Volunteer Handbook

Friendly Visiting
# Table of Contents

Welcome 3  
Vision & Mission Statement 4  
Who we are & What we do 5  
General Policies & Procedures 7  
1.0 Volunteer Rights & Responsibilities 12  
2.0 Volunteer Code of Conduct 13  
3.0 Volunteer Visitor – Rights, Responsibilities & Limits 14  
4.0 Friendly Visitor Volunteer Job Description 15  
5.0 Friendly Visiting Emergency Procedures 17  
6.0 Client Not Home Policy 18  
7.0 Unusual Client Behaviour 20  
8.0 Client Found or Becomes Unconscious 21  
9.0 Motor Vehicle Accident 22  
10.0 Volunteer Providing Private Service(s) to Clients 23  
11.0 Suspected Abuse of a Client 24  
12.0 Standard Precautions 25  
13.0 Confidentiality 28  
14.0 Volunteer Identification 29  
FRIENDLY VISITOR COMMUNICATION TIPS 30  
FRIENDLY VISITOR ACTIVITIES RESOURCE SHEET 33  
INDEX 35  
Friendly Visiting Monthly Service Record 37
WELCOME

Dear Volunteer:

Thank you for choosing to volunteer with Home and Community Support Services of Grey Bruce. You have joined a dedicated team of volunteers and staff – together we are making a difference in our community to provide needed services to people, so that they can live independently in their homes as long as possible.

We hope that this handbook will assist you in your volunteer role. As a new volunteer it is important that you are aware of who we are and what we do. In your volunteer work, you may come across people who require our services but may not be aware that the support they require exists in their community. Your knowledge of all the programs we administer will be very helpful in ensuring that individuals get the information and be matched with the service they need.

Throughout the year, various training/recognition opportunities are provided to assist you in your volunteer role. We encourage you to attend – it is an opportunity to gain new knowledge and to meet new friends.

If at any time you have questions, ideas or concerns, please do not hesitate to contact the staff person that you report to. We are always happy to receive fresh ideas and get feedback on how things are going.

We are thankful for your gift of time and hope you will enjoy your volunteer experience with our Agency.

Sincerely,

Andy Underwood

Executive Director
VISION & MISSION STATEMENT

Vision
Our team will be a progressive leader in the community, uniting people to help people live with dignity, security, health and well-being.

Mission
Home & Community Support Services of Grey Bruce is a team of caring staff and volunteers who provide community based services that support independence and enhance the quality of life for seniors, adults and their families.
WHO WE ARE & WHAT WE DO

Home and Community Support Services of Grey-Bruce is a non-profit, volunteer based organization formed in 1993; designed to provide support services which allow, without discrimination, eligible adults within Owen Sound and Counties of Grey and Bruce to live with dignity and enhanced independence. Adults with physical disabilities and cognitive impairments are encouraged to maintain their independence and well being.

To accomplish this, the Agency has the following coordinated services:

DAY AWAY PROGRAMS

The Day Away Program is a community program that provides socialization and medical monitoring for seniors and adults with a physical disability as well as respite for caregivers. Program hours are generally between 9:30 a.m. and 3:30 p.m. Staff take the time to get to know the interests of our clients and then provide meaningful activities which match these interests. A meal with friends, a game of cards, crafts, music, and simply sitting and chatting are all common activities at Day Away. Our clients are assisted in all activities by professional staff and trained volunteers.

MEALS ON WHEELS

The Hot Meals on Wheels program is available to individuals who are having difficulty preparing nutritious meals whether on a short-term or long-term basis. The service provides clients with a hot meal delivered to their door on a pre-arranged basis. The meals are delivered by volunteers who provide regular social contact and some monitoring of potential crisis situations. All complete meals, provide one third of the client’s daily nutritional requirements. Some special diets are available for clients who are unable to consume normal diets because of health, religious and/ethnic reasons.

Frozen Meals are an alternative to hot meals and are often used on weekends and holidays when hot meals are not available. Frozen meals are also kept on hand in our freezers in each area for people returning home from hospital or special circumstances. These meals are available throughout all of Grey Bruce and are popular in areas where a hot meal source is not available. Meals are ordered monthly by clients and delivered to their homes by volunteers. Volunteers often have a short visit with clients when they deliver the meals and may help clients by putting meals in the freezer if needed.

MOVIN’GB TRANSPORTATION

The MOVIN’GB transportation service is a support service which provides transportation to non-emergency medical appointments, shopping, banking, and various social activities and programs. This service may also be used for long distance medical appointments to out of county medical centres. These services are provided by trained volunteers who use their personal vehicles and paid drivers utilizing wheelchair accessible vans. Service is available Monday to Saturday from 7:00 am until 7:00 pm unless a medical or dialysis appointment can only be accommodated on
Sunday. Arrangements may be made to accommodate medical trips past 7:00 pm if the resources are available.

This service is currently available to residents of Grey and Bruce counties who are 18 years of age or older and have difficulty accessing existing transportation.

**FRIENDLY VISITING**

The Friendly Visiting Program matches volunteer visitors to eligible clients who, due to health and mobility restrictions are losing touch with their community. This service attempts to enhance client’s quality of life and helps to improve their health and independence by providing a friend who will assist in activating social skills and maintaining community contacts. Friendly Visiting services also provide support and relief to caregivers, thereby helping them to maintain their own health.

**DINING CLUB**

Congregate Dining is a community-based meal service that is intended to increase opportunities for nutritional and social support among individuals. Clients gather together on a pre-arranged day, for a nutritious meal, and a social time out. The event may also include a health promotion activity and/or special entertainment.

We currently offer this program in Walkerton and in Markdale.

**HOUSEKEEPING**

Housekeeping is a service which delivers support to individuals who live in their own homes and cannot maintain adequate household cleanliness and/or adequate nutrition. The services provided include routine and seasonal cleaning, laundry, meal organizing and preparation, basic pet care, errands and grocery shopping. Trained Home and Community Support Services staff provides the housekeeping services. Frequency and scope of the service will be based on individual assessment.

**OVERNIGHT RELIEF PROGRAM**

This program is available to all clients living in Grey and Bruce Counties it is designed to provide caregivers a scheduled break, leaving the care of their loved one in the capable hands of qualified and caring staff. The program is held in our Owen Sound and Hanover sites.

