

TRAINING GUIDE ON
VOLUNTEERS
FOR THE
RECREATION STAFF IN STATE HOSPITALS OF MINNESOTA

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RECREATION TRAINING PROJECT

DIVISION OF PUBLIC INSTITUTIONS, ST. PAUL, MINNESOTA

OBJECTIVES

1. To provide a guide for the hospital Recreation Worker in relation to the use of volunteers in the state hospitals of Minnesota.
2. To indicate techniques in the selection, assignment, supervision and training of volunteers for service in the state mental hospitals of Minnesota.
3. To "bring about a realization of the contribution which properly utilized volunteers can provide in the Hospital Recreation Program.

Leadership has been called "the one indispensable skill" in recreation. Leadership is the keynote in the structure of recreation service. In its broad sense it includes the Administrator, the Supervisor, the "on-the-spot" leader and others affiliated with the service who consciously exert an influence on the service. Leadership in hospital Recreation is obtained from two sources:

1. The Professional Staff
2. Volunteer Services

The deepening humanitarian interest of the people of the state of Minnesota in the mentally ill hospitalized in state institutions, spear-headed by the Mental Health Bill of 1949 and the projection of its program through newspaper and radio publicity as well as public meetings, institutes and talks has sharpened the realization of the public as to the needs of the mentally ill in the state hospitals of Minnesota and the place of the community in the fulfillment of those needs. The resultant surge of effort and offers of service on the part of volunteer groups is not only commendable; it is challenging.

For—unless we who are in state hospitals as recreation workers are equipped to use the services of these groups and individuals in the community who may or may not be trained for recreation leadership but who have indicated a decided interest to serve, we have not met the challenge they have thrown us.

In addition to those who have already been stimulated to offer service, there are many who through encouragement and interpretation of purpose and need could be absorbed into the recreation programs for the mentally ill with great benefit to the patients. Every community contains individuals who might be drawn into this

work. Greater resourcefulness in attracting them and more effective organization for utilizing their services are necessary. Since recruiting, training and guidance of volunteers calls for initiative, tact, ability and patience, the extent to which a recreation program enlists volunteer service is an indication of the calibre of its leadership,

Volunteers can, and should be an extension of service. It is imperative that recreation workers realize that volunteers are supplementing the services of trained workers, not supplanting or replacing them. The impulses of public-spirited and generous-hearted volunteers, even though sometimes complicated by many other motives and interests are the prime reason why it is possible to bring the varied, "community-minded and colored" recreation program to the patients. Yet, the volunteers are not in themselves able to bring about the kind of well-organized, valuable service that you-or your administrators-want; service that fills the real needs, is intelligently directed, efficient, enthusiastic,, dependable and mutually satisfying. Such qualitative-and eventually quantitative-service depends upon real effort and planning within the hospitals. Courtesy, tact, consideration and understanding are necessary-and possible when there is careful planning and true realization of value and need.

The relationship and the responsibility are reciprocal. The volunteer has obligations; the Hospital Recreation Worker has obligations. The volunteer expects direction, guidance and recognition and the recreation leader should be equipped to give it. The volunteer expects, usually, to take out as well as put in. He will evaluate the time and effort expended. He comes to the hospital with willingness and sincerity as his armor. He is depended upon for the fulfillment of certain goals and objections by the hospital staff. It is an interdependent relationship which requires clearly defined purpose, function and responsibility.

The suggestions which are given below are offered as a stimulus to thinking and effective practice rather than as a pattern to be scrupulously followed.

A. The primary duties of the hospital staff members in relation to volunteers are:

- I. An analysis of the needs of the particular hospital in relation to volunteer service in hospital recreation.
- II. A plan for the recruitment, screening and selection of volunteer personnel to fill the needs.
- III. A clear cut job description for the volunteer.
- IV. An orientation program for volunteers.
- V. A plan for the supervision and in-service training of volunteers.

B. The primary obligations of the volunteer group are:

- I, A method of careful selection and screening.
- II. Preliminary training and discussion regarding aims and purpose of the proposed volunteer service program.
- III. A plan for the guidance and direction of volunteers in relation to schedules, performance, etc.
- IV. A plan for maintaining standards of volunteer service.

(The above pertain to the group, the individual within the group and point four in particular applies to the individual who serves but who is not a member of a group.)

A detailed consideration of above A and B factors follows:

A. Responsibilities of Hospital Recreation Staff

I. Analysis of need

a. What is the need of the hospital in relation to volunteers?

