

Volunteer Management

Sample Forms, Policies & Trainer Resources



About these resources

The following sample forms, policies and trainer resources are intended for rape crisis program staff members/volunteer managers as a supplement to the *Volunteer Training Manual for Rape Crisis Programs in Ohio*, published by the Ohio Alliance to End Sexual Violence (OAESV). These materials are intended to assist rape crisis programs in developing or enhancing the management of volunteer services within their programs. These materials are not intended to replace existing forms, policies, or resources that currently exist within programs. OAESV acknowledges that not all of the enclosed forms and policies will apply to each individual program. These materials may be utilized in their entirety, changed as needed, or disregarded according to the unique needs of each individual program.

For additional information, resources, or guidance regarding volunteer management within rape crisis programs, please contact OAESV at 216-658-1381, toll-free at 888-886-8388, or info@oaesv.org.

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SECTION 1:
VOLUNTEER TRAINING RESOURCES

A. GENERAL VOLUNTEER TRAINING TIPS

Volunteers are an investment

Volunteer training is a major investment of time, resources, and energy for your program. Prior to utilizing volunteers in your program, it's important to first have the commitment of everyone in your agency to the importance and responsibility of utilizing volunteers. In addition to the training of volunteers, there are multiple interrelated components of successful volunteer management, all of which should be developed prior to training your first volunteers. These include creating/updating and implementing policies and procedures, a volunteer job description, a volunteer application, screening interviews, supervision structure, evaluation, and recognition. Additionally, your program's budget should reflect your needs related to volunteer management, such as staff time and training materials.

A note about recruitment and screening: Having a large roster of volunteers is desirable for many programs, particularly those with small staffs and/or those that respond to a high volume of calls; however, the *quality* of volunteers is more important than the *quantity*. Being thorough and thoughtful with the recruitment and screening of potential volunteers will help to ensure that your program has a roster of volunteers that will meet your needs, be effective in supporting survivors, and be exciting and fulfilling for the volunteers themselves. Additionally, since supporting survivors of sexual violence is a serious endeavor, it is important to set a precedent for professionalism and accountability among volunteers in the recruitment and screening process. For example, it is not unreasonable to expect volunteer-trainees to attend all training classes and to commit to a defined period of service with your program.

Preparing for training

Prior to recruiting volunteers for your program, it's important to address the logistics for your training:

- Determine a training schedule that best meets the needs of your potential pool of volunteers. Daytime, evening, and weekend training hours may appeal differently to college students, working adults, people with families, retirees, etc. If you have (or are striving to achieve) a diverse volunteer roster, consider offering different or fluctuating, or rotating training schedules.
- Decide on training dates and times as early as possible, to allow ample time for advertising, recruiting, and screening volunteers, and for securing any guest speakers. When scheduling dates, be sure to avoid major holidays or popular events in your community. Additionally, it is wise to have a contingency plan in place for emergencies that may arise (inclement weather in the winter, staff illnesses, etc.).
- Find a location for training that is safe and accessible to trainees and conducive to learning. Many communities have government/civic/public facilities and churches that allow nonprofit organizations to utilize their conference rooms or other meeting spaces for free. Consider your logistical needs, such as parking/access to public transportation, after-hours building access, audio-visual accessibility, and any restrictions regarding food/beverages in the facility. If your program or agency has its own suitable space for training, be sure that having a group of trainees in the facility will not interrupt/interfere with services being provided to clients. It's recommended that the training location not be disclosed until an applicant is accepted into the training program.

Tips for successful training implementation

The more professional, informative, and engaging the training, the more likely volunteers will be to actively participate, remain committed to the program, and recommend that others become volunteers. Tips for ensuring a successful training program include:

- Set and enforce ground-rules for the training, such as attending every class, being on time, demonstrating respect for others, turning off cell phones and other electronic devices, etc.
- As much as possible, incorporate a variety of teaching techniques to appeal to diverse learning styles, such as lecture, guest speakers, videos, and group participation.
- If possible, have different staff members present different components of the training. This will enable trainees to get to know your staff, for your staff to get to know the trainees, and for the trainees to enjoy different personalities and presentation styles.
- If possible, have guests speak to the training class about their unique perspectives related to victim services. Such guests might include a forensic nurse, a police officer or detective, a prosecutor, a survivor, a mental health professional, and/or an experienced volunteer. Be sure to meet with each guest speaker ahead of time to ensure that his/her expertise, information, and presentation style are appropriate for the training class.
- Encourage trainees to ask questions, express concerns, and make comments throughout the training. The *Volunteer Training Manual* includes personal questions throughout that encourage self-reflection, but may also be appropriate for group discussion. Ideally, time should be set aside at the beginning and end of each training session for trainees to ask questions or reflect on the material that has been presented. This can be done in a straightforward fashion or creatively, such as having trainees write their questions on notecards, or having a “stump the trainer” session. As with all groups, it’s important to ensure that everyone has a chance to participate and that the discussion is not dominated by one or a few individuals.
- Provide case examples or other practical examples of concepts taught in training classes. Trainees will be more likely to understand and appropriately apply concepts if they are presented in a relevant context. While role-play practice typically makes trainees (and sometimes staff) uncomfortable, it is a vital component to rape crisis training. Incorporate role-play early and often throughout training.
- Assess for and monitor the self-care needs of trainees. Each trainee will respond to training topics differently, but there may be clear indications that a break is needed or that time should be taken for questions and comments. Bring snacks or ask trainees to bring their own food/drinks, particularly if the training classes are lengthy.

Training Resources

In addition to the Volunteer Training Manual provided by OAESV, the following resources may be useful in your volunteer training program:

- Office for Victims of Crime Sexual Assault Advocate/Counselor Training (contains participant and trainer manuals, sample forms, and online video vignettes): <https://www.ovcttac.gov/saact/>
- OAESV’s clearinghouse library (contains a variety of books, curricula and videos, which can be checked out for temporary use): <http://www.oaesv.org/clearinghouse-library/>

B. SUGGESTED GROUP ACTIVITIES/DISCUSSIONS

The following are suggested training activities and discussions, correlated with specific training topics. Not all of these activities may be feasible for all training classes, or for your program specifically.

