

PALLIATIVE CARE OFFSITE VOLUNTEER PROGRAMS POLICY®

DOCUMENT SUMMARY/KEY POINTS

This policy covers the SCHN Palliative Care Offsite Volunteer Programs which include:

- The Palliative Care Family Support Volunteer Program (FSVP)- CHW & SCH site
- Bear Cottage Crisis Support Program (HCSP)
- SCHN Palliative Care Volunteer Biography Program (The Story Project)- CHW, SCH & Bear Cottage site

Offsite Palliative Care volunteers visit families in their home or other community locations to support parents/carers and siblings. These programs do not include general Bear Cottage Volunteers, Ward Grandparent Volunteers or any other volunteer group within the SCHN.

CHANGE SUMMARY

This policy has been updated to include COVID guidelines to Infection Control section.

READ ACKNOWLEDGEMENT

Read acknowledgement for this document should include:

- SCHN Palliative Care Staff
- SCHN Palliative Care Volunteers within:
 - SCHN Palliative Care Home Support Volunteer Program
 - Bear Cottage Home Crisis Support Program
 - Palliative Care Biography Program

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	1 st March 2026	Review Period: 3 years
Team Leader:	Volunteer Coordinator	Area/Dept: Palliative Care

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Scope

This policy covers the SCHN Palliative Care Offsite Volunteer Programs. Volunteers from all programs provide support in the homes of patients and their families who have been referred to palliative care or in other venues away from CHW/SCH and Bear Cottage. It does not include general Bear Cottage Volunteers, Ward Grandparent Volunteers or any other volunteer group within the SCHN.

Definitions

Palliative Care

Palliative care is a philosophy of care that is characterised by flexible, family-centred care and support throughout the course of a life limiting illness and continues after the infant, child or young person's death. Palliative care is holistic care that encompasses physical, psychosocial and spiritual care of the child in the context of his or her family. It may be for a few hours or a few years. Although death is the usual outcome for children receiving palliative care, prognosis can be uncertain. Therefore predicting when a child may die is often difficult.

Volunteer

A volunteer gives their time willingly to undertake an activity which is performed for the common good and without seeking financial gain.

Offsite Palliative Care Volunteers

Offsite palliative care volunteers provide their support primarily in the home to enhance the clinical care that is available to children and their families who are supported by the SCHN Pain and Palliative Care (PPC) Services.

Supporting Policies

This policy is supported by: (for non-intranet users)

SCHN Policies:

- Volunteers Procedure: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/3774>
- Work Health Safety Risk Management Procedure: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/2883>
- Staff Vaccination Procedure: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/3762>
- Social Media: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/4262>
- SCHN Patient Complaints Management: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/3591>
- SCHN Insurance, Cover and Limitations Procedure: <http://webapps.schn.health.nsw.gov.au/epolicy/policy/3825>

- SCHN Home and Community Visiting-Risk Management Procedure:
<http://webapps.schn.health.nsw.gov.au/epolicy/policy/3415>

NSW Health Policies:

- Volunteers-Engaging, Supporting and Managing Volunteers:
http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2011_033
- Code of Conduct:
http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2015_049
- Work, Health and Safety: Better Practice Procedures:
http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2018_013
- Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases: http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2018_009
- Managing for Performance:
http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2016_040
- Managing Misconduct:
http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2014_042
- Conflicts of Interest and Gifts and Benefits:
http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2015_045

The Palliative Care Service

SCHN Palliative Care is represented by the three palliative care services located at:

- The Children's Hospital at Westmead (CHW)
- Sydney Children's Hospital Randwick
- Bear Cottage Children's Hospice, Manly

The CHW and SCH multidisciplinary Palliative Care Services are consultative services that aim to improve the quality of life of children with a life limiting illness and their families. Children and their families can be supported at hospital or home and/or other residential/hospice facility including Bear Cottage, Manly.

Palliative Care provides the following support:

- Assessment and management of pain and/or other difficult symptoms
- Home visits to families to assist with patient care at home
- Linking families with available hospital, community and respite services
- Provision of care and support during the different stages of a child's illness
- Psychosocial support for patients and families
- Bereavement support for parents and families

Bear Cottage is a 10 bed children's hospice located at Manly that provides both respite and end of life care to children with a life limiting illness and their families. Bear Cottage is a service of the Sydney Children's Hospital Network.

