

- 14385  
CD-13250

**P.A.L.S.**  
Partners In Achieving Life Skills

Clearinghouse on Child Abuse and  
Neglect Information  
PO Box 1182  
Washington, DC 20013



A COST EFFECTIVE MODEL  
TO PREVENT CHILD ABUSE AND NEGLECT  
BY TEENAGE PARENTS

SUPPORTED BY.

Division of Maternal and Child Health  
U. S. Department of Health and Human Services  
Federal Grant No. 90-CA-1357 ✓

and

Washington State Department of Social and Health Services

Tacoma Pierce County Health Department

## ACKNOWLEDGEMENTS

This replication manual was made possible by Grant 90-CA-1357 from the Department of Social and Health Services Bureau of Parent-Child Health, Olympia, Washington. The project, "A Cost Effective Model to Prevent Child Abuse and Neglect by Teenage Parents" was the creation of Becky Curneen, Section Manager for Women's Health, Parent Child Division, Tacoma Pierce County Health Department, and Ilene Kasten, Office of Parent Child Health, Department of Social and Health Services, Olympia, Washington.

The staff of the Adolescent Pregnancy Program, community health nurses and volunteers provided the cooperation and collaboration necessary to make the PALS Project happen.

A special THANKYOU to the Family and Children's Center at Pacific Lutheran University for providing space, materials and equipment, and many hours of support to the PALS Project. Faculty and students provided a variety of opportunities for PALS to participate in university sponsored activities or programs specific to adolescent parents.

Finally, great appreciation is given to the young women who participated in the PALS Project, they and their children became the teachers and inspiration for us all.



You give but little when you give  
your possessions. It is when you  
give of yourself that you truly give.

## PROBLEM STATEMENT

Adolescent childbearing is a national concern that affects every area of the country, transcending such traditional barriers as income and race. For the past three decades, a network of services has attempted to prevent the adverse outcomes frequently associated with school age parenting. Lack of education, lack of job skills, isolation, and poverty are factors which contribute to a generation of young children who, because of their environment, become at risk for developmental delays, social and emotional disorders, and a higher incidence of child abuse and neglect.

## RESPONSE

In response to this need, the Adolescent Pregnancy Program of the Tacoma Pierce County Health Department developed and implemented a cost-effective prevention/intervention model that can be adapted to communities who are ready to implement or expand services to meet the identified needs of pregnant and parenting adolescents. This model is a three tiered system of service delivery that integrates an existing community network with the specific expertise of community health nurses, paraprofessionals, and community volunteers in a continuum of care. While each tier focuses on the individual client, each member of the multidisciplinary team has the potential to maximize intervention through a systematic, collaborative relationship that is established between the community health nurse, the paraprofessional and the volunteer.

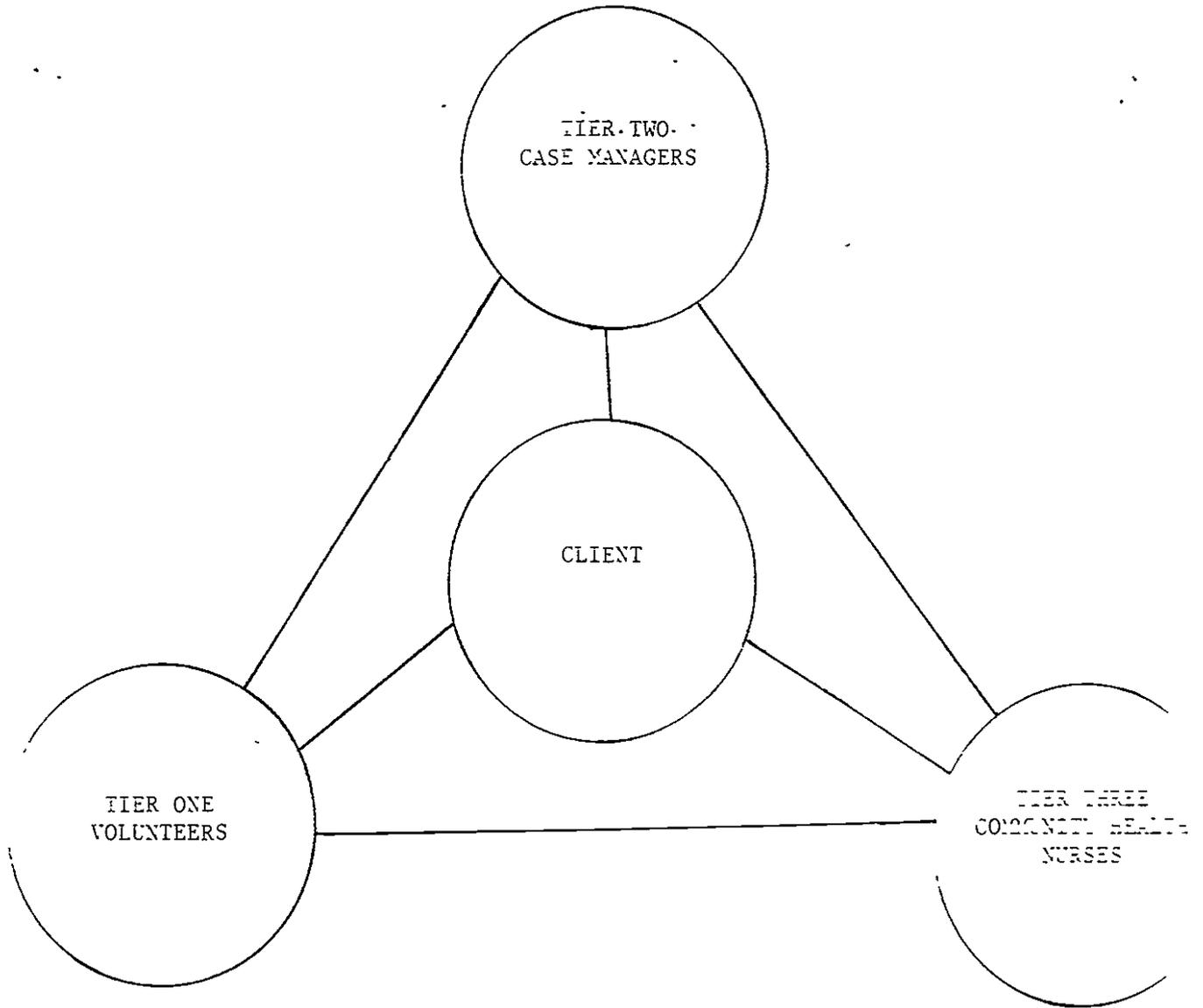
The role of the community health nurse, TIER THREE is to provide a comprehensive nursing assessment of the child and family, thereby identifying factors which may contribute to the risk of child abuse and neglect. This evaluation of the health, development and physco-social state of the child and family becomes the basis for a plan of care developed by the family and case manager (paraprofessional). Direct involvement by the community health nurse is designed to be of limited duration, thus interventions focus on anticipatory guidance, health and parenting education, social service needs, and the provision of a supportive network. Working in collaboration with the community health nurse, the case manager is responsible for long term case management needs.

