

PA-TSA Volunteer Policies and Agreement

The PA Tourette Syndrome Alliance is a non-profit organization that promotes awareness and acceptance, provides education, and assists families, schools and communities while advocating for individuals with TS.

STANDARDS OF PROFESSIONAL CONDUCT

PA-TSA is guided by a board of directors, managed by a professional staff, and assisted by volunteers, all of which pledge to follow the following standards of professional conduct:

- We shall respect the uniqueness of each client, relative to his/her culture, customs and beliefs and shall not discriminate against any person in the provision of services.
- We shall recognize the potential vulnerability of clients and their families and treat them accordingly.
- We shall not take advantage of a professional relationship with a client for our own personal gain.
- We shall respect the professional status and obligations of the agencies with which we interact and we shall promote cooperation among them.
- We shall strive to provide communities with programs and services that are culturally sensitive and of the highest quality.
- We shall strive to recognize the boundaries of our competence and resources and we shall not offer services that we are not qualified to provide.
- We shall treat all employees fairly and respectfully.
- Recognizing that confidentiality is a hallmark of professionalism, we shall ensure that no information about our clients be inappropriately disclosed.

STATEMENT ON CONFIDENTIALITY

It is the policy of the Pennsylvania Tourette Syndrome Alliance (PA-TSA) to respect the privacy of all individuals, members and groups that receive its services or are associated with its activities. To implement this policy, the Pennsylvania Tourette Syndrome Alliance has adopted the following practices:

Before releasing any information (including, but not limited to, names, addresses, telephone numbers and photographs) about any individual, member or group that receives its services or associated with its activities, the PA-TSA will obtain written permission from individuals 18 years or older. Written permission to release information about children under the age of 18 will be obtained from custodial parents or guardians.

This policy applies to, but is not limited to the following:

- The display of information and photographs in exhibits, or publication of information and photographs in PA-TSA publications
- The publication of names or photographs of donors or other benefactors of PA-TSA
- The providing of information to other organizations, including financial sponsors, who might seek information
- Confidentiality of mailing lists and other rosters of members, individuals or groups that receive services or participate in activities of PA-TSA

It is the policy of the Tourette Syndrome Alliance not to release its mailing lists or other rosters of members, individuals or groups that receive services or participate in activities of PA-TSA to any other organization for any purpose.

NONDISCRIMINATION POLICY

SERVICES

The Pennsylvania Tourette Syndrome Alliance provides information, referral services and advocacy to its clients and potential clients, the general public and fellow professionals without regard to race, creed, ethnic origin, disability, age or gender. Advocacy is provided for identified diagnosed clients without regard to mental or physical challenges in addition to the above listings.

EMPLOYMENT

The Pennsylvania Tourette Syndrome Alliance is committed to the principles of equal opportunity and nondiscrimination. Applicants for employment will be evaluated and selected without regard to race, gender, religion, creed, ethnic origin, political persuasion, gender preference, marital status, disability, age or union membership.

BOARD OF DIRECTORS

The same safeguards are used to select candidates for election to the Pennsylvania Tourette Syndrome Alliance Board of Directors.

DISSEMINATION

This policy is disseminated to all volunteers on a yearly basis, to all potential employees upon application for employment and to all potential Board candidates upon application.

This policy has been in effect since October 1, 1985. This policy was reaffirmed on September 23, 2004.

CONFLICT OF INTEREST POLICY

The Pennsylvania Tourette Syndrome Alliance, Inc. will not knowingly hire, solicit or affiliate with any person, business or association which appears to be in conflict with the goals and objectives of this Alliance or its funding sources. No person will be allowed to serve on the Board of Directors who is paid for direct professional patient services by the agency. No employee may be an immediate relative of a member of the Board of Directors of the agency. Furthermore, the agency will not purchase services from any business, which discriminates against people with disabilities.

REFERRAL OF CLIENTS TO OTHER PROFESSIONALS

Clients or parents will contact the office seeking information on physicians, lawyers or others who provide professional services. It is the policy of the agency *not* to make individual recommendations for a certain physician, lawyer or other entity unless that is the only name available or known of in that client's area.