Training Topic	Activity
History of rape crisis advocacy	Have trainees split into two groups and debate which is the more effective approach to advocacy: 1) Political/oppression-based approach, 2) public health approach. This can be in an actual debate, or writing points on a whiteboard.
Role of the advocate	Have trainees discuss what is limiting about the role of the advocate, and how those limitations are good and/or bad.
Confidentiality	Have participants respond to various confidentiality scenarios (i.e. "Should I tell this to someone? If so, who, and what should I tell?").
Sexual violence statistics	Have trainees discuss the implications of utilizing statistics. How might they impact survivors? How do they impact the public? How do they impact legislators?
Myths & facts	Have trainees identify a myth that has not already been discussed; keep going until there are no ideas left.
Rape culture	Have trainees bring in an example of rape culture (a song, a film clip, a magazine article, etc.). Challenge them to find subtle examples (not just obvious examples).
Impact of sexual violence/trauma	Have each trainee choose a religion/faith to research in terms of how sexual violence is addressed in/by that particular religion/faith; report back to the class.
Active listening skills	Present a common scenario to the class (i.e. stressful day at work, traffic issues), and have trainees offer differing examples of how someone would respond based on 1) if they were a friend versus 2) if they were an advocate.
Hospital & criminal justice system advocacy	Have trainees split into two groups to debate 1) how television crime dramas have helped the response to sexual violence, and 2) how they have hurt the response to sexual violence.
Cultural competency, accessibility	<ul style="list-style-type: none"> ▪ Have each trainee choose a culture different from their own, and research how that culture may be impacted by, and respond to, sexual violence; report back to the class. ▪ If possible, have a staff member or volunteer who speaks a language other than English begin speaking to the class in the other language (to demonstrate barriers in communication faced by survivors who do not speak English).
Special populations & issues	Have each trainee choose a particular survivor population and present reasons why more resources or attention should be directed to that particular population.
Vicarious trauma & self-care	Have trainees discuss an advocacy scenario they envision would bother them physically and/or emotionally, and how they could address that from a self-care perspective.
Conclusion	Have each trainee participate in at least one role-play practice in front of the class; additionally, offer a "stump the trainer" question and answer session, where trainees are invited to ask you anything at all about rape crisis advocacy.

C. SAMPLE PRE-/POST-TEST

The following sample test is designed to be given both at the beginning of training and at the end. By administering an identical test at both points of the training process, you will be able to measure the knowledge gained by individual trainees, as well as the overall effectiveness of your training program. Be sure to collect both tests from trainees for comparison purposes. An answer key is included at the end.

1. Which of the following describe(s) the role of a rape crisis advocate? (choose all that apply):
 - A. An advocate provides nonjudgmental support to survivors of sexual violence.
 - B. An advocate always encourages survivors to press charges so that offenders are held accountable.
 - C. An advocate speaks for the survivor when s/he is too upset to answer questions or make decisions.
 - D. Confidentiality is one of the most important aspects of an advocate's interaction with a survivor.

2. Which of the following statements about sexual violence is/are true? (choose all that apply):
 - A. Most sexual assaults are committed by strangers.
 - B. Nearly half of all women in the U.S. have experienced a form of sexual violence in their lifetime.
 - C. Approximately 3% of rapists in the U.S. are punished for their crimes.
 - D. A weapon is used by offenders in most sexual assaults.

3. Which of the following is/are true regarding the impact of sexual violence? (choose all that apply):
 - A. Most survivors do not experience any long-term effects from the assault/abuse.
 - B. About one-third of survivors develop Post-traumatic Stress Disorder (PTSD).
 - C. Sexual violence impacts a survivor's emotional health, but rarely her/his physical health.
 - D. Sexual violence is the most financially costly crime to its victims, compared with other crimes.

4. Which of the following is/are normal reactions of survivors after being raped? (choose all that apply):
 - A. Crying or sobbing
 - B. Laughing or giggling
 - C. Acting numb or "spacing out"
 - D. Shaking or trembling

5. Which of the following describe(s) appropriate communication with survivors? (choose all that apply):
 - A. Allowing the survivor as much time as s/he needs to collect her/his thoughts.
 - B. Talking about yourself a lot, so the survivor will get to know you and feel comfortable with you.
 - C. Asking the survivor to describe the assault/abuse to you, so you'll know exactly what happened.
 - D. Allowing the survivor to cry, be silent, or be alone, even if that means you can't talk to her/him.

6. Which of the following is/are appropriate to say to a survivor who is suicidal? (check all that apply):
 - A. "You shouldn't kill yourself. It's wrong and it's a sin."
 - B. "Every cloud has a silver lining. This too shall pass."
 - C. "Tell me about how you're feeling. What made you decide to call right now?"
 - D. "How are you planning to kill yourself?"

7. Which of the following is/are true about a “rape kit” examination? (check all that apply):
 - A. It’s only useful for attacks by strangers, when DNA needs to be collected.
 - B. It can only be done at a hospital or sexual assault clinic (not a doctor’s office).
 - C. The State reimburses hospitals for the cost of the exam, so survivors do not pay for the exam.
 - D. Rape kits are always analyzed quickly, so that DNA results can be used for prosecution.

8. Which of the following is/are true about the criminal justice system? (check all that apply):
 - A. Most rape cases that enter the criminal justice system never make it to trial.
 - B. The Prosecutor represents the State of Ohio, not the survivor.
 - C. “Rape shield laws” also apply to defendants, not just victims.
 - D. All police officers and detectives receive thorough training about sexual violence.

9. Which of the following is/are true about alcohol and sexual assault? (check all that apply):
 - A. Alcohol is the most common “date rape drug” used by perpetrators.
 - B. If the perpetrator was intoxicated, he/she cannot be charged with a crime.
 - C. An intoxicated individual who is substantially impaired is legally unable to give consent for sex.
 - D. Alcohol is a factor in many rapes on college campuses, but not in rapes elsewhere.

10. Which of the following describe(s) cultural competency in advocacy? (check all that apply):
 - A. It means learning all there is to know about a survivor’s culture.
 - B. It means accepting that survivors are the experts on their own lives and experiences.
 - C. It means examining, understanding, and working to overcome your own biases.
 - D. It means striving to be politically correct above all else.

11. Which of the following statements is/are true? (check all that apply):
 - A. The vast majority of child survivors are victimized by someone they know.
 - B. Sexual abuse can directly cause a male survivor to identify as gay.
 - C. Human trafficking is not a problem in Ohio.
 - D. Elderly survivors are more likely to experience physical injury than younger survivors.

12. Which of the following describe(s) effective self-care by an advocate? (check all that apply):
 - A. Discussing each case thoroughly with your supervisor.
 - B. Maintaining a balance between advocacy and other activities in your life.
 - C. Always picking up extra shifts/taking extra cases, for the good of the Program.
 - D. Taking a break from advocacy when you need to.