Bear Cottage can provide:

- Regular booked respite
- Emergency respite
- Pain and symptom management
- End-of-life care
- Child Life Therapy
- Music Therapy
- Art Therapy
- Specialised Camps and activities for children
- Camps and activities for family members
- Bereavement support

SCHN Palliative Care Offsite Volunteer Programs

The Offsite Palliative Care Volunteer Programs are recognised as integral to the SCHN Palliative Care Services. Offsite volunteers are committed to enriching the care experience for the patient and their family by providing compassionate support in the family home.

Offsite volunteers assist families in a variety of ways. They provide practical help and offer their time and presence to listen to parents and offer emotional support. Volunteers can play with a sick child or other siblings. These activities provide some respite for parents as well as special time and attention for siblings and/or a patient.

The principles of the Offsite Volunteer Programs are:

- To utilise the diverse personalities and skills of volunteers to provide support to families caring for children with life limiting illnesses receiving palliative care in their home.
- Work in partnership with parents and carers in the home to support the individual psychosocial and practical needs of families and children while respecting their social and cultural values.
- To provide short or longer term volunteer support for families at home to enhance family functioning through practical and emotional support when caring for a child with a life limiting illness.

Duties can include:

- Practical support for parents/carers
- Helping with outings including medical appointments
- Playing or engaging with the patient

- Sibling support
- Emotional support for the parent/carer
- Supporting therapeutic interventions that are facilitated through the Biography Program Volunteers

The Offsite Volunteering Programs:

Palliative Care Family Support Volunteer Program (CHW/SCH sites)

This program provides regular volunteer support in the homes of families who are referred to the CHW/ SCH Palliative Care Services. Volunteer support is available to families throughout the child's illness and can continue in the initial bereavement period (up to 6 months)

Bear Cottage Home Crisis Support Program

This program provides short term volunteer support in the homes of families who attend Bear Cottage in the event they experience a short term crisis situation.

The crisis must be short term in nature and the short term intervention would provide emotional and practical support for families and increase their capacity to function in a crisis situation.

SCHN Palliative Care Volunteer Biography Program (The Story Project)

Provides an opportunity for family/carers to tell their child's story via a series of approximately six interviews with a volunteer, who has received specialised training in biography writing by the SCHN Palliative Care Volunteer Managers. The biography incorporates words and visual media and is presented in a printed book and USB.

The Biography Volunteers assist families to reflect and record stories and anecdotes about their child. The project may or may not continue following the death of the child depending on family wishes.

Offsite Palliative Care Volunteers

The engagement of offsite volunteers brings together a diverse mix of cultural and life experiences, skills and expertise from the local community.

Offsite volunteers are entitled to the same conditions of service as paid staff excluding salary. Potential volunteers should note that volunteering is not a precursor to paid employment at SCHN or Bear Cottage. Volunteering is viewed as an activity that is:

- of benefit to children, families, carers, paid staff and volunteers
- undertaken of the volunteer's own free will and without coercion
- a designated volunteer position only. Volunteers do not replace paid workers, nor constitute a threat to their job security.

All volunteers are provided with the SCHN Volunteer Handbook on commencement of their role. Parents/carers, relevant family members and palliative care staff from SCHN/Bear Cottage are made aware of the scope and limits of the volunteer role prior to a placement. Volunteers will also be provided with a copy of the SCHN Offsite Volunteer or SCHN Volunteer Biography Program Duty Statement which includes health and safety information. It is a requirement that this document is signed by the volunteer prior to commencement. Parents/carers utilising the Bear Cottage HCSP will be asked to sign an Agreement that outlines an agreed length of time for the volunteer placement.

Selection and recruitment of volunteers

Volunteer Managers for offsite volunteers will follow the recruitment procedures outlined in the [SCHN Volunteers Procedure](#).

Volunteer training

Volunteers will be provided with training at the time of introduction to the Palliative Care FSVP, HVCP or SCHN Biography Program. Training must be satisfactorily completed before a volunteer is placed with a family.

