



Volunteer/Observer Guidelines and Policies

You are expected to read the following policies carefully and thoroughly.
(Please ensure you wear your volunteer name tag at all times)

● CONFIDENTIALITY

- The parents and family have a legal right to privacy concerning their medical records. It is an obligation of Pediatric Possibilities to uphold this right.
- Volunteers are not allowed access to client charts or any other confidential client information.
- In addition: names, diagnoses and any other identifying information should not be used in front of any other client or family member, inside or outside of Pediatric Possibilities.
- Conversations with therapists and other Pediatric Possibilities employees should remain professional and objective and should be limited to relevant information regarding the client's care.
- Volunteers/Observers must wear name tags at all times while in the clinic setting.

initial

● SAFETY FIRST

- The safety of each client is of utmost concern. While the Pediatric Possibilities clinic is child friendly, we use suspended equipment that requires one on one supervision.
- Many of the children have poor balance, visual awareness, and motor planning, which can cause them to trip and fall more easily if equipment or materials are left out of place or on the floor.
- Please check with the therapist to ensure they are finished with toys or equipment, then assist by cleaning up.

initial

● DRESS CODE IS BUSINESS CASUAL

- Please use good judgment in choosing clothes that are presentable, professional, and cover bare skin.
 - NO hats / NO athletic wear, NO hoodies or sweatpants
 - NO ripped or frayed jeans
 - NO shirts with printed logos
 - If wearing leggings, the shirt must cover your bottom
 - If wearing shorts, they must be dressy and be longer than where the fingertips reach on the leg
 - You will be reaching up, bending over, and squatting, so wear things that are comfortable but professional.
 - Avoid top/bottom combinations that gap in the back when bending or reaching.
 - Shoes need to be removed before entering the therapy rooms. Bare feet or socks are ok

initial

- **FACE TO FACE CONTACT**

- Volunteers/Observers may not be able to observe each therapy session unless in the observation room, due to the comfort levels of children and families, and the treating therapist. Please check with the therapist before joining in on a session.
- In addition, families must give their permission for a volunteer to observe.
- During a treatment session, you may also be asked to gather play materials or help maintain safety of the child or therapist. Let a staff member know if you are unable to lift a child or equipment due to your own needs or limitations.

initial

- **BOUNDARIES**

- Please turn off cell phones or leave them in an area that is not being used for therapy.
- Please keep in mind that your role here is to observe and to assist, not to get overly involved in a treatment session.
- Make sure that your presence or interactions don't detract from the therapeutic goal. While we maintain a fun, easy-going atmosphere, it's important to remember that the play the children are doing is actually purposeful "work".
- The therapist may or may not include you in the session, but be sure to ask before getting involved.
- Please refrain from chatting with the other volunteers or employees if it interferes, distracts, or takes away from the care of a child or family.
- Please follow therapists' directions during sessions, and be ready to help if asked.
- Volunteers should maintain good boundaries with the families we serve and monitor the amount of information they disclose.
- Please do not share inappropriate personal information and respect other beliefs even if they do not agree with your own.

initial

- **INDEPENDENCE AND DEPENDABILITY (ATTENDANCE)**

- It is extremely helpful for volunteers to be independent in seeking out activities with which they can assist.
- Take initiative to help with clean up during and after therapy sessions.
- Volunteers should also check in with therapists to see if they need help with a special project.
- Volunteers may be asked to work on an activity at home.
- Please respond promptly and dependably to assignments.
- Some therapy activities, such as summer camps, are planned based on having enough volunteers present. Please call the clinic as soon as possible if you are not available for a shift that you have signed up for.
- Volunteers are responsible for maintaining a log of their own hours and are responsible for asking therapists to complete performance reviews as needed for school requirements. Please make sure documentation is filled out in a timely matter.

initial

- **COMMUNICATION AND CONCERNS**

- Volunteers should always use child first language (refer to a “child with autism” rather than “an autistic child”).
- Pediatric Possibilities is a family centered agency. We provide a safe place for families to bring their children and their concerns. Please approach all families in a friendly, welcoming manner. Our goal is to provide a gentle, nurturing, and safe environment for ALL children as well.
- If a parent asks you a question, please refer them to the proper therapist for clarification.

initial

- **CLEANING/CLERICAL TASKS**

- Part of your volunteer duties will include sterilizing toys, wiping down equipment, organizing clinic materials, refilling disposable supplies such as gum, balloons, and paper products, and washing the laundry. Please refer to Office Procedures Manual for instructions for each of these activities.
- PLEASE NOTE: Any object that goes in a child’s mouth must be sterilized. If in doubt, wash it out!
- Be sure to complete the volunteer feedback form at least once per month so that we know you and the clinic are all getting the best experience from your time here.

initial

- **PHYSICAL DEMAND**

- Some tasks we may ask you to do around the clinic may involve frequent lifting or carrying of objects weighing up to 25 pounds.
- Please let the office staff know if this is not something you feel comfortable with and we will be able to find other tasks for you to do around the clinic.

initial

- **OBSERVING**

- Please make sure you introduce yourself and your role to the therapists and other employees.
- If you are seated behind the observation window please give first priority to any parents that arrive.
- Please ask the therapists before sitting in on therapy sessions.

initial

- **AFTER VOLUNTEERING**

- You are responsible for keeping track of your own hours and totaling them at the end of your volunteer period.
- Please bring any necessary forms to be signed on your last day of your volunteer experience.
- It is your responsibility to make arrangements for any recommendation letters needed before your volunteer experience is complete. We have the right to decline any requests for reasons we see appropriate.

initial

At any time, we reserve the right to discontinue your volunteer experience for any reason.

Volunteer Signature:

Print Name:

Date:
