1. What was your annual demand during the last financial year?
   Some confusion about what the question meant. 39 of 54 completed this section = 72%.
   
   Total: 1,215,816 contacts during the last financial year

2. Please list the channels your helpline currently uses

   * Other includes:
     - Post / letter
     - Social media including Twitter and Facebook
     - Other digital including Whatsapp, Skype, Facetime, Zoom
     - Mobile app
     - On-line form
     - BSL
     - Text relay
     - Face to face appointments
     - On the streets providing support

3. Does your service usually operate 24/7?
   Yes = 8 (15%)
   No = 46 (85%)

4. Have you experienced increased demand since coronavirus?
   Yes = 23 (43%)
   No = 31 (57%)

5. If so, by what percentage?
The four helplines who reported contacts increasing more than 100%:

- One reported that they were still looking at the figures however email contacts increased from around 15 per week to over 70 last week – an increase of 360%
- Another reported contacts had increased by 120% since 16 March 2020
- Another reported an increase in the length of calls
- The biggest impact came from a helpline who said calls had increased between 10 to 20 times, representing a 1000 to 2000% increase

In Addition:

HLP has had many conversations with members around coronavirus and the changes to contacts. We’ve been told calls increased by three times the usual number for one helpline. Another helpline said they’d seen a 30% increase in contacts and another, had received three months of calls in three days. One domestic abuse helpline reported a 15% decrease in calls – the reasons could be complex with self-isolation and staying at home with family. Callers may not be able to get the support they need so there could be hidden dangers.

6 Have you had to suspend any channels due to coronavirus?

Yes – 8 (15%)
No – 46 (85%)

Of those saying they had suspended channels, these are the changes they have made:

- Stopped face to face group meetings, 1-2-1 work and all group sessions
- Helpline changed to a call back service
- Significant drop in volunteer workforce regarding reliability and personal welfare concerns. This has had an impact on call answer rates due to reduced resource
- Some 24 hour services have needed to reduce their hours because they can’t resource the full service
- Had to close the phone lines occasionally when not enough staff able to come into office due to self-isolation. SMS, email and Webchat have been operating remotely since March 2020. At end of March, the helpline switched to having VoIP phones available remotely so helpline workers can operate from home
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- People can’t ring the helpline directly and the current phone system can’t accommodate working from home, so phone calls go to voicemail and there is a call back service
- The helpline has ceased
- Office phones are suspended - helpline is working as normal
- One helpline said there were no suspended channels however, there is an increased delay in responses on both channels (phone and email)

7 Have you had to reduce the hours your helpline operates due to the coronavirus?
Yes – 6 (11%)
No – 48 (89%)

If yes, by how many hours a week?
- One helpline’s 'on demand' service has stopped. Rather than live calls they use a virtual receptionist service to manage the contacts
- Another helpline’s hours have reduced by 2/3rds (66%)
- One helpline has had to close phones on an adhoc basis but only for a couple of hours at a time
- Another helpline is currently closed

8 Have you had to increase the hours your helpline operates due to the coronavirus?
Yes – 8 (15%)
No – 44 (85%)
(52 of 54 responded)

If yes, by how many hours a week?
10 of the 52 helplines (19%) said they had increased helpline hours or were exploring the possibility of doing so:

- 42.5 hours increase per week
- Phone by 28 hours/week and email by 19 hours/week
- 50
- 22.5
- Extra day - Sunday working (6 hrs)
- We are considering offering a lunchtime session - but not confirmed yet
- Hours not changed, but working from home the opening/closing times have blurred and working times have extended when we would otherwise be closed
- This is currently under discussion as we anticipate there to be a demand for longer opening times
- 20
- On demand

9 Have you got enough staff and or volunteers to cope with the current demand?
Yes – 41 (76%)
No – 10 (19%)
Don’t Know – 3 (5%)
10 Do you have the provision and systems in place to transfer your helpline staff or volunteers to work from home?
   Yes – 51 (98%)
   No – 1 (2%)
   (52 of 54 responded)