This is a weekend program and can accommodate up to three clients from 4:30pm on Friday until 2:30pm on Sunday. Clients may also attend Day Away on the Friday from 9:30am until 4:30pm.
GENERAL POLICIES & PROCEDURES

Orientation and Training

Orientation is provided for all volunteers who are new to Home and Community Support Services of Grey Bruce to ensure that the agency's guidelines and expectations are communicated and to ensure that the volunteer is prepared for his or her position.

Police Checks

Character references are required before being accepted as a volunteer or staff. If you are a volunteer driver, friendly visitor, or day away volunteer you require a police check prior to your volunteer placement.

Confidentiality

All information concerning clients, agency personnel, or other confidential Agency information must be safeguarded. Volunteers must respect confidentiality whether such information is available to them in the normal performance of their duties or occasionally and/or inadvertently received. You should never tell anyone who our clients are e.g. “Mrs. X” receives Meals on Wheels”. No names should be shared when talking in public. Please refer to the attached Confidentiality policy for more specific information. All volunteers must sign a confidentiality agreement which will be kept in their volunteer file.

Supervision/Feedback to Volunteers

Staff will provide ongoing support, supervision and feedback to volunteers as they carry out their duties. Each volunteer will be contacted at least once per year in order to informally review the volunteer’s work within the agency, the suitability of their placement and to determine their ongoing education and support needs.

Incident Reports

All incidents/accidents must be reported to your staff supervisor who will then complete an incident report with you. An example of this may be you find someone on the floor when delivering Meals on Wheels or arriving at someone's house for a visit or transportation.

Smoking

HCSS-GB is a smoke free workplace. Volunteers are not to smoke while performing a volunteer service or when driving someone.

Volunteers have the right to be informed if the client is a smoker and then they would decide if they want to fulfill the request for service.
Accepting Gifts

Volunteers are not to accept any remuneration/gifts or tips from clients. A client may, from time to time wish to give a small gift as a token of appreciation, and this is acceptable. The volunteer will notify their staff supervisor when gifts are received from clients.

Reimbursement

Volunteers using personal vehicles to transport clients of HCSS-GB and for the delivery of meals will be reimbursed for mileage expenses according to the Board approved rate.

Volunteer MOW Drivers and Day Away Drivers:

- If you deliver hot/frozen meals, or transport Day Away clients you must complete the mileage record and submit it for processing by the 5th of the month. Start your mileage calculation from the point of leaving your home and end your calculation when you return.
- If you travel a total distance of 20 kilometers or less, you will be reimbursed $9.00.
- For round trips greater than 20 kilometers, you will be reimbursed using the Board approved mileage rate for each kilometer traveled.

*Please review the attached Mileage Form with your supervisor.

Volunteer Transportation Drivers:

- Transportation drivers will be compensated using a flat rate billing system. Flat Rate Billing was established to pre-determine costs for long distance travel using electronic mapping technology which results in set costs leading to a more efficient billing process. When you are contacted to provide a ride, you may request the reimbursement rate from the Team Clerk. You can keep track of your mileage for your own personal records if you choose.
- Long distance trips are defined as greater than 20 kms in distance round trip.
- Local trips are defined as trips 20 kms or less – round trip.
- The driver will receive a flat rate of $9.00 for a round trip less than 20 kilometers in length, and will be reimbursed for trips greater than 20 kilometers using a flat rate billing system.
- During a long-distance trip outside of Grey Bruce, only additional medical stops are permitted at a cost of eight dollars for each stop to a maximum of three stops per trip.
- At the time of booking, drivers will be made aware of any parking and or meal cost associated with a ride. Drivers will be reimbursed for those expenses.
- Using a flat rate billing system the driver and scheduler will confirm the reimbursement of the trip, including parking and meals when the driver is confirmed. If there are changes to this agreed upon amount after the ride is completed, the driver notifies the scheduler of these changes.
- Drivers will be compensated an additional $5.00 after four hours, $10 from 6 to 12 hours and $15 after 12 hours to a maximum of $15 per trip to help offset the cost of a meal. Drivers will be compensated the actual cost of parking at all healthcare institutions. Actual parking fees at health care institutions have been pre-determined and already added to the flat rate compensation for these rides. The average number of hours it will take to provide a trip has
also been established based upon past trips and compensation for meals has been automatically added to the flat rate compensation. Unforeseen circumstances may arise which require a longer than average time commitment from the driver and parking fees can change without notice. Under these circumstances the driver will be instructed to call their scheduler after the fact and inform them of the necessary adjustments.

- The driver should keep his/her receipts for meals and parking.
- Drivers will be reimbursed by HCSS-GB for damage clients may have done in the vehicle. (i.e.: vomit & urine stains)
- If a driver is doing numerous long distance trips a month and this provides them with a financial hardship, it may be arranged through their coordinator to receive their mileage cheques bi-monthly.

Right of Refusal

It is the right of volunteers to a suitable assignment with consideration for personal preference, temperament, education and skills. Home and Community Support Services of Grey-Bruce recognizes that a volunteer may refuse to serve a client and this is the volunteer’s right.

If a volunteer receives a client assignment which they feel uncomfortable with, the volunteer should immediately contact their supervisor.

Insurance

- Volunteers using their own vehicles to transport clients need $1 million Personal Liability & Property Damage Insurance. Confirmation of Auto Insurance must be received before a volunteer can commence transportation duties. This will be kept in the volunteer's file.
- Liability insurance carried by HCSS is to protect the volunteer and agency in the event that the volunteer driver’s insurance coverage is not adequate
- **Under NO CIRCUMSTANCES should anyone drive on a “Closed Road”**. If you are out of town and it is not safe to drive, please contact our office at 1-800-267-3798 to make alternate arrangements i.e. check into a motel – see below.

Overnight Accommodation & Reimbursement

If a volunteer driver transports a client(s) on a long distance trip and the client and driver's safety is at risk due to poor weather conditions or mechanical breakdowns, accommodations may be provided.

If you encounter this situation **please contact our office immediately at 1-800-267-3798**. We have 24 hour support available to assist you and provide appropriate direction.

- We would ask that you first approach the local hospital information desk to see if local accommodation is available such as Ronald McDonald’s House, etc. If no accommodation is available the driver and client may book into a motel room.
The client should pay the motel at time of registration. If the client is unable to pay, accommodation will be charged to Home and Community Support Services of Grey Bruce and the client will then be billed by the agency.

1. The driver may choose a hotel/motel in the area and bill HCSSGB for the one night’s accommodation and breakfast in the morning.

