



Winnipeg Regional
Health Authority
Office régional de la
santé de Winnipeg

Volunteer Activity Description
PROGRAM/CLINIC
SUPPORT ASSISTANT

Program Community Care

Community Area/Location _____

Placement Supervisor Manager of Administration

Phone _____ **FAX** _____

Purpose: To provide supportive assistance to community health programs and services.

Responsibilities:

➤ **May include:**

- Working with files
- Photocopying
- Assembling charts or information packages
- Mail-outs
- Telephone
- Computer activities including word processing, spreadsheets and/or Internet.
- Other: _____

Necessary Qualifications and/or Skills

- Physically able to perform tasks
- Manual dexterity
- Ability to follow directions and attention to details
- Ability to understand, give direction and express oneself in English in a clear, concise manner
- Organizational skills
- Conscientious
- Computer skills (specify) _____
- Ability and comfortable with approaching people in a friendly, supportive manner
- Sensitive to diverse cultures and socio economic backgrounds
- Neat and clean in appearance
- Must respect the confidentiality policies of the WRHA

Benefits An opportunity to:

- Learn new skills
- Explore careers
- Gain experience in an office environment
- Provide service to others
- Make a personal contribution to the improvement of health care

Length of Commitment Minimum of one 3-4 hour shift per week. Volunteers may be required for special projects or on an as-need basis.

Shifts Monday through Friday, between 9:00 am -4:00 PM.

Scheduling Standards Minimum 1 volunteer, Maximum 2 volunteers per shift.

Supervision The Manager of Administration for each community area/pair is responsible for supervising the volunteer. If the volunteer activity takes place in a location other than where the Manager of Administration is primarily located, an immediate placement supervisor must be identified at that location.

Orientation/Training Volunteer Services staff and/or designate will provide general WHRA and Volunteer Services orientation. Placement supervisor will provide all necessary training required by this activity including specific examples of confidentiality practices.

Risk Level/Screening Standards Level 2 (moderate risk). In-person interview, 3 reference checks and criminal record check required.

Activity Description Approved by:

Community Area/Program Director

Date

Manager, WRHA Volunteer Services

Date

Placement agreement

I agree to be responsible for providing the volunteer(s) with appropriate training and supervision in a respectful environment. I will communicate any changes to this placement in a timely way to Volunteer Services.

Placement Supervisor

Date

Volunteer Agreement

I agree/commit to perform my duties, as provided in the activity description, to the best of my ability. I understand that it is important not to go beyond the responsibilities, outlines in the volunteer activity description, and I will confine my volunteer activities as so defined by Volunteer Services of the Winnipeg Regional Health Authority (WRHA).

Volunteer Signature

Date