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Dear Friend

Thank you for expressing an interest in volunteering in one of our Northern Ireland Hospice Shops or The Old School House Café. Please read the information below which explains the volunteering opportunities available with us in Retail at present.

In order to be considered for the role of Shop or Café Volunteer you will need to complete the application form which you can do online. Please ensure you complete the monitoring form also. We cannot consider applications which have not been fully completed so do answer all questions.

Just one other point of note: we cannot consider applications from anyone less than 15 years of age and for anyone applying who is between 15 and 17 years - you should ask a parent or guardian to countersign the bottom of the application form.

If you have any queries with regards to volunteering in our Retail division, please do not hesitate to contact me at the Head Office number below or by e-mail at the following address: retail@nihospice.org.

Thank you for considering Northern Ireland Hospice Retail and may I wish you every success with your application.

Yours sincerely

**John Lynas.**

John Lynas

Volunteer & Customer Care Co-ordinator (Retail)



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ROLE DESCRIPTION FOR

HOSPICE SHOP VOLUNTEERS

**Purpose**

Shop volunteers are an essential and efficient part of the retail team. Their goal is

maximising sales to raise essential funds for the care of patients and their families.

Volunteers contribute to the customer having a positive experience of Northern

Ireland Hospice and our cause when shopping in one of our retail outlets.

**Reports to**

Volunteers report to and are supported by the Shop Manager and / or Shop Supervisor.

**Key Activities**

* Creating a friendly, welcoming atmosphere in the shop.
* Being ready to listen or chat to customers in a caring and sensitive manner.
* Assisting customers with their enquiries when choosing or donating goods.
* Selling items from the shop.
* Operating the till, ensuring security and safe handling of all money.
* Re-stocking the rails and shelves as necessary.
* Ensuring the shop is kept clean, tidy and safe.
* Helping to sort donations of goods.
* Window display and merchandising.
* Mending and washing clothes.
* Administration.
* Gift Aid Promotion.
* Registering donors on Cybertill database.

**Qualities necessary**

* An understanding of NI Hospice and the care services we provide.
* A helpful and caring attitude.
* A desire to serve and deal with the general public.
* A good listener, showing discretion and sensitivity when dealing with customers. Tact and diplomacy.
* Punctual and reliable.
* An ability to work in a team.
* An understanding of the importance of practising good health and safety procedures, and a willingness to carry them out.
* Being willing to learn how to operate a till.
* Honesty when dealing with money and goods.

**Time commitment**

Duties are allocated on a rota basis which can be on a set or flexible basis. Shifts are usually 3 – 4 hours duration.

HOSPICE SHOP LOCATIONS

* [Abbots Cross](http://www.nihospice.org/hospice_shops) - 24/25 Abbots Cross, Newtownabbey, BT37 9QU.

Tel: 9036 5142

* [Andersonstown](http://www.nihospice.org/hospice_shops) – 3 Slemish Buildings, 105 Andersonstown Road, Belfast,

BT11 9BS. Tel: 9030 7850

* [Antrim](http://www.nihospice.org/hospice_shops) - Unit 5 Castle Walk, Antrim, BT41 4DN. Tel: 9446 4534
* [Antrim Road](http://www.nihospice.org/hospice_shops) - 461-463 Antrim Road, Belfast, BT15 3BJ. Tel: 9077 4888
* [Ballyclare](http://www.nihospice.org/hospice_shops) - 10 Doagh Road, Ballyclare, BT39 9BG. Tel: 9332 3293
* [Ballygowan Road](http://www.nihospice.org/hospice_shops) - 6-10 Ballygowan Road, Belfast, BT5 7LL. Tel: 9079 3149
* [Ballyhackamore](http://www.nihospice.org/hospice_shops) - Unit 5 Library Court, 402 Upper Newtownards Road, Belfast, BT4 3GE. Tel: 9065 1706
* [Ballymoney](http://www.nihospice.org/hospice_shops) - 12 High Street, Ballymoney, BT53 6AG. Tel: 2766 5471
* [Bangor](http://www.nihospice.org/hospice_shops) - 106 Main Street, Bangor, BT20 4AG. Tel: 9146 3255
* [Castle Court, Belfast](https://www.castlecourt-uk.com/) Unit 48 Castle Court, 12-56 Royal Avenue, Belfast,

BT1 1DD. Tel: 9024 9492.