The following training will be required:

- SCHN or Bear Cottage Orientation
- HETI online modules
- Paediatric Palliative Care Volunteer Training
- Biography training for The Story Project volunteers
- Ongoing mandatory training (including online when available)

Support of Offsite Palliative Care Volunteers

Offsite volunteers have an emotionally challenging role. The Volunteer Managers and their respective teams from each site seek to assist the volunteer and provide psychosocial support. The support includes:

- Regular supervision/de-briefing with the Volunteer Manager or an appropriate palliative care staff member if needed
- Regular networking with other volunteers from each program
- On-going education
- Access to counselling/supervision through Employee Assistance Program
- Contact information for the Volunteer Manager and all relevant staff
- Feedback and annual review to discuss the volunteer role

Confidentiality

Children and families who are supported by offsite volunteers are entitled to have their personal information kept private.

The [NSW Health Code of Conduct](#) states that staff including volunteers will:

- Maintain security of confidential and/or sensitive information, including that stored on communication devices
- Not disclose, use or take advantage of information obtained in the course of volunteer duties, including when they cease volunteering within NSW Health
- It is a requirement that all volunteers sign the NSW Health Code of Conduct to agree to the terms contained within
- The SCHN Biography Volunteers will sign the Completion Record stating they have deleted any personal biography materials

Management of the Offsite Volunteer Program

Management of offsite volunteers will comply with the [SCHN Volunteers Procedure](#).

Offsite Volunteer placement

Placement of an offsite volunteer is negotiated between the family, the Volunteer Manager and the volunteer. Placement of a volunteer with a family is based on finding the best match of volunteer abilities to the needs of the family.

- A volunteer will be briefed about a family and their support needs by the Volunteer Manager. The briefing will include details of the child's illness and symptoms, the family structure (e.g. parent/carer, siblings) and location of the family's home. The briefing may include details of the family's ethnicity, religious beliefs and lifestyle choices.
- During the briefing, the Volunteer Manager will discuss any specific requirements the family has and the volunteer's envisaged role. This will include details of time commitment. If both the family and volunteer are happy to proceed, the Volunteer Manager will arrange a suitable meeting date and time at the family home. For all initial volunteer placements with a family, the Volunteer Manager or member of the SCHN palliative care/Bear Cottage team will be present to introduce the volunteer and assist with initial rapport building.
- If for any reason, the volunteer or family do not wish to proceed (either following the initial briefing or face to face meeting) they may choose to decline the placement. In the event the volunteer declines the placement, the volunteer is bound by NSW Health Code of Conduct not to discuss details of the briefing with anyone outside the SCHN Palliative Care Service or Bear Cottage.

Boundaries of volunteer duties

The boundaries of Offsite Volunteers are listed below. The most important of these boundaries are:

- A volunteer may not have sole charge of a child receiving palliative care, and
- A volunteer may not administer medicine and/or use medical equipment to care for a child.

#	Volunteers may not	Examples	Volunteers may
1	Be the only adult with an unwell child in the home	Be left in sole charge of unwell child while parent or caregiver leaves the home for any period of time.	Be alone with sick child while parent is in another part of the home
2	Initiate the dispensing or administration of medication	Requests to calculate a dose, dispense from medication bottle/ medication box or administer the drug to the child	Interact with or distract the child while the parent/carer initiates the dispensing and administration of medication to the child
3	Operate any medical equipment that is needed for the child	Suction machine, oxygen cylinders	Alert a parent/carer if there is a concern that the child has a medical need requiring their equipment
4	Assist a parent/carer with any appliances which may cause injury to yourself or the patient without training and instruction from parent/carer	Adjusting wheelchairs or hoists	Assist parent/carer with use of appliances for the child following their instructions
5	Assist with personal care to a child alone	Independently washing the child or nappy changing	Assist with personal care to a child whilst in the presence of parent or other carer
6	Initiate or assist with any work which involves strenuous physical activity	Requests to move household furniture, clear rubbish from a back yard	Help with light practical tasks requested by family such as bringing in washing or vacuuming
7	Initiate CPR to a child	Initiating CPR	Assist parent/carers with administration of basic first aid treatment to minor wounds or injuries. Call an ambulance at parent's request.
8	Offer personal views regarding ethnicity, religion or lifestyle choices to the child, parent or other carers.	Make remarks or negative comments about a particular group or belief	Discuss concerns with Volunteer Coordinator if experiencing conflict between your personal values and those of your placement family
9	Take photos or videos of the child or siblings without permission from the parent/carer	Taking photos at a sibling outing without the parent/carer present to ask permission	Take photos or videos of child or siblings with the family's request or permission

