



Taskforce

Breaking the cycle of addiction & unemployment

Students, Internships, Volunteers

**Handbook
2010**

To our prospective Volunteers

On behalf of our organization TaskForce I would like to thank you very much for offering to contribute to the success of our programs through your consideration as a volunteer. Our volunteers are an important arm of TaskForce and your time and effort are most appreciated and valued.

Your skills and range of experiences will provide a valuable set of resources that will assist TaskForce in improving and expanding opportunities for our clients. It is envisaged that your imagination and / or special interests may be inspirational in the development of new volunteer programs or activities.

Further, your time with TaskForce will be most rewarding and may even lead to a satisfying career change. I look forward to receiving your application and meeting with you.

Wende Moss
Volunteer Coordinator
August 2010

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Volunteering at TaskForce

At Task Force, we believe that the chronic addiction, unemployment and homelessness experienced by our clients are typically the result of deeper, often long-term issues and circumstances. We believe that the key to breaking the cycle in their lives is to start by helping them deal with the circumstances that led to their current situation. Task Force is committed to offering non-judgmental and non-threatening help to our clients, many of whom have nowhere else to turn. We provide personal support, counselling, support groups, outreach, as well as training and job preparation programs.

These services are designed to increase the client's self-belief and ultimately to help them help themselves. When the underlying issues are addressed and then access is provided to the right resources, the cycle of unemployment and addiction is more likely to be broken, effectively and for the long term. We believe that volunteers can make a difference with their ability, their insight and their courage to face and make impossible things possible. We believe that together, we can break the cycle of addiction and unemployment.

Who can become a volunteer?

We invite expressions of interested from people who share our passion to make a difference. Participants should be at least 18 years of age, be prepared to volunteer regularly for a minimum of six months, with a regular shift commitment of 4 hours per week and be 2 years free from drug use or associated addictive episodes (including alcohol). Those participants who will be involved with direct client work will be required to undertake further training in the 4 core competencies of the Certificate IV in Alcohol and Other Drugs.

Key selection criteria

- A passion and desire to help break the cycle of addition and unemployment
- Some relevant experience – either through education and training or through employment or work experience
- Good communication and team work skills
- Willingness to undertake induction training and complete core competency training within the agency (funded by TaskForce)
- A commitment to a regular shift of a minimum of 4 hours per week over 6 months.

Volunteer Positions

- Intake and assessment – drug and alcohol services
- Peer drug and alcohol counsellors
- Support group facilitators
- Out door adventure therapy – youth / art therapy
- Outreach support – Alcohol and other drugs
- Administration support
- IT support

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Application process

- Complete and return the TaskForce's volunteer's application form (at the end of the Handbook). Attach copies of any relevant qualifications and the details of 2 referees
- Short-listed applicants will be invited to a formal interview.
- Successful applicants will be required to attend an Information Evening and then be invited onto the TaskForce's Induction Training course
- Successful applicants are required to undertake a 6 month volunteering commitment and where appropriate will participate in the relevant accredited training.

TaskForce Volunteer Training

TaskForce trains all the volunteers who work in our programs. It is part of our duty of care to both clients and the volunteers, to prepare our volunteers to work in this challenging area. The courses are skills based, and are designed to help volunteers develop their knowledge and skills to assist our client groups. The courses also provide volunteers with skills that may be useful in every day life. Participants attend sessions which include lecture-style presentations, group discussions, role plays, practical exercises and other formats, including videos or specialist presenters.

Volunteer Induction Program

The initial course comprises 6 X 3.5 hour sessions over 6 weeks and is mandatory for anyone interested in volunteering at TaskForce.

- Session 1 Values & Communications
- Session 2 Drugs in Perspective
- Session 3 Crisis & Intervention
- Session 4 Understanding our client base
- Session 5 Motivational Interviewing
- Session 6 TaskForce Policy & Procedures and Operations

Certificate IV Alcohol and Other Drugs Core Competency Training

Once accepted as a volunteer at TaskForce there is a commitment from both the volunteer and TaskForce to complete the 4 core competencies in the Certificate IV Alcohol and Other Drugs. TaskForce will deliver this training with no cost to the volunteers. This course is competency based with classroom style instruction. (This course is to be undertaken only by those volunteers directly working with clients). The 4 core competencies are:

- Orientation to the Alcohol and other Drugs Sector
- Assess the Needs of Clients who have Alcohol and/or Other Drug Issues
- Work with Clients who have Alcohol and/or Other Drug Issues
- Work with Clients who are Intoxicated

All participants will be provided with a record of the completion of their accredited training.

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Volunteers and Student Placements

Policy overview

TaskForce offers a unique environment for the development of clinical, education and training skills in youth services, employment services and alcohol and drug services for professionals at undergraduate and postgraduate levels. Maintenance of an efficient and effective specialist sector is dependent upon appropriately trained professionals, and both volunteer and student placement are regarded as one avenue by which professionals may be attracted to the field. As such TaskForce has a strong commitment to supporting people to gain skills and experience in the sector.