ANSWERS:

- | | | | |
|--------|------------|----------|-----------|
| 1: A,D | 4: A,B,C,D | 7: B,C | 10: B,C |
| 2: B,C | 5: A,D | 8: A,B,C | 11: A,D |
| 3: B,D | 6: C,D | 9: A,C | 12: A,B,D |

D. SAMPLE TRAINING EVALUATION

Please complete the following evaluation regarding the training you've received to become a Volunteer Advocate with our program. Your honest feedback will help us to improve our training process. Thank you!

Please use the following scale when rating the statements below:

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

1. This training met my expectations for a Volunteer Advocate training: _____
2. The presenters were knowledgeable, informative, and interesting: _____
3. The training format was conducive to learning: _____
4. The training schedule was convenient for me: _____
5. The facility was comfortable and conducive to learning: _____
6. I feel as prepared as I can be to serve as a Volunteer Advocate: _____
7. I would recommend this training program to others: _____

Please write your answers to the following questions, using the back of the page if needed:

1. What did you like or feel was most beneficial about this training?

2. What did you not like or feel was not beneficial about this training?

3. What topics or activities would you recommend be added to, or omitted from, this training?

4. How could this training be improved?

SECTION 2:

SAMPLE VOLUNTEER MANAGEMENT FORMS

A. SAMPLE VOLUNTEER JOB DESCRIPTION

Thank you for your interest in becoming a Volunteer Advocate with [Program Name]. This document provides important information about our program and our volunteer opportunities. If you have any questions or would like additional information, please do not hesitate to contact [Name, contact information].

Mission & Services of [Program Name]

The mission of the [Program Name] is to [insert mission statement]. Our program provides advocacy, support, and outreach to [number of individuals] each year in [insert name(s) of area(s) served]. In order to ensure that all survivors in our service area receive timely and effective support, we utilize the time and skills of trained volunteers from our community. Volunteer Advocates are an invaluable part of our program and mission.

Role of the Volunteer Advocate

The Volunteer Advocate provides crisis intervention, advocacy, support, and information to survivors of sexual violence and their loved ones in our community. Volunteer Advocates provide confidential, empathic, nonjudgmental support to survivors in the immediate aftermath of sexual violence, or at any point in the survivor's recovery process.

Volunteer Opportunities

Our program is accepting Volunteer Advocates to provide support to sexual assault survivors in the following capacities: [Below, list the duties that volunteers could provide, such as hospital advocacy, hotline/phone advocacy, criminal justice system advocacy, etc.]. If you wish to support our program, but are not interested in providing direct services to survivors, you may still volunteer for our program in other capacities. Please contact [Name, contact info] for more information.

Requirements to Volunteer

All individuals who serve as Volunteer Advocates must meet all of the following requirements:

- Be at least 18 years of age by the first day of training
- Complete an application and screening interview
- Pass a criminal background check
- Complete all training classes (40 total hours)
- Commit to a minimum of [specify minimum on-call requirement and/or time period of service]
- Abide by all program policies and procedures (to be discussed in training)

Training Program

Prior to serving as a Volunteer Advocate, you will receive thorough training which will equip you with the knowledge and skills necessary to provide support to survivors of sexual violence. The training program requires a significant time commitment, but it is essential in preparing volunteers for their role and responsibilities. All Volunteer Advocates are required to complete the entire training program. [Include the upcoming training schedule below (excluding the location), or indicate how an individual could obtain a copy of the training schedule].

B. SAMPLE VOLUNTEER APPLICATION

Thank you for your interest in volunteering as an advocate with the [Program Name]. Please complete and return this application to [name/contact information]. The information provided will be kept confidential. Unless otherwise noted, the Program does not discriminate on the bases of age, sex, race/ethnicity, economic status or sexual orientation.

PERSONAL INFORMATION

Name: _____ Sex: Male Female
Address: _____ DOB: ____/____/____
City: _____ State: _____ Zip: _____
Home Phone: _____ OK to call? _____ OK to leave message? _____
Cell Phone: _____ OK to call? _____ OK to leave message? _____
Email: _____

Preferred method of contact: Home phone Cell phone Email

Do you work? Yes, full-time Yes, part-time No

Do you attend school? Yes, full-time Yes, part-time No

Are you or a loved one of yours a survivor of sexual violence (optional)? Yes No

Have you ever been convicted of a crime (not counting minor traffic violations)? *Note: all volunteers must submit to a criminal background check prior to volunteering with the program.* Yes No

If yes, please describe: _____

What difficulties or challenges (if any) do you think you might have being a volunteer advocate?

What accommodations (if any) do you need in order to fully participate in training? _____

INTEREST & AVAILABILITY

What interests you about becoming a Volunteer Advocate? _____

Which of the following activities are you interested in? (Check all that apply)

- Supporting survivors in-person
- Supporting survivors via phone/hotline

Do you have access to transportation? Yes No

In general, what is your availability for volunteering?

- Weekdays
- Weekends
- Evenings/overnight

How did you learn about our volunteer opportunities?

- Program materials/flyers
- Current program volunteer
- Friend/family/acquaintance
- Other (please describe): _____

Please tell us anything else about yourself that you would like us to know: _____

ACKNOWLEDGEMENT & SIGNATURE

I, the undersigned, attest that the information provided in this application is true and accurate. I understand that all applicants are screened by program staff in the best interests of the Program and the applicants themselves, and that by completing and submitting this application, I am not guaranteed acceptance as a volunteer with the Program.

Signature

Date

OFFICE USE ONLY

Date received: _____ Received by: _____ Date of interview: _____

Notes:

C. SCREENING INTERVIEW GUIDELINES

Why interview?

A completed paper application from a potential volunteer will help you to identify whether or not the applicant has met the basic criteria for volunteering, based on your program's policies and needs. If the applicant has met the criteria and seems appropriate for your program, a screening interview is recommended for the following reasons:

- Ensures that the volunteer opportunity is a good fit for the applicant, and that the applicant is a good fit for the program and the duties they would be fulfilling
- Fosters a greater sense of professionalism and responsibility
- Allows you to expand on the program's mission and work
- Allows the applicant to expand on anything in his/her application

What to ask about?

The main purpose of the interview is to get to know the applicant better and determine if the volunteer opportunity is a good fit. Allow the answers on the paper application to guide any questions or concerns you have about the applicant. For example, if the applicant has a criminal history, you'll want detailed information about that. If the applicant indicated that s/he is a survivor, be sure to spend some time talking about that. Also allow the applicant to tell you more about her/himself and to ask questions about the program and volunteer opportunities. Finally, be sure that the applicant knows what is required for participation (training classes/schedule, required on-call commitment, etc.), and that s/he is able to make the required commitment.

Why ask about prior victimization?