The case manager, TIER TWO, utilizes the Office of Adolescent Pregnancy ten core services as guidelines, thus providing a broader focus of information and referral, advocacy, preventative education, and the opportunity to build positive relationships between the adolescent and other service providers. When the need arises the case manager who sees the client on a monthly basis can call on the services of the community health nurse even though she may not be seeing the client on a regular basis.

Community volunteers, TIER ONE, are the new component of this model, and the focus of this manual. The emphasis of this tier is for the volunteer to establish a long term trusting, supportive relationship with the pregnant or parenting teen. The volunteer commits to having two hours of contact time per week with her PAL, and helps her achieve the goals developed in the plan of care. The volunteer may have direct contact with the case manager or the community health nurse as needed. Volunteers serve in a partnership with her PAL and assists her in acquiring life skills such as cooking, budgeting, child care, parenting, and meeting educational goals.

The success of the model is contingent upon the degree of collaboration established between the tiers and service providers in the community. Each community is as unique as the population it serves. It is the intent of this model to be adapted to meet the unique needs of the community and to utilize existing networks while expanding services to reduce the incidence of child abuse and neglect among adolescent parents.

FIGURE 1 THREE TIERED INTERACTIVE MODEL



# TABLE OF CONTENTS

1		
	Needs Assessment	-
	Three Tiered System of Service Delivery	6
2		
	Program Planning	10
	Establish client base	12
	Referral and Placement Procedures	17
3		
	Volunteer recruitment	20
	Identifying Volunteer Population	21
	Methods of Recruitment	23
4		
	Screening	24
	Application Packet	25
	Home Visit	26
5		
	Volunteer training	27
	Inservice	28

6

Volunteer management	30
Recognition	33
Termination	34
Statistical Data	35

7

Support groups	36
Parenting classes	38

8

Evaluation	39
------------	----

APPENDIX A

Protocols for Tier One

APPENDIX B

Support Group Program Ideas

BIBLIOGRAPHY

## NEEDS ASSESSMENT

In order to successfully recruit, train, and retain volunteers, it is essential to conduct a needs assessment. The following guidelines have been established for conducting a needs assessment that will allow you to gather the information needed to implement an effective program. The areas to be assessed should include but not limited to; the community for the purpose of establishing need and identifying resources, the agency sponsoring the volunteer program for the purpose of receiving staff input and generating ideas, and the client population to be served for the purpose of receiving input on perceived needs and wants

*Always keep in mind the procedures in this manual can be used directly from the manual or adapted to meet the unique needs of your community.*

## ASSESSING THE COMMUNITY

### *ESTABLISHING NEED*

Research and statistical data clearly supports the fact that adolescent pregnancy and consequently adolescent parenting is a problem of national concern. Before a new program is implemented, it is recommended that the community be surveyed for the following information:

*When collecting statistical data, it is helpful to have statistics that include national, state, and county data.*

- \*\*\*Current statistical data on the number of pregnancies to women younger than the age of 20
- \*\*\*Current Statistical data on the number of live births to women younger than the age of 20
- \*\*\*Current statistical data on the number of women younger than the age of 20 who choose to parent their babies
- \*\*\*Current statistical data on the number of repeat pregnancies to women younger than the age of 20
- \*\*\*Estimated number of parenting adolescents attending school
- \*\*\*Estimated number of parenting adolescents not attending school due to child care and/or transportation barriers
- \*\*\*Estimated number of pregnant and parenting adolescents living in socially isolated environments
- \*\*\*Estimated number of pregnant women under the age of 20 who are not receiving prenatal care due to transportation or motivational barriers

## *IDENTIFYING SERVICES AND COMMUNITY RESOURCES*

Every community has existing services and resources. Through collaborative efforts, creative thinking, and pooling monies, existing services can be expanded or adapted to fit the needs of pregnant and parenting adolescents. The following ideas are suggestions for identifying possible resources for adapting or expanding services:

- \*\*\*Identify all agencies that currently provide services to pregnant and parenting adolescents  
(to include the local health department, mental health centers, vocational technical institutes, school districts, service organizations, and private non profit agencies)
- \*\*\*Identify the types of service provided, their cost, frequency, and location
- \*\*\*Identify case management systems
- \*\*\*Identify existing services that are not specific to pregnant and parenting adolescents but have the potential to be expanded to serve this population (ie traditional parenting classes that are not appropriate for adolescent parents due to average age of attendees and the literacy level of materials presented could be expanded to offer a class specific to adolescent parents)
- \*\*\*Identify potential support services that would enhance the ability to provide services (ie Girl Scouts babysitting for adolescent moms while they attend parenting classes or support group meetings)
- \*\*\*Identify resources in the community that could be utilized while providing services to pregnant and parenting adolescents (ie free lunch programs, free tickets to recreational places and special events)
- \*\*\*Identify resources in the community that would support or fund special projects (ie free space for meetings, donated items)

## ASSESSING THE SPONSORING AGENCY

### *SURVEYING THE STAFF TO BE INVOLVED*

If the program is to be implemented into an existing program all staff members who will be participating in, or affected by the program, should be surveyed for their input and perceptions of how the program will best function. The following recommendations should be adapted to fit the kinds of staff available to, or participating in the program:

\*\*\*Identify the activities best suited for volunteers working with pregnant and parenting adolescents and their children

- \* role model for parenting
- \* provide transportation
- \* provide break from social isolation
- \* provide friendship, acceptance, support
- \* incidental teaching

\*\*\*Identify activities not suitable or appropriate for volunteers

- \* provide food and shelter
- \* loan money or make purchases
- \* case manage
- \* use girl for babysitter of volunteer's children

\*\*\*Determine communication process between tiers, to include the amount and level of paperwork by a volunteer

- \* Should volunteer work with charts?
- \* Should volunteer be included in staff meetings?
- \* Should volunteer be part of case conferences?