Student placement criteria

TaskForce will offer student placements with consideration to the following criteria:

- The institution from which the request is made
- The number of students concurrently requesting placement
- The length of the placement
- The profession or the particular course of study the student is engaged in
- Student expectations re placement e.g. clinical experience, project work
- Requirements for supervision and reporting to the academic institution
- Successful interview

Volunteering criteria

TaskForce will offer volunteer roles within the agency with consideration to the following criteria:

- The skills and experiences of the person
- The number of opportunities for volunteers within the agency
- The commitment a volunteer can make
- Volunteer expectations re placement e.g. clinical experience, project work
- Successful interview

Student placement and volunteer worker decision making procedures

1. All requests from individual students or from institutions for student placement will be directed to the service manager in the first instance.
2. A written request for placement, including details of requirements for supervision and reporting will be required before the placement can be considered.
3. All student and volunteer applicants will be asked to complete an application form.
4. The Service Manager (or delegated staff member) will then assess the application according to the above criteria.
5. All potential students and volunteers will be interviewed by the relevant TaskForce staff members as per policy to assess the appropriateness of the placement
6. The Manager (or delegated staff member) will notify the student, volunteer or organisation of the outcome of the request.
7. Successful applicants will be reference checked and will be required to complete both a police records check and working with children check prior to commencing.
8. All successful personnel will be required to undertake the TaskForce induction training program.

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9. The Service Manager will refer those who have been offered placements to an appropriate staff member for supervision.

TaskForce’s Roles and responsibilities

- Responsibility for supervision (and reporting to the parent institution for students) lies with the agreed TaskForce supervisor.
- The confidentiality of student reports rests with the parent institution, the student and the TaskForce supervisor.
- The student placement contract is between the parent institution and TaskForce.
- The volunteer placement contract is between the volunteer and TaskForce
- TaskForce is responsible for offering competent supervision for all volunteers and students whilst the parent institution retains accountability for student behaviour e.g. professional indemnity.
- Problems arising during a student placement should be referred by the supervisor to the parent institution, or addressed internally if a TaskForce organisational issue.
- Problems arising during a volunteer placement should be addressed internally.

Student and volunteer responsibilities. Each student and volunteer will:

- Complete a police records check and working with children check prior to placement commencement.
- Be required to sign the TaskForce Confidentiality Agreement and the TaskForce Code of Ethics at the time of commencement of placement.
- Be encouraged to participate in periodic review of their work and experience.
- Be encouraged to complete an Exit review for internal use by TaskForce.

Orientation

TaskForce believes that good on the job orientation is necessary for smooth development of effective and safe employee work practices. It is our policy that all students and volunteers will receive an orientation to the workplace and work culture on their first day of employment.

Training

All volunteers will be required to undertake the TaskForce induction training program. All volunteers in clinical programs are expected to undertake core competency training in alcohol and other drugs.

Hours of Work

TaskForce will negotiate these individually with each student or volunteer. A minimum of one 4 hour shift per week for a minimum of 6 months is the volunteer policy.

Breaks

All students and volunteers are entitled to one half hour lunch break, free from work, after 5 hours work. A 10-minute break can be taken between the time of commencing work and the lunch break.

When leaving the office

Students and volunteers must be accountable for their working hours. Therefore it is mandatory to record in their electronic calendar, the staff diary, whiteboard (or other recording mechanisms) when they leave the office and when they are expected back.

Public Holidays

Students and volunteers are entitled to public holidays in accordance with the provisions of the *Public Holidays Act 1993 (VIC.)*.

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Sick Leave

Students and volunteers are required to inform their supervisor as soon as practicable, or in any event within 24 hours of normal starting time, of inability to attend work, the nature of your illness and when you expect to return to work.

Access to records / Privacy principles

Where a student or volunteer requires access to a service user's file to complete a learning objective this must be done with documented permission from the appropriate service user and with supervision by TaskForce staff.

Policy and procedures.

All students and volunteers are expected to receive, read and become familiar with the all TaskForce policies and procedures.

The Volunteers' Standard

The TaskForce **Investing in Volunteers' Standard** comprises ten Indicators. The ten Indicators have been developed to cover all the aspects of volunteer management.

Indicator 1. There is an expressed commitment to the involvement of volunteers, and recognition throughout TaskForce that volunteering is a two-way process, which benefits volunteers and TaskForce.

Indicator 2. TaskForce commits appropriate resources to working with volunteers, such as money, management, staff time and materials.

Indicator 3. TaskForce is open to involving volunteers who reflect the diversity of the local community, in accordance with TaskForces stated aims, and operates procedures.