• If the driver pays for his costs, a receipt must be given to HCSSGB for reimbursement.

**Waiting Times and Stops**

In order to minimize waiting times for volunteer drivers, clients will be limited to a maximum of three stops for each local ride booked with the agency (e.g. bank, shopping, and Doctor’s appointment). All stops must be prearranged when the client books the trip. If the waiting time is more than 90 minutes on a local trip, the driver may, at their discretion, leave and return for the client later. The client will then be charged for a return trip. Please note, if it is a distance medical appointment and the driver must wait in excess of 90 minutes, the client will not be charged a return trip. For all long distance medical trips, outside of Grey Bruce, only medical stops are permitted at a cost of eight dollars each stop to a maximum of three stops per trip. The stops will be discussed when the client is booking the ride.

**Seatbelts**

Home and Community Support Services of Grey-Bruce is dedicated to the safety and security of their clients when they are traveling with a volunteer driver. Clients are expected to adhere to all provincial laws in regards to seat belt usage.

**Volunteer Identification**

All volunteers, in the performance of their duties with clients of HCSS-GB are requested to wear their identification badge. This is particularly important when the client is new to the volunteer, or if the client has difficulty remembering names. Volunteer drivers will also be issued with cards which confirm they are driving for a program of HCSS-GB. These are to be used in case of emergency. If any piece of identification is lost, your supervisor should be notified. All pieces of identification are property of the Agency and must be returned when the volunteer retires from their role(s).

**Personal Harassment**

Volunteers of the HCSS-GB are entitled to work in an environment free from personal or sexual harassment from staff, clients or other volunteers, and to have any complaints in this area dealt with by management.
Legal/Financial/Family Conflict

Volunteers will refrain from being involved in the legal and financial affairs of whom they are serving. Volunteers will maintain a professional relationship with clients.

All volunteers of HCSS-GB will adhere to the Code of Conduct and the Rights and Responsibilities for volunteers. Each volunteer will also adhere to the responsibilities and limitations for volunteers set specifically for each program.

If a client of HCSS-GB requests assistance with banking, bill payment, etc., the volunteer may discuss the situation with the client, but will not perform any tasks related to money transfer or legal documents.

Volunteers will not become involved in family conflicts. The volunteer should listen and be supportive to the client, without adding personal opinions or providing advice. If a client is asking for advice or drawing a volunteer into matters of a highly personal nature or matters which make the volunteer uncomfortable, the volunteer has the right to terminate the conversation and minimize contact with the client until your supervisor can be notified. It is the volunteer responsibility to inform the supervisor as soon as possible regarding the above mentioned situations. Your supervisor will seek an alternate solution to the client’s needs.

Conversely, the volunteer will refrain from drawing the client into their personal/family affairs. Should the supervisor become aware of inappropriate involvement, immediate action will be taken.

Inappropriate Activities For Volunteers

All volunteers providing service within HCSS-GB will have a written service description and will be expected to adhere to this description.

The following are activities judged to be inappropriate for any volunteer of HCSS-GB:

- Those activities for which the volunteer has not received training
- Those activities which have been identified in the individual program plan as the responsibility of paid staff
- Those activities which could put the volunteer or the client at risk
- Those activities which would not be covered under the agency’s liability insurance
- Those activities which should breach any existing agreements, contract, professional policies or standards of practice
- Those activities for which appropriate levels of support/supervision cannot be assured.
- Those activities that would put the client’s privacy at risk

Dress Code

Clean casual clothing, comfortable footwear, and a neat and tidy appearance.

Volunteer Absences or Resignation

Volunteers are expected to notify HCSS-GB if they are unable to attend to their volunteer duties or if they are resigning from their position. Whenever possible, advance notice is preferred so that staff can arrange for a placement.
1.0 **Volunteer Rights & Responsibilities**

1.1 **Rights of Volunteers:**
- To be treated as a co-worker, not just free help
- To a suitable assignment with consideration for personal preference, temperament, education and skills
- To a well planned program of training and supervision
- To a continued education on the job and the follow-up to initial training...training for a greater responsibility
- To sound guidance and direction
- To promotion and a variety of experience through advancement to assignments with more responsibility
- To be heard, to have a part in planning, to feel free to make suggestions, and to have respect shown for an honest opinion
- To recognition in the form of promotion and rewards, and through day-to-day expression of appreciation

1.2 **Responsibilities of Volunteers**
- To respect the privacy of clients by maintaining confidentiality
- To be sincere in the offer of service and believe in the value (worth) of the job to be done
- To be loyal to the organization and the staff with whom they work
- To maintain the dignity and integrity of the organization with the public
- To understand the job he or she undertakes, its responsibilities and the skills required by the volunteer
- To carry out duties promptly and reliably to the best of their ability
- To be willing to learn and participate in orientation and training programs, and to continue to learn on the job
- To accept the guidance and decisions of the coordinators of volunteers
- To maintain a smooth-working relationship with others and stay within the bounds of the volunteer placement description
- To contribute to supervision by self-evaluation and willingness to ask.
- To handle all client records with care ensuring that unauthorized person do not gain access to them.
2.0 **Volunteer Code of Conduct**

Volunteers of Home & Community Support Services of Grey-Bruce must at all times observe the highest standards of professional ethics.

In representing Home & Community Support Services of Grey-Bruce volunteers should be aware of the degree to which they have authority to act on the Agency’s behalf. It is improper conduct for a volunteer to imply the Agency’s support of actions, products, candidates, etc., when in fact he or she is simply expressing a personal opinion.

Where any possible conflict of interest exists or may develop, or is in doubt, volunteers are required to declare to the Agency the full extent of any other employment when accepted into a volunteer position. As well, any changes to that outside commitment must be disclosed to the Agency when they occur.

The “Code of Conduct” in reference to the staff of Home and Community Support Services of Grey Bruce, also pertains to the volunteers of the agency. Please see policy HR-3-90 (*Code of Conduct – Employee*)
3.0 Volunteer Visitor – Rights, Responsibilities & Limits

To ensure the safety of both the client and the friendly visitor, specific rights, responsibilities and limitations have been set by Home & Community Support Service of Grey-Bruce for the volunteers within the Friendly Visiting Program.

Rights:

Visitors for the Friendly Visiting program have the same rights as those set for all volunteer within Home & Community Support Services of Grey-Bruce. (see VM-1-10 Volunteer Rights & Responsibilities)

Responsibilities:

Volunteer visitors have the same responsibilities as those set for all volunteer within Home & Community Support Services of Grey-Bruce. (see VM-1-10 Volunteer Rights & Responsibilities)

Visitors have specific responsibilities as outlined in the Friendly Visitor Service Description (PM-6-40)

Limits:

1. No volunteer shall lift or transfer a non-weight bearing client.
2. No volunteer shall assist or administer any drug or medication to a client.
3. Volunteers shall not accept any remuneration for costs associated with volunteering. A client may from time to time wish to give a small gift as a token of appreciation, and this is acceptable. The Team Leader will be notified by the volunteer when large gifts are received from clients.
4. Volunteers will refrain from becoming involved in the legal and financial affairs of the client. If the client request assistance with banking, bill payments, etc., the volunteer shall inform staff and discuss the situation. Exceptions, with staff knowledge, will be made for clients who have no other means of attending to their financial affairs.
5. Volunteers and clients are discouraged from using alcohol while spending time together.
6. Volunteers shall not purchase alcohol for the client and shall inform staff if asked to do so.
7. Volunteers shall be advised not to discuss their personal problems with the client.
8. Volunteers shall not become involved in family disagreements affecting the client. Rather than taking sides, volunteers should listen and be supportive.
4.0 FRIENDLY VISITOR VOLUNTEER JOB DESCRIPTION

GOAL OF POSITION: To befriend a senior or adult with a disability who is lonely and in need of a supportive friend.

TIME COMMITMENT: Provide weekly visits of 1-3 hours duration, for a minimum commitment of 8 months.

CONTACT WITHIN THE AGENCY: The Team Leader

GOAL OF THE FRIENDLY VISITING PROGRAM:

1. To alleviate isolation, loneliness and depression by providing a friend who will assist in activating social skills and maintaining community contacts.
2. To provide support for caregivers and relieving them periodically, thereby helping the caregiver to maintain their own health.
3. To assist clients with activities that they are no longer able to do by themselves.
4. To provide a periodic monitoring system of the client’s well being.

SKILLS REQUIRED:

- Genuine interest in assisting seniors and adults with physical disabilities
- Good listening skills
- Sincerity
- Patience
- An ability to accept people as they are
- Caring and friendliness
- Reliability
- A sense of humour

DUTIES & RESPONSIBILITIES

Visiting:

- Provide companionship and friendship.
- Participate in activities which are of interest to the client such as: shopping, playing cards/games, crafts, sharing recipes or jokes, reading aloud, writing and mailing letters and conversation.
- If possible, plan occasional outings, a short walk, visits to an old friend, shopping, etc.
- Encourage the client to make the most of his/her abilities.
- Assist the client in using community services, if appropriate.
• For the initial visit always phone, introduce yourself and arrange for a suitable time to visit.
• Plan the date and time of your next visit, bearing in mind how to notify the person if you are unable to keep the date.
• Leave your name and the Home and Community Support Services phone number - in case the client wishes to contact you.
• Send cards for special occasions - birthdays, holidays.
• Report any problems or concerns encountered in carrying out his/her duties to the Team Leader.

Safety:
• Report any problems or concerns encountered in carrying out his/her duties to the Team Leader.
• Inform the Team Leader of any change in health status that may affect volunteer visiting.
• Inform the Team Leader, within five days, of any charge or ticket under the Highway Traffic Act or of any other serious driving or criminal offense.

Record Keeping
• Complete the Friendly Visiting Monthly Service Record (FV-2) and submit to the Team Leader at the end of each month.

Additional Responsibilities:
• Maintain client confidentiality.
• Accept the Rights & Responsibilities of all volunteers of Home and Community Support Services of Grey Bruce as set out in the orientation manual.
• Attend training sessions offered by the agency.

SCREENING:
All volunteers are required to complete a screening process which includes a police check and two personal references. VM-1-10 Volunteer Rights and Responsibilities)
5.0 FRIENDLY VISITING EMERGENCY PROCEDURES

Due to the nature of the client group which the Friendly Visiting program serves, there is a potential for problems or emergencies to arise. Volunteer visitors must be aware and observant for these situations.

PROCEDURE

1. Volunteers are instructed to be observant of the following during their visits to clients:
   a. an unusual smell in the house could indicate a potential gas leak
   b. a cold house could indicate heat has been disconnected or not working
   c. many layers of clothing being worn by the client inside the house
   d. darkness in the house may be a sign of no electricity
   e. confusion or depression exhibited by the client
   f. unusual talkativeness, loneliness
   g. stopped eating, losing weight, stock piling of food in the fridge
   h. changes in general appearance, looking pale, ill, bruised
   i. change from usual pleasant mood to suspicious, angry, agitated, rude behaviour
   j. evidence of pain, difficulty breathing, illness
   k. change in appearance of home environment, i.e. a generally neat and tidy home is suddenly very untidy or dirty

2. The volunteer will contact the staff of Home & Community Support Services of Grey Bruce during the visit, or immediately following the visit (in non-emergency situations) if anything unusual or suspicious is observed in a client’s home.

3. Staff will record these observations. The Team Leader is responsible for ensuring follow-up if required.

4. If the volunteer is involved in an accident while providing a service for HCSSGB should proceed as in policy VM-6-30 (Motor Vehicle Accident).

5. If a volunteer should find a client not at home at the appointed time of pick-up, the volunteer should proceed as in policy VM-6-10 (Client Not Home)

6. If the volunteer should find a client unconscious or the client becomes unconscious during the time the volunteer is with the client, proceed as in policy VM-6-20 (Client Found, or Becomes, Unconscious).

7. All volunteers are expected to follow universal precautions when dealing with clients. (see PM-2-180 Standard Precautions).
6.0 **CLIENT NOT HOME POLICY**

Due to the nature of the client group which Home & Community Support Services of Grey-Bruce serves, there is a potential for problems or emergencies to arise. Volunteers encountering a client not at home when delivering a prearranged service must be aware and react as if there were an emergency situation.

If a client is expected to be at home when the volunteer arrives - for meal delivery, to pick up the client for a prearranged trip or for a friendly visit - and the client is not found, the volunteer will act as follows:

If the client lives in an apartment, the volunteer will contact the superintendent and have him phone the client. If there is not response, the volunteer will call the Home and Community Support Services of Grey-Bruce office or the Day Away Program and simultaneously request that the superintendent accompany the volunteer to the client's apartment and unlock the door.