\*\*\* Determine communication process between case manager and volunteer coordinator

- \* physical location of case manager and volunteer coordinator will be a determining factor in the communication system
- \* develop forms, memo styles and frequency
- \* determine where written information should be kept

\*\*\* Identify benefits to program by adding volunteer component to existing system of service delivery

- \* increased follow-up with plan of care
- \* decreased number of "crisis oriented" calls
- \* increased awareness of program in community
- \* longer stay of clients in program

\*\*\* Identify benefits to client by adding volunteer component

- \* increased positive self esteem
- \* reduced social isolation
- \* positive role models
- \* increased independence
- \* non-agency person to relate to
- \* increased chance to develop and realize personal goals

\*\* Determine support services available within the agency

- \* clerical support
- \* printing and media support
- \* speaker s bureau
- \* inservice by other disciplines
- \* counseling / consultation
- \* space and equipment

## THREE TIERED MODEL OF SERVICE DELIVERY

### *COMMUNITY HEALTH NURSES / TIER THREE / MEDICAL*

Community health nurses play an important role in serving pregnant and parenting adolescents and their children. The primary role is to provide a comprehensive nursing assessment of the child and family. Identified risk factors become the base for a plan of care in the continuum of service. The following areas are assessed and addressed at the Tier Three level:

- \*\*\* health assessment of mother during pregnancy
- \*\*\* health assessment of mother and child after delivery
- \*\*\* referrals to appropriate services when indicated
- \*\*\* assessment of child's development
- \*\*\* assessment of nutrition, physco-social state, and environment of child
- \*\*\* teaching infant care, addressing nutritional needs, and providing guidance in parenting

The role of the community health nurse is designed to be limited in duration. As the mother and child become established in routine and bond in their relationship, the nursing services become less needed. Exception to this may be the parent/child relationship where the potential for child abuse and neglect remain high due to environment or other risk factors, or when the child is experiencing medical and/or developmental problems.

The community health nurse may reopen a case at anytime as need indicates. She is available at all times to consult with TIER'S ONE and TWO.

## *PARAPROFESSIONALS / TIER TWO / CASE MANAGEMENT*

Paraprofessionals in the three tiered model serve as casemanagers and are TIER TWO. The role of the casemanager is to assess the social service needs of the client according to ten core services established by the Office of Adolescent Pregnancy and provide appropriate follow-up:

- \*\*\* pregnancy testing
- \*\*\* family planning
- \*\*\* medical care
- \*\*\* nutrition education
- \*\*\* pediatric care
- \*\*\* family counseling
- \*\*\* educational and job training referrals
- \*\*\* adoption counseling and referral
- \*\*\* childbirth preparation classes
- \*\*\* parenting classes

The casemanager sees the client monthly for approximately one hour. A plan of care is developed and the case manager provides referral and advocacy for the client. The case manager consults with and works cooperatively with the community health nurse and the volunteer to provide a continuum of service.

The case manager may serve as the primary referral source for pregnant and parenting adolescents to be matched with a volunteer and will keep the client open to services as long as she is matched with a volunteer under the auspices of the agency.

## ASSESSING THE CLIENT POPULATION

Programs that address the specific needs identified by the client tend to be more successful than programs where services are defined but not specific to the individual needs of the client. It is important to have client input to identify areas of needs and interests. Existing programs can easily survey clients already receiving service and identify needs or gaps in service. New programs will need to identify the client population before developing the volunteer component. The following questions are recommended to survey clients

- \*\*\* Would you like a volunteer to help you through your pregnancy and early days of parenting?
- \*\*\* Would you like a volunteer who is a young parent or a volunteer who is older, more like a mother or grandmother?
- \*\*\* What would you like a volunteer to do for you?
- \*\*\* What kind of personality do you think a volunteer should have?
- \*\*\* Would you like to spend time doing things socially with a volunteer such as going to the movies, park, shopping, or special events?
- \*\*\* Would you like to spend time with a volunteer cooking and learning basic skills like housekeeping, shopping budgeting?
- \*\*\* Would you like a volunteer who has young children?
- \*\*\* What else would be important to you in being matched with a volunteer?

Surveys for clients should be at a sixth grade or below literacy level. Check with you local literacy program for help in determining literacy level. Surveys should be limited to one page.

## *VOLUNTEERS / TIER ONE / SUPPORT*

Volunteers provide a cost effective way to enhance services to pregnant and parenting adolescents, and reduce the incidence of child abuse and neglect. The volunteers provide opportunities for the client to utilize services, increase participation in social activities, and realize personal goals. The volunteer works closely with the case manager and the community health nurse to identify areas of concern with either the mother or child, and to help with problem solving. The following areas are appropriate tasks of a volunteer:

### **\*\*\* provide transportation for:**

- \* prenatal care
- \* infant and maternal health care
- \* WIC and welfare appointments
- \* parenting classes
- \* support group meetings
- \* recreational / social purposes

### **\*\*\* provide friendship and support**

- \* non-judgemental in relationship with client
- \* non authoritative in attitude
- \* positive role model in behavior
- \* assist with childcare needs while client keeps appointments