Indicator 4. TaskForce develops appropriate roles for volunteers in line with its aims and objectives, and which are of value to the volunteers and create an environment where they can develop.

Indicator 5. TaskForce is committed to ensuring that, as far as possible, volunteers are protected from physical, financial and emotional harm arising from volunteering.

Indicator 6. TaskForce is committed to using fair, efficient and consistent recruitment procedures for all potential volunteers.

Indicator 7. TaskForce takes a considered approach to taking up references and official checks which is consistent and equitable for all volunteers, bearing in mind the nature of the work.

Indicator 8. Clear procedures are put into action for introducing new volunteers to TaskForce, its work, policies, practices and relevant personnel.

Indicator 9. Everybody in TaskForce is aware of the need to give volunteers recognition.

Indicator 10. TaskForce takes account of the varying support needs of volunteers.

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TaskForce’s Induction Training Program

Session 1

Values & Communications

Examines participants’ own values, identifies how values impact on behaviour and judgment, and discusses the importance of non-judgmental support. Specialist communication skills are discussed and practiced, e.g. active listening, ‘talking down’ aggressive situations, communicating in challenging situations. An opportunity to gain an understanding of TaskForce values and code of ethics.

Session 2

Drugs in Perspective

Discusses what constitutes a drug, and what effect drugs have on the body and general health & well-being of individuals. It also examines legal aspects of working in the Alcohol and Other Drug (AOD) field, how interventions may work and what assistance is available for those seeking treatment both at TaskForce and through a range of other services.

Dual Diagnosis gives an understanding of the difficult area of crossover between Mental Health issues and Alcohol and Other Drug use, relevant for at least 50% of our clients. Strategies for working with these challenging clients are practiced.

Session 3

Crisis & Intervention

Discusses what a crisis may be, the principles and practice of crisis intervention, and examines particular types of crises encountered by our services, eg homelessness, addiction, abuse and suicide. Strategies for assessing situations and providing support are discussed and practiced. Confidentiality and mandatory reporting issues are also covered.

Session 4

Understanding our client base

Cultural Awareness allows volunteers insight into other cultures encountered in both clinical and outreach, and examines practices which allow better communication across cultural challenges as well as specialist services to assist across language barriers. Youth Culture is designed to look at issues specific to young people in general and at risk, and encourages practices which increase effective communication and connection with young clients.

Session 5

Motivational Interviewing

This session looks at the techniques of motivational interviewing and how to apply them effectively to assist clients to make change in their lives. It also covers intake procedures, episodes of care and treatment plans including a focus on group work.

Session 6

TaskForce Policy & Procedures and operations

This session examines the details of policy and procedures governing this support work, addressing issues of workplace health and safety, reporting procedures, safety measures and behavioral expectations. TaskForce Operations covers the mechanics of providing support to clients: telephone support skills, rapport building, making assessments, case management skills, referrals and follow up. These are very practical sessions.

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Certificate IV Drug and Alcohol 4 Core Competencies Training.

Once accepted into the TaskForce volunteer program in the drug and alcohol services area all volunteers are required to complete the 4 core competencies outlined by DHS as the minimum standard in the AOD sector. There is no cost to participants. Delivery of this program will be:

- Classroom based – formal training sessions
- Competency based – evidence of your ability

Each participant will be required to develop and complete a learning journal.

Core Competency 1

CHCAOD2C Orientation to the Alcohol and other Drugs Sector

This unit applies to all workers who may be working with clients who have alcohol and/or other drug (AOD) issues. It provides a basic introduction to the values, services and approaches to work in the AOD sector. Topics covered include:

- Historical Perspectives on Drug and Alcohol Policy
- Drug Identification (Pharmacology)
- Models of Treatment
- Harm Minimisation
- Legislative Frameworks

Core Competency 2

CHCAOD8C Assess the Needs of Clients who have Alcohol and/or Other Drug Issues

This unit relates to assessing clients' needs and identifying options for delivery of community services. The unit includes applying standard procedures to provide comprehensive assessments, develop appropriate case management plans and refer clients to other services.

Topics covered include:

- Assessment
- Case Management
- Motivational Interviewing
- Dual Diagnosis

Core Competency 3

CHCAOD10A Work with Clients who have Alcohol and/or Other Drug Issues

This unit relates to the range of community services that are provided to meet the needs of clients with AOD and other issues. It covers service delivery in a range of settings, client progress reviews and evaluations of all work undertaken with clients. Topics include:

- Relapse Prevention
- Treatment Planning within the Context of Harm Reduction
- Special Considerations for Workers
- Working with People from Culturally and Linguistically Diverse Backgrounds
- Mental Health Issues in Drug and Alcohol
- Working with People with Acquired Brain Injury
- Supervision and Self-Care

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Core Competency 4

CHCAOD6B Work with Clients who are Intoxicated

This unit covers working with alcohol and/or other drug affected clients, assisting clients with long-term needs and applying strategies to reduce harm or injury. Topics include:

- Signs of Intoxication and Conditions that Mimic or Mask Intoxication
- Assessment & Management of Intoxication
- Intoxication and Aggression
- Prevention and Management of Aggression
- Managing Overdose
- Suicide and Self-Harm
- Providing Safe Environments to Sober Up
- Infection Control Guidelines

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TaskForce's Code of Ethics

Policy statement

The following Code of Ethics is to be signed by all staff including students and volunteers. The principles are basic to all work within TASKFORCE, and should be aimed for at all times.