10	Discuss or share patient details or images on social media platforms. Patient privacy should be protected, even if the information about the patient is unidentifiable. Accepting invites from families on Social Media platforms is also not permitted during the volunteer placement.	Posting photos or videos that are taken during a volunteer visit on Facebook, Instagram or other social media platforms	Discuss any concerns around social media with the Volunteer Coordinator.
11	Use any belongings or assets of the family for personal reasons	Borrowing a lawn mower or other household appliances	Use family equipment for related volunteer tasks e.g. using an iPad with a child to assist with homework
12	Give or receive gifts in excess of \$75	Give or receive gifts in excess of \$75	Give or receive gifts to a lesser value than \$75 as per SCHN Policy Conflicts of Interest and Gifts and Benefits
13	Witness legal documentation for the family.	Witnessing or signing any documentation regarding the private affairs of the child or family	Refer family to nearest Justice of the Peace

Reimbursement of out-of-pocket expenses

Reimbursement of travel expenses will be available as per [SCHN Volunteers Procedure](#)

Reimbursement for any other expense is only available when pre-arranged with the Volunteer Manager

Reimbursement for expenses incurred on behalf of the parent, carer or family is not available. If the volunteer is asked to purchase anything on behalf of the parent, carer or family, the volunteer should politely decline unless provided with the money to do so prior to purchase. The Volunteer Manager may exercise discretion in administering this policy provided that evidence of emergency circumstances is presented and this would be in the best interests of the volunteer, SCHN and Bear Cottage.

Persistent requests for the volunteer to purchase anything by the parent, carer or family should be referred to the Volunteer Manager.

Work Health and Safety

Hazard, accident and injury reporting

Volunteers are required to report any hazard, accident, near miss or injury to the Volunteer Manager. This encompasses anything that affects the volunteer, other members of staff, children, parents or carers in the family home where the volunteer is placed. Following the incident the Volunteer Manager and the volunteer together are required to enter the details of the event into the Incident Information Management System (IIMS).

Insurance Coverage

The NSW Treasury Managed Fund (TMF) (the insurer for the Network) provides personal accident protection for voluntary workers whilst actively engaged in volunteering for NSW Ministry of Health under their "Miscellaneous" cover. For further information please refer to SCHN Insurance: Cover and Limitations Procedure. Coverage will be provided for death or Injury in the course of official duties to Eligible State Officials who are not covered under NSW Workers Compensation and Injury Management Legislation, which includes Voluntary Workers while actively engaged in voluntary work with, or at the request of, a TMF Agency. If an injury occurs due to an accident or incident the Volunteer Manager must be contacted. Coverage for volunteers who are injured while actively engaged in volunteering is for out of pocket medical expenses after initially claiming from Medicare and/or private health funds.

Injuries arising out of the use of a motor vehicle would normally be covered under motor vehicle insurance.

What TMF (insurance) will NOT Cover

The TMF will not cover any liability, damages, costs or expenses:

1. arising out of any illegal activity by the covered party, except where:
 - i. there was no knowledge of the activity by the covered party;
 - ii. the activity was not a deliberate act of the covered party; and/or
 - iii. the covered party, acting reasonably, was not aware that the activity was illegal;
2. arising out of any fraudulent, dishonest or malicious conduct, act or omission by the covered party;
3. in respect of any fine or penalty, the insurance of which is not allowed or is prohibited by law
4. for personal injury or death covered by any Compulsory Third Party policy; or
5. arising from conduct involving a lack of good faith by the covered party

Sign in / Sign out

The SCHN has a responsibility for volunteer safety arriving to and returning from their volunteer home visits. Volunteers also have a responsibility to inform the Volunteer Manager or other designated palliative care staff member of their safety to and from visits.