### **\*\*\* incidental teaching**

- \* teaches appropriate parenting techniques through role modeling, sharing own experiences, problem solving
- \* teaches basic homemaking skills either in volunteer's home or clients home, to be determined by volunteer and client
- \* teaches crafts, skills to promote positive self esteem in client
- \* teaches budgeting and home economics as needed

---

## PROGRAM PLANNING

A three tiered model requires well defined parameters for each tier yet maintains flexibility and fluidity between tiers. The following guidelines can be used to identify parameters for program planning and design:

*PROGRAM PLANNING CHECKLIST (include anticipated date of completion)*

- \*\*\* What geographic areas will be served?
  - \* may be determined by county, service area, or zipcode
  
- \*\*\* How prevalent is the need for service?
  - \*gather statistical data needed for program promotion
  
- \*\*\* What existing programs can be utilized?
  - \* identify all appropriate programs
  - \* review working agreements
  
- \*\*\* What additional services are needed?
  - \* identify gaps in service
  
- \*\*\* What duties will volunteers be able to perform?
  - \* develop protocols for volunteers
  - \* integrate with protocols from other tiers
  
- \*\*\* What is the legal liability of the sponsoring agency in the utilization of volunteers?
  - \* review legal structure with agency
  - \* consult with agency's attorney before finalizing volunteer program

**\*\*\* Identify staff to be involved in program**

- \* Program director/supervisor
- \* Project coordinator
- \* Service providers
- \* Support staff

**\*\*\* Develop volunteer component**

- \* determine number of volunteers needed
- \* develop selection criteria
- \* plan orientation and training
- \* develop referral procedures
- \* determine matching process
- \* develop management and evaluation procedures

**\*\*\* Establish program recordkeeping and reporting systems**

- \* inservice staff on communication procedures
- \* establish Gantt chart or similar timeline

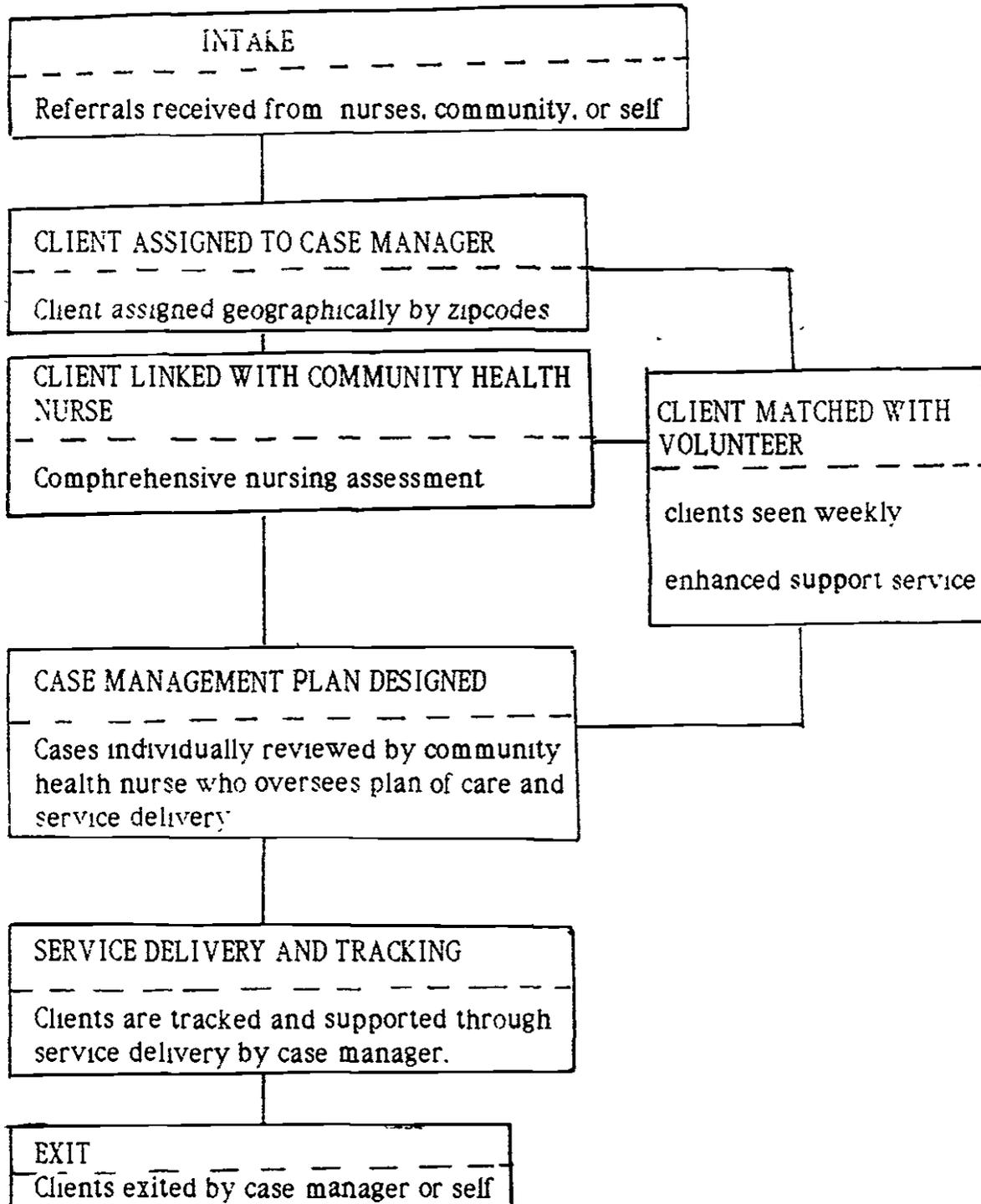
**\*\*\* Develop community awareness**

- \* design and distribute informational flyers and/or brochures
- \* use local media for public service announcements
- \* plan informational speaking engagements

**\*\*\* Establish evaluation criteria**

- \* overall program effectiveness
- \* staff
- \* client satisfaction
- \* internal and/or outside evaluator

FIGURE 2. CLIENT FLOW IN A THREE TIERED SYSTEM OF SERVICE DELIVERY



## *MISSION STATEMENT AND GOALS AND OBJECTIVES*

The mission statement for a new program should be a broad based statement that reflects the mission of the sponsoring agency as well as the individual project