DRESS/ATTIRE

Employees and volunteers are to practice good personal hygiene and to dress in business or business casual attire whenever in the office or in a public environment when representing the organization. Perfumes and colognes are to be used sparingly and should not be offensive to others. Jewelry should be kept simple and professional and tattoos are to be concealed as much as possible.

IN-SERVICES/SPEAKING ENGAGEMENTS

Consultants and Speakers Bureau volunteers present in-services to schools, classmates, institutes of higher education, civic groups and etc. They also may be asked to be a speaker for a conference or at a support group meeting. The consultant's appearance and dress for these presentations should be clean, well fitting, neat and professional. Shoes should be also professional (no sneakers or flip-flops) and not scuffed or dirty. The person giving the in-service should arrive at least 30 minutes ahead of time to set up and test the equipment and to distribute information.

VOLUNTEER CONSULTANTS

Volunteers Consultants are non-legal advocates who can act as a resource on Tourette Syndrome, but in no way "represent" any party within IEP/504 or other school meetings. The training supplied to Volunteer Consultants helps them gain information that will help parents, school staff and most importantly an identified child with Tourette Syndrome.

ACCEPTANCE OF GIFTS FROM CLIENTS

Sometimes clients will wish to give gifts to the staff/volunteer or to buy them a meal particularly after a school meeting. The staff/volunteer may accept a meal as a contribution toward travel expenses and may accept very small gifts such as a scented candle, note cards or perfume; namely items that are less than \$15.00. Personal gifts should be discouraged and a donation to the organization should be encouraged in its place. No staff member or volunteer is to take money from a client for services the staff members have provided while working for PA-TSA or to accept costly items. If a client makes a check out in the name of a staff member/volunteer, the check is to be refused and/or reissued in the agency's name or the client is to be informed it will be signed over to the agency for deposit. If the client still insists to give money, a gift or a check as a personal gift, the staff member/volunteer is to express appreciation and **REFUSE** to accept it.

REPORTING

Volunteers are expected to provide PA-TSA with the following items in order to report their volunteer activity.

1. Report any scheduled presentations and/or school meetings to staff of the PA-TSA as soon as the speaking engagement/meeting is scheduled so it can be added to PA-TSA staff calendar.
2. Volunteers will use PA-TSA evaluations at the end of each presentation and mail the completed evaluations to PA-TSA within 5 business days of the presentation.
3. Volunteers will keep track of their hours, including travel time and report weekly(or monthly) to our volunteer coordinator.

NON-DISCLOSURE

PA-TSA has a proprietary interest in its business and financial plans and systems, methods of operation and other secret and confidential information, knowledge and data ("Proprietary Information") which includes, but is not limited to, annual and strategic business plans; financial plans, reports and systems including, profit and loss statements and other information regarding the financial condition of PA-TSA, including information regarding the capabilities and experience of PA-TSA employees; information regarding PA-TSA's clients, customers, and suppliers and prospective clients, customers and suppliers; and technical data and know-how,

including policy and procedure manuals, computer programs, accounting forms and procedures and human resource policies and procedures, all of which information is not publicly disclosed and is considered by PA-TSA to be confidential trade secrets.

PA-TSA shall, in the course of employment, provide and confide to Employees and volunteers, PA-TSA's Proprietary Information developed at great expense by PA-TSA and which Employee/volunteer recognizes to be unique assets of PA-TSA's business. Employee/volunteer shall not, during or after the term of employment or volunteering, directly or indirectly, in any manner utilize or disclose to any person, firm, corporation, association or other entity, except where required by law, any such Proprietary Information which is not generally known to the public or recognized as standard practice in the industries in which PA-TSA is engaged.

PERIODIC REVISIONS

PA-TSA reserves the right to revise these policies periodically and will provide any changes to volunteers within 1 week of approval. Volunteer will then be able to sign new updated agreement in order to continue service to PA-TSA.