If the client lives in a house, the volunteer will go to a neighbour's home or if available use a cell phone or pay phone and phone the client. If there is no response, the volunteer will call HCSS and proceed to investigate further at the client's home.

a) If the door of the house is unlocked, or the superintendent has unlocked the door, the volunteer will proceed inside cautiously and call the client’s name loudly.

b) The volunteer will do a cursory search of the client’s home. It is most important to check the bathroom and bedroom. The volunteer is instructed to knock loudly on any door before opening.

c) If there is no sign of the client after the search then the volunteer is requested to call the offices of Home and Community Support Services of Grey-Bruce or Day Away.

d) If the client is found unconscious or in an abnormal state, the volunteer will contact 911. (see VM-6-20 *Client found or becomes unconscious*).

e) If, before entering the clients dwelling, the client can be seen laying on the floor, unconscious, the volunteer will immediately call 911. (see VM-6-20 *Client found or becomes unconscious*)

f) If in an isolated rural area and phone access is difficult, the volunteer upon seeing the medical emergency is within rights to gain access by force into the client’s home in order to access a phone.
Resolution

Upon resolution of the incident or at the first available opportunity, the volunteer is to contact the office or program of HCSS.

6.6 Incident Report

The Team Leader is responsible for the completion of an *Incident Report* (Form ADM-1) as per policy ADM-6-50.
7.0 UNUSUAL CLIENT BEHAVIOUR

All clients will be assessed by the appropriate staff person and any unusual behaviour or medical conditions outlined to volunteers before being assigned. Training will be provided to the volunteer to assist dealing with anticipated unusual incidents.

1. Any behaviour or conditions which would warrant special responses by a volunteer will be assessed by the staff at time of admission and as the client’s condition changes. This will be noted on the assessment form. This may include such behaviours/conditions as:
   - agitated behaviour
   - seizures
   - hallucinations
   - client attempting to exit a moving vehicle

2. Before assigning a volunteer to provide service for this client, the staff member responsible for volunteer placement must feel confident that the behaviour will not put the volunteer or client at risk of harm or injury.

3. The volunteer has the right to refuse assignment to a client.

4. In proceeding with a volunteer match with a client, the Team Leader will review with the volunteer the unusual behaviour or medical condition and what to expect from that client. The staff member will review what actions the volunteer may take in event of an unusual occurrence.

5. The volunteer will be instructed to notify the Team Leader of any unusual occurrences. Dependent upon the nature of the incident, the staff member may be required to complete an Incident Report (see policy ADM-6-50 and Form ADM-1), provide further training for the volunteer, provide support and feedback to the volunteer and/or reassess the match of the client with the volunteer.

6. If the client’s behaviour is such that they cannot be provided service in a safe fashion, staff in charge of the program will proceed as in policy PM-2-120 (Discharge).
8.0 CLIENT FOUND OR BECOMES UNCONSCIOUS

Due to the nature of the client group which Home and Community Support Services of Grey-Bruce serves, there is a potential for problems or emergencies to arise. Volunteers finding a client unconscious, or observing a client become unconscious, will immediately institute emergency measures.

1. The volunteer discovering an unconscious client or witnessing a client become unconscious, will assess the situation to ensure it is safe to render care to the client.
2. The volunteer will not move the client, unless the client is in immediate danger.
3. If trained in CPR, the volunteer will start CPR. If not trained, the volunteer will seek the assistance of someone with CPR training.
4. Regardless of whether CPR is initiated, the volunteer will place a call to 911.
5. The volunteer will stay with the client until the ambulance arrives.
6. The volunteer will provide what details are available to assist the ambulance service.
7. Once the ambulance is providing care to the client, the volunteer will immediately contact Home and Community Support Services of Grey Bruce.
8. Staff at Home and Community Support Services of Grey Bruce will notify the hospital emergency department of any relevant additional information pertinent to the client.
9. Staff at Home and Community Support Services of Grey Bruce will contact the family or emergency numbers listed.
10. The Team Leader will ensure that an Incident Report (Form ADM-1) is completed. (See policy ADM-6-50)
9.0 **MOTOR VEHICLE ACCIDENT**

The volunteer is responsible for the safe operation of their vehicle and the safe transportation of the client to and from their destinations. Circumstances beyond the volunteer’s control such as accidents and emergency situations must be reported immediately.

When the volunteer is involved in an accident while providing a ride for HCSSGB the following steps should be taken:

1. The volunteer will assess injuries to client, self and others involved.

2. The volunteer will render care and assistance in an emergency situation to the client or others if, and only if, the volunteer feels capable of rendering such assistance without danger to the injured person or the volunteer himself.

3. The volunteer will ensure the police and ambulance are contacted if required.

4. Once the immediate emergency situation is dealt with, the volunteer driver will contact the Team Leader.

5. It is the responsibility of Family and Client Care Coordinator to notify a client’s family or emergency contact person in the event of an emergency or unusual medical condition.

6. The Team Leader must complete an *Incident Report* (Form ADM-1) as per Policy ADM-6-50 and will require information from the volunteer.

7. The volunteer will take responsibility to contact his insurance company.
10.0 VOLUNTEER PROVIDING PRIVATE SERVICE(S) TO CLIENTS

HCSS recognizes and fully supports that volunteers and clients may develop relationships outside of the scheduled services, arranged, managed and delivered by HCSS. However, it is important for volunteers, clients, caregivers and HCSS staff to understand that there are limits to what an off duty volunteer can provide for an HCSS client. When an HCSS volunteer provides services privately, the client, caregiver and possibly the volunteer may not realize the risks and liabilities inherent with this type of arrangement.

When an HCSS employee becomes aware of the possibility of a volunteer and client making private arrangements, this information must be forwarded to the HCSS employee who is responsible for the volunteer.

The appropriate HCSS employee will contact the volunteer at the earliest opportunity to confirm whether or not they are providing private service. If the answer is no the contact will be noted and placed in the volunteers file. If the volunteer is providing private service the employee will ascertain why: price, convenience, availability of nights and weekends, etc. Appropriate alternatives may need to be put in place to accommodate the client’s needs if possible.

Due to the possible confusion which could result from an HCSS volunteer providing private services in place of HCSS services, this practice should in most cases be verbally discouraged by the staff responsible for the volunteer in question. (If the service being provided is transportation a verbal warning is not sufficient – see point 4). HCSS is mandated, funded, insured and qualified to provide the services we administer. The client, caregiver and volunteer involved in privately arranged services may not be aware of all of the issues and liabilities of an informal arrangement. The employee will document action taken and file in the volunteer’s file.