*example: The mission of the P.A.L.S. PROJECT is to enhance the quality of life for pregnant and parenting adolescents and their children.*

The Goals and Objectives of the program are more specific to fulfilling the mission statement

*example: Goal 1: to prevent child abuse and neglect by adolescent parents through a comprehensive, community-based support system which provides well integrated, nonduplicative, geographically accessible services.*

*Objective 1: By 1990, the percent of reported cases of child abuse and neglect among program participants will be significantly less than the percentage of total reported cases among the population of Pierce County*

It is from measurable goals and objectives that an intervention/prevention program can be implemented and evaluated for effectiveness. The volunteer job descriptions reflect the goals and objectives, and are determined by identified gaps in service, and from case management of individual clients based on need

## JOB DESCRIPTIONS

Volunteers can only be as good as the job we ask of them. Clearly defined job descriptions are necessary for a successful volunteer experience. Setting parameters for the volunteer as defined by the protocols for Tier One ensures a working relationship between the tiers and protects the volunteer from inappropriate expectations. The following example of a job description for a PALS Volunteer can be adapted for a variety of volunteer positions. The main headings are generic and represent the areas to be specifically defined.

### *SAMPLE JOB DESCRIPTION*

**JOB TITLE:** PALS Volunteer

**SUPERVISOR:** Volunteer Coordinator

**GENERAL FUNCTION:** The PALS Volunteer is responsible for developing a positive relationship with a pregnant or parenting adolescent (APP) in order to provide support, encouragement, and friendship. The volunteer works as a team member with other APP staff.

**MINIMUM REQUIREMENTS:**

- 1 Ability to develop and maintain positive relationships
- 2 Good verbal communication skills
- 3 Ability to keep accurate written records
- 4 Current Washington State driver's license and auto insurance

**RESPONSIBILITIES:**

- 1 Provide a continuing relationship of trust and friendship
- 2 Provide information and assistance on infant care, community resources, and parenting
- 3 Engage in enjoyable activities with client such as shopping, picnics, crafts, etc.
- 4 Provide transportation to and from medical and WIC appointments as needed
- 5 Participate as an effective team member with APP staff through monthly reports, case conferences
- 6 Identify needs and refer to case manager as needed
- 7 Attend training and inservice opportunities

**TIME COMMITMENT:** Weekly contact in home and/or designated place or by phone for a period of six months. Attendance at monthly support meetings and training sessions.

**TRAINING:** Orientation and training sessions before assuming position. On-going support group and inservicing on specific topics.

## BUDGET

The budget of any program is determined by the funding source. Each agency has its own requirements for fiscal management and policy and procedures for expenditures and reimbursement should be established before the program begins. The following recommendations for budget items are

\*\*\* Staff related expenses

- \* salary and benefits
- \* training/continuing ed
- \* travel

\*\*\* Program related expenses

- \* administrative costs
- \* equipment and supplies
- \* printing

\*\*\* Volunteer management

- \* recruitment
- \* training
- \* recognition
- \* travel / childcare stipends

\*\*\* Client related expenses

- \* supplies for meetings
- \* doorprize incentives
- \* recognition
- \* group activities

## **ESTABLISHING A CLIENT BASE**

The pregnant and parenting adolescent population crosses all ethnic religious and socio-economic boundaries. Established programs already have a roster of clients, however, new programs will need to implement a referral process to build a client base. The scope of service provided by the program and the community linkages will be variables in recruiting clients for service. The following recommendations are for developing or expanding a client base:

- \*\*\* Existing programs for pregnant and parenting adolescents
- \*\*\* Hospital social workers
- \*\*\* School counselors and nurses
- \*\*\* Doctors
- \*\*\* Mental health professionals
- \*\*\* DSHS program case managers
- \*\*\* Family and self referrals

## REFERRAL AND PLACEMENT PROCEDURES

### *REFERRAL*

Client referrals should provide as much information as possible for the volunteer coordinator. Utilizing a standardized form will help facilitate the referral process and provide the necessary information. It also helps the person making referrals to know the type of information needed and allows them to obtain necessary release of information signatures. The following information is recommended for a referral form:

*sample:* REFERRAL TO PALS PROGRAM

DATE	CASE MANAGER	NURSE
CLIENT	AGE	BIRTHDATE
ADDRESS	ZIP	PHONE
		MESSAGE PHONE
ALTERNATE PLACE OF CONTACT		
LIVING WITH	SELF	PARENTS
	RELATIVES	BOYFRIEND
		OTHER
HAS CLIENT BEEN INFORMED OF VOLUNTEER PROGRAM?		
HAS CLIENT REQUESTED A VOLUNTEER?		
IS CLIENT IN SCHOOL?	YES	NO
	GRADUATED	WHERE?
IS CLIENT WORKING?	YES	NO
	WHERE?	
IF PREGNANT, DUE DATE IS		
IF PARENTING, BABY'S NAME IS		
BABY'S AGE	BABY'S BIRTHDATE	BABY'S SEX
BRIEF FAMILY PROFILE		
ADDITIONAL INFORMATION		
SPECIAL PROBLEMS		
ISOLATION	PARENTING	SOCIAL
EDUCATIONAL	HOUSEHOLD MANAGEMENT	ALCOLHOL/DRUGS
LEGAL	MEDICAL	TRANSPORTATION
OTHER (SPECIFY)		
GOALS AND EXPECTATIONS FOR THE CLIENT WHICH A VOLUNTEER COULD HELP MEET		
NAME OF VOLUNTEER		
DATE ASSIGNED		
DATE TERMINATED		
REASON FOR TERMINATION		

## *PLACEMENT*

Matching clients and volunteers should always be done on an individual basis using an established set of criteria. Giving volunteers a choice of matches is recommended if possible. The following guidelines are suggested for consideration when making matches:

- \*\*\* Geographical areas determined by zipcodes or local districts
- \*\*\* Ethnicity when requested by client or volunteer (cultural sensitivity may be a factor)
- \*\*\* Religious affiliation when requested by client or volunteer
- \*\*\* Handicapping conditions of client or client's child or volunteer
- \*\*\* Smoker or non-smoker
- \*\*\* Individual characteristics of client (example: punk rocker) that may impact client/volunteer relationship
- \*\*\* Ability to provide transportation if needed
- \*\*\* Age of client and volunteer
- \*\*\* Hobbies and interests of client and volunteer

## *AGREEMENT BETWEEN CLIENT AND VOLUNTEER*

A successful match between volunteer and client is based on mutual trust and understanding. This can be facilitated by the volunteer coordinator through a prematch agreement. Knowing the parameters of the relationship will help to avoid conflict and putting either partner in uncomfortable situations or the feeling of being misused in the match. The agreement should be easy to read and understand and signed together at the time of the match. Both parties and the volunteer coordinator retain a copy of the agreement. The following is an example of an agreement that can be adapted to meet individual program needs;

### *example* PALS AGREEMENT

As a PALS volunteer, I agree to

- \* Meet or contact my PAL on a weekly basis for about two hours
- \* Respect confidentiality in the PALS match
- \* Be on time and keep our meetings as scheduled - when changes are necessary I will contact my PAL ahead of time
- \* Attend monthly group meetings
- \* Contact the volunteer coordinator when problems or questions arise

Name \_\_\_\_\_ Date \_\_\_\_\_

As a PAL to my volunteer, I agree to

- \* Meet or have contact with my volunteer on a weekly basis
- \* Respect confidentiality in the PALS match
- \* Be on time and keep our meetings as scheduled - when changes are necessary I will contact my volunteer ahead of time
- \* Attend monthly group meetings
- \* Contact the Volunteer Coordinator when problems or questions arise

Name \_\_\_\_\_ Date \_\_\_\_\_

---

## VOLUNTEER RECRUITMENT

### *MARKETING PROGRAM*

Marketing a new program or service requires raising community awareness through a variety of media, making presentations to civic and professional groups, and developing printed materials that sell your program or service. Utilizing the current statistical data about pregnant and parenting adolescents as it pertains to the community involved will generate interest, problem solving, and support. The following list of agencies and organizations to include in developing program awareness should be amended to individual communities:

- \*\*\* Parent Teacher Association
- \*\*\* Junior League
- \*\*\* School districts
- \*\*\* Hospital staff
- \*\*\* Mental health centers
- \*\*\* Local service groups such as Rotary, Lion's Club, etc
- \*\*\* Large companies that have an employee volunteer component
- \*\*\* United Way
- \*\*\* Cooperative and Private nursery schools
- \*\*\* Community Colleges and Universities
- \*\*\* Childbirth Education programs
- \*\*\* Church groups

## *IDENTIFYING VOLUNTEER POPULATION*

Client and staff survey results will determine desired characteristics of a volunteer. Individual differences and preferences should always be kept in mind and therefore characteristics that are narrowly focused or limiting should be avoided. The following characteristics may be helpful in determining the target population for recruitment purposes.

- \*\*\* Demonstrates attitude of caring and nurturance for people
- \*\*\* Demonstrates ability to be non-judgemental or non-biased
- \*\*\* Demonstrates ability to maintain honest and genuine relationship
- \*\*\* Demonstrates ability to be open to learning and supervision
- \*\*\* Demonstrates ability to work as part of a team
- \*\*\* Passes background and driving record checks
- \*\*\* Willingness to commit to weekly contact for six months
- \*\*\* Willingness to participate in orientation and training
- \*\* Has parented a child
- \*\*\* Has the patience of Job!

## *METHODS OF RECRUITMENT*

Recruitment of volunteers will be ongoing for the duration of the program. A variety of methods for recruitment should be utilized to maximize the number of potential volunteers. For every four persons who apply to volunteer, only one will finish the screening process and become a volunteer. There isn't a "best" time of the year for recruiting. Holiday and summer months have produced new volunteers as well as the fall and winter months. Advertising through public media will produce a large number of inquiries and net some volunteers, whereas, recruiting to a specific group may reduce the number of inquiries but produce a large group of volunteers. The following list of methods may be helpful in starting a recruiting campaign

- \*\*\* Advertise in local newspaper and small regional newspapers
- \*\*\* Utilize public service announcements on local TV and radio stations
- \*\*\* Develop one page flyers that can be posted in community centers, staff rooms, distributed at meetings, and included in agency and program newsletters
- \*\*\* Participate in resource fairs and special events that are appropriate for recruiting
- \*\*\* Encourage current volunteers to recruit friends, relatives, neighbors - word of mouth is a strong recruiting tactic

---

## SCREENING AND SELECTION

### *INITIAL CONTACT*

Initial contact with volunteers usually occurs as a phone call. A quick interview over the phone can screen out those persons who genuinely aren't interested once they know program or job specifics, and those people who aren't appropriate because they do not meet minimum requirements. During the initial phone contact much information can be gained. The following form can be used during a phone interview:

*sample phone interview form:*

#### VOLUNTEER RECRUITMENT FORM

NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIPCODE \_\_\_\_\_

BEST TIME OF DAY TO CONTACT \_\_\_\_\_ INITIAL CONTACT DATE \_\_\_\_\_

INTERVIEW DATE \_\_\_\_\_ DATE MATERIAL SENT \_\_\_\_\_

HOW THEY FOUND ABOUT PROGRAM \_\_\_\_\_

PALS ASSIGNMENT \_\_\_\_\_ CASEMANAGER \_\_\_\_\_ NURSE \_\_\_\_\_

DATE MATCHED \_\_\_\_\_ DATE TERMINATED \_\_\_\_\_

COMMENTS \_\_\_\_\_

## *APPLICATION PACKET AND HOME VISIT*

An application packet should be sent to potential volunteers who have passed the phone screen and indicate a desire to volunteer. An interview date should be scheduled approximately one week following the phone interview to allow the potential volunteer time to review the packet materials and formulate questions. The packet should include the following materials .