11 As an organisation, do you have access to any existing non-helpline staff or volunteers who could be trained to provide extra support for your helpline?
   Yes – 37 (69%)
   No – 17 (31%)

If you answered yes, would you be interested in online training from HLP?
26 responded to this question with responses as follows:
   • Yes = 9 (also quick reminder for all staff dealing with people over the phone in these difficult times; depending on cost and timeliness; potentially; we have training from you to impart but online sessions would be helpful)
   • Possibly = 4 (we have drawn up a contingency list in case regular staff become ill; online training would be useful)
   • No = 10 (already in hand internally; not currently needed, as trying to manage inhouse; these are in management positions and trained the existing staff so HLP training not required thank you)

Other comments from helplines:
   • Enlisting support of other specialist staff teams to cover helpline staff absence
   • All staff at the office receive the same helpline training so are available to support the helpline if needed
   • We can use previously trained bank staff
12 If you answered yes to Q12 what topics would you want new helpline teams, staff or volunteers, to be able to access through on-line training?

*Other courses:
- None required at this stage but will be in touch if this changes although we already have good in-house training around these issues and robust policies and procedures in place
- Loss and bereavement knowledge
- Would have to be specific to our organisation
- Possibly vicarious trauma, although at present all those in supporting roles at our organisation have access to clinical supervision
- We would like to have volunteers man our helpline as we are a very small part-time office team. They would need to be trained/ have knowledge in the conditions our patient group suffer from

13 Thinking about your helpline and coronavirus, what are you top three concerns?
Summary of key concerns (see full list at end of document)

- Keeping up to date with advice, information and legislation
- Staff and volunteer welfare
- Caller wellbeing
- Helpline demand and capacity
- Complexity of calls and quality of support
- Lack of other organisations for signposting
- Out of helpline remit
- Changes to type of calls
- Moving to home or remote working, support and technology
- Resourcing, impact, sustainability and funding
- Reduction in volunteers and funding
- Risk and safety
14    Thinking about your helpline, are there any additional resources that HLP could help you with at this time?

- No = 21 (But thank you; probably still early days!; Not at this time; Not at the moment but keeping in touch with us is great; None, but just knowing you're there should something arise is good)
- Enhanced Helplines Listing
- We're currently looking to secure funding to pay the extra volunteers we have recruited to help during our extended hours
- Lay advice on technical issues
- Possible support to provide staff with mobile phone and laptops to work from home as this has and will come out of the general organisational budget as opposed to the helpline budget
- Did not know about the Forum so will check that out
- Please can you tell me if any members use whatsapp api? we are trying to decide whether to use WhatsApp business or WhatsApp api. Also a breakdown of what other helplines are offering at the moment if it's changed
- Changes in opening hours of other services so we are giving callers the best info
- On-line training
- Help sheets covering the key areas that you have listed in Question 13!
- We are a charity and all our fundraising has been disturbed and therefore we would hope that Helpline Partnership would reduce costs to a minimum
- Best Practice guidelines for web chat
- Exploring IT systems which would allow easy divert of Helpline to different locations/phones
- Advice on establishing webchat functions
- Safety Advice/Self-Care Tips that can be posted on our website
- I guess what we need to do is make sure we can help everyone through this difficult time
- Virtual conferencing
- Online training would be good. Possibly a virtual meeting or similar too for Helpline Managers
- Not sure there is anything immediately, though running the service in such extreme conditions may well lead us to re-evaluate how we do what we do once things calm down again
- Support with recruitment
- It is difficult to know at this time as we have just been flat out moving to home working. It might be helpful to ask this question again in a few weeks to give time for us to adjust to home working and review issues as these come to light
- Cost reduction for VCC?!
- Lobbying Government to support 3rd Sector organisations through financial uncertainty
- Keeping us abreast of any financial/funding opportunities to maintain services
- If you can get the government to pitch in financially, that would be helpful
- Free online training e.g. safeguarding - not just for helpline volunteers but for social media moderator volunteers too
- Any extra guidance around GDPR and confidentiality when operating helplines remotely would be helpful. We are doing everything we can but it may be helpful if there are any resources out there that we could access just to check if we could be doing anything more than what we already are.
- We have never operated remotely before so this is new to us. Also, any guidance or resources for support volunteers who are working from home, something like a self-care resource pack
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Q14 – Key concerns for helplines