1. Is there a need for groups of volunteers:

- (a) *JOT* dances - social, square, folk.
- (b) For parties, holiday, "once-a-month" birthday, special theme such as "Winter Wonderland", "Circus Carnival", "Harvest Moon Ball", "Strawberry Frolic" etc.;
- (c) For entertainment - shows, orchestras for dancing, choral groups, Christmas or other pageants and plays etc.
- (d) For "cottage" or ward or house parties - teas for geriatric services; for special parties on wards.
- (e) For special, hobby club groups - such as sewing, art work, patient orchestras or singing groups.

2. Is there a need for the individual who can serve the patient by:

- (a) Assisting with art or craft work. (Red Cross Arts and Skills workers or art teachers and pupils in the community.)
- (b) Leading patient orchestras or rhythm bands; teaching musical instruments; conducting patient singing groups; playing for community singing, playing for entertainment etc.
- (c) Assisting in teaching sewing or certain needlework to women - particularly on geriatric services (to form "Sewing Clubs").
- (d) Showing 16 mm movies - on wards or in the recreation hall.
- (e) Helping with patients newspaper.
- (f) Aiding in working with patients interested in dramatics.
- (g) Visiting patients with friendly, individual interest - encouraging the individual patient through conversation (ability to speak the foreign language native to the patient is very valuable), record listening, magazines, etc.
- (h) Showing and discussing holly collections-dolls, stamps, etc. (one volunteer collected pictures of dogs and was of great value when she encouraged patients to join her and become interested in her hobby.)

b. When are volunteers most needed?

- 1. What days of the week?
- 2. What time of day?
- 3. For how long a period?

c. What is the greatest number of volunteers the recreation staff and/or hospital facilities can handle? (Note: It is quite possible to limit the number of volunteers per visit to, for instance, no more than forty or fifty people at one time by asking your superintendent (or his delegated representative) to establish a policy which will protect you and the patients from too large, undisciplined, scattered groups. This is done with a sincere desire to provide quality rather than quantity and the superintendent should be approached on this basis.)

d. What is the hospital policy on the presentation of individual- or large gifts? (It is well to have these things clearly decided so that all volunteers are accorded the same treatment in this area. It is also wise to have in mind as a staff what the immediate needs of the patients are materially so

- c. What is the hospital policy on the serving of food by volunteers? (This policy should be firmly established and you will provide better service and save much time and trouble if the facilities etc. are exactly the same for all groups i. e., do not tell one group you will be able to provide cups and saucers and coffee and tell the next group it will be impossible, etc. These things should be firmly established and are quickly accepted and understood ~~by~~ volunteers. It is the lack of policy that is confusing. You may find that your Superintendent will only allow certain kinds of food, or will allow it only at certain hours or in certain places. Be sure to follow hospital rules regarding this. Flexibility, of course, is necessary but a flexible policy presupposes an established policy.)

II. A plan for the recruitment, screening and selection of volunteer personnel to fill the needs of the hospital.

a. Community resources might be:

1. Rural:

Grange, farm bureaus, farmers' cooperative, church, school, Extension Division of State University, County, State or park departments, village or town governing bodies, Red Cross Chapter branch, 4H Groups, fraternal, civic, veterans and neighborhood organizations.

2. Municipal:

Any of above available plus Council of Social Agencies, special interest groups such as magicians, Audubon Society, music and garden clubs, athletic associations, libraries, newspapers, commercial concerns, private agencies, etc.

b. Agencies with volunteer service plans such as:

1. Red Cross - with Arts and Skills Service, Canteen Service, Entertainment and Instruction Service, Motor Service, Production and Supply Service, Gray Lady Service, etc.

2. YMCA, YWCA, YMHA, YWHA, B'nai B'rith, Catholic Youth Organization, Veterans Organizations, Fraternal groups, Church, scout and school groups, etc.

c. Method of recruiting, screening and selecting volunteers:

1. Personal appeal to group through talk interpreting needs. Be definite, be informed, be convinced of particular needs and hopeful of fulfillment.
2. Written or advertised appeals for help are not usually too fruitful or valuable but written offers of help should be answered immediately, gratefully acknowledged, and should be given specific information regarding a time and place for a personal interview for planning program. (If personal interview before pro-

gram or visit is not possible do not be fearful of discouraging volunteer help if you cite rules and regulations of hospital as well as needs before the group: visits. The truly valuable volunteer, or volunteer group will accept hospital regulations and understand their purpose.)

d. Tools for the screening and selection of volunteer assistance:

1. Application blank. (See suggested form in Davies: Volunteers in State Mental Hospitals.)
2. Personal interview (Look for as many of Slavson's (Recreation and the total Personality) lists of characteristics for successful leadership as possible.)
3. Probation or trial period mutually understood by hospital staff and visiting group as volunteer work is not easy and not something done merely with arms, legs, and bodies. It takes spirit and understanding, friendly attitudes and usually, an unselfish love for the patients themselves.
4. The screening and selection process as set up by certain agencies themselves is very complete and can be relied upon for satisfactory results (Sod Cross, Unitarians, etc.)