Not all rape crisis programs ask potential volunteers about prior sexual victimization, as it seems to be an unnecessary invasion of privacy; however, asking about prior victimization can be instructive and beneficial for a number of reasons. It's important that all advocates are as emotionally prepared as possible to interact effectively with other survivors. While some amount of triggering is expected while serving as a volunteer, all volunteers should find the advocacy experience to be fulfilling, rather than traumatizing. Ask the applicant to speak generally about the victimization they experienced and about their healing process, paying attention to how comfortably the applicant is able to speak about these things. Prior to volunteering, an applicant should be past the crisis period and finished with any legal proceedings related to the victimization. If you and/or the applicant determine that s/he is not ready to volunteer, be sure to emphasize that s/he can always volunteer in the future, or in a capacity that does not involve direct contact with survivors.

How to accept or decline an applicant?

To further foster a sense of professionalism, and to document the application process with each applicant, it's a good idea to formally notify an applicant via email and/or regular mail that they have been accepted or declined as an advocate-trainee in your program. It's a good idea to submit this notification in letter format, preferably on program/agency letterhead, and to keep a copy in the volunteer's file. (Note: For applicants who are declined, it's useful to keep their application materials for future reference).

D. SAMPLE CRIMINAL BACKGROUND CHECK POLICY

The [Program Name] requires all Volunteer Advocates to submit to a criminal background check prior to beginning their service with the Program. The Program works with survivors of violent crime and with the law enforcement community. As such, it is necessary that all staff members and volunteers be free of any prior felony or major misdemeanor offenses. The Program reserves the right to refuse acceptance of any volunteer based on any prior criminal conviction.

A criminal background check may be obtained from the following location(s) [list below]:

The cost of the criminal background check will be [choose the appropriate option for your program]:

- Paid for by the Program
- The responsibility of each individual volunteer-trainee [indicate cost of background check and any helpful information about payment options]
- Paid for by each individual volunteer-trainee and reimbursed by the Program [indicate cost of background check and any helpful information about payment options]

The result of the criminal background check will be sent to the Program (not to the advocate-trainee), and it will be kept in the advocate-trainee's volunteer file.

My signature below indicates that I have read this policy and understand it. I confirm that the information I provide to the Program and to the entity performing the criminal background check on me is accurate to the best of my knowledge. I understand that the Program reserves the right to refuse acceptance of me as a volunteer with the Program, or to terminate my involvement with the Program at any time, based on prior or future criminal behavior.

Volunteer Advocate-Trainee signature

Date

Program Staff signature

Date

E. SAMPLE CONFIDENTIALITY POLICY

Confidentiality Policy

All client contacts (telephone, in-person, with primary or co-survivors) while providing services through the [Program Name] are strictly confidential. No identifiable information about a client or client contact shall be revealed, acknowledged, or discussed with anyone who is not a staff member or volunteer with the Program/Agency.

Confidentiality may only be breached in the following circumstances:

- In order to prevent harm to the client or other
- If the client gives verbal or written consent to breach confidentiality on her/his behalf
- If a signed subpoena has been given to the Program by a court of law requiring breach of confidentiality for legal proceedings
- In order to comply with the Program's policy regarding mandatory reporting

If confidentiality must be breached, only the minimally necessary information should be disclosed, and only to the appropriate entity. If there is any question or confusion as to if or when confidentiality should be breached in a particular circumstance, *notify program staff before breaching confidentiality.*

If it is necessary to discuss a client contact with another volunteer or staff member, the discussion must take place in a private area and only for professionally appropriate reasons. If it is necessary to discuss a client contact with a person/persons not a volunteer or staff member of the Program/Agency, verbal or written consent of the client must first be obtained and documented, and the discussion should only occur for professionally appropriate reasons.

All Program staff members and volunteers are expected to abide by the standards of confidentiality as outlined in the federal Violence Against Women Act

(http://www.lsc.gov/sites/lsc.gov/files/LSC/pdfs/10.%20%20Appendix%20IX-2%20%20CH%203%20SA_Confidentiality_Final.pdf) in addition to the Program's policies.

Finally, all personal information shared by fellow advocate-trainees and staff members during training is to be considered confidential, including personal accounts of life experiences and past victimizations by fellow volunteers, and client stories shared by staff members for the purposes of training.

Pledge of Confidentiality

By signing below, I am indicating that I understand the Program Confidentiality Policy, including the necessity and importance of it, and I agree to abide by it as a Volunteer Advocate of the Program. I understand that if I have a question or concern about a matter of confidentiality, I should consult a staff member. I also understand that any serious violation of this policy may result in my termination from the Program.

Volunteer Advocate signature

Date

Program Staff signature

Date

F. SUGGESTED VOLUNTEER POLICIES & PROCEDURES

The following is a suggested outline for Volunteer Policies & Procedures in your program, which is intended to be comprehensive. Based on the specific service structure of your program, as well as the specific duties that volunteers perform as part of your program, each individual policy may or may not apply to your program.

Recommended wording for specific policies are noted by use of quotation marks.

Section 1: Definition of the Volunteer Advocate

Policy 1-A: Identity of the Volunteer Advocate:

- Define the structure of the Program (i.e. nonprofit organization, part of larger agency, etc.)
- Note that the Volunteer Advocate is an extension of the Program and larger agency (if applicable)
- “The Volunteer Advocate does not retain by his/her title any official certification or licensure with any government, law enforcement, prosecutorial, medical, and/or mental health agency or association.”

Policy 1-B: Compensation for Volunteer Advocates:

- “The Volunteer Advocate is an unpaid volunteer of the Program and shall not receive financial compensation for any of the following: on-call shift coverage; actual time spent with clients in-person or on the phone; time spent in training; time spent in supervision in-person or on the phone; time spent traveling to training sessions or to provide support to clients; or gas/mileage reimbursement for program-related travel.”
- List any exceptions to the above policy, if applicable (holiday shift pay, phone allowance if using personal phone for crisis calls, etc.). Be specific about when and how compensation is made.
- “While serving in the capacity of a Volunteer Advocate, the Volunteer Advocate is covered under the general liability insurance of the Program/Agency, which shall cover liabilities associated with direct contact with clients. The Volunteer Advocate is not required to pay any premium for coverage under this liability plan. Coverage under this plan does not extend to services or activities conducted outside the Volunteer Advocate’s role with the Program.”