If an HCSS volunteer is being paid privately by the client/caregiver to provide private transportation services, the volunteer’s supervisor will inform them this must stop immediately and send them a copy of the letter explaining why this cannot be permitted (Form VM-14). This arrangement presents an unacceptable level of liability to HCSS, the client, volunteer and requires immediate action be taken. A copy of the letter will be placed in the volunteers file.

If the volunteer continues to provide an HCSS client with private transportation after receiving Form VM-14, their volunteerism with HCSS will be terminated according to policy.
11.0 **Suspected Abuse of a Client**

**Elder abuse is any action by a person in a position of trust - a friend, family member, neighbour or paid caregiver - which causes harm to a senior. It may be physical, psychological, financial or neglect in nature.** In cases of suspected or real abuse of an elderly client or a younger adult, the staff of Home and Community Support Services of Grey Bruce will balance the client’s need for protection with the client’s need for autonomy. Under no condition will the staff or volunteers of the agency contribute to an abusive situation.

**Procedure:**

Staff and volunteers working with the clients must be aware of the following warning signs of elder abuse:

i. Cuts, bruises, bites, burns, untreated bed sores or poor hygiene may be signs that physical abuse is occurring. Over-medication of a client may be abuse.

ii. Symptoms such as withdrawal, depression, anxiety and fear of family members, friends or caregivers may be a sign of psychological abuse.

iii. There may be financial abuse or neglect if a client is denied food, clothing or other necessities which they can afford. Other signs of financial abuse may be missing personal belongings, sudden changes in a client’s will or unusual withdrawals from their bank account.

Volunteers will be encouraged to report any suspicions to the staff member to whom they report. When abuse is suspected, the staff member will notify her supervisor of the situation. A meeting may be arranged with the client to discuss the concerns of the staff member or volunteer. The intent of this meeting would be to explore the situation and assess the client’s desire for action, if there is indeed an abusive environment. The client has the right to refuse help. Even if no action or help is accepted by the client, the staff member should maintain regular contact with the client.

If other agencies are involved and consent to share information has been obtained from the client, the staff member may facilitate a joint case conference. In certain situations the staff member may wish to alert the family physician as to the suspected abuse danger.

Assault, sexual assault, theft, fraud, forgery, forcible confinement and refusing to provide necessities are crimes. These situations must be reported to the police regardless of consent by the client.

All assessment, actions and outcomes must be carefully documented in the client's chart in a timely fashion.

In situations of physical violence, volunteer and even staff involvement may be terminated if this violence is putting the worker at risk. Termination of service would be the last option, as isolation will put the senior at greater risk.
12.0 **STANDARD PRECAUTIONS**

All HCSS employees and volunteers will practice “Standard Precautions” when there are reasonable grounds to believe they may come into direct or indirect contact with feces, urine, blood, vomit or more than trace amounts of a clients saliva.

**Purpose**

This policy is established to protect employees and volunteers from exposure to contagious pathogens that they may encounter while assisting client’s as part of their regular daily activities. The underlying assumption for infection control practices is that all persons are to be treated as if they are infected and infectious. The term that was initially used to describe all that is done to prevent transmission of diseases through body fluids was "Universal Precautions". However, this was used to describe transmission of disease specifically through blood. This term has now been largely replaced by the term "Standard Precautions" (since this term applies to transmission through all body fluids).

Healthcare workers and many HCSS volunteers may be exposed to a variety of microbial pathogens with variable life spans ranging from minutes to months. These exposures have the potential to result in infections, some of which may be life threatening. To prevent such infections all HCSS employees and volunteers will practice the following list of procedures and precautions. These guidelines should be followed each time there is potential for exposure because we are never certain of the client's status, either because they themselves do not know or because they have chosen not to inform their healthcare providers of their condition. Following these precautions for HCSS intents and purposes will be referred to as "Standard Precautions".

12.1 **Training & Equipment**

a. HCSS will provide all employees who may be exposed to contagious pathogens while performing their jobs, training and guidance regarding the use of Standard Precautions.

b. HCSS will make available at no cost to all employees and volunteers the necessary safety equipment to practice Standard Precautions.

c. HCSS employees will ensure that volunteers who have the potential to be exposed to contagious pathogens as a result of their volunteer activities, have appropriate training and equipment to safely participate in these activities.

d. HCSS employees who are charged with employee supervisory duties as part of their regular duties will ensure Standard Precautions are being practiced.
12.2  Precautions

a. Wear disposable gloves every time there is a potential exposure to blood, faeces, urine, vomit, saliva (toileting client’s, cleaning toilets, client is bleeding or nauseated, handling soiled clothing, bedding, soiled furniture or wheelchair).

b. Do not re-use disposable gloves, always re-glove before assisting different clients.

c. Dispose of used gloves in a disposable plastic garbage bag.

d. Wash hands thoroughly after removing disposable gloves.

e. If a client is heavily soiled wear a disposable gown (disposable gowns cannot be reused).

f. Wear a disposable mask if a client is coughing or sneezing more than usual and follow usual protocol regarding an ill client.

g. Soiled clothing, bedding, equipment, etc. must be laundered, cleaned in a timely manner and not placed in a hamper or left untreated.

CONTACT

For more information, contact the Executive Director.
UNIVERSAL PRECAUTIONS

To avoid getting infected with HIV, Hepatitis B or C or another communicable disease, use the following precautions when you come into contact with any body fluids or fecal matter. In order to be safe and not to discriminate, assume that everyone is infectious.

COVER CUTS
If you have cuts or open sores on your skin, cover them with a plastic bandage.

WEAR GLOVES
If there is any risk of coming into contact with blood or other body fluids, wear latex gloves. Gloves should only be worn once and disposed of in a plastic garbage bag.

WASH HANDS
Wash your hands with soap and hot water for at least 20 seconds after you have had contact with blood or other body fluids, after going to the bathroom, before preparing or eating food, and after removing latex gloves. Use hand lotion to help keep your hands from becoming chapped or irritated. Intact skin is your first defense against infection!

DISCARD GARBAGE
Use caution when disposing of garbage and other waste that may contain infected materials or used needles. Discard material soiled with blood or other body fluids in a sealed plastic bag.