CONFIDENTIALITY AGREEMENT

It is important that employees and volunteers of the PA Tourette Syndrome Alliance as well as those employees of other businesses that provide services to the PA Tourette Syndrome Alliance understand and maintain the need for client and employee confidentiality.

The person signing this agreement agrees to follow these policies regarding confidential information:

1. Any discussion that takes place among employees or volunteers about clients, their families, schools, school personnel, treatment providers and other is considered confidential and is not to be expressed outside of the work environment or made public.
2. Any client information found in office files, the computer, correspondence or in other written form that is seen or read is not to be expressed outside the work environment or made public.
3. Any conversations that are overheard about clients, their families, schools, school personnel and treatment providers are considered confidential and are not to be expressed outside of the work environment or made public.
4. Contact information or personal information regarding the employees or volunteers of the PA Tourette Syndrome Alliance is not to be revealed unless the employee/volunteer gives their permission.
5. Client information will not be sold, distributed or otherwise made public. In the event that research is being done and clients need to be contacted, PA-TSA will contact the clients and give them the option to contact the researcher.

CLEARANCES

The PA Tourette Syndrome Alliance requires staff, Board Members and volunteers providing services to schools or children to provide the organization with a PA State Police Criminal Background Clearance and PA Childline Child Abuse Clearance within 3 months of beginning in any capacity with the organization. In addition to those clearances listed above, if the volunteer has not been a resident of PA for at least the last 10 consecutive years, an FBI criminal check is also required. If needed, the FBI clearance should be initiated within 30 days. If preferred and upon signed permission from the volunteer, PA-TSA will run the Criminal Background clearances allowed by law, on behalf of the volunteer. Prior to receipt of clearances, each volunteer or staff member will be supervised at all times when having personal contact with students or families. Any volunteer, staff member or Board member who does not produce the proper clearances within 3 months, will be terminated or relieved of their responsibilities until the proper clearances are produced.

By signing this form you swear/affirm that you have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law. You are stating that you have not been convicted of any of the following crimes under Title 18 of the Pennsylvania consolidated statutes or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

Chapter 25 (relating to criminal homicide)
Section 2702 (relating to aggravated assault)
Section 2709 (relating to stalking)
Section 2901 (relating to kidnapping)
Section 2902 (relating to unlawful restraint)
Section 3121 (relating to rape)
Section 3122.1 (relating to statutory sexual assault)
Section 3123 (relating to involuntary deviate sexual intercourse)
Section 3124.1 (relating to sexual assault)
Section 3125 (relating to aggravated indecent assault)
Section 3126 (relating to indecent assault)
Section 3127 (relating to indecent exposure)
Section 4302 (relating to incest)
Section 4303 (relating to concealing death of child)
Section 4304 (relating to endangering welfare of children)
Section 4305 (relating to dealing in infant children)
Section 5902(b) (relating to prostitution and related offenses)
Section 5903(c) (d) (relating to obscene and other sexual material and performances)
Section 6301 (relating to corruption of minors)
Section 6312 (relating to sexual abuse of children),
or an equivalent crime under Federal law or the law of another state.

You have not been convicted of a felony offense under Act 64-1972 (relating to the controlled substance, drug device and cosmetic act) committed within the past five years.

You may not be approved for service if you are named as a perpetrator of a founded report of child abuse within the past five (5) years or have been convicted of any of the crimes listed above or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

If you are arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or are named as perpetrator in a founded or indicated report, you must provide the administrator or designee with written notice not later than 72 hours after the arrest, conviction or notification that you have been listed as a perpetrator in the Statewide database.

If PA-TSA staff has a reasonable belief that you were arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or were named as perpetrator in a founded or indicated report, or has provided notice as required under this section, PA-TSA shall immediately require you to submit current clearances obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of clearances shall be borne by PA-TSA.

If you willfully fail to disclose information required above, you have committed a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position. PA-TSA is required to maintain a copy of your clearances. According to State Law, Clearances must be renewed every 3 years in order to continue to serve in a volunteer capacity.

