



Volunteer Resources and Engagement

Island Health Site:

Dear Island Health Volunteer Applicant, thank you for your interest in volunteering with Island Health. Volunteering in health care is a privilege and a serious commitment. Please indicate your response to each of the requirements below.

Please send completed document to

Your Name:	Your email address:
<p>Please click on the box next to your chosen response (or place a check mark if the document is printed). n/a = not applicable</p>	
Are you willing to commit at least 60 hours (approximately 6 months) of volunteering? Typical assignments: 1 shift per week (shift length anywhere from 1.5 – 4 hours, depending on assignment); there are some exceptions.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Our initial intake process can take 4-6 weeks and includes setting up an interview. Some sites do periodic intake which may extend this time frame. Will this pose a problem for you?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Online learning is required for all Island Health volunteers.	
<ul style="list-style-type: none"> Applicants for <u>Acute Care Hospital or Community / Inpatient Mental Health & Substance Use settings</u>: 8 hours of online learning is required. Are you willing to make this commitment? 	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>
<ul style="list-style-type: none"> Applicants for <u>Residential settings (long term care) or Community Health Units</u>: 2 hours of online learning and 1 hour of additional reading is required. Are you willing to make this commitment? 	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>
<ul style="list-style-type: none"> Do you agree to update relevant training/certificates annually? (approx. 1 hour) 	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you willing to attend additional site and assignment training?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have questions regarding our requirement for a Ministry of Justice Criminal Record Check, including Vulnerable Sector Verification (both Children and Vulnerable Adults)? Note: this screening is completed through our department and does not need to be in place prior to interview.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have spoken English (ESL Level 6 preferred)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
I acknowledge that Island Health strongly recommends staff and volunteers do not wear: nail polish, long nails, artificial nails, extensions, nail jewelry, or hand or wrist jewelry (although plain wedding bands and medical alert bracelets are acceptable). I understand that by following this policy I contribute to improving the health outcomes for the patients, residents, and clients, as well as protecting my own health.	I understand <input type="checkbox"/>
Do you understand that an email account is required?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you agree to comply with the BC Influenza policy: either have an annual flu vaccine or wear a mask during flu season (typically December to March) each year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Youth Volunteers: Parent / Guardian consent is required if under 19 years of age. Will this pose a problem for you?	Yes <input type="checkbox"/> No <input type="checkbox"/> n/a <input type="checkbox"/>

These requirements support excellent care and provide you with a good foundation for volunteering in health care. We appreciate you taking the time to consider whether volunteering with Island Health is the right choice for you.

Site Address:

Volunteer Resources: Trusted. Included. Valued.