011003	Pack Essentials
P1011004	Pack Programmes
P1011005	Troop Essentials
P1011006	Troop Programmes
P1011007	Unit Essentials
P1011009	Unit Programmes
YLESSEN	Young Leaders' Essentials
BS320030	Recruitment of Adult Volunteers
MODMAT	Module Matrix – A guide to the Adult training scheme
YC	Young People First - the 'Yellow Card'

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