III. A clear cut job description for the volunteer

a. All service should be defined as to:

1. Time
2. Place
3. Junction.:
4. Duties

b. All volunteer service should have from the hospital staff:

1. Personal greeting and assignment.
2. Personal escort, or direction when necessary.
3. Availability at all times of hospital recreation staff member.
4. Opportunity for evaluation, recognition or discussion of problems after each visit.
5. Arrangement for personal convenience of volunteer such as lavatory facilities, coatroom, protection, equipment previously requested by volunteers, transportation if necessary and possible etc.

IV. An orientation program

- a. The orientation of volunteers who serve regularly or irregularly should include information and instruction applicable to the individual hospital such as:
 1. Types, numbers, age, and sex of patients,
 2. Services of hospital-medical and non-medical.
 3. Physical layout,
 4. Recreation areas and equipment.
 5. Hospital regulations,
- b. Individuals or groups planning to serve the hospital on a regular basis should have as much information through an orientation program on the following subjects as is possible in the individual hospital:
 1. All of the items included under section a under point IV plus:
 2. Hospital organization:
 - (a) Administration
 - (b) Personnel
 - (c) Departments and their function.
 3. Medical information: (preferably given by a member of the medical staff - or a psychologist or social worker.)
 - (a.) Psychology of the sick
 - (b) Meaning of mental illness
 -
 - (c) Types of patients - reactions
 - (d) Approach to patients
 4. Relationships:
 - (a) The role of the volunteer with the patient
 - (b) The role of the volunteer and the recreation staff member,
 - (c) The role of the volunteer and the medical staff
 - (d) The role of the volunteer and other hospital personnel (psychiatric aides, occupational therapists, dietitians etc.)

5- Tour of the hospital

6. Introduction to as many members of professional staff at hospital as is possible.

7. Occasional opportunity to be present at special phases of the hospital program:

(a) Staff meetings

(b) Shock treatment, etc,

V. A plan for the training and supervision of volunteers,

a. One staff member should be assigned responsibility for volunteer program and services.

b. This person plans with Recreation Leader regarding the total program in relation to volunteer needs of hospital.

c. Schedule is established into which volunteer programs fit-- rather than day to day use or acceptance of all types and kinds of service at any time. i. e.:

1. Know your needs

2. Fit your offers of volunteer service to your needs.

d. All correspondence and volunteer contact should be made through the recreation staff member in charge of volunteers

e. All recreation staff should know hospital policy on volunteers in relation to the items discussed above such as time, number of volunteers, food and gifts etc.

f. Recreation staff member in charge of volunteers arranges for the visit, plans for the greeting of the group and its supervision while at the hospital and checks to see that a "thank-you" letter is written to the group.

(Note: It is fully realized that the recreation staff member in charge of volunteers will not always be on duty when volunteers serve. It is also realized that some recreation staff member is always on duty to greet and direct the groups. In order that the policy for visiting groups be established and uniform, the attached sample form -- or one similar to it -- is suggested for use with all volunteer groups. It is filled out in advance by the recreation worker in charge of volunteers and is left in the same place each day so that the recreation worker on duty merely checks to see what his or her duties are in relation to volunteers on this day. In the case of two or three recreation workers on duty at a particular time, and not the recreation worker assigned to volunteers, the recreation leader assigns one person to be in charge of administrative duties on that day which includes the supervision of volunteers. This can be done by putting an asterisk on the daily schedule. The reason the person on

duty and not the person in charge *of* volunteers is asked, to write the "Thank-you" letter to the group is that the person who sees the activity can write a more meaningful letter. In the case of a regular individual volunteer--the thank you is verbal, not written, usually. Groups can ~~be~~ evaluated ~~by~~ this form, but direction, if necessary, is given at the time it is necessary on the job; individual volunteers have conferences with the recreation worker assigned to volunteers, Staff discussions regarding the use and improvement of volunteers may help the recreation worker who has this important assignment.)