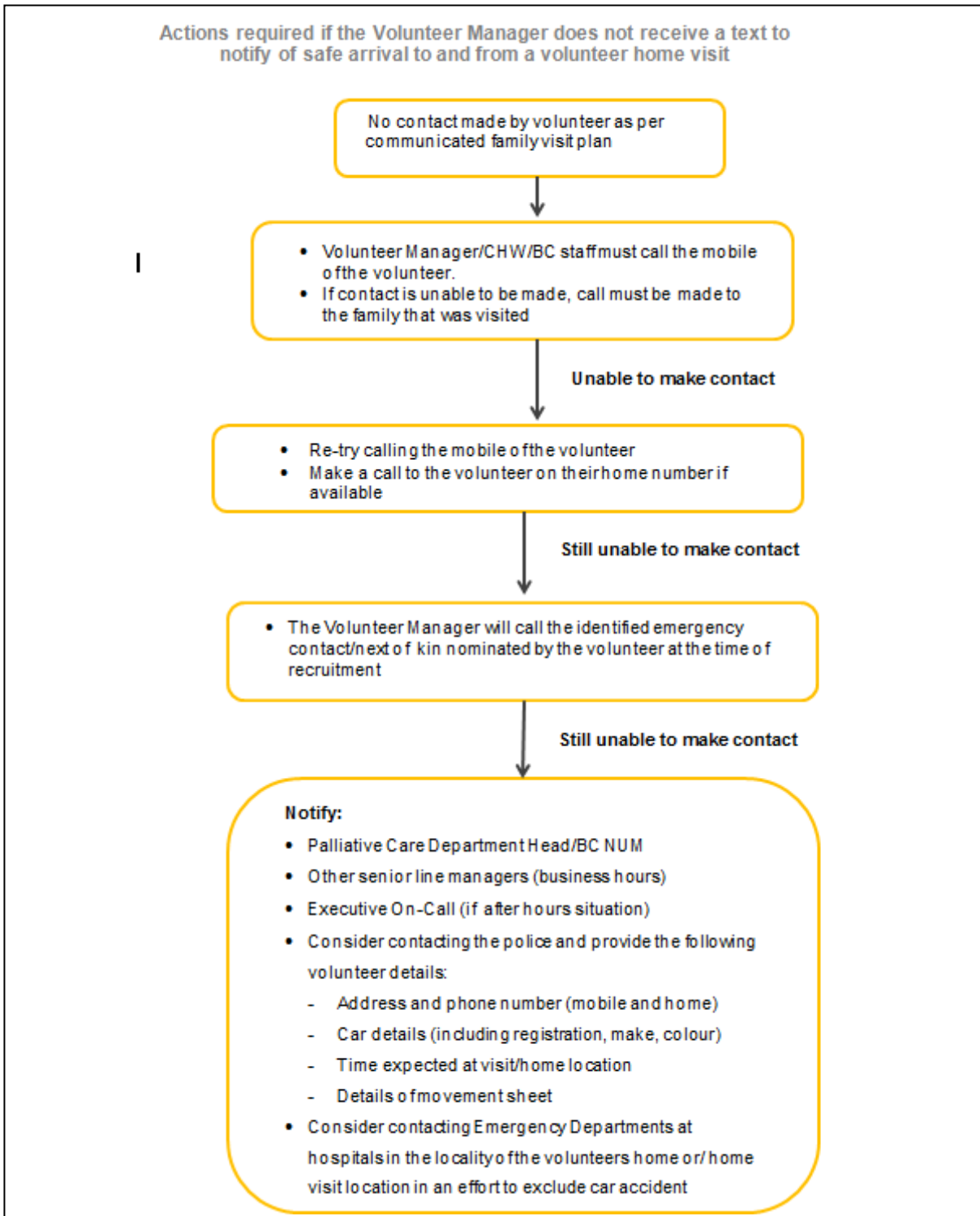
Note: If COVID symptoms are present in either family or volunteer, visits will not go ahead (please refer to "[Infection Control](#)" section below)

The process to sign in/ sign out from visits is:

- The Volunteer Manager will ask the volunteer to confirm their visit day and time via a Planned Visit Sheet that is circulated prior to scheduled visits. If there are unplanned changes/cancellations volunteers will need to inform the Volunteer Manager by phone, email or text prior to the rescheduled visit.
- On the day of the planned visit, volunteers must send a text message (phone number will be provided) to the Volunteer Manager/on-call manager to confirm their safe arrival to the family home and a second text message to confirm the volunteer is leaving, or has arrived safely home or to their next destination following the visit.

