



The City of Raleigh, Parks, Recreation and Cultural Resources Department welcomes the participation of all individuals in our programs, including those with disabilities. We are fully committed to complying with the Americans with Disabilities Act and providing reasonable accommodations to facilitate participation in our programs. The City of Raleigh recognizes that individuals with disabilities may require the support of a Personal Assistant in order to fully access and participate in PRCR programs.

As used herein, a Personal Assistant is an individual designated by an individual with a disability or the participant's parent/guardian to provide specialized support, supervision and/or assistance to the participant during a PRCR program. A Personal Assistant can be a family member, caregiver, service provider, or other individual able and qualified to provide needed support to a PRCR participant with a disability. PRCR staff will work with the participant and/or their parent/guardian to determine the level of support, if any, which is necessary and appropriate to reasonably accommodate participation in a particular PRCR program.

The PRCR recognizes the vital role that Personal Assistants play in the positive and successful experiences of the individual(s) they serve. The information contained herein is intended to provide guidance to enhance the experience of all parties interested in the participant including the personal assistant, family members, PRCR, and the personal assistant's agency (if applicable). The PRCR also collects information from and about Personal Assistants for the safety of the PRCR, the personal assistant and all participants.

Expectations for all persons working with PRCR programs:

- Remain with the participant(s) during program hours.
- Assist the participant(s) and engage in all program activities.
- Be responsible for the care of participant(s). This includes assistance with and/or teaching skills (i.e. health, nutrition, hygiene, sportsmanship, social skills, recreational activities, etc.), adequate supervision for safety, and providing a healthy environment for all participants.
- Utilize positive behavior management techniques to address behavior issues for the participant(s).
- Promote inclusion of the participant(s) in all activities.
- Positively interact with all program participants, staff and parent/guardian. Be a contributing member of the partnership by giving and accepting constructive feedback.
- Adhere to PRCR policies and guidelines regarding dress code, cell phone use, COVID requirements, etc.

Expectations for Personal Assistants in PRCR programs:

- Provide specialized services such as intensive behavior support (safety, management systems, etc.), medical/personal care (i.e. catheterization, medication administration, toileting, feeding, etc.), physical assistance (mobility devices, safety, transfers, etc.), and/or special assistance with effective communication to the individual participant. Personal Assistants should not provide these supports for other participants in the

program.

- Assist the participant(s) and engage in all program activities (including active games, art projects, swimming, hiking, field trip activities, etc.).
- Be responsible for the care of participant(s). This includes assistance with and/or teaching skills (i.e. health, nutrition, hygiene, sportsmanship, social skills, recreational activities, etc.), adequate supervision for safety, and providing a healthy environment for all participants.
- Follow the guidance of PRCR staff for behavior management. Requests for a personal assistant to provide behavior management techniques not utilized by PRCR staff will be addressed on a case by case basis with the Specialized Recreation and Inclusion Services Program Director, and the personal assistant may be required to show proof of training, certification and/or authorization to perform the behavior management technique(s). Personal Assistants should not provide behavior management to other participants in the program.
- Utilize positive behavior management techniques to address behavior issues for the participant(s).
- Remain with and assist the participant during transport to off-site activities. Note: the Personal Assistant may be responsible for transporting themselves to off-site activities if space on provided transportation is not available.
- Remain with the participant(s) at all times during program hours and assist with engaging the participant in all program activities.
- Positively and appropriately interact with all program participants, staff and parent/guardian. Be a contributing member of the partnership by giving and accepting constructive feedback.
- Adhere to PRCR policies and guidelines regarding dress code, cell phone use, etc.
 - A. Personal Assistant's must wear appropriate length shorts (not cutoffs or baggy pants), and closed- toed, athletics shoes. Excessively loose (ex: baggy pants) or tight (ex: leggings or yoga) pants or shirts with spaghetti straps, cutoff or jogging shorts, or revealing clothing are not permitted. Clothing and hats that displays drugs, alcohol, tobacco, sexual, gang or religious references are not permitted. Personal Assistants must wear swim wear that provides full coverage, such as one piece suits, board shorts and shirts while working with program participants. Males should wear appropriate length swim shorts (brief style swim suits are not permitted). Avoid wearing light colored swim wear that could become see-through. Sandals, Crocs® or flip-flops may be worn for water activities only. Length of fingernails and type of jewelry should not interfere with job tasks or pose safety hazard.
 - B. Personal Assistants are expected to wear a PRCR issued badge, to identify themselves as approved, to other participants, staff, parents, community members, etc., at all time while working in a PRCR program.
 - C. Personal Assistants are asked not to use electronic devices during work hours with PRCR programs (i.e.: personal cell phones, laptops, Mp3 players, gaming devices, etc.). Personal Assistants are asked to only access their personal cell phones and electronic devices outside close proximity of participants. Personal conversations during the program are not permitted. Personal Assistants should communicate with camp staff if needing to step away for a short period – extensive time away from the participant/program is not appropriate. Inappropriate reading material (i.e.: electronic (e.g. Kindle) or hard copy materials) should not be brought during program hours. Personal Assistants should not allow participants to use their personal electronic devices and should secure all personal items. PRCR is not responsible for damage to staff's electronic device or personal items.