- As an employee of TaskForce, volunteer or student on placement, it is vital that your conduct is at all times of the highest standard. This includes a commitment to satisfy standards of honesty and integrity.
- Employees, volunteers and students have the responsibility to work in the best interests of TaskForce and avoid situations and actions that may be, or create the appearance of being, in conflict with the organisation's overall objectives and principles.
- Problems arising through these situations can usually be avoided by conducting yourself in an ethical and honest manner.
- We recognise that many staff will also be governed by professional bodies' codes of ethics.
- If you are in a situation in which you believe that you may have a conflict of interest, it is appropriate to discuss the matter with your Manager.

The TaskForce Code of Ethics outlines patterns of behaviour and expectations in relation to staff and Service users, including therapeutic relationships. This Code of Ethics does not attempt to address research ethics; however it is applicable to all staff and does not exclude those working on particular projects.

TaskForce Code of ethics

As a staff member of TASKFORCE I will place the welfare of our service users and relevant family members in matters affecting them above all other concerns.

- To this end I will deliver kind and humane treatment to all in my care regardless of age, race, religion or lack of religion, sexual orientation or health status.
- I will not deliberately do harm to a service user, either physically or psychologically. I will not verbally assault, ridicule, attempt to subjugate or endanger a service user, nor will I allow other service users or staff to do so.
- I will urge changes in the lives of service users only on their behalf and in the interest of supporting them to break the cycle of addiction and unemployment and other associated problems. I will not otherwise press them to adopt beliefs and behaviours which reflect my value system rather than their own.
- I will remain aware of my own skills and limitations. Since service users and ex-service users may perceive me to as an authority and hence overvalue my opinions, I will attempt never to counsel them or advise them on matters not within my area of expertise. I will be willing to recognise when it is the best interest of these people to release or refer them to another program or individual.
- I will not engage in any activity that could be construed as exploitation of service users for personal gain, be it sexual, financial or social.
- I will not attempt to use my own authority over a service user in a coercive manner to meet my own ends. I will not promote dependence on me, but help service users to empower themselves.

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- In my personal use of mood altering drugs I will serve as a responsible role model for service users, staff and the community. I will maintain abstinence from illicit drug use whilst employed at TaskForce.
- I will exhibit responsible concern for the well-being of my peers by not ignoring manifestations of illness or unethical conduct in my colleagues.
- I will accept responsibility for my continuing education and professional development as part of my commitment to providing quality care for those who seek my help.
- I will follow the TaskForce confidentiality statement, policy and procedures.

TaskForce disclosure/ Confidentiality statement

Further to each employee’s employment contract, preservation of confidential business information and trade secrets is vital to protect the interests of TaskForce and its clients. Such confidential information includes, but is not limited to the following:

- Any information specifically designated as confidential by us or our clients;
- Client lists;
- Contractual, technical and production information;
- Treatment methods, models or plans;
- Training materials;
- Notes and developments regarding confidential information;
- Staff personal information

All employees must take care not to reveal confidential information to outside parties, even inadvertently. However, information should be shared amongst relevant staff within the agency, including service managers, co-ordinators and peers through clinical supervision, de-brief, case reviews and case conferences.

However, there may be times when information must be shared outside of the agency. This policy states information must be shared or disclosed under the following circumstances:

- If TaskForce staff believe a person is at significant risk of harm (self or otherwise)
- If TaskForce staff believe a person is at risk of causing significant harm to another individual
- Where a child under the age of 17 is considered to be at risk
- Or where a staff member is mandated by law
- Or where a service users signs a consent to release personal information
- Or where TaskForce is required to share information by law

All employees are required to sign a confidentiality agreement as a condition of employment. Employees who disclose confidential information inappropriately will be subject to disciplinary action, up to and including termination of employment. In addition, where any ‘reasonable doubt’ exists, contacts with the police and other relevant organisations may be made to lodge claims for damages incurred, even if the employee does not actually benefit from the disclosed information.

Acceptance of Code of Ethics

I agree with the principles outlined in the foregoing Code of Ethics and pledge myself to observe them.

Signed: _____

Name: (printed): _____

Date: _____

Witness: _____

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Confidentiality Policy

Policy statement

The following confidentiality statement is to be signed by all staff, students and volunteers. The principles are basic to all work within TaskForce and must be followed at all times.

