



February 2013

## Art at the Bedside Final Report for the Winnipeg Foundation



### *Executive Director's Report*

It has been a delight to watch the Art at the Bedside program at St. Boniface Hospital grow, thanks to the Winnipeg Foundation's support. The program began April 2010 as detailed in our interim report. Much time was spent meeting with unit managers and staff at the hospital as well as recruiting and training volunteers. Over the two years plus that this program developed I have observed an excellent working relationship develop between our coordinator and the Director of Volunteer Services at St. Boniface Hospital.

St. Boniface Hospital and the volunteer department have now taken ownership of the program and are constantly directing new volunteers to the coordinator for training and mentorship as well as offering a significant amount of other volunteer time to prepare supplies for the art projects. Volunteers cut and sort all the images for collage projects; they prepare small balls of yarn so that the art carts are ready to go when the art volunteers take them up to the units. The hospital has also assumed financial

ownership of the program on an on-going basis with Artists in Healthcare. At the present time the contract between AIHM and St. Boniface covers the coordinator's time at 15 hours a month.

In the history of Artists in Healthcare this is a 'best success' story. Thanks to the Winnipeg Foundation's funding we were able to design and implement a unique program in the community that has succeeded in becoming sustainable and is expanding to other communities.



Not only has it thrived at St. Boniface but there is growing interest in the program throughout the healthcare community. Thanks to the success of Art at the Bedside we were able to bring the Art by the Big Blue Chair program to chemotherapy patients at Cancercare Manitoba through a Manitoba Arts Council grant. Art at the Bedside was also the example used by Misericordia hospital which inspired them to apply for a grant to create their own art program with residents. They have held a first art exhibit and created a calendar using their resident's art, which I will attach with this report.

AIHM were delighted to share our information with Misericordia and provide support for their grant application. We will continue to work to expand the program to Winnipeg hospitals.

As part of the continued efforts to give this program visibility in the community and celebrate what has been done, we created a short video which runs continuously on our website with acknowledgment to the Winnipeg Foundation: <https://vimeo.com/37978606>

Shirley Grierson, Executive Director





### *Program Coordinator's Report*

The following portion of the report has been compiled by and is used by the program coordinator and the volunteer department as its work binder. It has evolved as the program has and contains material that describes all aspects of the program as well as photographs of participants and examples of art work.

The Art at the Bedside program is a work in progress with changes evolving as a result of regular monitoring and assessing patient and volunteer's experiences as well as consultation between the coordinator, the art volunteers and the volunteer department.

The volunteer department of St. Boniface Hospital assumed official ownership of the program in fall 2012 and is involved in most aspects of recruitment and maintenance of the art volunteers.

The Program Coordinator is primarily involved with:

- Training and supporting art volunteers
- Developing art projects and maintaining art supplies
- Furthering public awareness of and involvement in the Art at the Bedside program.

One of the strengths of this program is its flexibility for both the volunteers offering the program and the patients who participate.

Volunteers do not need an art background to effectively facilitate the activities but if they have an interest and experience with art it enriches the experience for all involved. The same can be said for the patients.

The art projects chosen have a built in flexibility in that they can be done at a fairly simple level or completed in a more complex way depending on the experience and skill of the patient. This means that a patient who is not very well can enjoy taking part and have a positive experience and outcome, while another patient who is more able or in the hospital for a longer time or who has art experience can more fully explore the potential of their creative process with the materials provided.

Whenever possible the volunteers leave the materials with the patient so a project can be completed. Patients who are in the hospital for an extended period of time may have art visits on several occasions or on an on-going basis and may take part in many different projects.

When reading the de-briefing notes or listening to the volunteer's stories it becomes clear that this program continues to offer a unique opportunity to enrich the patient's experience of being hospitalized, providing a welcome distraction and a healthy activity.

Nurturing the creative process is an important component of overall wellness as is having a personal interaction with another human being.

The benefit also extends to the volunteers who are encouraged to create along with the patient, which further supports the patient's creative process and enriches the volunteer's experience. There is mutual benefit in the process of sharing art making.

Several times a year an interactive display is offered in the hospital atrium. This allows the public and staff to become acquainted with the program. The interactive part of the display provides a wide variety of art materials and invites patients, families and staff to enter their own creative process and make a small piece of wearable art.