CLEAN UP
Spills of blood or other body fluids should be cleaned up with a fresh mixture of household bleach (1 part) and water (9 parts). Paper towels should be used and disposed of in a plastic garbage bag. Remember to wear latex gloves during clean-up.

WASH CLOTHES
Soiled items should be stored in sealed plastic bags. Wash soiled clothing separately in hot soapy water and dry in a hot dryer, or have clothes dry-cleaned.
13.0  CONFIDENTIALITY

All information concerning clients, agency personnel, or other confidential Agency information must be safeguarded. Volunteers must respect confidentiality whether such information is available to them in the normal performance of their duties or occasionally and/or inadvertently received. Any information obtained by an individual in the role of an HCSS volunteer is included in this policy.

Volunteers must exercise all reasonable care and caution in protecting printed or written information from casual observation, unauthorized perusal, or other abuse. Volunteers must not divulge confidential information disclosed to them within or outside the Agency unless required to do so in the normal performance of their duties or unless expressly authorized by the Agency.

13.1 Definition of Reasonable Care

a. The first type of client information is written information such as client records or documents or any other client related information that exists in either paper or electronic form. If a volunteer is required to remove this information from its usual storage place, special care must be taken. The information should be kept on the person at all times and when not in use, it should be stored in a locked satchel or other such location that cannot be easily tampered with by a casual observer. When the information is being used, it should be concealed from onlookers.

b. The other type of client information which volunteers will have access to is verbal information. This includes any information about a client that a volunteer learns as an agent of HCSS. All information obtained in this way is to be considered confidential and volunteers should never reveal it unless they are doing so as part of their normal function as a volunteer. Confidentiality extends to interaction with other volunteers or employees of HCSS. If the person does not need to know the information to perform their job, they should not have access to it. Gossip or stories about a client is not useful and is most likely unwanted by the client and as such is not permitted.

c. The final situation that volunteers need to be concerned with is indirectly revealing information. This situation would most likely happen when volunteers accompany clients in public. Volunteers should avoid discussing confidential information in public and they should avoid acting in a manner that clearly identifies their client as a recipient of HCSS support.

d. The policy and procedure “Confidentiality” in reference to the staff of Home and Community Support Services of Grey-Bruce, also pertains to the volunteers of the agency. Please see policy HR-3-80 (Confidential Information).
14.0 VOLUNTEER IDENTIFICATION

All volunteers, in the performance of their duties with clients of Home & Community Support Services of Grey-Bruce are requested to wear their identification badge.

Procedure:

14.1 Volunteers will be issued an identification badge specific to the program they are involved with during the orientation process.

14.2 The identification badge will identify the volunteer’s name and either the agency name or Logo.

14.3 Volunteers will be asked to wear their identification badge when providing service to the clients. This is of particular importance when the client is new to the volunteer, or if the client has difficulty remembering name.

14.4 Volunteer drivers will also be issued with cards which confirm they are driving for a program of Home & Community Support Services of Grey-Bruce. (Form VM-6 Volunteer Driver Cards) These are to be used in case of emergency.

14.5 If any piece of identification is lost, staff of Home & Community Support Services of Grey-Bruce should be notified.

14.6 All pieces of identification are property of the agency and must be returned when the volunteer ceases in their role within the agency.
FRIENDLY VISITOR COMMUNICATION TIPS

Communication is the way we share information or exchange ideas. When one person conveys a message the other expects a response. This is how we interact with each other. As human beings, we need contact with others and the support that comes from that. Communication is two-way, requiring two people. When one of the two is impaired, communication becomes difficult.

When we think of communicating, we usually think of language, and Alzheimer Disease has a profound effect on language. The disease affects speech and the use of words, as well as the understanding of the words heard. As the disease progresses, language as a means of communicating becomes less effective. You need to use different ways of getting the message across and staying in touch.

Communication with a person with Alzheimer Disease requires belief, creativity, understanding, patience and skills.

**Belief** – that every person, regardless of disabilities, maintains a core of self that can be reached.
**Creativity** – in expressing both your feelings and your message.
**Understanding** – of the effect of the disease on communication.
**Patience** – to slow down, listen, watch, wait for a response, repeat a phrase.
**Skills** – to convey messages or feelings effectively

GETTING A MESSAGE ACROSS

**Set the Stage**
Communication is always easier if other things are not happening at the same time. When trying to get your message across, make sure that there are few distractions. For example, if the TV or Radio is distracting the person, turn it off.

**Get His/Her Attention**
Approach the person slowly and from the front. Gently touch a hand or arm to help get attention. Wait until he/she seems ready to listen before talking.

**Make Eye Contact**
Sit facing or standing in front of him/her, if possible. Keeping eye contact will help the person know who is speaking and may assist the person in concentrating on the message.

**Speak Slowly & Clearly**
Use simple words and short sentences to make the message clear. If the person has hearing problems, lowering the pitch of your voice is often better than increasing its volume.

**Give One Message at a Time**
Keep a conversation simple. Too many thoughts or ideas at one time can be confusing. Limit choices: questions which can be answered with yes or no are easier than open ended ones.
Pay Attention
The person’s reaction to what you say can give you some idea of how much is understood. Watch facial expressions and body movements. Respond to moods and emotions even when the words don’t make sense or are inappropriate.

Repeat Important Information
If you are uncertain the message was understood the first time, repeat it using the same words.

Show and Talk
Use actions as well as words. For example, if it is time to go for a walk, point to the door or bring the person’s overcoat or sweater to illustrate what you mean.

Take Time
Allow the individual to respond. Interrupting can discourage further communication.

ALWAYS REMEMBER
- That feelings remain despite the losses caused by Alzheimer Disease. Feeling may be the only way the individual understands what is going on;
- That we all communicate by emotion, expression and touch. Holding a hand, or smiling when talking can convey more than any words;
- To be aware of your body and facial expressions. Harsh glances can be just as negative as harsh words;
- To include the individual. It is painful to be ignored because of your difficulties in communicating.
- The quality of life of individuals with Alzheimer Disease is largely dependent on their interactions and relationships with others. Maintaining a connection can be a complex and challenging process. Some days it may seem that nothing is being understood, while on others much is exchanged and felt. Try to make the most of the good days – let them help you through the tough ones. Common sense helps, for no-one has all the answers…keep trying.

In Addition…
Understanding more about Alzheimer disease and its effects can give insight into how you can improve communication. Exchanging ideas with other caregivers can help provide comfort and let you know you are not alone. Give your local Alzheimer Society office a call. There is information. There is help.