Section 2: Requirements to be a Volunteer Advocate

Policy 2-A: Requirements to become a Volunteer Advocate

- Age requirement (recommend at least 18 years of age by first training date)
- Submit a completed application
- Complete a screening interview with program staff
- Successfully pass a criminal background check (define which offenses render someone ineligible)
- Complete the entire training course and all requirements therein

Policy 2-B: Requirements to maintain active status as a Volunteer Advocate

- Required minimum on-call commitment (defined according to your program’s structure)
- Required minimum time period a Volunteer Advocate is expected to commit to the Program following the completion of training (i.e. six months, one year)
- Compliance with any continuing education or ongoing meeting requirements of the Program
- “Abide by all program policies and procedures”

Section 3: Training, Orientation, and Supervision

Policy 3-A: Description of training the Volunteer Advocate will receive

- Curriculum being used (OAESV's *Volunteer Training Manual* or other source)
- General topics to be covered
- Length of training in total hours
- Completion certificate issued upon completion of training (and I.D. badge, if appropriate)

Policy 3-B: Orientation of Volunteer Advocates

- "Volunteer Advocates will be provided with copies of all relevant program/agency policies (i.e. emergency procedures, sexual harassment, violence in the workplace, non-discrimination, and grievance procedures)"
- "Volunteer Advocates will be provided with a tour of the program/agency, including where to park, where to find needed supplies, how to access the building after-hours, etc."
- Volunteer Advocates will be provided with addresses, a map, and/or directions to any locations they may be travelling to for work with clients (hospitals, police stations, courts, etc.). Indicate the availability of site visits/tours at these locations, if possible and applicable

Policy 3-C: Supervision of Volunteer Advocates

- Define circumstances in which supervision is *required* (including when, where, with whom, and what will be discussed/included in supervision)
- Define circumstances in which supervision is *recommended* (i.e. if the Volunteer Advocate has a question, concern, or problem, needs additional support, etc.)

Section 4: Services Provided to Survivors

Policy 4-A: Types of Services Provided

- List all services provided by the Program for survivors of sexual violence
- List the services that Volunteer Advocates are permitted to provide (if different from above)
- Define the locations and geographic parameters of where Volunteer Advocates respond in-person to survivors (names of hospitals, police stations, courts, etc.). Clarify if/when Volunteer Advocates should respond to these locations (i.e. for all survivors, only survivors who live in or were assaulted in the program's county/service area, etc.)
- "Any services or locations not listed above that may be needed by or beneficial to the client must first be cleared with Program Staff."

Policy 4-B: Responding to a Crisis Call

- Define the time period in which a Volunteer Advocate is expected to respond to a hotline call (within 30 minutes of the initial call is recommended)
- Define the time period in which a Volunteer Advocate is expected to respond to a hospital call (time may vary, depending on distance advocates will travel; generally, within 1 hour is recommended)
- Define what the Volunteer Advocate should do if s/he is unable to respond within the appropriate timeframe (i.e. due to car trouble, traffic issues, phone service is disabled, etc.)

- Define any circumstances in which a Volunteer Advocate should not respond to a hospital call (i.e. during snow emergencies)
- Define what consequences (if any) there are for a Volunteer Advocate who fails to respond to a call without a valid reason

Section 5: Ethical Guidelines for Working with Survivors

Policy 5-A: General Ethical Considerations

- “Volunteer Advocates must promote the safety and individual needs of each client at all times”
- “Volunteer Advocates must never provide personal opinions about the care or recovery process of any client, nor coerce any client into any course of action”
- “Volunteer Advocates must never denigrate, marginalize, or otherwise deliberately contribute to the distress, traumatization and oppression of any client for any reason”

Policy 5-B: Confidentiality (See Sample Confidentiality Policy)

- Define confidentiality (what it means, the importance of it), including what information is confidential in advocacy work; include individuals to whom Volunteer Advocates are permitted to share confidential information (i.e. supervisor, staff members, other Volunteer Advocates, etc.)
- Define all circumstances when confidentiality must be breached (i.e. to prevent harm); if your program requires Volunteer Advocates to follow mandatory reporting guidelines, define those guidelines
- Define all circumstances in which confidentiality could/should be breached (see Sample Confidentiality Policy for examples)
- Define how confidentiality should be breached when necessary (i.e. to appropriate individuals only, sharing only the minimally necessary information, etc.)

Policy 5-C: Relationships with Clients

- “All interactions between Volunteer Advocates and clients must remain professional at all times”
- “Volunteer Advocates may not meet or speak with a client in a location or manner that has not been approved by Program Staff, or in any capacity outside the scope of appropriate program services”
- “Volunteer Advocates must not at any time engage in a personal or social relationship with clients, even after the client is no longer receiving program services”
- “Volunteer Advocates must not maintain communication with any client via phone (voice or text), mail, email, instant messaging, or social media after the client is no longer receiving program services.”
- “Volunteer Advocates must not correspond with past or current clients via Program social media pages or accounts (i.e. via Program’s Facebook or Twitter page/account)”
- Policy regarding the exchange of monetary or material gifts between Volunteer Advocates and clients (generally, Volunteer Advocates should never give any gift to a client; any gifts given to the Volunteer Advocate by a client must be disclosed to Program Staff immediately)
- “While disclosure of some personal information is inevitable, Volunteer Advocates should refrain from disclosing significant or highly personal information to any client, and should never disclose personal contact information (personal phone, email, home address, etc.) to any client”

- “If the Volunteer Advocate has a prior or current social or personal relationship with a client, the Volunteer Advocate must remove her/himself from the role of Volunteer Advocate and notify Program Staff immediately”

Section 6: Professionalism of Volunteer Advocates

Policy 6-A: Personal Appearance

- Define appropriate and/or inappropriate dress for presence in the Program facility
- Define appropriate and/or inappropriate dress for hospital calls
- Define appropriate and/or inappropriate dress for advocacy in police stations or courts

Policy 6-B: Professional Demeanor

- “Volunteer Victim Advocates should conduct themselves professionally at all times while providing services to clients/for the Program”
- “Interactions with other professionals (i.e. hospital staff, SANE/SAFE, law enforcement) should be respectful and collegial at all times”
- Statement about what the Volunteer Victim Advocate should do if s/he witnesses rude or abusive behavior toward the client by a professional or a loved one of the client (i.e. deal with the situation directly, contact a supervisor, document the incident, etc.)
- “At no time should the Volunteer Victim Advocate engage in any altercation, whether verbal or physical, with another individual while providing services to clients of the Program”
- “If the Volunteer Victim Advocate engages in egregiously unprofessional behavior with a client or other professional, s/he will be terminated from the Program”