This has been highly successful and raised awareness of the program.

The acceptance of the Art at the Bedside program by staff, patients and their families has grown and requests are often made for a volunteer to visit a specific patient.

These requests are handled through the volunteer office and the next available volunteer follows up with a visit.

In conjunction with the hospital's audio visual department, the volunteer office designed and printed bookmarks advertising the program which are placed in each patient's information package. The Winnipeg Foundation logo was included on these bookmarks. There is also a poster on each floor and unit throughout the hospital advertising the program.

Art at the Bedside is about to start offering programming in the Dialysis Unit and contact has been made with the Palliative Care Unit with the intention of beginning a program in that department if deemed appropriate, though art volunteers always respond to patient and family requests to visit any unit.

I am extremely grateful to have been involved in the process of developing this program and to continue to see it offered to patients by the many caring and capable volunteers. A debt of gratitude is owed to the generous support of the Winnipeg Foundation which has made this all possible.

Claire Stephensen, Program Coordinator





Hôpital St-Boniface Hospital

## **Art at the Bedside – Spring/Summer 2012**

### **Purpose**

The purpose of the Art at the Bedside program is to introduce ideas and materials that invite patients to engage in a creative process of self-expression offering a pleasant diversion during their hospital stay, while enjoying the company of interested and committed volunteers. This project was made possible by a grant from the Winnipeg Foundation and included a research component, as well as documentation, to discover if an art program can be successfully delivered by volunteers from the community with a professional artist providing training and mentorship.

### **Beginnings**

Artists in Health Care Manitoba (AIHM) and St. Boniface Hospital introduced the Art at the Bedside program concept in the spring of 2010, with the approval and support of the senior leadership team, consistent with the hospital's support of the arts in all its forms as an important component of the healing process. The project was funded thanks to a grant from the Winnipeg Foundation.

Artists in Health Care Manitoba (AIHM) retained the services of Claire Stephensen as Coordinator to develop and implement an art at the bedside program that could be trialed, evaluated and eventually spread to other health facilities.

### **Establishing Support**

As a first step the coordinator met with the Program Directors and Program Team Managers of the Hospital's clinical programs, specifically:

- Cardiac Sciences
- Woman and Child, Antenatal and Gynecology
- Surgery
- Mental Health and Geriatric-Rehab., McEwan Centre
- Medicine

The purpose of these meetings was to determine where Art at the Bedside programming would be of most benefit and to address logistics necessary to the program's delivery, such as:

- space requirements
- role and involvement of staff
- identification of patients for the volunteers
- art supply requirements
- impacts at the bedside (cleaning up paint mess for example)

Managers received the proposal with interest and excitement and were instrumental in facilitating the implementation with suggestions as to how staff could assist volunteers in locating patients and available spaces for volunteers and patient/patients to use for creating art (e.g. small lounges in unit hallways or at the end of halls). Use of common spaces provides opportunities for social interaction with patients.

Managers identified opportunities where the program could have a greater impact on units where patients have longer stays, such as antenatal and gynecology. Materials could be left with the patient so they could work on a project at their leisure. Units with longer stay patients would be prime areas for volunteers to work with patients.

### **Volunteer Services**

The coordinator from AIHM works closely with the manager and supervisory staff in Volunteer Services. A volunteer activity description was developed and recruitment began with targeting the existing volunteer base and then expanding into the community. Volunteer Services staff interviews the potential volunteers, complete the screening process and schedules the orientation that includes signing the PHIA confidentiality form. A supervisor then connects the volunteer to the AIHM coordinator to begin specific training to the art projects. Volunteers shadow the coordinator for a few shifts until comfortable in their role. At the 3 month mark, Volunteer Services staff connects with the volunteers to evaluate the placement and gather feedback on the program.

A total of 34 volunteers have been involved in delivering the program to patients since its conception contributing 1000 hours. Today 11 volunteers are active and are scheduled for a variety of 2 hour shifts daily. Volunteer retention improved as the program became more established, was accepted by staff and marketed throughout the hospital.

Volunteers can be identified by the wearing of a hospital name tag and uniform. They have access to complimentary parking, refreshments and are invited to the annual recognition event. Volunteer Services tracks their hours of service.