B. The obligations of the volunteer group remain:

- I, Careful selection and screening by their own members.
- II. Preliminary discussion within the group itself regarding the purpose and program and need for training and understanding.
- III. Assigned, strong leaders who will work out plans for
 - a. Time of visit
 - b. Transportation
 - c. Equipment needed
 - d. Program
 - e. Dependable attendance and performance
- IV. Maintenance of standards in regard to:
 - a. Dependability
 - D. Punctuality
 - c. Furnishing equipment needs
 - d. Strict adherence to hospital rules in relation to:
 - 1. Time
 - 2. Numbers of volunteers
 - 3. Area to ~~be~~ used
 - 4. Food permitted
 - 5. Gifts provided
 - 6. Supervision

The obligations of the individual (not a member of a group) are the same as number four above but must also be in understanding of the supervisory role of the recreation worker assigned to volunteers in relation

to the fulfillment of duties. Hopefully the individual volunteer is assigned on the "basis of interest, ability and personality.

- C. Tools which have been used by recreation staff in the supervision of individuals and groups of volunteers include:
- I. Log book - in which volunteer leader records activities of the day, any problems etc. and his, or groups' reaction to them.
 - II. Card file with volunteers name, or name of group, with address, telephone number and space for number of hours served on what dates.
 - III. Individual conferences
 - IV. Individual and group meetings with hospital recreation staff - or other members of hospital staff.
 - V. Bulletin boards for pertinent notices of interest to volunteers.
 - VI. Recognition ceremonies, teas, parties, etc.
 - VII. Maps of the hospital area.
 - VIII. Short written descriptions of hospital organization, personnel, service, function and channels of supervision in relation to volunteer service.
- D. Volunteer Councils - if it, is feasible to set up a volunteer council in your hospital with representatives of various community agencies the following suggestions may be helpful.
- I. Have group elect a co-ordinator or chairman and a vice-chairman.
 - II. Have regular meeting place, time and schedule as well as minutes which are mailed to absent members - as well as to those who did attend.
 - III. As the hospital representative be ready at each meeting to interpret needs and request specific personnel and material service. Make your story meaningful with examples and consideration of two types of needs, those fairly constant in nature and those of emergent or short duration.
 - IV. Try to fit resources to needs.

The material in this pamphlet is presented in recognition of the understanding and intelligent service which can be rendered by volunteers and in the firm belief that volunteers who prepare adequately for work to be done under supervision in full and gracious acceptance of hospital regulations will meet the exacting, high standards for volunteer service as set by the recreation staffs in the state hospitals of Minnesota.

VOLUNTEER SERVICE

STATE HOSPITAL

DATE December 10, 1950

VOLUNTEER GROUP OR INDIVIDUAL) Minneapolis Choristers

LEADER Mr. John Smith ADDRESS 242. Calfax Avenue, Minn.

PHONE Atlantic 3652

TIMS EXPECTED 7:00 P. M. - - - - -

PLACE Recreation Hall

TRANSPORTATION Bus

PROGRAM Choral music "by group followed by community singing
by patients - Christmas program

REFRESHMENTS PROVIDED BY GROUP Dixie cups and cookies

PROVIDED BY HOSPITAL None

EQUIPMENT PROVIDED BY GROUP 150 song sheets

PROVIDED BY HOSPITAL microphone, piano, 40 chairs on stage

PATIENT ATTENDANCE 120 NUMBER Regressed female, cottages 8 & 9 TYPE

EVALUATION BY WORKER Group was well organized. Arrived on time. Patients
Enjoyed music and almost all patients participated in
singing of Christmas songs. A return visit of this
Volunteer group is recommended.

THANK YOU LETTER - WRITTEN BY Betsy Brown, Recreation Worker

DATE December 11

COPY ATTACHED

PLEASE RETURN THIS FORM TO RECREATION WORKER IN CHARGE OF VOLUNTEERS.

NAME OF HOSPITAL, ETC.

SAMPLE THANK YOU LETTER

Mr. John Smith
242 Calfax Avenue
Minneapolis, Minnesota

Dear Mr. Smith:

Please express to the Minneapolis Choristers the very sincere appreciation of the personnel at _____ State Hospital for a very fine program on Sunday, December 10.

The patients truly enjoyed your music and the delicious refreshments and, as you know, took great pleasure in joining with the Choristers in the community singing.

We do hope you will come to the hospital again soon.

Yours very truly,

(Signature should be whatever is authorized at the hospital. To facilitate correspondence so that the Recreation Worker in charge of volunteers receives it, may be added in the left hand corner:

Please mail reply attention:

Miss Mary Brown
Recreation Worker

_____ State Hospital
_____, Minnesota