- \*\*\* An application form
- \*\*\* Statement of Confidentiality form
- \*\*\* Volunteer / PAL agreement form
- \*\*\* Volunteer handbook
- \*\*\* Volunteer mileage record
- \*\*\* volunteer profile sheet
- \*\*\* Program brochure for adolescent
- \*\*\* Release form for driving record check
- \*\*\* Release form for background check
- \*\*\* Volunteer contract with agency
- \*\*\* Welcome letter

## *HOME VISIT*

The home visit affords the volunteer coordinator to meet with a perspective volunteer outside the office setting. If children are present the volunteer coordinator can observe parenting skills and parent child interactions. A one to two hour visit should be scheduled in order to cover the material in the packet and answer questions. The following questions can be used in a home visit interview.

- \*\*\* What attracted you to our program?
- \*\*\* What would you like to get out of your volunteer experience?
- \*\*\* How does your family feel about your volunteering?
- \*\*\* How do you see volunteering fitting into your schedule?
- \*\*\* Describe some of your previous volunteer experiences

---

## TRAINING

Training volunteers to be prepared for the tasks asked of them is essential to the success of the volunteer and the program. Prevention of child abuse and neglect is the primary goal of the program. Volunteers need to be trained in multiple areas in order to understand the scope of the problem and the clients with whom they will be working. Training can happen in several ways; one way is to offer pre-assignment training which gives the volunteer the basics to do her job, and the other is to supplement the initial training with continuing education opportunities, usually provided by guest speakers on specific topics. The use of tapes and videos can be utilized for volunteers who miss training opportunities. This is a less desirable method as it does not allow for interactive participation. The following guidelines are offered for developing volunteer training.

### *PREPLACEMENT TRAINING*

\*\*\* Determine site for training ( free, easily accessible comfortable)

\*\*\* Determine dates and times

\*\*\* Select topics

- \* Program orientation
- \* Adolescent development
- \* Child development
- \* Parenting issues
- \* Communication skills
- \* Effective teaming
- \* Perspectives on volunteering
- \* Children's Protective Service
- \* Community resources

\*\*\* Schedule speakers

**\*\*\* Plan details**

- \* send schedule and map to volunteers
- \* determine space needs and reserve room space
- \* determine audio-visual equipment needs
- \* determine supplies needed (paper, pens, nametags, etc.)
- \* determine food and beverage items needed
- \* invite staff members to participate
- \* prepare packets of information

**\*\*\* Design method of evaluating training**

**\*\*\* Send thankyou notes to speakers**

## ***INSERVICE TRAINING***

Volunteers will seek assistance from the volunteer coordinator as they get further into their match and are faced with complex issues of family dysfunction and adolescent behaviors. Volunteer needs will largely determine the topic areas. Inservice training can be scheduled to coincide with monthly / weekly meetings, or be scheduled at a separate time. Follow the guidelines for setting up pre-placement training. Inservice trainings can be joint with the pregnant or parenting adolescent if they are general information. The following suggestions for topics are based upon the P.A.L.S. PROJECT volunteer requests:

- \*\*\* Mental health speaker on coping with clients who live in impoverished and high risk environments.
- \*\*\* Specifics on understanding and interpreting adolescent behaviors
- \*\*\* Speaker on chemical dependency and co-dependent behaviors.
- \*\*\* Speaker on sexual assault and treatment / personal safety
- \*\*\* Speaker from Child Protective Services
- \*\*\* Training in typical/atypical child development
- \*\*\* Speaker on "relationships"
- \*\*\* Mental health worker to speak to the issue of measuring impact, how to identify small steps of progress, accept regression, set realistic expectations for change

---

## VOLUNTEER MANAGEMENT

### *SUPERVISION*

Supervising volunteers requires skills in leadership, communication, and problem solving. A systems approach to volunteer coordination will ultimately lead to an effective, quality program. Supervision begins at intake and ends with termination. Weekly contacts with volunteers should be scheduled for the purpose of sharing information, identifying concerns and issues in the match, providing consultation, and giving recognition. The utilization of checklists and forms will assist the volunteer coordinator in gathering all the information needed while processing the volunteer's application, and throughout the volunteer commitment. Documentation is needed for volunteer recognition, evaluation, and if necessary early termination. Forms are necessary to record volunteer time and activities, and to communicate between tiers. The following samples of forms can be adapted to meet individual program management needs:

*sample:* Volunteer Management Checklist

Item	Date
Intake form	
Application form	
TB test	
Statement of confidentiality	
Volunteer contract	
Agency registration form	
Titre test	
Proof of car insurance	
Driving record check	
Background check	
Reference checks	
Orientation and training	
Photo ID	



The monthly report form is filled out by the volunteer to summarize her activities for the month with her PAL, and to document the hours spent. The form has space for the volunteer to comment on observations for the month and to list concerns. This form is shared with the case manager.

*sample:* P.A.L.S. PROGRAM VOLUNTEER MONTHLY REPORT

Client Name \_\_\_\_\_ Casemanager \_\_\_\_\_  
Volunteer \_\_\_\_\_ Nurse \_\_\_\_\_

SUMMARY OF CONTACTS

DATE	TYPE	ACTIVITY	HOURS

CONCERNS/OBSERVATIONS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL HOURS FOR MONTH \_\_\_\_\_

## ***VOLUNTEER RECOGNITION***

Volunteers who are recognized for their efforts remain motivated and stay with the program longer. Recognition happens either formally, such as in certificates or gifts, or informally through conversations, gestures, job satisfaction. Monies should be allocated for recognition, and recognition on-going throughout the time of volunteer commitment. Recognition can also be in the form of helping volunteers do their job, ie, given their own personal pocket calendar to record times and dates of volunteering. The following examples are only a beginning of the kinds of things that can be done to recognize volunteers for their work:

### ***INFORMAL RECOGNITION***

- \*\*\*verbal statements that show praise and gratitude**
- \*\*\*physical gestures like a hug or touch on the arm**
- \*\*\*phone calls to touch base and see what can be done to help**
- \*\*\*inclusion in program meetings, decision making, planning**
- \*\*\*words of appreciation by other staff members**
- \*\*\*remembering birthday and other special days**