Policy 6-C: Expectations of Personal/Social Conduct

- “The Program reserves the right to suspend or terminate the Volunteer Advocate from the Program if s/he has commits any crime at any point during her/his period of service with the Program”
- “The Program reserves the right to suspend or terminate the Volunteer Advocate from the Program if it is determined that s/he was deliberately deceptive or withheld pertinent information in the application and screening process”
- “The Program reserves the right to suspend or terminate a Volunteer Advocate if s/he engages in public behavior that contradicts the mission of the Program (e.g., writing a blog about why survivors are to blame for sexual assault)”
- “If the Volunteer Advocate conducts her/himself in as a representative of the Program in situations not approved by the Program, then the Program reserves the right to evaluate the service status of the Volunteer Advocate based upon her/his behavior in such situations (e.g., if the Volunteer Advocate gives an interview with a newspaper without approval and identifies her/himself as being a Volunteer Advocate with the Program)”

Section 7: Health and Safety of Volunteer Advocates

Policy 7-A: General Health & Safety Guidelines

- “While on-call, Volunteer Advocates will refrain from consuming alcohol or other intoxicating substances, so that they may safely/legally drive (if needed) and effectively respond to client needs”
- “If the Volunteer Advocate is severely ill or suffers from a highly contagious illness, s/he should refrain from providing in-person services to clients until s/he is well”
- “If an in-person client is suffering from a highly-contagious illness, the Volunteer Advocate should consult her/his supervisor regarding the safety of the interaction and to plan for any follow-up arrangements”
- “If a client (including co-survivors) is abusive or threatens violence toward the Volunteer Advocate, the Volunteer Advocate is to end contact with the client and notify a supervisor”
- “No Volunteer Advocate is permitted to meet with any client in the home of the client or in the home of the Volunteer Advocate”
- “No Volunteer Advocate is permitted to meet with a client in any location that has not been approved by Program Staff”

Policy 7-B: Safety While Driving (if applicable)

- “It is the responsibility of each Volunteer Advocate to maintain her/his vehicle in proper working order and to maintain a current operator’s license, registration, and insurance”
- “Volunteer Advocates should abide by all traffic laws, including speed limit; it is the responsibility of the Volunteer Advocate to pay any fines for any traffic violations incurred while driving for the purposes of her/his volunteer service with the Program”
- “If one Volunteer Advocate rides with another Volunteer Advocate to a location to provide services to a client, the driver assumes all responsibility for the safety of the passenger”
- “No Volunteer Advocate may ever transport a client in her/his car for any reason without prior approval by a supervisor; no Volunteer Advocate may ever accept a ride from any client”
- Statement regarding the Program’s policy for travel during snow emergencies or other inclement weather conditions

Policy 7-C: Safety While Providing In-Person Services

- “While providing in-person services at any location, the Volunteer Advocate must abide by all health, safety, security, and emergency protocols of that location”

Policy 7-D: Safety While on the Telephone

- “When calling a client from a personal phone, the Volunteer Advocate is required to utilize caller-I.D. blocking (by dialing *67 prior to dialing the phone number)”
- “The Volunteer Advocate should refrain in all cases from giving any client her/his personal contact information (phone, email, mailing address), as well as the personal contact information of staff members and other Volunteer Advocates”

Policy 7-E: Firearms and Other Weapons

- It is advised that your program adopt a policy regarding the possession of firearms and other weapons while serving in the capacity of Volunteer Advocate. Even if the Volunteer Advocate has a permit that lawfully enables her/him to carry a firearm, it is advised that s/he not have it (or any other weapon) on their person while providing any in-person services for the Program, or while transporting other Volunteer Advocates, if applicable.

Section 8: Documentation of Client Contacts

Policy 8-A: What information to document

- Specify what information is to be collected regarding contact with clients
- Specify any information that should NOT be collected

Policy 8-B: How information is documented

- Specify what form/format is to be used for documentation (see sample form)
- Specify how documentation is to be completed (i.e. printed in blue or black ink)
- Specify what should be done with any notes that are not part of the official documentation

Policy 8-C: When and how documentation is submitted

- Specify when documentation should be turned in, and to whom (i.e. within 24-48 hours of the client contact, to a particular supervisor)
- Specify how documentation should be turned in (i.e. in-person only, via fax, etc.)
- Specific how documentation should be securely stored by the Volunteer Advocate until s/he is able to turn it in

Section 9: On-Call Shift Procedures

Policy 9-A: Defining the On-Call Shift

- Define what constitutes an on-call shift with your program (i.e. total number of hours, from what hour/day to what hour/day)
- Specify how a Volunteer Advocate should respond if s/he receives a call at the end of her/his shift (i.e. should s/he still respond, or contact the Volunteer Advocate coming on the next shift)
- Include policy regarding compensation for on-call shifts, if applicable (holiday shift pay, e.g.)
- Specify any restrictions for on-call coverage, if applicable
- Include a statement about consequences for the Volunteer Advocate if s/he fails to respond while on-call, is found to be intoxicated while on call, etc.

Policy 9-B: Scheduling and Documenting On-Call Shifts

- Define your program's procedure for scheduling on-call shifts (when scheduling occurs, by whom, and how the Volunteer Advocate receives a copy of the on-call schedule)
- Describe what the Volunteer Advocate should do if s/he needs to change her/his assigned on-call shift(s) (i.e. notify a supervisor, swap shifts with another Volunteer Advocate, etc.)

- Include policy regarding a Volunteer Advocate’s need to be taken off the schedule entirely, or added back onto the schedule after an absence
- Define your program’s policy for tracking volunteer hours (i.e. when and how volunteer hours are recorded)

Section 10: Leaves of Absence, Termination and Evaluation

Policy 10-A: Leaves of Absence

- “The Program supports any Volunteer Advocate who feels the need to take a leave of absence to manage personal stress, family issues, work/school obligations, or other reasons”
- “If the Volunteer Advocate has responded to an unusually high number of calls in a short amount of time, Program Staff may encourage or require the Volunteer Advocate to take a short-term leave of absence to promote self-care”
- Specify how the Volunteer Advocate should go about requesting a leave of absence (i.e. who to contact and when)

Policy 10-B: Suspension and Termination of Volunteer Advocates

- “The Program reserves the right to suspend or terminate any Volunteer Advocate from the Program if the Volunteer Advocate has violated any policy of the Program”
- “The Program reserves the right to suspend or terminate any Volunteer Advocate from the Program if s/he has committed any crime”
- Define how suspension/termination will be made (i.e. how the Volunteer Advocate is notified); it is highly recommended that the reason for suspension/termination be documented
- Define the procedure Volunteer Advocates should follow if they wish to terminate their own service with the Program (i.e. in writing, with advance notice, etc.); it is recommended that Program Staff conduct an exit interview with Volunteer Advocates who leave the Program, if possible