Keeping up to date with advice, information and legislation
- Constantly changing government advice and information keeping teams up to date
- That we give accurate, up to date information
- Ongoing information updates
- Keeping a pace with government and NHS guidance, and changes in legislation (new Emergency Act)
- Maintaining up to date information e.g. benefit changes, problem solving e.g. Universal Credit ID check problems
- Understanding new signposting pathways/keeping up to date with changes in services we are signposting to
- Having the most relevant information
- Keeping staff informed of changes regarding the Coronavirus
- We can only advise on Government guidance
- Keeping up to date with developments and publishing new guidance in a timely manner

Staff and volunteer welfare and caller wellbeing
- Wellbeing of team who will be working from home and more isolated from colleagues
- Calls have become more emotionally demanding on call handlers
- I’m concerned that eventually calls will start to arrive from people in harrowing circumstances whom Helpliners are powerless to help. They are already feeling stressed because they can’t give the definitive information that callers are asking for on various issues
- Women who are at risk may only have a small window of an opportunity to call us so having enough staff on to take live calls is vital
- That we can reassure the callers
- Staff staying healthy and safe whilst working from home
- Health of Volunteers
- Mental health needs
- Keeping volunteers and staff safe and feeling supported working from home
- The clients take their drug users back into their home putting themselves at risk
- Length of time this will go on for already stressed and anxious callers
- Helpline staff/volunteers becoming ill
- Increase in people feeling anxious due to current situation
- Victims of Domestic or Sexual Abuse not being able to access support
- Abuse escalating due to additional pressures and risk increasing
- Keeping staff safe and well, whilst still delivering a quality service
- Keeping clients and staff safe
- We are currently down to just two people manning the lines, so one concern is burn out. Another concern is that we will be able to help everyone who needs us. Another concern is that people who need us will slip through the gaps
- Lone worker burnout
- Sickness absence
- Supporting the team with their own wellbeing and not feeling overwhelmed
- That the provision from staff and volunteers drops due to ill health
- Many people with OCD are struggling due to the isolation, contamination, health and responsibility worries brought on or increased by the situation
- Keeping staff healthy and active
- People have other issues and so are not contacting us
- Staff wellbeing as they cancel annual leave to support the service
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- Isolation of staff long term; wellbeing and mental health of staff
- Staff welfare - health concerns
- How Covid 19 will affect our more vulnerable callers
- Emotional impact on us if any callers seriously affected by Covid 19 (we have ongoing contact with some of them and many are already vulnerable health wise
- Illness within team
- We support women only on our helpline. All our knowledge and experience tells us that women are going to be disproportionately affected by the virus, as they are among the most financially vulnerable, more likely to experience violence and abuse, be parenting alone, and so on. So firstly our concerns would be that we are able to continue to provide a safe service for these women, but concerned they may be less able to get in touch with us during this time

Helpline demand, capacity, complexity of calls, quality of support and lack of other organisations for signposting

