

NWCASA VOLUNTEER TRAINING

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The slide features a white background with decorative geometric elements. In the top right corner, there are two overlapping triangles: a larger olive green one and a smaller, lighter green one. In the bottom right corner, there are two overlapping triangles: a larger light pink one and a smaller, darker pink one. A solid dark blue circle is positioned on the light pink triangle in the bottom right.

AGENDA

Welcome, Greeting, and Introductions

In-Person Advocacy

Hotline Paperwork Review

Hotline Trends

Advocacy Check-Ins

Volunteer Program

WELCOME, GREETINGS & INTRODUCTIONS

We completed our 40-hour training back in January, we are welcoming Roslyn to Arlington Heights and Lia to McHenry!



**IN-PERSON
ADVOCACY**

MEDICAL ADVOCACY PROTOCOL

- "Hotline Specifics" handout
- Hospital Binders
- PPE
- Hospital Packets
- Hotline Schedule

MEDICAL ADVOCACY PROTOCOL

HOTLINE SPECIFICS HANDOUT

- I have created an outline with scripts for our hotline
 - What to expect when the hotline calls you
 - What to do with the information the hotline gives you
 - How to ask for required fields on paperwork
 - Reminders
- **Important**
 - Make outgoing hotline/hospital calls with *67 to block your number
 - Make sure to ask nurse to speak with patients at hospital
 - Make sure to complete intake and get consent forms signed!

HOSPITAL BINDER

- Advocacy team created a binder that we will be giving to our hospitals. This binder gives the important information about trauma, our services, and the hospital visit for survivors.
- Here are some topics in the binder
 - Bias VS Implicit Bias: definition and examples
 - How to describe the role of an advocate
 - The process of what advocates will do and ask for when calling
 - Do's and Don'ts' of evidence collection kit and SA visit
 - Evidence collection and report options
 - Neurobiology of trauma
 - SASETA
 - Victim Blaming 101

MEDICAL ADVOCACY PROTOCOL

HOSPITAL PACKETS

- McHenry County has beautiful binded notebooks that are given to survivors (these are given by hospitals)- Cook County is working on updating ours
- For Cook County, please continue to pick up hospital packets at AH office
- Updates
 - SASETA: voucher went from 90 days to 180 days
 - Evidence Collection Kit: Combing is no longer needed, it will not be provided in newer kits. If you see a nurse throwing out combs, it is okay!
 - Evidence Collection Kit: only 100% water-based lubricant can be used. Some doctors refer to it as "surgical lubricant" but always be sure to double check!

OTHER

- We still have a bunch of PPE! Please feel free to stop by the AH office to pick up masks, gloves, hand sanitizers
- Hotline Schedule will still be sent out via google drive, continue to let me know if you can pick up available shifts
- We are very low on clothing bundles, we are trying to get clothing drive's started, once we have bundles, I will let y'all know!
- Please be sure to get the nurse's you are working with information! First and Last name, credentials (SANE, non-SANE)



**HOTLINE
PAPERWORK
REVIEW**

HOTLINE PAPERWORK REMINDERS

- Collecting paperwork is very important, we submit statistics every 15th and last day of the month to our funders
 - Intake paperwork is due within 24 hours
 - Hotline paperwork is due within 72 hours
 - Please view the ICASA Recordkeeping video, 27:18-51:13 in order to know how to properly fill out paperwork

HOTLINE PAPERWORK: INTAKE

- Refer to Hotline Outline handout
- The areas Highlighted in **YELLOW**, **PURPLE**, and **TEAL** are **ABSOLUTELY** needed when completing an intake.
- Please make sure to have the following
 - Name
 - **Address** (if survivor's decline, just a city and zip will work)
 - Use **township search** to find the **township** of an address
 - **Phone number** and to check if we are able to leave a message(will allow us to complete a follow up call)
 - All areas with an ***asterick*** are **needed** by InfoNet database, if we do not have these, we can not input a client
 - InfoNet is a database ICASA uses to gather all data to create statistics and manage funding
 - You **must** use an option from the **InfoNet reference list**, if you do not put the exact options, we cannot input a client

HOTLINE PAPERWORK: INTAKE

- **Medical Response** section
 - Be sure to report if the survivor was treated by a SANE or not, please write the nurse's first and last name next to that area on the paperwork
- **Criminal Justice Response** section
 - If they did not report to the police, you do not have to mark any sections below
 - If they did report to the police
 - Unless the officer says they are a detective, you will check yes for patrol interview
 - Typically you will not answer any other response below the interview sections
- Important Reminders
 - Sign Intakes
 - Sign Consent Forms
 - Our intake's are used between medical advocacy, legal advocacy and counseling, which is why it is important to look at the outline to know what is needed

HOTLINE PAPERWORK: HOTLINE FORMS

CRISIS INTERVENTION

- Used when client's call in crisis, or if hospital patient declines services and/or intake
- Try to gather all demographical information
 - Name and Address is most important
- **InfoNet** fields are required
 - Referred from (typically Center Hotline)
 - Referred to (typically NWCASA)
- Summary of Contact
 - Must be 200 letters
 - ICASA wants this to be as broad as possible to protect confidentiality of clients, please view the training [here](#).