Policy 10-C: Evaluation of Volunteer Advocates

- Define your program’s policy for evaluating the performance of Volunteer Advocates (see sample evaluation form); an annual evaluation is recommended, in addition to ongoing informal evaluation of Volunteer Advocates as they respond to individual clients
- Define how evaluation results are utilized (i.e. to recognize outstanding service on behalf of Volunteer Advocates)
- It is recommended that the Program have a means by which Volunteer Advocates can evaluate their satisfaction with the Program (see sample satisfaction survey)

Section 11: Self-Care and Continuing Education

Policy 11-A: Emotional Health of Volunteer Advocates

- “Upon completion of training, each Volunteer Advocate should have an understanding of the emotional impact of rape crisis advocacy”
- “Each Volunteer Advocate is required to seek supervision regarding contact with clients, and each Volunteer Advocate is encouraged to seek additional supervision, support, and guidance as needed regarding the impact of their work with clients”

- “Volunteer Advocates are encouraged to self-monitor their emotional well-being, and to communicate any and all concerns to Program Staff”
- “Program Staff make every reasonable attempt to monitor the emotional well-being of each Volunteer Advocate, and to provide additional support and guidance as needed”
- “The Program reserves the right to suspend or terminate any Volunteer Advocate if it is believed that to do so would be in the best interest of the Volunteer Advocate’s health and well-being”

Policy 11-B: Continuing Education

- Define any required continuing education for Volunteer Advocates, either formal or informal
- Describe any mandatory group meetings or events required by the Program and/or larger agency (i.e. emergency procedures drills, annual agency meeting, etc.)
- Describe any incentives or reimbursement (if applicable) for Volunteer Advocates who wish to attend professional trainings or workshops to further their advocacy knowledge and/or skills

Note: It may be beneficial for staff, and a committee of volunteers to review policies and procedures annually, in accordance with your program’s emerging/changing needs and service structure.

G. SAMPLE POLICY AGREEMENT & LIABILITY FORM

I, the undersigned, acknowledge that I have received, read, and understand the *Program Name Policies & Procedures for Volunteer Advocates* [or insert other title]. I agree to follow the policies and procedures of the Program to the best of my ability. I understand that I may be suspended or terminated from the Program if I violate any of these policies or procedures. I acknowledge that the Program Staff is available to me at all times for clarification of policies and procedures, and that I should consult with a Program staff member if I have any questions or concerns about these policies or procedures, and/or if any of these policies or procedures is unclear to me. I understand that if additional policies are created, and/or existing policies are revised, I will be notified by Program Staff. I understand that I will be given a copy of this signed form for my records, and the original signed form will be kept by the Program in my volunteer file.

Further, by signing below, I absolve the [Program Name] and [larger Agency Name, if applicable] from any liability or responsibility for any injury, physical or otherwise, that I may suffer while serving in the capacity of Volunteer Advocate. I further absolve the Program and Agency from any liability or responsibility for any personal, academic, or professional losses or consequences that may arise from my participation as a Volunteer Advocate.

Volunteer Advocate signature

Date

Printed Name

I, the undersigned [title, of Program Name] acknowledge that I have witnessed the above individual's signature on this document. To the best of my ability, I agree to follow, maintain and uphold all responsibilities and duties of the Program to ensure that the above individual is in compliance with all policies and procedures while serving as a Volunteer Advocate.

Program Staff signature

Date

H. SAMPLE VOLUNTEER HOURS TRACKING SHEET & LEAVE OF ABSENCE REQUEST

Volunteer Name: _____

Month/Year: _____

Total on-call shifts: _____ Total on-call hours: _____

Total client contacts: _____ Total hours with clients: _____

Volunteer signature: _____ Date: _____

Staff signature: _____ Date: _____

VOLUNTEER LEAVE OF ABSENCE REQUEST:

Volunteer Name: _____

Date request made: _____

Desired dates of absence: From (day/month/year) _____ To (day/month/year) _____

Reason for leave of absence: _____

Volunteer signature

Date

Program Staff signature

Date

I. SAMPLE ANNUAL VOLUNTEER EVALUATION

Date of evaluation: _____ Volunteer's Start Date: _____

Volunteer Name: _____

Evaluator Name: _____

Total number of on-call shifts: _____ Total on-call hours: _____

Total number of client contacts: _____ Total hours with clients: _____

The following items are evaluated using the scale where 1 = Poor, 2 = Satisfactory, and 3 = Excellent

- 1. Time commitment and availability: _____
- 2. Quality of services provided to clients: _____
- 3. Adherence to Program/Agency policies and procedures: _____
- 4. Utilization of supervision: _____
- 5. Documentation of client contacts and volunteer hours: _____
- 6. Attendance/participation in program meetings (if applicable): _____

Strengths during the evaluation period: _____

Goals for improvement: _____

Volunteer signature

Date

Program Staff signature

Date

J. SAMPLE VOLUNTEER SATISFACTION SURVEY

Thank you for your service as a Volunteer Advocate with the [Program Name]. Your service to our Program and the survivors in our community is invaluable. We strive to continually improve the quality of the volunteer opportunities we offer. We would greatly appreciate your honest feedback about your experiences as a Volunteer Advocate with our program. Your responses will remain anonymous and will be utilized for internal quality assurance and planning purposes only. Thank you!

Please use the following scale when rating the statements below:

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

1. Overall, I find my experience as a Volunteer Advocate to be fulfilling: _____
2. I am happy with the time commitment for this program: _____
3. I am satisfied with the number of cases/clients I have worked with: _____
4. The policies and procedures are clear and reasonable: _____
5. The supervision I receive is adequate and helpful to me: _____
6. I feel valued and appreciated by program staff: _____
7. I have grown personally, vocationally, and/or academically from this experience: _____
8. I would recommend this volunteer opportunity to others: _____

Please describe what you like the most about being a Volunteer Advocate with this program:

How could the Program improve any aspect of our volunteer opportunities:

Please provide any additional comments about your experience as a Volunteer Advocate:

K. SAMPLE VOLUNTEER FILE CHECKLIST

Importance of volunteer records

It is recommended that rape crisis programs keep thorough records of all individuals who apply for and/or serve as volunteers with the program. Keeping a detailed file for every volunteer will not only ensure that all proper documentation has been completed, but it will also help your program to ensure that each volunteer has the most effective and fulfilling experience as possible with your program. Additionally, keeping detailed volunteer files will enable your program to more easily tout its success in seeking funding, community support, and future volunteers. Finally, in the event that a dispute should arise regarding a particular volunteer's status or performance, a thorough volunteer file will help protect the program.

