

# **Volunteer Position Description**

| Program Sketch Group                   |    |
|--|----|
|  |    |
| Volunteer Title Sketch Group Assistant |    |
| Reporting to Care Programs Coordinator | or |

## **Purpose:**

Sketch Group is a volunteer run program for older adults who may be socially isolated, or have memory loss. The group meets in a relaxed and friendly environment. Volunteers engage clients with activities, help with providing refreshments and above all contribute to the clients having an enjoyable time together.

| Role<br>Responsibilities | <ul> <li>Prepare for Sketch Group session by setting up<br/>tables with sketch materials and beverages</li> </ul>                           |  |  |
|--------------------------|---|--|--|
|                          | <ul> <li>Greet clients upon arrival, write attendance list and<br/>collect payment for class</li> </ul>                                     |  |  |
|                          | Clear and clean tables after session  |  |  |
|                          | <ul> <li>Refer interested participants to Care Team for<br/>more information about our programs and services</li> </ul>                     |  |  |
| Qualifications           | <ul> <li>Able to communicate and care for clients who may<br/>be socially isolated; or are experiencing memory<br/>loss/dementia</li> </ul> |  |  |
|                          | <ul> <li>Able to follow safety and hygiene procedures at all<br/>times</li> </ul>   |  |  |
|                          | <ul> <li>Able to move chairs and tables for class set up</li> </ul>   |  |  |
| Benefits                 | <ul> <li>The enjoyment and rewards of knowing that you<br/>are providing appropriate social and emotional<br/>support.</li> </ul>           |  |  |
|                          | <ul> <li>Opportunities to meet new people and make new friends.</li> </ul>  |  |  |
|                          | <ul> <li>The knowledge that you are contributing to the<br/>well-being of vulnerable people.</li> </ul>                                     |  |  |
|                          | <ul> <li>Support people experiencing memory loss and/or<br/>social isolation to connect.</li> </ul>   |  |  |
| Background Checks        | National Police check/ Working with Children Check/<br>Reference check  |  |  |



### **Commitment** Minimum 3 to 6 months

| Scheduling              | Every Tuesday from 10:00am to 12:00pm                 |
|-------------------------|---|
| Volunteer Role Location | Senior Lounge at the Seniors Centre at Mosman Council |

#### Work Health and Safety Responsibilities: (as per Volunteer Manual pages 10 & 11)

As a Volunteer of Mosman Council, you must:

- Take reasonable care for your own health and safety
- Take reasonable care that your acts or omissions do not adversely affect the health and safety of other persons
- Comply, so far as you are reasonably able, with any reasonable instruction that is given by Mosman Council (to comply with its responsibilities under the WHS Act)
- Co-operate with any reasonable policy or procedure relating to health or safety at the workplace that has been notified to volunteers
- Participate in training
- Keep the workplace safe, clean and tidy
- Cooperate with Site Safety Rules
- Cooperate with safe work method statements, standard operating procedures and controls
- Report all incidents, hazards, near misses and injuries to your program coordinator with 24 hours and assist in completing an incident report form.
- Participate in emergency response rehearsals and reviews.
- Wear and maintain provided Personal Protective Equipment (PPE).
- Manual handling.

#### **Medical conditions:**

- It is the responsibility of the Volunteer to inform Council staff, if at any time you are prescribed medication and/or acquire a medical condition, injury or illness that may affect your ability to perform your volunteering role.
- A medical certificate may be requested before you can begin or resume the volunteer role, which should state any limitations to your capability. The Volunteer Coordinator/Program Coordinator may attempt to adjust the role accordingly, however this may not be possible and you may be referred to a different volunteer position or requested to take time to recover.



## **Acknowledgement:**

| I have read and understand the contents of this position do<br>meet the responsibilities in an appropriate manner. | escription and undertake to |
|--|-----------------------------|
| Volunteer's Name (printed):  |                             |
| Volunteer's Signature:   | Date:                       |
| Volunteers Office/ Program Coordinator:  | Date <sup>.</sup>           |