## Projects

In working through different art projects it is clear that Art at the Bedside must respond to the realities of a health care setting, and must meet the following criteria:

- portable and practical for implementation at the bedside/low mess factor
- interesting and adaptable to varying clientele and abilities
- colorful and diverse (texture, pictures, memories and words) to engage the patient's interest and offer the best possibility of a successful outcome

Yarn/Paper Weaving   Paper Quilting/Pattern Making   Painting on Paper Tiles/Canvas  
Collage with   Magazines/Tissues   Drawing Water Color Painting   Cards/Print Making  
Color Diffusing Paper

Two projects in development for the future include collages for gardening and furniture.

The coordinator purchases all supplies through Christies School and Office Supplies, other art supply stores and dollar stores. Cre8ive Arts Supplies offers a discount to all Artists in Healthcare artists. Occasionally donations will come through Volunteer Services. The greatest need is the replenishment of packages left with patients that include glue sticks, scissors, paper, paints, and markers. Budget for supplies is approximately \$500 per year. This does not include start up costs.

After experimenting with several ways of transporting materials and equipment to the bedside a near perfect "Art Cart" was found. Now volunteers carry all their supplies in a wheeled, canvas cart that is labour-saving, attractive and small enough to reduce disruptions on units and hallways. "Art at the Bedside" decals on the cart will create visibility and awareness of the program. To meet the needs of evening volunteers, the Security Department maintains the keys to the art supply cupboard and room. Volunteers sign out and return the keys.

## Training

As new volunteers join the program, the coordinator begins the training of the art projects. Regular meetings with the volunteers as a group encourage new ideas and the opportunity to share experiences. The coordinator provides a training checklist that includes:

- Purpose and Objectives of an Art Program
- Guiding Principles
- Creating a Supportive, Cooperative Environment
- Supplies and preparing for the next project
- Communicating with seniors
- Maps & locations of designated wards – Floors 8, 7, E6, A5, B5, E4 and 3A South



- Evaluation and documentation
- Infection Control

### **Requests & Evaluation**

Staff, patients, family or visitors can request service by directly calling the Volunteer Services Department to speak with a supervisor who will relay the message to the volunteer. Upon starting their shifts volunteers approach to the unit desk to speak to the staff inquiring if anyone is available or has interest that day to participate.

Volunteers are required to track all visits, comments and testimonials in a binder that is kept with the supplies. This assists in evaluating the program on a regular basis.

### **Marketing**

To create awareness of the program a selection of printed materials were designed by the Audio Visual Department in the Hospital. Posters were distributed on the wards and bookmarks supplied on the library cart that goes to patients rooms regularly. Bookmarks are also included in the delivery of the first "well wish" computer message to patients. A suggestion is to update the printed material that would also include the music program – promoting all Art Service Programs to patients.

Three to four times per year the coordinator prepares displays in the Hospital Atrium during special events such as National Volunteer Week or Culture Days in the fall. Volunteers are scheduled to assist and share a sampling of new projects to the general public. The coordinator works with Audio Visual to book tables, display board as needed.

Articles have been published in the Lance newspaper sharing testimonials and information on the success of the program. Internally the Hospital advertises the program through the staff newsletter "This Week".

Volunteers are recruited through Volunteer Manitoba, local High Schools/Universities and the Art and Culture Industry e-zine.

### **TRAINING CHECK LIST FOR VOLUNTEERS**

- Supplies/kit and preparing for the next project
- Projects
- Maps and locations of wards
- Tour
- Infection control
- Atrium displays
- Evaluation and documentation process
- Contacts in Volunteer Services



## **GUIDING PRINCIPLES FOR THE ART AT THE BEDSIDE PROGRAM**

- Each person has a creative life that is unique, meaningful and important and deserves the greatest respect.
- Each person has the right to express their creativity in any way they wish (as long as it does no harm to others).
- Each person has the right to take part in the art activity regardless of their level of ability.