* [Coleraine](http://www.nihospice.org/hospice_shops) - 11 Stone Row, Coleraine, BT52 1EP. Tel: 7035 3810
* [Enniskillen](http://www.nihospice.org/hospice_shops) - 14 Cross Street, Enniskillen, BT74 7DX. Tel: 6632 8734
* [Finaghy](http://www.nihospice.org/hospice_shops) – 124a Upper Lisburn Road, Belfast, BT10 0BE. Tel: 9030 7898
* [Glengormley](http://www.nihospice.org/hospice_shops) – 269-273 Antrim Rd, Glengormley, Newtownabbey, BT36 7QN. Tel: 9084 8333
* [Holywood Road](https://www.nihospice.org/hospice-shops)- 303 Holywood Road, Belfast, BT4 2EX. Tel: 9065 3462
* [Larne](http://www.nihospice.org/hospice_shops) - 24 Main Street, Larne, BT40 1SS. Tel: 2826 0526
* [Lisburn](http://www.nihospice.org/hospice_shops) - 129 Longstone Street, Lisburn, BT28 1ET. Tel: 9266 9031
* [Lisnaskea](http://www.nihospice.org/hospice_shops) - 1 Cross Street, Lisnaskea, BT92 0JE. Tel: 6772 3170
* [Londonderry](http://www.nihospice.org/hospice_shops) - 12 Shipquay Street, Derry, BT48 6DN. Tel: 7126 9888
* Londond[erry, Rath Mor](http://www.nihospice.org/hospice_shops) - Unit 6, The Rath Mor Centre, Blighs Lane, Derry,

BT48 0LZ. Tel: 7126 3221

* [Maghera](http://www.nihospice.org/hospice_shops) - 61 Main Street, Maghera, BT46 5AB. Tel: 7964 3101
* [Magherafelt](http://www.nihospice.org/hospice_shops) - The Diamond Centre, Market Street, Magherafelt, BT45 6ED. Tel: 7930 0411
* [Ormeau Road](http://www.nihospice.org/hospice_shops) - 449 Ormeau Road, Belfast, BT7 3GQ. Tel: 9064 6710
* [Shankill Road](http://www.nihospice.org/hospice_shops) - 243 Shankill Road, Belfast, BT13 1FR. Tel: 9024 3292





ROLE DESCRIPTION FOR

THE OLD SCHOOL HOUSE CAFÉ VOLUNTEER

**Purpose**

The position of the coffee bar volunteer, as part of the retail team helps to provide the patients, families, friends and visitors to NI Hospice as well as staff with a friendly efficient service whilst ensuring sensitivity and confidentiality of those using the service.

**Key Tasks**

* Creating a friendly, relaxed atmosphere in the Old School House Café.
* Being ready to listen or chat to visitors in a caring and sensitive manner.
* Serving tea / coffee and other refreshments to any customers / visitors that request them.
* To complete Barista training
* Ensuring Food Hygiene standards are maintained at all times.
* Selling items from the shop area and Café.
* Operating the till, ensuring security and safe handling of all money.
* Re-stocking consumable goods as necessary.
* Ensuring the Café is kept clean and tidy, whilst adhering to hygiene procedures.
* To communicate openly with the appropriate service manager, other staff and volunteers of NIH.
* To undertake initial induction training, mandatory training and refresher training on an annual basis, along with any other training that NIH deems necessary.
* To discuss your progress on an annual basis with your manager.
* To follow Northern Ireland Hospice policies relevant to your volunteer role.

**Reports to**

Café Managerand Supervisors.

**Time commitment**

Duties are allocated on a rota basis which can be on a fixed or more flexible basis i.e. ‘as and when required’. Shifts are usually of 3- 4 hours duration.

**Location**

Old School House Café, NI Hospice, 74 Somerton Road, Belfast BT15 3LH.

**Qualifications and other requirements:**

* An understanding of NI Hospice and the care services we provide.
* A desire to serve and deal with the general public.
* Being willing to learn how to operate a till and Barista style coffee machine.
* Willing to undertake training in Food Hygiene standards
* Honesty when dealing with money and goods.
* A helpful and caring attitude with good communication skills.
* A good listener, with an ability to know when it is appropriate to talk, showing discretion and sensitivity with an understanding of the importance of confidentiality.
* The ability to work in a team.
* An understanding of the importance of good hygiene practices, and a willingness to carry them out.