PHYSICAL, MENTAL & SEXUAL ABUSE PREVENTION POLICY

The PA Tourette Syndrome Alliance does not permit actual or threatened acts of physical abuse, mental abuse, sexual abuse, sexual molestation or sexual misconduct (“prohibited conduct”) to occur in the workplace or at any activity sponsored by or related to it. In order to make this “zero-tolerance” policy clear to all employees, volunteers and staff members, we have adopted mandatory procedures that employees, volunteers, board members, individuals and victims must follow when they reasonably suspect, learn of or witness prohibited conduct.

Abuse or molestation means each, every, and all actual, threatened or alleged acts of physical or mental abuse, sexual abuse, sexual molestation or sexual misconduct performed by one person or by two or more persons acting together.

Reporting Procedure

All staff members who learn of or have a reasonable suspicion of prohibited conduct must immediately report it to the Administrator/or the highest ranking staff member of the PA-TSA. If the prohibited conduct was alleged to involve the Administrator/or the highest ranking staff member of the PA-TSA, the report must be brought to the attention of the Board President. If the victim is an adult, abuse or neglect will be reported by this designee to the local or state police and/or Adult Protective Services (APS) Agency. If a child is the victim of abuse or neglect the designee will report it to the local or state police and/or the Pennsylvania Child Abuse registry. Appropriate family members of the victim must be notified immediately of suspected child abuse or neglect.

Investigation & Follow Up

We take allegations of prohibited conduct seriously. Once the allegation is reported, we will promptly, thoroughly and impartially initiate and investigation to determine whether there is a reasonable basis to believe that the prohibited conduct has occurred and that it was committed by the target(s) of the investigation. The investigation may be undertaken by an internal team comprised of fellow employees or we may hire and independent third party. We will cooperate fully with any investigation conducted by law enforcement or regulatory agencies and we may refer the complaint and the result of our investigation to those agencies. We reserve the right to place the target(s) of the investigation on an involuntary leave of absence or reassign that person to responsibilities that do not involve personal contact with individuals or students. To the fullest extent possible, but consistent with our legal obligation to report suspected prohibited conduct to appropriate authorities, we will endeavor to keep the identity(ies) of the target(s) and alleged victim(s) confidential.

If the investigation substantiates the allegation, our policy provides for disciplinary penalties, including but not limited to termination of the target’s relationship with our organization.

Retaliation Prohibited

We prohibit retaliation against anyone, including an employee, volunteer, board member, student or individual, who in good faith reports prohibited conduct. Retaliation against a participant in the investigation is also prohibited.

Anyone who retaliates against someone who has made a good faith allegation of prohibited conduct or intentionally provides false information to that effect will be subject to discipline, up to and including termination.

ACKNOWLEDGMENT of RECEIPT of CLEARANCE and PHYSICAL, MENTAL, & SEXUAL ABUSE Policies

I, _____, acknowledge that I have received and read the, Rules of Confidentiality, Standards of Professional Conduct, Non-Disclosure, Physical, Clearance, Mental & Sexual Abuse policy and other policies set out in the preceding 6 pages immediately preceding my signature below. I understand that I am bound to follow the policy and understand the consequences in the event that I fail to do so. I also ensure that I have proof of current valid Motor Vehicle Registration, personal auto insurance and am covered for 100/300 Automobile accident liability.

Signature _____ Date: _____

Printed Name _____ Last 4 of SSN: _____

I serve PA-TSA in the following positions: (check all that apply)

- | | | | |
|--------------------------|----------------------|--------------------------|------------------------------|
| <input type="checkbox"/> | Board of Directors | <input type="checkbox"/> | PA-TSA Staff |
| <input type="checkbox"/> | Speakers Bureau | <input type="checkbox"/> | Committee Member |
| <input type="checkbox"/> | Volunteer Consultant | <input type="checkbox"/> | Support Group Leader |
| <input type="checkbox"/> | Camp Volunteer | <input type="checkbox"/> | Other (please specify) _____ |

This policy must be reviewed and signed annually. Employee or volunteer please sign & date below:

	Signature	Date
1.		
2.		
3.		
4.		
5.		
6.		
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10.		