## **HOW TO CREATE A SUPPORTIVE, COOPERATIVE, ENVIRONMENT FOR AN ART SESSION**

- Listen and respond accordingly
- Allow for choices and control of the process
- Connect with the participant as a unique individual
- Be present, do not hurry
- When appropriate encourage participants to work together
- Do not interrupt when the participant is working with focus and purpose
- Give clear instructions on the project but avoid telling them how to do the project
- Invite participants to share – memories, ideas, stories, opinions
- Be flexible, follow the lead of the participants, be able to change the direction in a project or try a new idea
- Use humour when possible and appropriate
- Always use safe, non toxic art supplies and tools

## **PURPOSE AND OBJECTIVES OF AN ART PROGRAM**

- To provide a safe, secure environment that will encourage receptive and expressive communications
- To provide purposeful activities where creativity, choice and control are encouraged and supported and where process is more important than a finished product
- To offer opportunities for social inclusion and interaction which help to counteract isolation and may offer increased opportunities for interaction with family, friends and staff
- To encourage movement and increased mobility, when appropriate
- To introduce or increase sensory stimulation and create opportunities to express appreciation for art and beauty.
- To encourage the exploration of memories
- To help support self confidence and self esteem.
- To provide opportunities for creative self expression and exploration of the imagination.
- To be fully in the moment
- To support the expression of preferences about art activities
- Participants may be provided a venue to display their art work

## **ANTICIPATED OUTCOMES**

- Increased interest and curiosity about the participants environment, themselves and others
- Increased sensory stimulation
- A sense of ownership of the artistic process as well as the art work

- Reduction in isolation of the participant
- Heightened pride in sharing their work with family, friends and staff
- Allows participant to focus on something other than their illness or condition
- A sense of joy, happiness, peace and laughter is possible

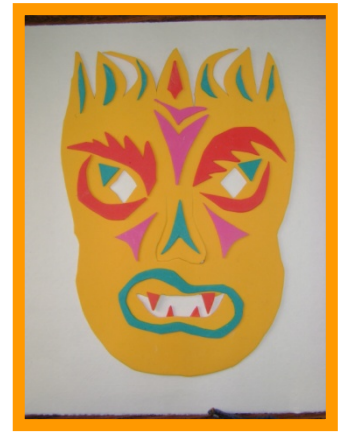


### GUIDELINES FOR VOLUNTEERS

- Show respect for an individual's artwork by not writing or drawing on it, except to include their name and the date
- Participants benefit from being encouraged to do their ownwork and from working without interruptions
- Work at the pace set by the participants – no hurry – no deadlines – no mistakes
- Be respectful of an individual's process, it is more important than a lesson plan
- Positive reinforcement can be useful but asking questions of the participants about the work and how they feel about it puts the focus back on them and their artistic process
- As a session facilitator (volunteer) it is not your job to dispense approval or to designate what is "good art"
- When appropriate materials may be left with the participant so they may finish their project

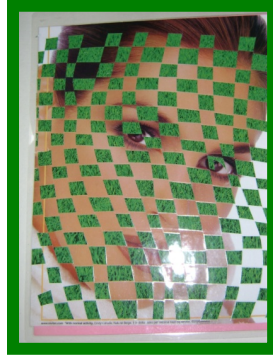


## Samples of Artwork









## Art at the Bedside

August 2011- December 2011



**Ward:**

**Comment:**

A7	Mother and daughter painted, would be interested in doing more another day.
E4	Visited a patient, she didn't want to make anything, so we just talked.
E4	I made a paper quilt with a young girl.
E4	Saw a patient with arthritis so she could not do any art work. We talked for a while and she mentioned that she appreciated our volunteer services and thought it was a great program.
E6	Painted with an older gentleman, he enjoyed it very much. We worked on a tile painting together as he liked my tile and wanted to keep adding to my painting.
M2	Visited with a patient in McEwen, left her paints to work on a bookmark. She was very happy.
A7, E4	Used watercolors with one lady, she's an artist and very bored. Then made a bookmark with another lady.
A7	This lady only wanted to talk. We talked for about 1 ½ hours; she told me things she never told anyone else. She said it felt good to get it off her chest.
B4	Worked with a young woman from Baker lake – She was very enthusiastic.
E5	I worked with a lady who was in cardiology. She did not want to do anything, but she did talk a lot. I did a pencil sketch and left it with her.