- The primary responsibility in releasing information is to ensure that prior agreement and informed consent has been obtained from the service user.
- A person releasing service user information has a responsibility to obtain written consent, although at times verbal consent may be sufficient. Verbal consent given by a service user should always be documented in the service user's file.
- Where a request to provide information is initiated from an outside source, special care needs to be taken to ensure the legitimacy of the person or agency making the request. Requesting a contact telephone number and calling the person back may be one method of ensuring the credentials of the person and/or agency. However, regardless of the authenticity of the requester, except in exceptional circumstances (see below) no information should be disclosed without the consent of the service user.
- Clearly workers will have to exercise their own judgement in dealing with specific situations. Prior to releasing any personal information outside of the agency the matter should be discussed with the service manager and or CEO. In recognising that many issues regarding confidentiality arise out of regular working hours, lines of accountability are noted further in this document.

Penalties for breaching confidentiality

Section 141 Health Services Act 1988 prohibits a hospital or like institution or its employees from disclosing to a third party, service user identifiable information except in specified circumstances. Prior to breaching confidentiality it is the responsibility of all staff to:

- Inform the Service user as to what information will be released, and to whom.
- Discuss with the Service user why the information is being released.
- Discuss the matter with relevant staff prior to the release of any information.
- A Breach of Confidentiality may be deemed appropriate if there is a perceived risk to self and/or the general public.

Section (141) Health Services Act 1988 - CONFIDENTIALITY

141 (1) In this section -

"Person to whom this section applies" means -

- (a) A relevant health service; or
- (b) The board of a relevant health service; or
- (c) A person who is or has been a member of the board of a relevant health service; or
- (d) A person who is or has been the proprietor of a relevant health service; or
- (e) A person who is or has been engaged or employed in a relevant health service.

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- "Relevant health service" means -
- (a) A public hospital or denominational hospital; or,
 - (b) A private hospital; or
 - (c) A nursing home; or
 - (d) A day procedure centre; or
 - (e) A community health centre.
- (2) A person to whom this section applies must not, except to the extent necessary....
- (a) To carry out functions under this or any other Act; or
 - (b) To exercise powers under this or any other Act in relation to a relevant health service; or
 - (c) To give any information he or she is expressly authorised or permitted to give under this or any other Act

Give to any other person, whether directly or indirectly, any information acquired by reason of being a person to whom this section applies if a person who is or has been a service user in, or has received health services from, a relevant health service could be identified from that information.
Penalty: 50 penalty units.

- (3) Sub-section (2) does not apply -
- (a) To the giving of information with the prior consent of the person to whom it relates or, if that person has died, with the consent of the senior available next of kin of that person; or
 - (b) To the giving of information to a court in the course of criminal proceedings; or
 - (c) To the giving of information concerning the condition of a person who is a service user in, or is receiving health services from, a relevant health service if the information -
 - (i) Is communicated in general terms; or
 - (ii) Is communicated by a member of the medical staff of a relevant health service to the next of kin or a near relative of the service user in accordance with the recognised customs of medical practice; or
 - (d) To the giving of information to the Australian Red Cross Society for the purpose of tracing blood, or blood products derived from blood, infected with any disease or the donor or recipient of any such blood; or
 - (e) To the giving of information required in connection with the further treatment of a service user; or
 - (f) To the giving of information to the Australian Statistician; or
 - (g) To the giving of information acquired by an agency concerning a person's medical condition or treatment for the purposes of medical or social research if -
 - (i) The use to which the information will be put and the research methodology have been approved by an ethics committee established under the by-laws of the agency; and
 - (ii) The giving of information does not conflict with any prescribed requirements; or
 - (h) To the giving of information to a person to whom in the opinion of the Minister it is in the public interest that the information be given.

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- (4) A person who received information by reason of the giving of information under sub-section (3) (g) must not give to any other person, whether directly or indirectly, any information so received unless the giving of the information -
- (a) has been approved by the ethics committee referred to in sub-section (3); and
 - (b) does not conflict with any prescribed requirements.

Release of information to treating agencies

Includes but is not limited to:

- General Hospitals
- Psychiatric Hospitals/Units
- General Practitioners
- Office of Corrections and Others

Ideally the consent of a service user or authorised carer should be obtained prior to the release of information, although there will be occasions when the service user's consent cannot be obtained and a treating agency has a legitimate and urgent need for information, for example, to manage a crisis.

Information necessary for the transfer of methadone does not require specific written consent, as the Service user's request for or consent to a transfer implies consent to the release of the requisite documentation.

Non-deliberate release of information

Non-deliberate release of information may occur through staff showing a lack of discretion in the places where they talk about service users or display service user information. Other service users or visitors may receive information in these instances. Non-deliberate release of information can occur in the office, the houses or at work-related functions. It can be prevented by staff being conscious of the environment they are in and of the people around them. Staff should also consider whether they are talking about a service user for a justifiable reason

Government departments (e.g. social security)

No information either verbal or written is to be released without the consent of the Service user. Where a government department has a statutory authority, which requires release of information by subpoena, this must be forwarded to the relevant Service Manager for authority to release information.