INFORMATION & REFERRAL

- Used when schools, police departments, social workers, significant other's call looking for information on our agency and/or resources
- Try to gather all demographical information
 - Name and Address is most important
- **InfoNet** fields are required
 - Referred from (select from list and write Agency)
 - Referred to (typically NWCASA)
- Summary of Contact
 - Must be 200 letters
 - ICASA wants this to be as broad as possible to protect confidentiality of clients, please view the training [here](#).

HOTLINE PAPERWORK UPDATES

- Summary of contact: needs to be vague, no identifying information, and 200 letters. Examples:
 - Survivor called hotline need emotional support, advocate validated survivors feelings and provided support.
 - Caller called seeking housing resources, advocate provided proper referrals.
 - Survivor called hotline seeking help for flashbacks and triggers. Advocate provided psychoeducation on sexual violence and grounding techniques.

HOTLINE PAPERWORK: NEW DATABASE

- Our agency is transitioning to electronic records with EmpowerDB
- A link will be provided on the volunteer portal that you will have to use to submit forms electronically.
 - I suggest you still use paper forms unless you have the database open while on a call
- Summary of Contact
 - Because ICASA only allows 200 letters and a specific format, please type that up in the box. If you want to add more information, please feel free to call me or send me an email with more details.
- The link is not yet complete, I will send it once we have it up and running, but please get in the habit of completing forms and submitting within the required timeframe.
- I will post a tutorial video on our volunteer portal

ADVOCACY CHECK-IN

- Calls that went well?
 - LG has a child specialist used in PEDS cases. SOMETIMES you may get paired with a woman (forgot her name.. Will keep you updated) who used to work with CAC, so she is very versed on the kit and they may not need us.
- Calls that went poorly?
 - Immigration: the hospital treated the survivor very poorly, survivor did not speak any English
- Debrief
 - Calls including children with disabilities
 - Multiple calls at a time (we are writing a protocol for this, remember to use your backup)
 - Housing calls (unfortunately, we can only provide referrals and inform survivors they have to call on themselves)

ADVOCACY CHECK-IN

- View Advocacy Quick Reference Guide: this helps with the quick go-tos on the hotline
- Volunteer Portal: you can now access this via our new website! Hover over "Login" and select "Volunteer Portal"
 - Username: first initial last name (**kzimmerman**)
 - Password: [center]volunteer! (**carevolunteer!** or **nwcasavolunteer!**)

ADVOCACY CHECK-IN: HOTLINE TRENDS

- AH Frequent Callers
 - Kristin: is limited to 30 min calls related to sexual violence, we encourage to allow her to speak for 15 mins, and we provide intervention for 15 mins. Grounding techniques, coping skills work for her
 - Tina: does not yet have a limit but is calling frequently for short periods. She does not like to be asked "clinical questions" but wants a listening ear. Please remind her this is a crisis intervention line related to sexual violence and provide general hotline referrals
 - Alejandra: was a frequent caller a few months back, but has recently started calling again. She is very emotional in regards to her trauma and how she has been treated by the community



**VOLUNTEER
PROGRAM**

VOLUNTEER PROGRAM

- If you haven't already, please view the volunteer handbook and sign the volunteer agreements
 - Please note: you are still required to shadow an advocate in hospital, and I will shadow you on a call. This is only for self-evaluation and for me to provide feedback. This will allow you to decide where you feel most comfortable in the new program
- ICASA has recently received notice of VOCA funding cuts by 47%, we do not know what this means for our agency just yet but we are planning:
 - Combined hotline: please view next slide
 - We do not know what this means for contractual volunteers, right now funding is guaranteed until July 1. Please remember contractual shifts are only available for overnight shifts, and backup coverage

COMBINED HOTLINE

- What this means:
 - Crisis and hospital calls from both counties will be filtered through one call center
 - Backup will be required to go to both counties
- Ideas/Suggestions?
 - Having two volunteers cover a shift (one from each county)
 - Can it be optional to select which calls you'd like to receive? (hotline vs hospital), create a list with this information
 - Do volunteers have to cover both counties?
- This is a new idea, that has not yet been 100% tested..
Please come with open feedback so I can report to staff!

My goal for this volunteer program is for everyone to feel a part of the agency. I have created different levels based on what you are specifically interested in, or if you are passionate about our mission but do not have the availability to dedicate to the hotline.

Please remember this is a newer position for me, and I am learning as I go, especially with what is required from ICASA. I am always open to all and any feedback as I want volunteers to feel included and supported in the best way I can provide!

Thank you all for being patient with me as we go through these changes and thank you to the newer volunteers for being my first run on this new program!

Please expect a follow-up email with video tutorials on our new platforms.

LINKS TO HANDOUTS

**YOU ARE ALL VERY
APPRECIATED,
THANK YOU!**

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