

## PROCEDURE FOR RECRUITMENT OF RCH VISITING VOLUNTEERS

To ensure registration as an approved RCH visitor, a VVP checklist must be completed for each individual prior to his/her commencement. Please note that all visiting volunteers must be at least 18 years of age, and the process of becoming an approved RCH visiting volunteer can take 8-10 weeks.

The processes and documentation in the attached checklist are accreditation requirements for all volunteers engaged by RCH to comply with ACHS Equip 4 Standard 2.2. Once the checklist has been completed and signed, please forward a copy to Lisa Burke (c/o - RCH Family Resource Centre). The details will be added to the Volunteer Service database. The visiting volunteer cannot commence until this process has been completed; it is only at this point they are then covered by the Victorian Public Healthcare Insurance Program managed by RCH Executive.

If you have any queries please contact Lisa Burke by email ([lisa.burke@rch.org.au](mailto:lisa.burke@rch.org.au)) or telephone (03 9345 4662). Please contact Lisa for electronic or hard copies of any of the forms detailed below.

### INFORMATION TO HELP YOU COMPLETE THE CHECKLIST

#### **Police Check Reference Number**

All visiting volunteers will need to complete a 'Consent to Check and Release National Police Record' form. On the form under section 3 'type of position' state "Voluntary, work with children". Under section 5, write "The volunteer rate is \$13.70 for 2008". Please use CVF number 99/98 at the bottom of page 2 for all volunteers and sign section 7. Once the Police check has been completed and you have viewed the original, record the reference number and date of issue on the checklist and then return to check to the visiting volunteer.

#### **Working with Children Checks**

This is free for volunteers. Forms are available from the post office or go to [www.justice.vic.gov.au/workingwithchildren](http://www.justice.vic.gov.au/workingwithchildren). RCH staff must view the photo card and keep a copy on file showing the number and expiry date.

#### **Application Form and Letter of Offer**

Examples are available to use or to assist you in developing your own form. You must keep a record of current emergency contacts and any medical conditions, and update these annually, forwarding updates to the Volunteer Service for database records.

#### **Position description, interview questions and selection criteria**

General RCH position description forms, and a sample volunteer position description, can both be provided on request. You may use these in their current form or adapt them to suit your specific role. Other documents available to assist with interview questions and selection criteria include interview questions templates, interview assessment forms, and the RCH Volunteer selection criteria. To obtain any of these documents, please contact Lisa Burke.

#### **Two referee checks**

The RCH referee report checklist can be provided on request. Again, you may use the existing RCH form or adapt it to your needs. You must keep completed copies on file.

#### **Orientation**

Prior to beginning, visiting volunteers will require a thorough orientation to both the physical environment and their role. Provided at the ward/departmental level, this orientation should cover rights, responsibilities, expectations, codes of conduct, ID badges, privacy/confidentiality, infection control, OH&S policies, and emergency procedures. In addition to orientation, visiting volunteers must attend an RCH Volunteers Emergency Procedures training session, please contact Volunteer Services staff for session details.

#### **RCH Health Form & RCH Privacy, Confidentiality & Security Agreement**

Hard or electronic copies of these forms can be provided by Lisa Burke. Two signed forms of the Privacy, Confidentiality & Security Agreement are required, one for the visiting volunteer and one for your own file records.

## CHECKLIST FOR RECRUITMENT OF RCH VISITING VOLUNTEERS

Please complete the following checklist, then return a copy to Lisa Burke, Family Resource Centre

DETAILS	
<i>Name of your visiting volunteer:</i>	
<i>Name of external organisation:</i>	
<i>RCH department/area to be visited:</i>	
<i>Visiting volunteer role:</i>	
<i>Date:</i>	

RECRUITMENT CHECKLIST	
<ul style="list-style-type: none"> <li>▪ Have you sighted the visiting volunteer's Police Check record?</li> <li>▪ Record reference number and date of issue here.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you sighted the volunteer's Working With Children card?</li> <li>▪ Record the number and expiry date here.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you sighted photo identification (ie. driver licence) to confirm volunteer's photo and address?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Has an application form been completed, and is there a copy in your file?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Record emergency contact details here**</li> <li>▪ Record any known medical conditions here**</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you developed a position description for this role?</li> <li>▪ Has a copy been given to the volunteer, and a copy kept for your file? (This should be updated every second year.)</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have two reference checks been completed and recorded, and copies kept in your file?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Has a letter of offer been signed and dated, and a copy kept in your file?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Has an Identity Badge been ordered through Lisa Burke?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Has the volunteer been oriented to environment and role?</li> <li>▪ What date did he/she attend Emergency Procedures training?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Has a Health Form been completed &amp; sent to Lisa Burke?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have two copies of the Privacy, Confidentiality &amp; Security Agreement (one for volunteer and one for your file) been signed and dated?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you given the volunteer a Starter Pack?</li> </ul>	
Name, position, & contact details of staff member responsible for visiting volunteer and/or completion of above file records:	
Department Head (print name and date):	
Department Head Signature:	

\*\* Emergency contacts and known medical conditions must be updated annually & updates forwarded to the Volunteer Service.

<b>FOR FAMILY SERVICES STAFF ONLY</b>	<i>Date entered on Volunteer Database:</i>	<i>Database No:</i>
<i>Date received by LB:</i>		