Court subpoenas

The Service Manager, CEO and board should be informed of all subpoenas served on members of staff. Prior to response, a legal opinion shall be sought and the service user informed of the request.

Corrections treatment orders

Offenders who are directed to TaskForce by Community Based Corrections must sign Consent to Release Information before information concerning their progress may be divulged. It is in their interest to do so if they wish their attendance to be regarded as fulfilment of the terms of their order.

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Press and other media

No service user information is to be disclosed to any representative of the media under any circumstances. Any involvement of service users with TaskForce media events must be firstly discussed with the service user and written consent obtained.

Employers

No information is to be released to employers or potential employers without service users' prior written consent.

The police department

The police have no right of access to service user information, including whether or not an individual is registered at TaskForce. If a member of the police force produces a warrant authorising access, staff must comply, but it is important that the CEO and Service Manager are immediately informed of the event.

Access to files by students and volunteers

Student / Volunteer's supervisors are responsible for ensuring that they are made aware of their obligations in regard to confidentiality, and that they carry out their obligations. Generally students and volunteers will only have access to that section of the service users files that are relevant to their current work. When students or volunteers attend for observation or for brief periods only - written consent is required for access to service user files.

Visiting staff

Visits to TaskForce by health professionals should be encouraged. Such visits can be authorised at the discretion of the CEO or Service Manager who will take responsibility for ensuring that confidentiality is respected.

Research projects

Persons responsible for a research project must present a copy of the research proposal to the programmatic steering committee and / or board. The project must be approved by this committee as the committee constituted under standards registered by the National Health and Medical Research Committee Guidelines on Human Experimentation to access ethical considerations.

HIV

Due to the potential for significant discrimination arising from public knowledge of an individual's seropositivity, special provisions are made under Sections 127-130 of the Health (General Amendment) Act 1988. In particular, Section 128 prescribes that:

"A person who, in the course of providing a service, acquires information that a person has been or is required to be tested for HIV or is infected with HIV, must take all reasonable steps to develop and implement systems to protect the privacy of that person."

Relatives and friends

It is the right of the service user to choose to whom they disclose details of their health status and treatment regime, and hence no information should be given to family or friends of service users without explicit consent. However, if a staff member should become aware that the health or safety of

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a family member or friend is being compromised by the actions of the service user, they should consult with their direct report before deciding to breach confidentiality.

Mandatory reporting

With the amendments to the Children and Young Persons Act (1989) in November 1993, teachers, psychologists, doctors, nurses and police officers are now required to notify the Department of Human Services (DHS) in circumstances where they form a "reasonable belief that a child is in need of protection from sexual abuse or physical injury resulting from abuse or neglect".

The requirements are described under Section 64 of the Act, and state that the worker should make the notification "as soon as practicable (a) after forming the belief and (b) after each occasion on which he or she becomes aware of any further reasonable grounds for the belief". Reports are to be made to the Regional Child Protection office closest to the child's home, or there is a state wide 24-hour child protection crisis line, which can be contacted on 131278.

The purpose of the law is not to punish professionals, but to protect children. As many staff have legitimate concerns about the impact that making a notification may have upon their therapeutic relationship, it is of clear benefit to all that the care coordinator of the limits to confidentiality requirements informs the Service user. The service manager must be informed of any notification that may be made.

Disclosures and duty of care

Confidentiality should not be upheld in instances where doing so would result in otherwise avoidable harms occurring to innocent others or the service user themselves. Where a staff member believes there may be significant risk of harm to a service user, or other person the disclosure must be discussed with the Service Manager, CEO board and course of action determined. A report outlining the disclosure and action is to be documented and placed on file.

Colleagues

Staff members have the same right to privacy as service users, therefore, just as service user information should not be disclosed, neither should staff information. This includes not only specific details such as telephone numbers, but also indications of the suburb in which a staff member resides and other similar information.

Facsimiles

All care must be taken to ensure that no service user information is released to persons not authorized to receive such information. Therefore as a general rule, no information should be sent by fax that may cause damage or embarrassment if it fell into 'the wrong hands'. Any faxes containing such information must be clearly labelled "confidential" and a phone call made to the recipient to inform them that sensitive information is being faxed immediately. All faxes and Emails sent will contain the following privacy statement.

- This electronic communication (including any attached files) may contain confidential and/or legally privileged information and is only intended for the use of the person to whom it is addressed. If you are not the intended recipient, you do not have permission to read, use, disseminate, distribute, copy or retain any part of this communication or its attachments in any form. If this e-mail was sent to you by mistake, please take the time to notify the sender so that they can identify the problem and avoid any more mistakes in sending e-mail to you. The unauthorised use of information contained in this communication or its attachments may result in legal action against any person who uses it.

