

ST. ALBERT VICTIM SERVICES

Victim Advocate

Volunteer Information Package and Application Form



*Helping Victims
of Crime or Tragedy*

ST. ALBERT VICTIM SERVICES

Volunteer Advocate Information and Application

The St. Albert Victim Services Unit (VSU) was established in May of 1992. The advocates are civilian volunteers who reside in St. Albert. They work out of the St. Albert Detachment, which is located at 96 Bellerose Drive, St. Albert.

The advocates are requested to work a minimum of one shift per week and one on-call weekend per month with the unit.

The shifts are as follows:

Monday thru Friday	1900 hrs – 2100 hrs at the detachment 2100 hrs – 0700 hrs on call duty
Saturday & Sunday	0700 hrs – 0700 hrs (48 hrs on call with pagers/cell phones for week-end shifts)

Some advocates are also available for immediate response to crisis situations on the twenty four hour Crisis Call Out basis.

The advocates must be at least 19 years old, reside in St. Albert, have a valid Alberta Driver's License, be a Canadian citizen or landed immigrant, agree to a complete security clearance and meet the terms of the program. Volunteers are asked upon engagement to sign a contract for a period of one year.

New advocates are required to successfully complete the Victim Advocate Core Training. All advocates will be offered the opportunity of ongoing training.

UNIT FUNCTIONS AND SERVICES PROVIDED

Contact with the Victims is through various means:

- Victim Service referral provided by the St. Albert RCMP members
- Correspondence
- Telephone contact
- Police reports
- Referrals by surrounding RCMP Detachments or other Police Services
- Referrals by various other community organizations

CRISIS RESPONSE

Advocates are available on a twenty four hour basis, to assist Police members in dealing with victims of crime or tragedy, suffering severe trauma or stress, particularly where there is no family or friends' support base available. Some examples of where Victim Services may be used are:

- Homicide
- Suicide
- Sudden deaths
- Armed robbery
- Sudden Infant Death
- Sexual assault / child abuse
- Domestic violence
- Break and Enter
- Motor Vehicle Accident

PERSONAL SUPPORT

Support is provided through crisis intervention, personal home visits, hospital visits, home security checks, telephone contact and court orientation program. Telephone contact is made with the victim, offering assistance and support through various channels, which may be a referral to another agency where direct assistance is available, or assisting the victim in obtaining the correct help for their circumstance. Information packages are explained and provided, focusing on prevention of further victimization and community agency referrals.

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FOLLOW UP ASSISTANCE

Victim Services will contact victims in particular cases, which involve trauma in order to determine how that individual is coping. In some cases additional assistance may be in order.

VICTIM INFORMATION

The Unit acts as a focal point to the Justice System and upon request, provides information to victims regarding the status of their particular case, court proceedings and court dispositions.

DEATH NOTIFICATION (Otherwise known as Notification of Kin)

Advocates are trained in bereavement and are familiar with police procedures. They are available to assist police members in death notifications and can remain “on scene” assisting next of kin.

ADVOCATES

BACKGROUND/SCREENING/TRAINING

Initially, new advocates attend a number of in depth training courses. The training given will enable the advocates to deal with each Victim in the appropriate manner. All instruction is given by qualified personnel, which include police members and professionals from within the community. Training is continually ongoing, which enables all advocates the ability to deal with a variety of situations or new legislation.

Examples of the training are:

- Sudden Death & Bereavement
- Suicide Intervention
- Police Policy and Procedures
- Report Writing
- Medical Examiner Procedures
- Funeral Home Procedures
- Crisis Intervention
- Death Notification - MADD
- Next of Kin (NOK)
- Harassment / Stalking
- Spousal Assault and Domestic Violence
- Sexual Assault
- Break & Enter and Home Security Checks
- Mental Health Issues
- Criminal Justice System
- Victim Impact Statements
- Request for Restitution
- Financial Benefits for Victims of Violent Crime
- Court Orientation Program
- Police Ride-A-Long

Upon completion of their training, all new advocates are put on a six-month probationary period. During this period they are closely monitored and evaluated. The purpose is to ensure all advocates are suitable for the program.

The advocates come from all walks of life, their background may include homemakers, teachers, managers, retirees, nurses, business individuals or self-employed.

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NAME: _____
Surname Given Middle Maiden

DATE OF BIRTH: _____
Year Month Day

TELEPHONE: Res: _____ Bus: _____
Cell: _____ E-mail: _____

MAILING ADDRESS: _____

OPERATOR'S LICENSE: _____
Province Number Class Expiry

ACCESS TO MOTOR VEHICLE: Y () N () Lic. Plate No. _____

ARE YOU CURRENTLY EMPLOYED? _____ Length of Employment _____

EMPLOYER: _____ **POSITION:** _____

HIGH SCHOOL DIPLOMA: Complete () Incomplete ()

POST SECONDARY: _____

OTHER: _____

LANGUAGE OTHER THAN ENGLISH: _____

LIST OF VOLUNTEER EXPERIENCE: _____

LIST CLUBS OR ORGANIZATIONS TO WHICH YOU BELONG: _____

OTHER RELATED SKILLS: _____

ARE YOU PRESENTLY UNDER A PHYSICIAN'S CARE? _____

IF SO, FOR WHAT REASON: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? _____

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If yes, explain _____

HAVE YOU EVER BEEN CHARGED WITH A CRIMINAL OFFENSE? _____

If yes, explain _____

REFERENCES: PERSONAL, BUSINESS OR VOLUNTEER RELATED

1. Name: _____

Address: _____

Phone Number(s): _____

2. Name: _____

Address: _____

Phone Number(s): _____

3. Name: _____

Address: _____

Phone Number(s): _____

DECLARATION:

I understand and agree to a criminal records check by the RCMP as part of my application to St. Albert Victim Services. I further understand and agree that any falsification on this application could/will result in me not being considered for a volunteer position with the St. Albert Victim Services Unit.

SIGNATURE OF APPLICANT: _____ Date: _____

ST. ALBERT VICTIM SERVICES ASSOCIATION
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St. Albert, AB T8N 7A4
(780)458-4353
Attn: Program Coordinator