5 CCU	Followed up with a young woman, previously did weaving. Showed her how to make a woven bag. She's in here for a long stretch and has two young daughters. She talked a lot about them.
E4, 5	Just talked with 2 patients and the other 2 did weaving, drawing. They also loved making Christmas cards. I will print off some Christmas words to glue into the card. Good day, lots of fun.
4	Worked with a young mom on 4 <sup>th</sup> fl. Pre-natal bed rest. She was very enthusiastic about working with acrylic. I left her paint, canvas and tiles as well as card making supplies. I visited with her for quite a while, this is her second long term stay and she really appreciated having something to do.
4	Pre- natal bed rest. She showed me the paintings she had done from last Thursday as well as Christmas cards. She wasn't feeling very well, but I when I showed her a new craft I brought she perked up right away. It's a wreath made with paper roses. I left her all the supplies to make one.
B3	Helped a patient make a woven bag.
E6	Spent the rest of my shift with an elderly lady with dementia, she was crying. She cries when she remembers her mother died. At first she didn't want to do anything then I showed her the paper quilting and got excited. I worked closely with her and she became animated. This is an amazing program!
A7	I had such a great first shift! I did weaving with a little boy and his grandma. Also with a girl who just graduated high school.
3,4,5	Made 2 bracelets with the patients, they just wanted someone to talk to.
5E	I worked with a patient for 2 hours today. We had such a great time. Her husband was there as well, but they seemed very excited to have some company.
4E	Did a painting with a lady I've been working with a lot. I worked with her for over an hour, she loves this program.
4,5	



## Art at the Bedside March 2012 – October 2012

**Ward:**

**Comment:**



E6	Worked with a lady on E6, I showed her weaving but she found to too difficult so we did paper quilts.
E5	Left Scritch/Scratch kit with a man on E5.
8A	Made a card with patient and worked on weaving project.
E4	Visited a man who used to be a teacher, left him some sketching materials.
E4 & E5	Worked with ladies on paper quilting and water painting.
E4	Made Mother's Day card with patient.
E4	Visited patients and worked on collages to decorate their rooms.
A7	Showed patients how to make woven yogurt container and greeting cards.
A7	Did a weaving project with a German lady; she had a wonderful time and great conversation.
B5	Visited with a lady 99 years young who worked on a number puzzle.
A7	Showed patients how to make a woven yogurt container and greeting cards.
A7	Showed one woman how to weave and paint. Started a bookmark with another woman.
A7	Liked painting projects in the past, but would like us to come back another day.
E4	Talked with a woman who would like to try something next week and also made a bookmark with another lady on the floor.
E4	Worked with 3 ladies in the Day Room making greeting cards.
E4	Helped/ followed up with a patient who was painting a bird house, she was referred to me by a social worker.
E5	Sweet lady, spoke for at least an hour, really liked the visit.
B4	Followed up with 2 ladies, left them more supplies to make woven bags.
B4	A patient who is making the paper rose wreath was feeling very low and teary. We chatted and I helped with the making the wreath. She was feeling better by the time I left.
E6	Spent time making chains with a lady on E6.
E6	Left supplies and showed a patient how to make woven container.
B4	Visited with a young mom on bed rest. I showed her to make a wreath with paper plates and paper flowers. She was really excited about the project.
B4	Patients seemed eager to make the woven containers.
B4	Met a Chaplain from Pastoral Care on the ward. He thanked me and said how appreciative the patients are for what we do. He said it's a wonderful service and very helpful to enrich the patients stay.
E4	Visited and helped paint a birdhouse with an elderly man recovering from a stroke.
B4	Visited with a patient who only wanted to talk.



E4	Worked on a paper quilting and made a checker board with an elderly man
B4	Spent most of my shift working on rose wreath with a pregnant mom on bed rest. On Tuesday when I was there she was able to forget her situation as we worked and chatted.
E6	Very sweet lady, talked and did paper quilt cards; she would love someone to come back.
B4	Visited with patient on bed rest, followed up on a project already started.
A7	Weaved a bookmark with a cute little lady, read to a patient and did some painting with a lady who used to be a art teacher.
B4	Made a woven bag with a lady, she loved it and didn't want to stop.
B4	Weaved a bag with a lady, she was very happy to be doing something.
5E	I spent a couple hours with Margaret making bracelets for her granddaughters. Worked with another patient in for bedrest.
4B	Showed a patient how to make a woven container.
4E	Did paper weaving with an elderly lady on E4
A7	Visited with a patient who was leaving today. I showed her the weaving project. She thought it was great and was sorry she hadn't had the opportunity to work at them while she was here.
4B	Spent lovely afternoon with pregnant mom on bedrest, I taught her how to make a woven bag container.
6	Visited with a lovely lady named Eva, although she has a very short attention span she loves visitors.
E5	One lady was too tired today, other lady was interested in making greeting cards
4B	Visited with a 93 year "young" women, she just wanted to chat.
4C	Followed up request to visit Shirley on 5A, she was having dialysis on 4C so I went there to see her. I worked with Shareen for many months when she was in CCU waiting for her new heart. She received a new heart in July but had a few complications so is still in the hospital for a while. She has Dialysis 3X week for 4hrs with nothing to do. So now she is making a woven bag.
E\$	Visited with an elderly man, he was too tired so we talked.