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Service user access to their files

Under the Freedom of Information Act service users must make a request in writing to TaskForce Community Agency to obtain documents from their files. In the case of a service user requesting access to their file

- The request will in the first instance be discussed with the Service Manager and CEO
- A written response will be made to the requesting service user within 14 days of receipt of their request.
- Within 30 days, TaskForce will tell the service user the decision on giving them access. (Where TaskForce has to consult a third party, we may extend the time in which it is required to tell a service user its decision by another 30 days. Consultation is usually necessary where the document contains information about the third party.)
- In providing copies of requested material to the service user, or allowing access to the records, a file note should be made of which documents were seen by, or copies of, given to the service user.
- If TaskForce decides not to give access to the document asked for, we must identify the documents withheld, give the service user written reasons for the decision and advise them of their rights of appeal.

Service user files

All personal information about service users should be protected from loss, misuse, unauthorised access and unauthorised disclosure. Current service users files will always be adequately stored, recorded and accessible. Reasonable security precautions must therefore be in place to safeguard such information.

Further more, the TaskForce management team and staff takes responsibility for:

- Making sure all staff / volunteers / students are aware of privacy and security issues
- Making sure information is locked away in appropriate containers when not in use
- When taking files or information out of the office, ensuring that they have been secured in a lockable briefcase / bag
- Not leaving files in open view in a car;
- Not taking service user information home for others to see
- Providing private interview rooms for service users who may want to discuss sensitive and personal matters.
- TaskForce staff will record on files only that information which is directly relevant to the provision of assistance to the person concerned.

All employees must take care not to reveal confidential information to outside parties, even inadvertently. However, information should be shared amongst relevant staff within the agency, including service managers, co-ordinators and peers through clinical supervision, de-brief, case reviews, case conferences etc.

However, there may be times when information must be shared outside of the agency. This policy states information must be shared or disclosed under the following circumstances:

- If TaskForce's staff believe a person is at significant risk of harm (self or otherwise)
- If TaskForce's staff believe a person is at risk of causing significant harm to another individual
- Where a child under the age of 17 is considered to be at risk
- Or where a staff member is mandated by law

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- Or where a service users signs a consent to release personal information
- Or where TaskForce is required to share information by law

All employees are required to sign this confidentiality agreement as a condition of employment. Employees who disclose confidential information inappropriately will be subject to disciplinary action, up to and including termination of employment. In addition, where any 'reasonable doubt' exists, contacts with the police and other relevant organisations may be made to lodge claims for damages incurred, even if the employee does not actually benefit from the disclosed information.

TaskForce's confidentiality statement

This statement is to be made available to all service users and to be displayed prominently at all sites and in all interview and counselling rooms

At TaskForce we recognise that keeping your information confidential is important. Therefore we will not disclose to any other person or party outside of this agency any information about yourself where you have not given us permission to do so in writing to do so except in the following circumstances:

- If we believe you are at significant risk of harm (self or otherwise)
- If we believe you are at risk of causing significant harm to another person
- Where we believe a child under the age of 17 may be at risk of harm
- Or where we are mandated by law to share information

You have the right at request access to your file at TaskForce. Under the Freedom of Information Act you can make a request in writing to TaskForce to obtain documents from your files. We will:

- Make a written response to you within 14 days of receipt of your request.
- Within 30 days, we will tell you're the decision on giving you access. (Where we have to consult a third party, we may extend the time in which we tell you our decision by another 30 days.)
- If we decide not to give access to the document you have asked for, we must identify the documents withheld and give you written reasons for the decision and advise them you of your rights of appeal.

Acceptance of confidentiality statement

I have read and agree with the principles outlined in the foregoing confidentiality statement and policy and pledge myself to observe them.

Signed: _____

Name: (printed): _____

Date: _____

Witness: _____

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Volunteer Contract

Name: _____

Position: _____

Start date: _____

Hours of work: _____

Reporting to : _____

Position Context

Established in 1973, TaskForce is a registered non-profit incorporated association, registered charity, and Registered Training Organisation (RTO). Our mission is “To break the cycle of addiction and unemployment”. Since 1973 our core activities have focused on working with young people and their families, with emphasis on a number of programs and initiatives that respond to drug and alcohol use, substance abuse, addiction and recovery, unemployment, social isolation, mental health issues and dual diagnosis. Our programs and projects are funded from various sources, including Federal and State Government funding, Local Council funding and support, and funds from grant making and philanthropic trusts. TaskForce, located in Prahran and is a provider of services including employment, training and work experience. TaskForce Alcohol & Drugs Service, in Moorabbin, provides drug and alcohol counselling, education, consultation and outreach services.