- Lack of capacity to meet significantly increased demand
- Increase in demand, ensuring we help everyone we can
- Increase in crisis calls, not enough current support for these people during the pandemic. Could lead to a national mental health crisis.
- Having enough staff who are able to take calls - at moment some staff are self-isolating but we have staff from other teams that can assist on the helpline
- Not having capacity to emotionally support callers
- Demand increase superseding capacity
- Having nowhere open to signpost people to. Councils harder to access for support
- Availability for new callers
- Cover if the advisers are too ill to work
- Anticipated increase in demand as the crisis progresses and loss and bereavement becomes more widely discussed
- More complex calls - especially around complicated grief
- That we will become busier than we can cope with
- Capacity within the team to deliver extended helpline hours
- Volume of calls when the government are not able to sustain the 80% pay retention of jobs programme
- Drop in service users contact
- Keeping on top of the number of enquiries we are getting
- Providing info about non coronavirus topics when the usual health services are being greatly depleted in the response to the virus
- We mainly provide information about accessing treatment, which is more complex now
- Providing same level of service
- Increase in calls to the service being unmanageable as face to face services reduce
- Meeting the expected demand with our current resources
- Being able to access suitable support/help
- The availability of other helplines. We are seeing an increase in callers that are not victims of Domestic Abuse but are desperately seeking someone to talk to
- If we are forced to completely shut the office, we will need to reduce helpline hours
- Back to back calls and emails - no free time
- We are unable to deal with other issues and vital services as quickly
- Unmanageable increase in demand
- Unmet caller’s expectations
Out of helpline remit, changes to type of calls

- We are still focussed on the impact of living with alcoholism
- Connecting people to Groups – some of our callers are very confused and isolated
- Out of our remit of care, many calls needing practical advice such as how to get a food delivery etc. People with mental illness are also vulnerable so need to be considered for practical support.
- We were going to change our telephony (which we can't now do) as we are unhappy about the provider and are dependent on them to set up and operate the diversion of calls which they say can only be to 2 home numbers. Therefore we don't have the facility to increase the number of Helpliners and extend opening hours
- That if the nurses are called to clinical work, the helpline would not be able to run
- Coordination between staff regarding work
- Not giving advice, but signposting. Carers are asking us to help them make difficult personal decisions for them and that isn't our role
- Failure to keep boundaries around Safeguarding amid fears of COVID-19 infection
- Increase in medical questions which are signposted to medical professionals
- We are being asked for legal advice more than we used to. We anticipate demand increasing (initially it dropped, since we are primarily to do with workplace wellbeing and people weren't in their usual workplaces) but we can't anticipate what people will be asking us, or plan our response
- Being able to answer the questions we are being asked about the coronavirus!
- Many service users are calling for coping strategies during the outbreak, but we can't provide this
- Moving from a signpost service to on-going support
- 50% of all calls now relate to coronavirus in relation to housing

Moving to home or remote working, support and technology

- Change to homeworking and impact on quality, safeguarding, confidentiality and staff welfare
- How we can roll out our remote working to volunteers as well as staff
- Home working - helpline workers having to listen to traumatic calls in their home environment and working alone. I am concerned about the risk of burn out
- The need to move to home working without VCC - waiting for government funding to pay for this before we move to home working to ensure best ethical practice and staff wellbeing
- Technology working from home
- Support for staff who have now found themselves homebased

Resourcing, impact, sustainability, reduction in volunteers and funding

- That we won't have enough equipment due to financial difficulties
- The impact on the charity as a whole - not just the helpline
- Providing training and support to additional staff being brought in
- Personal concern about the long-term future for the helpline due to current condition
- Keeping the helpline open
- Calls and emails have dropped significantly and our helpline is an essential way for us to gather data and case studies for our work
- Service delivery
- Financial
- Sustainability
- Staffing levels x 2
- Funding - impact of Covid-19 on business and individuals may make fundraising more challenging
- Managing other tasks while dealing with this volume (most other enquiry staff have other roles within the information team)
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- Recruiting more staff
- Providing support
- Ongoing training
- Reduction in staffing as workers become unwell or unable to take calls from home
- Staff retention
- External funding from ancillary activity stopped
- Donations will be down this year due to people’s financial circumstances as a result of the Covid-19 outbreak. We rely solely on private donations and fundraisers to finance the running of our helpline
- That our volunteer numbers will decrease as the lockdown/social distancing continues. Either due to their own mental health or due to getting the virus themselves. We continue to support our volunteers with debriefs after every shift and also monthly group supervision via Zoom, we are also working on having back up volunteers ready for when we need them to work on the helpline
- Flexibility from funders: Taking into account this unprecedented situation we find ourselves in we would hope for flexibility from funders around things like outcomes etc

**Risk and safety**
- Managing risk and safety