## Art at the Bedside

January 2012-March 2012



**Ward:**

**Comment:**

E4, E5	Mostly visited with patients as not many interested today. Painted with one lady on 4E and read to her after. She is almost blind.
B4, E4 5 CCU	<ul style="list-style-type: none"> <li>- Worked at weaving with 2 ladies on B4, very eager and appreciative.</li> <li>- I left acrylic paints with a lady on E4 – she is an artist.</li> <li>- I left supplies to make a valentines with a regular patient visit on 5 CCU</li> </ul>
E4	A man watched me draw and we talked.
E4	Worked with an elderly lady to make a Valentines card.
4B	Taught 2 pregnant mothers how to weave
4B	Made bracelets with an older man for his granddaughters. Quiet but fun day.
E4	Made a Valentines Day card with a lady, weaved and just visited with another patient.
E4	Spent the morning with a lady, making Valentines Day cards for her sons. She has no daughters and needed a "girl talk". Lovely lady.
A5	Visited with 2 elderly ladies - one in particular was so interested in our program; she is affiliated with WAG and asked all kinds of questions. She is going to talk about Art at the Bedside with her colleagues at the WAG.
A5	I showed a patient how to weave today; she is here from Northern MB and was eager to have something to do.
E4	I made a paper quilt with a lady; she was very pleased with her work.
8A	Had a request to show a lady how to weave. The nurse asked me if this was a new program – I said no but we had to be asked to come up palliative care. She said that was too bad as there were often patients who would benefit from the program. I suggested she make a request.
4E, 5	Worked on a painting with a couple of ladies on the 5 <sup>th</sup> floor and painted a butterfly for another on the 4 <sup>th</sup> floor.

4,5,6	Lots of patients are in isolation. I did find a little boy to color with who got very agitated when I tried to leave. Two ladies we're interested but too tired.
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I started a weaving project with a patient who was very interested. But she was too tired to complete and her vision is not very good.
Lady was very excited about learning how to weave.
Spent my time talking with a patient, we really didn't do any projects.
Nurses said no, as too many patients were in isolation.
We made an Easter card for his wife.
The nurses were very helpful in gathering patients in the visiting room today. I taught them how to weave.
Worked with a lady today, she really enjoyed it.
Painted a tile with the family
No time for art today, but we talked about art and the theatre and his eyes lit up with excitement. I'll go see him for crafts next week.
We did weaving with a lady on 5, she was wonderful and a pro at it. On the 6 <sup>th</sup> floor we did some painting and had a lot of fun. At first one lady was hesitant but by the end she had surprised herself with her own abilities.
Worked with mother and daughter, painted tiles and did weaving. The daughter even brought out her guitar and we all sang songs together. I was there for over 2 hours! Great day, I even stayed late because they didn't want me to go, haha.
Today was an emotional one; I worked with a family on B4, whose daughter just passed away today. The family was glad I spent time with them.
Ladies were really into the weaving today, we made 2 projects.
This patient used to be a florist and really enjoyed making crafts. She did some paper weaving and really enjoyed herself.
This lady really enjoyed weaving; she was hesitant at first but grew to love it. We talked about her family.
Today we made a paper quilt and I left her some paper weaving materials for her to make later. She really enjoyed it. I spent an hour with her, what a great person.

We did weaving since last week she learned how to paper weave, she enjoyed both very much.

We painted tiles and she really seemed to enjoy it. Initially she claimed she wasn't very good at art, but once she started she really got into it. I even got her to weave a little.