Equal opportunity employment statement

TaskForce is an equal employment opportunity employer. It is in all our interests to ensure that we create a working environment that is free from discrimination and harassment and in which all employees, volunteers and students are treated with dignity, courtesy and respect. All employees are protected under the provisions of the following equal opportunity laws:

- Equal Opportunity Act 1995 (Vic)
- Racial and Religious Tolerance Act 2001 (Vic)
- Human Rights and Equal Opportunity Commission Act 1986 (Fed)
- Sex Discrimination Act 1984 (Fed)
- Racial Discrimination Act 1975 (Fed)

Basic Position Purpose

Copy of position description to be attached.

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Duties and Communications

You will

- Be accountable to _____
- Attend regular group supervision sessions
- Liaise with other TaskForce programs, services and staff as required
- Work in accordance with your agreed position description
- Work in accordance with TaskForce's policies and procedures.
- Perform your duties with integrity and impartiality towards your fellow staff, clients and other professionals.
- Participate in agreed performance appraisal processes.
- Fulfil the duties assigned to you, to an agreed standard.

Expected Outcomes / Key Result Areas

To be negotiated and agreed with the program co-ordinator

Police check / working with children check

You will provide and disclose information as outlined in the Notice to Prospective Employees (Pre-existing Injuries) disclosure document and you will agree to a Criminal Records Check. A working with children's record check will also be completed.

Time sheets

TaskForce requests that all volunteer staff complete timesheets for the hours they are on site. These are to be provided fortnightly.

Sick and other Leave

Please provide notice where ever possible of non-attendance due to illness. Please negotiate working hours, holidays etc with your supervisor.

Termination of voluntary work

Subject to this contract, either party may terminate your voluntary work experience placement by providing the other with two weeks written notice. We may terminate your voluntary work experience placement immediately for serious misconduct without any obligation to provide notice.

Signing contracts

Both parties are to sign below to demonstrate acceptance of this contract of voluntary employment.

Service Manager name
Service Manager

Volunteer name
Role title (volunteer)

Date

Date

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Student / Volunteer Personal Information Form

Personal details			
Name:			
Address:			
Telephone	Home	Mobile	Work
Email			

Emergency contact details			
Name:			
Relationship			
Address			
Telephone	Home	Mobile	Work
Email			

University / Institution details (Students only)			
Institution name			
Course name			
Year			
Stage of study			
Academic supervisor		Contact No	

Interview (Office use)			
Date interview held			
Date placement accepted			
Reference checks	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>	Record attached <input type="checkbox"/>
Police records check	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>	Record attached <input type="checkbox"/>
Working with children check	Satisfactory <input type="checkbox"/>	Unsatisfactory <input type="checkbox"/>	Record attached <input type="checkbox"/>

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Comments	
Details of work experience / volunteer placement	
Service area	
TaskForce supervisor	
Hours to be worked	
Placement dates	Commencement End
Days to be worked	Mon <input type="checkbox"/> Tues <input type="checkbox"/> Weds <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/>
Position	
Other comments	

Checklist	Signed and dated copy on central file
Police check completed	
Working with children check completed	
Code of ethics signed	
Confidentiality agreement signed	
OHS&E agreement signed	
Copy of drivers license on file	
Referees checked and on file	
Position description created	
Contract signed and on file	
Checklist	
Supervisor allocated	
Induction given	
Employee manual given	
Copies of TaskForce polices given	

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Volunteer and Student Placement Application Form

Personal details

Name:			
Address:			
Suburb:		Postcode:	
Telephone:	home	Work	mobile
E-mail:			

Volunteering at TaskForce may take place at any of our three locations. Please indicate by ticking those activities that match your skills and preferences.

Carnegie

- Telephone intake and support _____
- Administration support _____
- Youth outreach _____

Moorabbin

- Drug and alcohol counselling _____
- Employment preparation _____
- Telephone intake and support _____
- Administration support _____
- Youth outreach _____
- Family therapy _____
- Art Therapy _____
- Crisis support _____
- Coordinating activities _____

Prahran

- Administration support _____
- IT support _____
- Employment preparation _____
- Fundraising _____

Customer service

Special projects

I have specialist skills in:

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Please outline any skills or relevant experience you have that you believe may be valuable as a volunteer at TaskForce.

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In no more than 250 words please outline your reasons for wishing to become a volunteer / student placement at TaskForce.

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What sort of issues do you think people who use our service face?

Tell us a little about your career goals and aspirations.

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<p>Referees Please give details of two people (not members of your family), who are able to provide a character reference.</p>
<p>Name</p>
<p>Contact details</p>
<p>Relationship to you</p>
<p>Name</p>
<p>Contact details</p>
<p>Relationship to you</p>

**Closing date
August 31st 2010**

Please return to

Wende Moss
Volunteer Coordinator
TaskForce Moorabbin
421 South Road
Moorabbin, 3189

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