### ***FORMAL RECOGNITION***

- \*\*\*establishing a volunteer support group**
- \*\*\*calendars specific to volunteering**
- \*\*\*certificates**
- \*\*\*outstanding volunteer awards**
- \*\*\*birthday and holiday remembrances**
- \*\*\*special luncheons to honor volunteers**

## *VOLUNTEER TERMINATION*

Termination of volunteers in a match or from the program happens for a variety of reasons. Termination can be initiated by the Volunteer Coordinator, the client, or the volunteer. The following guidelines for termination are

- \*\*\* Termination by the volunteer coordinator is initiated when a volunteer does not adhere to the standards of the program. Every effort should be made to help a volunteer improve their level of performance before termination occurs. Documentation of performance standards is critical to staff for making termination decisions and helpful to the volunteer in understanding that decision. Alternative ideas for volunteering should be given to the volunteer. Clients who are exited from the program due to age, or change in parenting status affect volunteer termination. Some volunteers are not ready to bond with another client so soon, or may choose to exit with the client and continue the relationship outside the auspices of the agency.
- \*\*\* Termination by the client occurs when the match has not been successful in establishing a positive, supportive relationship. The client may feel the volunteer is judgemental or simply not meeting her needs. In matches where there are young children some clients have expressed feelings of sibling rivalry in vying for the attention of the volunteer. Clients also terminate matches because they are experiencing high levels of stress and see the volunteer as one more stressor. These clients usually have another support system. Clients also have a high degree of mobility and terminate due to moving from the area.
- \*\*\* Termination by the volunteer occurs at the end of the six months when they have completed their commitment. The majority of volunteers, however, usually stay beyond their six month commitment. Volunteers who terminate early may be in a match that is not compatible, may be feeling stress outside the match by family members, or may have decided on returning to school or the work force. Moving from the area may also be a factor in terminating.

## *STATISTICAL DATA*

The amount and types of data to be collected in a program is contingent upon the requirements set forth by the funding source, and the evaluation system. The following suggestions for types of data to be collected are:

- \*\*\* number of volunteers
- \*\*\* number of client referrals
- \*\*\* number of contact hours by volunteers
- \*\*\* number of contact hours by volunteer coordinator
- \*\*\* volunteer profile
- \*\*\* number of adolescents who are already in the CPS system as parents
- \*\*\* number of adolescents who were in the CPS system themselves
- \*\*\* number of chemically addicted/affected babies born to adolescents
- \*\*\* number of babies with medical or handicapping conditions born to adolescents
- \*\*\* number of pregnant or parenting adolescents who are functionally illiterate
- \*\*\* number of pregnant or parenting adolescents who are developmentally delayed
- \*\*\* extent of social support system

---

## SUPPORT GROUPS AND PARENTING CLASSES

### *SUPPORT GROUPS*

Support groups are an integral part of the child abuse and neglect prevention project. Support groups offer a break from social isolation, provide opportunities for pregnant and parenting adolescents to make new friends while gaining peer acceptance and support, and provide opportunities for learning as well as having fun. It is their forum for asking questions in an environment that is non-judgemental and appropriate to their level of understanding. Support groups can be formed for the following populations:

- \*\*\*Pregnant and parenting adolescents
- \*\*\*Fathers of babies (to include boyfriends helping to parent)
- \*\*\*Parents of pregnant and parenting adolescents (including grandparents who are parenting their grandchildren)
- \*\*\*Volunteers
- \*\*\*Volunteer Coordinators

### *FORMAT MODEL FOR SUPPORT GROUPS*

A model which functions for both client and volunteer is both time and cost effective. It eliminates motivational, transportation, and child care barriers. It maximizes use of guest speakers and encourages interaction between client and volunteer. The following agenda is a sample format:

*sample:* SUPPORT GROUP MEETING AGENDA (2 hours)

- 6:30 -7:15 Joint meeting to get acquainted and share information  
Babies are included
- 7:15-7:30 Snack break
- 7:30-8:30 Clients go to separate room to meet with guest facilitator  
(babies can go to child care room if moms want a break  
or child is toddler and needs more play space)  
Volunteer coordinator will facilitate this session  
periodically.

Volunteers meet separately with volunteer coordinator or guest facilitator. Volunteers need a lot of support for working with the clients, especially when there is a vast difference in lifestyles or living conditions. The support group environment allows for peer support and problem solving, and the chance to see they are not alone in their frustrations. Support groups help to form realistic expectations for change. Support group meetings focus on mental health issues for the volunteers

*sample:* SUPPORT GROUP MEETING AGENDA (2 HOURS, TOGETHER)

- 6:30-7:15 Get acquainted, share information, plan future meetings
- 7:15-7:30 Snack break
- 7:30-8:30 Craft or project time together  
(babies are in childcare)

## *PARENTING CLASSES*

Parenting classes that are designed specifically for the pregnant and parenting adolescent have the greater chance of success. There are many variables to consider when setting up parenting classes. The following guidelines are criteria to be considered before starting classes.

- \*\*\* Will the classes be located in an identified area of need?
- \*\*\* Who will recruit for enrollment in the classes?
- \*\*\* What are the qualifications of the instructor?
- \*\*\* What curriculum will be used? Is it specific to adolescent parents?
- \*\*\* What is the literacy level of the curriculum? Does it match the literacy level of the attendees?
- \*\*\* Where will the classes be located? Is transportation available?  
Is the building and room user friendly?  
Is a USER AGREEMENT available?
- \*\*\* Is child care available?
- \*\*\* What will the format for presenting the material? Are hands on experiences integrated with lecture?
- \*\*\* Is the class culturally sensitive?
- \*\*\* Is there a cost to the class? Are there materials to purchase?
- \*\*\* Is there a system in place for those who cannot pay a class fee?
- \*\*\* How will information about the class be distributed?
- \*\*\* Are there support persons available to help with the class?
- \*\*\* Is the class available for court ordered clients? Is a certificate of attendance available?

# APPENDIX A

---

PROTOCOLS FOR TIER ONE