### Storage Cart for Supplies



September 2012



Hôpital St-Boniface Hospital

## POSITION DESCRIPTION

### Coordinator – Arts at the Bedside

POSITION SUMMARY: To develop and provide direction to a volunteer based visual arts program while responding to the needs of patients and families in a hospital setting.

#### REPORTING RELATIONSHIPS:

St. Boniface Hospital – Manager, Volunteer Services

#### DUTIES & RESPONSIBILITIES:

- Meet with Program Managers/Volunteer Staff as needed to introduce and support Art at the Bedside programming
- Orientate and train new volunteers to the art projects and mentor/shadow the volunteers on their first few shifts
- Partner with Volunteer Services for recruitment of volunteers
- Identify new projects for the volunteers based on the needs/ability of patients
- Purchase supplies required for the program
- Coordinate displays every 3 - 4 months in Atrium area to provide visibility
- Promote program in community
- Design training manual for volunteers
- Evaluates the success of the program in relation to planned outcomes and impact assessment
- Follow infection control practices
- Provide written report of program and the evaluation annually to St. Boniface Hospital

#### WORKING RELATIONSHIPS:

Program Team Managers, Volunteer Services staff, unit staff and volunteers, may have contact with families.

#### QUALIFICATIONS:

Education:

- Grade XII or equivalent
- University or College Degree Fine Arts an asset

Special Skills/Training:

- Knowledge of computer systems Microsoft Office and E-mail

Experience:

- Visual arts background, preferably in a hospital, healthcare setting
- Previous teaching and facilitation of workshops
- Staff/volunteer training

Other Attributes:

- Ability to read, write, speak and understand English, French an asset
- Ability to work independently with minimal supervision
- Good interpersonal and communication skills
- Ability to organize, prioritize workload and meet deadlines
- Ability to interact well with other healthcare professionals

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



## Volunteer Services Department

### Activity Description

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Activity/Location:	Arts in Health
Time Commitment:	Minimum 1 shift per week for 6 consecutive months
Hours/Days:	Monday – Sunday – Various Hours
Dress Code:	Volunteer uniform and identification tag must be worn at all times. Good personal hygiene. Clothing must be clean and appropriate.
Document Date:	January 14, 2011

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#### Position Summary:

This position is responsible for encouraging patients to take part in a creative art activity, and to further assist in this by providing materials and an explanation of the project so the patient understands the parameters of the project. This may take place in several different areas of the hospital.

#### Responsibilities:

- Retrieves/returns keys to room D1034 and the art cupboard from the Security Department
  - Understand how to do any projects being offered to a patient/patients
  - Gather the required materials from the art cupboard in the Hospitality Lounge (Room D1034)
  - Reports to the front desk on the unit prior to visiting patients to obtain names of suitable patients who might be interested in the arts Program
  - Explain the project to the patients
  - Assist, only as needed, the patient in beginning the project
  - Offer encouragement or suggestions during the activity to support the patient as they do the project
  - May be required (with patient's permission) to photograph their piece of art work at the end of the session, even if it is not complete
  - When appropriate, leave materials with the patient so they can work on the project on their own. If patient is discharged on the next visit, pick up materials from the front desk.
  - Clean up the area and gather unused materials and equipment and return them to the art cupboard
  - Complete daily log at the end of each shift
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#### Supervision:

This position is ultimately accountable to the Manager, Volunteer Services (or the Supervisor, Volunteer Services, in his/her absence. Day-to-day direction and supervision is received from the Art Coordinator.

#### Qualifications:

- Punctual, reliable and trustworthy
- Good interpersonal and communication skills
- Polite, friendly, courteous and outgoing
- Calm and even disposition



- Demonstrated ability to work independently and with minimal supervision
- An interest in art is an asset, but not essential

#### Training/Orientation:

Volunteers assigned to this position will be required to complete the following Hospital training/orientation sessions.

- General Hospital Orientation by Volunteer Services
- Specific orientation and training provided by the Art Coordinator
- Personal Health Information Act (PHIA) training

\_\_\_\_\_  
Placement Supervisor (Please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Placement Supervisor (Please sign)

\_\_\_\_\_  
Manager, Volunteer Services (Please sign)



With sincere thanks from the Board of Artists in Healthcare, Manitoba !