REMEMBER
The following are some simple guidelines which may assist you in communicating more effectively with a person suffering from Alzheimer Disease.

DO:
Listen. The person’s words may not make sense as they are spoken, so you may have to interpret what he/she actually means. Try to get at the thought or feeling of what he/she is attempting to say.

Watch. Look for clues to his/her message in facial expression, tone of voice, behavior. Respond to his/her emotions. Accept his/her emotions.

Keep it simple. Use short sentences, break down instructions into simple steps, ask only one question at a time and avoid fiving too many choices.
**Enhance your message.** Use gestures, objects, pictures and body language to bring your point across.

**Be calm.** Use a pleasant tone of voice, but avoid addressing the person as if he/she was a child. Allow the person time to respond.

**Be helpful.** Keep the person on subject by asking relevant questions, summarize what he/she has said in a conversational way, say aloud what you think he/she is trying to communicate and see if he/she can signal whether you are correct.

**Be caring.** Touch can communicate what words may not.

**DON’T:**

**Rush or Interrupt.** The person may lose his/her train of thought.

**Argue:** it is not productive. It may lead to confusion fusion for him/her and frustration for you.

**Repeat the same message more than once.** After two attempts, paraphrase the sentence, use synonyms.

**Correct wrong words.** But do use the right word in responding to let the person know he/she has been understood.

**What to Do When You Do Not Understand the Client**

- When a client speaks to you, always assume the client is trying to communicate something that is important to him/her.
- Your challenge is to understand and appreciate the intended meaning.
- Do not pretend to understand. Do not ignore the communication. This can result in frustration for you and the resident.
- Gently acknowledge that you do not understand.
- Suggest that they leave the subject for now and come back to it later; but make sure this is okay with the client.
- Be careful that the resident does not feel you want to ignore him/her.
- Try to re-direct the conversation.
FRIENDLY VISITOR ACTIVITIES RESOURCE SHEET

A to Z Activity Ideas

- Acquaint your client with available resources of social agencies
- Aid in shopping and supplying requested information
- Arrange for your client to visit an old friend
- Ask for a favourite recipe – prepare and share it
- Attend an event together
- Baking together
- Bring in a joke book and have a laugh
- Bring your well-mannered pet (with client’s permission)
- Bring flowers from your garden and make a floral arrangement
- Bring in lunch and share it
- Bring in books with colour photos of different countries, people or nature
- Card games
- Care for plants together
- Chair exercises
- Challenge the memory with trivia questions especially designed for seniors
- Checkers, chess, backgammon etc... (board games)
- Children can add joy to a short visit
- Compile an oral history
- Conversing
- Corresponding when you go out of town
- Crossword puzzles
- Dance
- Discuss books, music, newspaper articles, TV programs, etc.
- Dinner out together
- Election reviews
- Exchanging books and magazines
- Exploring the daily newspaper together
- Finger painting
- Do gentle stretching exercises (get instruction first)
- Go for a walk or drive
- Give a manicure
- Go to the mall for coffee
- Go to a video store and choose a favourite ‘Oldie’
- Grow plants as a project
- Have tea
- Help decorate for the seasons and holiday celebrations
- Help develop a scrapbook of memories
- Iron coloured leaves between waxed paper
- Invite to dinner
- Jog memories of happy times
- Keep a journal together
- Knitting projects
- Learn from each other
- Letter writing
- Listen to your client's favourite music – play 'name that tune'
- Listening
- Make a block for a patchwork quilt
- Make the calendar with visits, birthdays, favourite TV shows
- Make greeting cards to send
- Make phone calls
- Note special events with a small celebration
- Obtain newspapers from senior's home town
- Photo albums
- Picnic
- Pamper with a small gift of hand lotion or soap
- Quiet time together
- Read a book or magazine article out loud
- Read 'Dear Abby' and discuss if you agree
- Read poetry together
- Redo their personal address book or phone directory
- Remember birthdays and holidays by sending cards
- Reminisce about the good old days
- Save petals from flowers and make potpourri
- Scrapbooks
- Share embarrassing moments and laugh at them
- Share information about community activities
- Share magazines
- Sing along with CD's, tapes etc.
- Start a collection
- Talk about past experiences
- Talk about family
- Test perfume or aftershave samples
- Take pictures
- Try an arts and crafts project
- Understand current events and past events
- Validate feelings
- Value time together
- Vary activities
- Watch movies together
- Word games
- Writing memoirs
- Xerox favourite jokes, articles
- Yarn – spin some or knit some
- Yard and garden tours
- Zero in on their interests
- Zoo trips

Add your own ideas
### INDEX

#### A
- Abuse · 24
- Accepting Gifts · 8
- accident · 22
- Activities · 34
- Apartment Dwelling · 18

#### C
- Client Not Home · 18
- Code of Conduct · 13
- Confidentiality · 28

#### D
- Dress Code · 11
- Duties · 15

#### E
- Emergency Procedure · 17

#### G
- gloves · 26

#### H
- House Dwelling · 18

#### I
- Identification · 29
- identification badge · 29

#### L
- Legal/Financial/Family Conflict · 11

#### M
- Monthly Record · 30

#### O
- Overnight Accommodation & Reimbursement · 9

#### P
- Personal Harassment · 10
- Police Checks · 7
- Precautions · 25
- Private Service · 23
- protect · 25

#### R
- Record Keeping · 16
- Reimbursement · 8
- report · 7, 22, 24
- Resolution & Incident Report · 19
- Right of Refusal · 9

#### S
- Safety · 16
- Seatbelts · 10
- seizures · 20
- Smoking · 7

#### T
- termination · 23
- Time Commitment · 15

#### U
- unconscious · 17, 18
- Unconscious Client · 21
- Unusual Client Behaviour · 20

#### V
- Vehicle Accident · 22
- vehicle card · 29
- Volunteer Absences or Resignation · 11
- Volunteer Identification · 10
- Volunteer Rights & Responsibilities · 12
- Volunteer Visitor – Rights · 14
- Volunteer Visitor Responsibilities · 14

#### W
- Waiting Times and Stops · 10
FRIENDLY VISITING MONTHLY SERVICE RECORD

Month: ___________ Year: ___________

Volunteer: __________________________ Telephone: ________________

Client: ____________________________ Telephone: ________________

Total # Visits: ________________ Total Hours: ________________

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Please submit to the HCSS office by the 5th day of the following month