



# JEWISH VOCATIONAL SERVICES

## Client Bill of Rights

1. Each client shall have the right to choose care and treatment providers and the right to communicate with those providers.
2. Each client shall have the right to participate in the planning of an individualized care and treatment and the right to appropriate instruction and education regarding the plan.
3. Each client shall have the right to be informed about diagnosis, prognosis, and treatment (including length of care/treatment) including alternatives to care and treatment and the risks involved, in terms that the client and the client's family can readily understand so that informed consent can be provided.
4. Each client shall have the right to refuse care and treatment services and to be informed of possible health and/or mental health consequences of this action. Each client has the right to terminate care and treatment without incurring financial obligation beyond services already rendered.
5. Each client shall have the right to care and treatment that is provided without discrimination as to race, color, ethnicity, sex, age, sexual orientation, or national origin.
6. Each client shall be provided services only if the agency has the ability to provide safe, professional, and competent care and treatment at the level of intensity needed.
7. Each client shall have the right to reasonable continuity of care and appropriate referrals as needed.
8. Each client shall have the right to be advised in advance of the disciplines that will provide care and treatment including the proposed frequency and duration.
9. Each client shall have the right to be advised and participate in advance regarding any changes in the plan of care and treatment.
10. Each client shall have the right to confidentiality of all records, communications, and personal information. Each client has the right to consent to the release of any confidential information.
11. Each client shall have the right to review all confidential records (except for certain psychotherapy notes) pertaining to the client unless it is medically contraindicated in the clinical record by the physician and/or the mental health professional.
12. Each client shall have the right to be referred elsewhere for services if, for any reasons, services at this agency were denied.
13. Each client shall have the right to voice grievances, per agency policies, and suggest changes in services or staff providing those services, without fear of reprisal or discrimination. In such an event, contact the Executive Director of JVS.
14. Each client shall have the right to be fully informed of agency policies regarding changes in services, third-party payments, and fee schedules for services.
15. Each client shall have the right to an accounting of any balance or financial transactions.
16. Each client shall have the right to be treated with dignity and respect, and not be subjected to any type of physical, verbal, or psychological abuse or coercion.
17. Each client shall have the right to have his or her property treated with respect.
18. Each client shall have the right to be advised, in writing, of the in-home services licensing agency's toll-free complaint telephone number (1-800-842-0078).



## Volunteer's Rights and Responsibilities

As a JVS Volunteer, I have the right to:

- Appropriate and meaningful volunteer assignments.
- Adequate information, training and assistance.
- Effective supervision and feedback.
- Respect for your skills, dignity, and individuality.
- Respect for your feedback and suggestions.
- Recognition of your contribution.
- Confidentiality of your personal volunteer file.

As a JVS Volunteer, I have the responsibility to:

- Perform volunteer duties to the best of your ability and in the best interest of the client.
- Adhere to agency rules and procedures.
- Follow through on commitments, arrive on time and ready for your volunteer activity.
- Report any abuse or harassment.
- Honor confidentiality.
- Refrain from accepting valuables, gifts, or money from fellow volunteers, clients, or staff.
- Refrain from the use of illegal drugs or alcohol while volunteering.

### Causes for Dismissal of a Volunteer

As a JVS Volunteer, I understand that I can be dismissed for the following reasons:

- Failure to follow the rules and procedures set out by JVS.
- Failure to satisfactorily perform assigned duties.
- Failure to show up for a volunteer commitment without notice more than three times.
- Conduct endangering the life, safety, mental or physical health of others.
- Any form of harassment or abuse.
- Breach of confidentiality.

I have read, understand, and agree to the policies above.

Name: \_\_\_\_\_

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



## VOLUNTEER CONFIDENTIALITY STATEMENT

The foundation of our services is based on a policy of strict confidentiality. All volunteers who have access to personal information have a responsibility to keep the information confidential. The people JVS works with act in good faith, expecting that their circumstances and personal matters will remain confidential. Thus, volunteers are obliged by both law and ethics to honor this trust,

The following is presented to provide some guidelines concerning the matter of confidentiality as you volunteer under the auspices of JVS.

- Identifying information (names, addresses, physical disabilities, etc.) of the people you work with should not be discussed with anyone outside of JVS;
- Personal circumstances of the people you work with should not be discussed with anyone outside of JVS;
- The personal circumstances of the people you work with should be discussed only with staff at JVS to whom the information is necessary for the individual's welfare;
- Information about the people you work with obtained from the files or conversations at JVS or made public through the news media, is still confidential and should not be discussed with anyone;
- Identifying information about the people you work with may be given to prevent harm to self or others, or by court order.