- Prior to a visit, volunteers will need to ensure their mobile is adequately charged to send the above text messages and be contactable if required
- Volunteer visit times will be recorded by the Volunteer Manager or other SCHN palliative care/Bear Cottage designated team member.
- If text messages are not received on the day of the planned visit, the following flow chart will outline the process that will occur to ensure the volunteer is safe.

Flow chart: Offsite volunteer safety check process



Transport

Travel to and from home to placement family

- The SCHN does not accept any financial liability for vehicles in the event of an accident or other misfortune whilst travelling to and from the home of the volunteer to the placement home. Therefore purchasing comprehensive motor vehicle insurance is strongly recommended.
- Injuries arising out of the use of a motor vehicle would normally be covered under motor vehicle insurance
- Volunteers must observe NSW road laws and local government by-laws with regard to road rules, seat belts, speed limits and parking.
- SCHN does not accept any liability for financial penalties incurred by volunteers in violation of New South Wales road laws or local government by-laws.

Volunteer transportation of siblings and/or other family members

There may be times when a volunteer is required to transport siblings or family members to and from a venue using the vehicle of the volunteer e.g. school pick up and/or during unplanned circumstances. Offsite volunteers must present evidence of their driver's license, motor vehicle registration and insurance to the Volunteer Manager prior to commencement of volunteer duties.

Prior to transporting siblings and/or other family members in a volunteer's car, the volunteer must ensure:

- Evidence of comprehensive car insurance
- Parents/carers provide verbal consent for the volunteer to transport siblings to locations outside the family home
- The Volunteer Manager is informed that the parents/carers have requested the volunteer to carry out duties with sibling's outsider the family home
- Volunteers must carry their mobile phone whilst caring for siblings and/or other family members
- To ensure a safe journey, volunteers must ensure passengers wear seat belts, children are secured in appropriate car seats and are properly secured before the journey
- No smoking is permitted in the car whilst transporting placement family members

Volunteers are not to drive vehicles belonging to parent/carers to transport siblings or other family members during a volunteer visit. The SCHN is unable to take any responsibility for damage or injury arising in this situation as it would normally be covered under motor vehicle insurance.

If a sibling or family member is injured whilst in the care of a volunteer, liability cover will be provided to family members that are injured.

Theft / Loss of Personal Belongings

The SCHN takes no responsibility for volunteer's personal belongings; all volunteers must be security conscious and ensure their belongings are kept in a safe place.

Volunteer responsibility

All volunteers and staff are required to:

- Participate in the WHS risk management process and follow recommended policies and procedures provided by the SCHN and/or NSW Ministry of Health
- Take reasonable care in carrying out duties to minimise risk to themselves and others
- Report all WHS incidents to the Volunteer Manager who can record the incident as per SCHN procedure
- For further information refer to [SCHN Work Health Safety Risk Management](#).

Home Visit Safety Risk Assessment

Prior to volunteer placement, the Volunteer Manager will provide a completed Home Visit Safety Risk Assessment Form. This Form will outline any identified risks or hazards prior to visiting a family home. The volunteer must read the content and take all necessary precautions recommended on the Form. If at any time a volunteer identifies any additional hazards or risks whilst visiting the home they should be reported immediately to the Volunteer Manager.

Manual handling

Manual handling education (online) for volunteers is provided during the initial Palliative Care Volunteer training.

Personal safety

- All volunteers must report any suspicious activity around the family home (including concerns about risk to the child or family's safety) to the Volunteer Manager or police as appropriate.
- Volunteers must leave the child's family home immediately in the event they feel physically threatened or endangered and contact the Volunteer Manager or police as appropriate.