**Support**

Volunteer Induction Training for this position will be provided. In addition, your service manager and supervisors will be available for questions and assistance.

**Expenses**

The Northern Ireland Hospice recognises that volunteers should not be financially disadvantaged in the course of their volunteer role. Volunteers are eligible to claim for travel expenses as outlined at Volunteer Induction.

**What’s in it for you**

* The satisfaction of knowing you have made a difference to someone’s life.
* A sense of pride in being part of an organisation that helps the wider community.
* Gain experience and knowledge of the work of the hospice.
* Be part of a team.
* Increase in self-confidence with a feeling of accomplishment.

**Challenges of the role**

* Coming into contact with very ill people.
* Dealing with bereaved relatives.
* Coping with situations that can be distressing at times.
* Infection control and management.

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** SHOP & CAFÉ VOLUNTEER APPLICATION FORM**

Ref. No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for considering voluntary work with Northern Ireland Hospice in one of our Retail Shops or Old School House Café at Somerton House. We could not raise the vital funds for palliative care for our patients and their families without the help of volunteers in our Shops and Café to do this. Please complete this short form (in capital letters) and sign it in order for us to process your application.

**Your details**

Name: Mr/Mrs/Miss/Ms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(including postcode)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Next of kin details** (We need this in case of an emergency when you are volunteering)

Name: Mr/Mrs/Miss/Ms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Which Hospice Shop / Café would you like to volunteer in?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**When would you be available to volunteer?**

Shops open between 9.30am & 5.00pmMonday – Saturday

Old School House Café opens between 9.00am & 4.30pm Monday – Saturday

|  |  |  |
| --- | --- | --- |
| DAYS | TIMES | COMMENTS |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |

**Why do you want to become a Hospice Shop volunteer?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please list any relevant skills you could offer as a volunteer in a Hospice Shop or The Old School House Café**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you doing any voluntary work at present?**..........................................**Yes / No**

**If yes, please give brief details**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Referee Details**

We need full contact details of two referees who **cannot** be family members. They should be people you know who can confirm your suitability to volunteer with us.

**1.** Name: Mr/Mrs/Miss/Ms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(including postcode)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** Name: Mr/Mrs/Miss/Ms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(including postcode)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Rehabilitation of Offenders (Exceptions) Order NI 1979**

Volunteer roles are exempt from the provision of Section 4 (2) of The Rehabilitation of Offenders Act which means you are not entitled to withhold information about convictions which for other purposes under this Act are “spent”. You must disclose any such convictions.

**Do you have any criminal convictions?**......................................................**Yes / No**

**If yes, please give details of all convictions regarded as criminal offences**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Finally, please sign the following declaration**

I declare that the information given on this form is honest and accurate:

**Signed** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of parent /guardian if under 18** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for applying to be a shop or café volunteer. Now send this form, together with the equal opportunities sheet (which must be in a separate envelope) to:

**Retail Department,**

**Northern Ireland Hospice,**

**Head Office,**

**18 O’Neill Road,**

**NEWTOWNABBEY,**

**BT36 6WB.**

**All information is stored under data protection laws and in confidence.**



**NORTHERN IRELAND HOSPICE**

**EQUAL OPPORTUNITIES MONITORING SHEET**

Reference number:

Northern Ireland Hospice is committed to equality of opportunity for all volunteering applicants irrespective of race, ethnic origin, gender, marital or parental status, sexual orientation, creed, disability, age or perceived religious or political affiliation. The Hospice will select volunteers solely on the basis of merit. Therefore, it is necessary for the organisation to monitor its activities to ensure that these requirements under the Equal Opportunities Policy are met. This information will be treated in strict confidence and is used for monitoring purposes only.

**Please indicate your community background by ticking the relevant box**

Protestant □ Roman Catholic □ Other □

**Please indicate your gender by ticking the relevant box**

Male □ Female □

**Please indicate your marital status by ticking the relevant box**

Single □ Married □ Widowed □

Divorced □ Separated □

**Please indicate your ethnic background by ticking the relevant box**

White European □ Chinese □ Irish Traveller□

Indian □ Pakistani □ Bangladeshi □

Black Caribbean □ Black African □ Black Other □

Other □

**Date of Birth** ……./……./…….

**Have you a disability?**.......Yes / No

**If yes, please give brief details**……………………………………………………………

**Please let us know how you became aware of this volunteering opportunity**

…………………………………………………………………………………………………..