



Volunteer Program

Purpose:

- A. To maintain community contact
- B. To enhance resident life through event participation and are not involved in direct resident care.
- C. Volunteerism is good for the volunteer, the organization, and the community. The lives of all involved are enriched.

Policy:

- A. Volunteers will be used in the Activity Program and Food Service, as appropriate.
- B. Volunteer services may not be substituted for services of paid employees required by Department regulations.
- C. Volunteers may be:
 - 1. Residents
 - 2. People from area churches, civic groups, or individuals in the community who desire to participate in the program
- D. Volunteers must be supervised by the administrator or designee while in the Community.
- E. Volunteers who are consistently in the Community for 2 or more days per week or 3 or more hours per week, shall:
 - 1. Fill out a Volunteer Application form (PHMC # 74)
 - 2. Be given an orientation to include the characteristics and needs of the resident population
 - 3. Be oriented to the emergency procedures and an explanation of their specific responsibilities.
 - 4. Be given a copy of the residents' rights.
 - 5. Be given a copy of the Volunteer Handbook
 - 6. Read and sign the Volunteer's Code of Ethics
 - 7. Provide a written record of a Tuberculin Skin Test (PPD) within 30 days prior to starting volunteer work.
 - 8. Pass a background check
- F. The Community shall maintain a record for each volunteer as defined in subsection E, which includes the individual's name, current address and telephone number.



Volunteer Code of Ethics and Confidentiality Statement

All clients have the right to privacy and information about them or their treatment may not be divulged to other employees or the public, including family members, except where such information is necessary for client care or is requested with a signed release from the client. Any information concerning any change in a client's mental status should be reported immediately to the appropriate staff members.

As a volunteer, I realize that I am subject to a Code of Ethics similar to that which binds the professionals in the field in which I work. Like them, I assume certain responsibilities, and except to account for what I do in terms of what I am expected to do. I will keep confidential matters confidential. I interpret volunteer to mean that I have agreed to work without compensation in money, but having been accepted as a worker, I expect to do my work according to the standards as the paid staff expects to do their work. I believe that my attitude toward volunteer experience should be professional. I believe that I have an obligation to my work, to those who direct it, to my colleagues, to those for whom it is done, and to the public.

By signing the Volunteer Application, the applicant agrees to abide by this code of ethics and confidentiality statement.

Applicant Signature: _____

Emergency Notification: _____

Phone: _____



Volunteer Hours

Procedure:

- A. Volunteers will be scheduled by the Recreation Director.
- B. Volunteers are asked to call in if unable to fulfill their commitments.
- C. Volunteers will log their hours in the sign-in/sign-out book.