Volunteering in the family home

When volunteering in the family home volunteers must:

- Practice respectful behaviours when entering the child's home e.g. knocking before entering
- Wear their identification name tag when on duty
- Try to avoid confrontation. If a situation with a child, parent, family member, paid staff or member of the general public becomes heated, volunteers need to attempt to remove themselves from the situation and report to the Volunteer Manager as soon as possible
- Carry a mobile telephone or plan ahead when at the child's home in the event of an emergency e.g. to contact the Volunteer Manager or emergency services

- Ensure a responsible adult nominated by the parent is present at the family home at all times whilst spending time with the unwell child
- SCHN is a smoke-free environment. Volunteers are not permitted to smoke near children, in the home of a family or inside a motor vehicle
- Please note that all palliative care off-site volunteers are Mandatory Reporters under the Child Protection Act. Child Well Being and Child Protection training is provided on-line prior to commencement. Any concerns in relation to child protection should be discussed initially with your volunteer manager or other member of the Palliative Care staff for support and follow up.

Infection control

Volunteers are required to follow infection control risk management guidelines that are provided by the SCHN.

Standard precautions are designed to reduce the risk of transmission of micro-organisms from both recognised and unrecognised sources of infection in health organisations.

Standard precautions involve the use of safe practices and protective barriers including:

- Hand hygiene.
- Appropriate use of gloves when in contact with body fluid, possibly when changing nappies or toileting small children.

COVID Guidelines

As the COVID19 pandemic situation continues to evolve, guidelines currently in this policy may be subject to change. The Volunteer Co-ordinator will communicate changes to procedures via meetings, texts, phone calls or emails. Volunteers should ensure they keep up-to-date with communication in relation to COVID guidelines.

COVID Screening:

The Volunteer Co-ordinator will conduct a screening text to the volunteer and the family prior to every visit. The text will enquire if any members of the household have COVID/Flu symptoms. If symptoms are present in either family members or volunteer, the visit will be cancelled for that day. If COVID is present, the volunteer Co-ordinator will also let volunteers know the procedure for recommencement of visits, based on a Matrix of recommendations from NSW Ministry of Health. e.g. RAT on day 7 after PCR, return day 8.

Physical Distancing:

Physical distancing is to be practiced at all times to reduce the risk of the transmission of COVID-19 or other illnesses. Where practical, volunteers should remain 1.5 metres apart from any family member.

Masks:

Surgical masks should be worn during visits in the home until notified otherwise.

COVID and Flu Vaccinations:

SCHN requires all volunteers to receive two doses of the COVID19 vaccination as well as at least one booster shot. SCHN also requires all volunteers to receive the current influenza vaccine. Flu vaccine is offered for free at SCHN. Evidence of receiving the vaccine should be forwarded to your Volunteer Manager.

Hand hygiene

Hand hygiene is the single most important practice to reduce the transmission of infections including COVID19. Online training is to be completed by volunteers every five years.

Gloves

Gloves should be worn when there is a possibility of exposure to body fluids.

The wearing of gloves does not eliminate the need for hand hygiene. Gloves cannot be guaranteed to provide complete protection against viral or bacterial contamination of the hands.

Discipline and dismissal procedure

All complaints should be directed firstly to the Volunteer Manager who will act as mediator between the volunteer, family or staff if the complaint is of a minor nature.

Formal complaints from children or families about the volunteers will be managed in accordance with the [Patient Complaints Management Policy](#).

Discipline

- Disciplinary action is required in the event that a volunteer has seriously breached standards set out in the NSW Health Code of Conduct.
- Disciplinary action may occur after thorough investigation of claims and circumstances has been made by the Volunteer Manager and the Department Head of Palliative Care. Possible outcomes may include:
 - Counselling
 - Performance improvement plans
 - Formal disciplinary action

Dismissal

Dismissal can occur without disciplinary action as a prerequisite. Sufficient reasons for dismissal include:

- Failure to address poor performance or other circumstances after disciplinary action has occurred
- Criminal activity including theft, intoxication on duty, use of illegal drugs and assault
- Gross misconduct or insubordination (such as verbal abuse of children, families or staff, wilful misuse of equipment endangering safety of children, families or staff)
- Breach of patient privacy.

Dismissal will be accompanied by written notification specifying reasons and the volunteer will be banned from subsequent volunteering and/or employment with the SCHN.

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