No information about the people you work with as a JVS volunteer (current or former), employee or business contact (including donors) is to be released or discussed without the party's written consent.

- A. I understand and will adhere to JVS' policy regarding confidentiality of information for volunteers.
- B. No confidential information is to be removed from the premises, in any electronic or written form, unless work involving such data must be performed elsewhere. If so, the volunteer is responsible for protecting the confidentiality of private information offsite, under the same penalty for confidentiality violation onsite.

If there is a question in a specific case, the volunteer must consult with the Director of Volunteers.

All volunteers are asked to sign that they have read and understood The Volunteer Confidentiality Statement and that they will respect the confidentiality of all the people for whom they come into contact with through their volunteer service at JVS.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_



I \_\_\_\_\_ permit JVS to use my  
photograph/information for

- Promotional purposes for the JVS website
- Promotional purposes for the JVS Facebook page
- Promotional purposes including JVS fundraiser
- Promotional purposes including a press release
- Displayed in the JVS office building

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

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

Jewish Vocational Services  
4600 The Paseo  
Kansas City, MO 64108  
816-471-2808  
[www.jvskc.org](http://www.jvskc.org)



**JVS**  
**Volunteer Release and Waiver of Liability Form**

*Volunteer Release and Waiver of Liability* is a release and waiver of liability on the part of Jewish Vocational Service (“JVS”), a nonprofit corporation organized and existing under the laws of the State of Missouri and each of its directors, officers, employees, and agents. By signing Volunteer Release and Waiver of Liability, \_\_\_\_\_ (“Volunteer”) acknowledges, understands, and executes agreement to the following as they serve as a JVS volunteer:

1. **Volunteer Capacity:** I attest that I can meet/perform the volunteer duties and responsibilities listed in the volunteer program description or established by the JVS Volunteer Coordinator/Program Lead.
2. **Volunteer Relationship:** Volunteer understands that the Volunteer's relationship with JVS is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer, that JVS will not provide any benefits traditionally associated with employment to Volunteer, including, but not limited to, medical, health, disability, automobile, or workman’s compensation insurance, and that the Volunteer is responsible for their own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to JVS.
3. **Insurance:** Volunteer understands that JVS does not assume any responsibility for or obligation to provide Volunteer with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of Volunteer’s injury, illness, death or damage to my property. Volunteer expressly waives any such claim for compensation or liability on the part of JVS beyond what may be offered freely by JVS in the event of such injury or medical expenses incurred by the Volunteer.
4. **Assumption of Risk:** There are certain risks involved in volunteer work with JVS, as with any activity. Volunteer assumes the risk of injury or harm to them or their property, including but not limited to bodily injury, personal injury, illness, death, or property damage that may result from the services they provide to JVS or occurring while they are providing volunteer services. By assuming such risks, volunteer also releases JVS and all other participants in the JVS Programs: directors, officers, employees, and agents (“Program Participants”) from any claims or demands that might arise presently or hereafter from their participation in the program(s).
5. **Release and Waiver:** Volunteer hereby releases, waives and discharges any and all liability, claims, demands or rights of action, in law or equity, known or unknown, of whatever kind of nature against Program Participants and JVS arising out of, related to, or resulting from Volunteer’s participation in the Program, except to the extent that such liability, claim, demand, or right of action arises out of the negligence or willful misconduct of JVS or any Program Participant.
7. **Indemnify and Hold Harmless:** Volunteer hereby agrees to compensate or otherwise defend and hold harmless JVS and its Program Participants from any losses, claims, liabilities or expenses of whatever kind, arising out of, related to, or resulting from Volunteer’s participation in the Program.
8. **Other:** As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the States of Missouri and Kansas that this Release shall be governed by and interpreted in accordance with the laws of the States of Missouri and Kansas, depending on the

state where the volunteer activity occurred. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

If more than one family member will be volunteering, a single Volunteer Release and Waiver of Liability may be prepared for the family, with each volunteer signing on the last page of the form. If any volunteer is under the age of 18, a parent or guardian must sign in the space next to the volunteer's signature as well.

**IN WITNESS WHEREOF, I, the undersigned, have carefully read this Release and Waiver of Liability, and fully understand its contents. I am aware that this is a release and waiver of liability in favor of JVS and the Program Participants. I am aware that in the event I suffer loss or injury, the terms of this Release and Waiver shall apply and remain in full effect and force and bind the successors and assigns, heirs, legal representatives and executors of the volunteer.**

Printed Name(s) \_\_\_\_\_

Signature of Volunteer(s) \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_