Volunteer files should be regarded with the same level of confidentiality as client records. Volunteer files should be securely stored in the program's facility and should not be shared with other volunteers or anyone who is not affiliated with the Program.

Recommended components of a Volunteer File:

- Volunteer Application
- Notes taken by Program Staff during screening interview
- Copy of training acceptance/declination letter (original goes to applicant)
- Original signed Confidentiality Policy*
- Original signed Criminal Background Check Policy*
- Original copy of completed Criminal Background Check
- Original signed Policy Agreement & Liability Form*
- Completed training pre-test and post-test
- Original signed Volunteer Hours Tracking Sheets (*required by state and federal funders*)
- Original signed Leave Of Absence Forms (if applicable)*
- Original signed Annual Evaluation(s)*
- Documentation of any disciplinary actions
- Any other information or correspondence relevant to the volunteer's service or self-care

*The volunteer should be given a copy of these forms for her/his records.

Note: If an applicant is not accepted for training, or if a volunteer leaves the Program without completing all the forms/components listed above, it's still recommended that a file be kept for individuals who pursue volunteer opportunities with your program.

SECTION 3:

MISCELLANEOUS ADMINISTRATIVE FORMS

A. SAMPLE CLIENT CONTACT FORM*

CLIENT INFORMATION

Client Name: _____ Client Phone: _____

Okay to leave message? _____ Best time to contact: _____

Location of residence: _____

Location where assault/abuse occurred: _____

Is client the primary survivor? Yes No If no, relationship to survivor: _____

Age of client: Under 18 18-24 25-34 35-44 45-59 60+

Race/ethnicity of client: African-American Asian-Pacific Islander Latino/Latina Native American
 Multi-racial White Unknown/not disclosed

Does the client identify as the following (check all that apply, if known): Immigrant Refugee LGBTQ
 Cognitive/developmental disability Deaf or hard of hearing

ADVOCACY SERVICES INFORMATION

Date of Service: _____ Time: From: _____ To: _____

Type of Service: Phone Face-to-face – location: _____

Generally describe the client's presenting problem/circumstance and the response provided: _____

Based on interaction with the client, how did her/his level of distress change by the end of the interaction?

More distress About the same Less distress Unable to determine/NA

Was mandated reporting required for this client contact? Yes No

If yes: Name of program staff consulted prior to making report: _____

Agency contacted: _____

Name of person who received report: _____

Date/time report was made: _____

Staff/Volunteer Advocate signature

Date

B. SUGGESTED COMMUNITY RESOURCE LISTING

To assist Volunteer Advocates in providing relevant resources to survivors, it is helpful to produce a listing or database of resources in your community for survivors to have on-hand. Included in your listing or database should be full contact information (including a contact person) for each entity, updated at least annually. You may wish to add or exclude resources according to your community's specific needs and resource availability.

Emergency Resources:

- Hospitals with SANE/SAFE
- SARTs or other coordinated community response groups
- Police departments
- HIV/STI/pregnancy testing facilities

Criminal and Civil Legal Resources:

- Municipal court(s)
- Prosecutor's Office/Victim Witness
- Legal Aid and pro bono or private attorneys serving civil legal needs of survivors
- Immigration attorneys and advocates

Social Service Resources:

- Child protective services
- Domestic violence services/shelter
- Food pantry
- Housing assistance
- Employment assistance

Mental Health & Recovery Resources:

- Suicide hotline
- County mental health services
- Counselors/therapists
- School and campus-based mental health services
- Alcohol and other drug addiction services
- Self-defense courses

Resources for Specific Populations:

- Male survivors
- LGBTQI individuals/survivors
- Interpreting services
- Individuals/survivors with varying abilities
- Human trafficking
- Immigrant communities
- Incarcerated survivors
- Homeless
- Culturally-specific organizations
- Religious institutions
- Age/life stage-specific resources (children, teens, older adults)

Suggested material resources for advocates to have on-hand to give to survivors:

- Program brochure with hotline number and other contact information
- Crime victim rights information*
- Information about VINE*
- Crime Victim Compensation Form*
- Survivor survey (form is provided to VOCA-funded programs)
- Community resource listing, or other information for recovery

*These materials can be accessed/requested via the Ohio Attorney General's Office:

<http://www.ohioattorneygeneral.gov/Individuals-and-Families/Victims>

C. ADDITIONAL RESOURCES

General Volunteer Management Resources

- Energize, Inc.: www.energizeinc.com/
- Council for Certification in Volunteer Administration: www.cvacert.org/
- Ohio Commission on Service & Volunteerism: www.serveohio.org/
- Central Ohio Volunteer Administrators Network: <http://vancolumbus.org/>
- Cincinnati Association of Volunteer Administrators: <http://www.cincycava.org/>
- Forum for Volunteer Administrators (Cleveland): www.fvaohio.org/

Online Recruitment Resources

- Volunteer Match: <http://www.volunteermatch.org/>
- Idealist: <http://www.idealists.org/>
- Network for Good: <http://www1.networkforgood.org/>
- Craigslist: www.craigslist.org
- United Way: www.liveunited.org
- NSVRC Calendar: <http://www.nsvrc.org/calendar>
- OVC Calendar: <http://ovc.ncjrs.gov/ovccalendar/>
- OAESV Calendar: <http://www.oaesv.org/events/month/>

Additional Training & Certification Resources

- Training opportunities and resources from OAESV: <http://www.oaesv.org/>
- Office for Victims of Crime Sexual Assault Advocate/Counselor Training Curriculum: <https://www.ovcttac.gov/saact/>
- End Violence Against Women International, Online Training Institute: <http://olti.evawintl.org/Courses.aspx>
- National Organization for Victim Assistance (NOVA) National Advocate Credentialing Program[®]: <http://www.trynova.org/help-crime-victim/nacp/>
- Ohio Attorney General ADVANCE Training BASICS Course (for victim advocacy in general): <http://www.ohioattorneygeneral.gov/Individuals-and-Families/Victims/Trainings-for-Victim-Service-Providers/BASICS-Academy-for-Victim-Service-Providers>
- National Sexual Violence Resource Center e-Learning: <http://www.nsvrc.org/elearning>

****Note about Client Contact Form (page 31):***

Not all rape crisis programs choose to formally document the demographic data of clients served. The demographic indicators listed on this form coincide with data rape crisis programs may be asked to collect in reporting program services for state rape crisis funding beginning in 2014. These indicators were included on the Sample Client Contact Form as a means of making it easier for programs to capture this information.