



## Kids Vision for Life St. Louis Policies & Confidentiality Agreement

*The mission of Kids Vision for Life St. Louis is to eliminate poor vision and its life long consequences.*

### Policy Objectives

In order to complete our mission in the community, volunteers must agree to the terms and conditions of our program. Prospective volunteers are required to sign a confidentiality and policy agreement before volunteering with our program. In addition to signing the policies and procedures document, recurring volunteers are required to complete a background check through **Verified Volunteers**.

Kids Vision for Life St. Louis is committed to making sure our work environment exceeds the professionalism that all St. Louis schools require. Volunteers will **NOT** conduct vision screenings on Kids Vision for Life's property, but will serve on the school premises of his or her choosing. This means that our volunteers must acknowledge and abide by the policies set by the school board they serve.

### Background Screening Procedures

To ensure optimal safety of the children, families, and school staff, it is Kids Vision for Life's policy to conduct reasonable background investigations. Volunteers who wish to serve our program more than once will be asked to conduct an online background check through Verified Volunteers free of charge. Kids Vision for Life **will not accept:**

- Anyone convicted of a violent crime, including but not limited to assault, abuse, and murder.
- Anyone convicted of a sexual offense of any kind including but not limited to child molestation, rape, sexual assault, sexual battery, prostitution, solicitation, and indecent exposure.
- Any serious substance abuse crimes
- Misdemeanor crime against a child or dependent adult or involving weapons or arson
- All other convictions will be determined on a case-by-case basis always considering the child's safety first.

### Professional Ethics:

All volunteers are expected to act responsibly when dealing with elementary students, middle school students, high school students, school nurses, and school officials. Kids Vision for Life St. Louis reserves the right to ask volunteers to leave immediately with the exception that no volunteer shall be terminated because of race, color, religion, sex, age, marital status, national origin, disability, veteran status or status with regard to public assistance.

### Personal Appearance:

Kids Vision for Life expects its volunteers to dress appropriately for an elementary school environment. We expect volunteers to dress modestly, with clothes that fit, and are clean. We highly encourage our volunteers to wear comfortable shoes, due to long periods of standing, climbing stairs, and walking. Jeans are acceptable. Clothing not considered appropriate includes t-shirts with inappropriate writing, shirts that expose the stomach or back, pajamas, and low cut shirts.

### Grievance and Disciplinary Procedures **3-Step process:**

1. **Report to the Kids Vision for Life supervisor on site.**
2. Contact Sarah Graham, the Volunteer Coordinator at 501-766-4315 or sarahg@crownvisioncenter.com.
3. Let the Kids Vision for Life management team handle all grievances. If school officials, students, school nurses are involved, report to Kids Vision for Life staff *first*.

### Smoking Policy

Kids Vision for Life St. Louis and St. Louis schools strictly prohibits all smoking and other uses of tobacco products and the use of smokeless or vapor cigarettes within all buildings and school property, which includes school parking lots. Do not bring tobacco/tobacco products on school property while volunteering with Kids Vision for Life St. Louis.

### Reporting Neglect or Abuse

Any school official or employee who knows or has reasonable cause to suspect that a child has been subjected to abuse or neglect, or who observes the child being subjected to abuse or neglect shall immediately report the facts to the Kids Vision



for Life staff. The Kids Vision for Life staff will be responsible for reporting the incident to the school principal and the child's immediate supervisor.

**Sexual Harassment**

Any sexual advancement or verbal conduct of sexual nature towards a student while volunteering is prohibited even if deemed "welcomed" by a child. Anyone who volunteers with Kid Vision for Life and who has participated in the harassment of a child or who has participated in the investigation of a complaint of sexual harassment will be banned from participation in any Kids Vision for Life event and subject to discipline to the fullest extent of the school District's authority. As a volunteer you are a visitor to school property and will be subject to the discipline put forth by the school which will include being ban from reentry on District property or attending school events.

**Patient Confidentiality**

Federal law protects the confidentiality of patients' medical, financial and personal information. Patient information is exchanged in verbal, written and electronic forms. HIPAA regulations require that we protect patient/client information from being seen, heard or read by anyone who is not authorized to do so. Only specified individuals are permitted to access patient and client records: the patient or his or her authorized representative, the individual's physician and the staff members who need the information. No medical, financial or personal information about a patient or client may be disclosed to anyone else without the individual's permission.

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**Policy Agreement**

In my desire to conduct vision screenings to students in St. Louis schools, I (print name) \_\_\_\_\_, have read and will abide by all procedures and policies put forth by Kids Vision for Life St. Louis. I release Kids Vision for Life St. Louis staff, school staff affiliated, and other volunteers from all liability, or harm that may arise when volunteering. I, (print name) \_\_\_\_\_, fully understand that I will not be on Kids Vision for Life property and must abide by all the rules set forth by the school I am serving with upmost professionalism.

**Confidentiality Agreement**

This confidentiality form serves as an agreement between (print name) \_\_\_\_\_ and Kids Vision for Life St. Louis, that all personal information on our students is considered personal and confidential material. Student information, specifically medical prescriptions, is not to be released or viewed under any circumstance, by anyone other than Kids Vision for Life St. Louis staff. I, (print name) \_\_\_\_\_, understand that all student information is considered confidential and should not be viewed, read, or heard by anyone unauthorized to do so. I also understand that I will not be able to continue volunteering with Kids Vision for Life if I disclose any student's medical information

**Media Release**

I grant Kids Vision for Life St. Louis permission to be photographed or filmed solely for the promotion of Kids Vision for Life St. Louis. (Initial) \_\_\_\_\_ (optional)

**I have read the above and agree to both the Confidentiality and Policy Agreement.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**If under 18, the following must be signed by a parent or legal guardian:** I hereby consent and agree, as a parent or legal guardian of (print name of minor volunteer) \_\_\_\_\_, to all the terms and provisions stated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Relationship to minor: \_\_\_\_\_