Process & Requirements to participate in PRCR programs as a participant's Personal Assistant:

- Complete the attached information and waiver forms. (Information and waiver forms must be filled out for each program.) ***A valid email address for the Personal Assistant must be included.**
- Consent to and be cleared through a standard PRCR background investigation that is conducted for all staff and volunteers. (Background investigation must be completed annually.)
- After submitting the attached information and completed forms, the Personal Assistant will receive an email with a link to complete additional information for a background investigation to occur.
*The Personal Assistant must use this secured link to complete the Background Investigation.
- Personal Assistants and families will be notified when approved.
*Personal Assistants may not participate in PRCR programs until receiving approval.

It may take up to two weeks to process an application for a Personal Assistant; please plan accordingly. To submit information, or for questions or more information about PRCR's Personal Assistant program please contact: Specialized Recreation and Inclusion Services at 919-996-2147.



Raleigh
Parks

Personal Assistant or Healthcare Provider Application

Thank you for your interest in supporting participant(s) as a Personal Assistant or Healthcare Provider in Raleigh Parks, Recreation and Cultural Resources. Please complete the following application to participate in an ongoing role with our department. Personal Assistants must be 18 years and older, must complete the attached Release & Indemnity Form and complete the Background Investigation. If needed, a Raleigh Parks, Recreation and Cultural Resources staff will contact you with more information.

Personal Assistant and Health Care Provider Application

Name:

Last

First

Middle Initial

Address:

City:

State:

Zip:

Phone (Home):

(Cell):

Email:

Birthdate:

Age:

Emergency Contact Information

Name:

Relationship:

Phone:

Email:

Special Medical Circumstances:

Additional Information

Agency or Group Personal Assistant is Employed by (if applicable):

Agency Supervisor (if applicable):

Supervisor Phone Number:

Name of Participant(s) you serve:

Name of Program you will be assisting the Participant in:



Raleigh
Parks

Personal Assistant or Healthcare Provider Application

Please sign below when you have read and understand all statements.

I certify that the statements provided on this information form are true, correct, and given voluntarily. In addition, I understand that this information may be disclosed to any party with legal and proper interest.

I understand that the Raleigh Parks, Recreation and Cultural Resources Department reserves the right to screen personal assistants, and the Department will not accept as a personal assistant anyone who would jeopardize any aspect of service or the safety of PRCR customers and staff.

I understand that Raleigh Parks, Recreation and Cultural Resources Department may contact my Agency or Group to verify my employment or affiliation, or to discuss any concerns regarding performance or negligence of duties while working as a Personal Assistant.

I have read and agree to adhere to the Expectations for Personal Assistants while working in Raleigh Parks, Recreation and Cultural Resources programs.

I will also not abuse or disclose any information, materials, or hardware I may use or obtain while working as a Personal Assistant.

Personal Assistant Signature:

Date:

Participant's (Parent/Guardian) Signature:

Date:

Relationship to Participant:

PRCR SRIS Full Time Staff Signature:

Date:

Non-Discrimination-To the extent permitted by North Carolina law, the Parties for themselves, their agents, officials, directors, officers, members, representatives, employees, and contractors agree not to discriminate in any manner or in any form based on actual or perceived age, mental or physical disability, sex, religion, creed, race, color, sexual orientation, gender identity or expression, familial or marital status, economic status, veteran status or national origin in connection with this Contract or its performance.

TO BE COMPLETED BY VOLUNTEER'S PRCR STAFF SUPERVISOR

Supervisor Name:

Phone:

Email:

Position of Volunteer:

Volunteer Work Site:

PRCR Program, Site, or Facility:

% of Time Personal Assistant unsupervised by FT PRCR staff:

% of Time Personal Assistant in contact with minors:



Raleigh
Parks

Personal Assistant or Healthcare Provider Application

COVID-19 Risks; Release and Indemnity Agreement

COVID-19 is a highly contagious and novel viral agent. Its transmission vectors are imperfectly understood, and it may be possible to transmit or become infected by COVID-19 despite strict adherence to guidelines prescribed by the Centers for Disease Control (CDC) and other federal, state, and local health agencies. While PRCR Department staff will make reasonable efforts to adhere to the above-stated guidelines, users of PRCR programs and facilities may be exposed to increased risk of transmission or infection of COVID-19 through various actions or interventions, including but not limited to contact with or proximity to one or more of the following: other coaches or athletes, staff members, or administrators; the personal belongings of other coaches, athletes, staff members, or administrators; programming and activity materials including, but not limited to, workout equipment, recreational equipment, etc.; and City fixtures and furnishings, including door knobs, chairs, tables, plumbing apparatus, light switches, etc.

WHEREAS, the undersigned has requested to assist with coaching an athletic league at a facility within the City of Raleigh, North Carolina; and

WHEREAS, the undersigned agrees to do so at his or her own risk and recognizing the possible and inherent danger to his or her person or property resulting therefrom. These risks include but are not limited to: equipment problems or failures; contact with and actions of other fitness room users, participants, spectators, and volunteers; slips/trips/falls; musculoskeletal injuries; exposure to and illness from infectious diseases, and any and all risks described in the preceding section; and

WHEREAS, the City of Raleigh does not wish to be liable for any damages arising from personal injury, death, illness, or property damage sustained thereby;

NOW, THEREFORE, In consideration of mutual promises and other good and valuable consideration, the undersigned does hereby for himself / herself and their personal representatives:

- A. Acknowledge that he/she has been given reasonable notice of the actions taken by the Raleigh for the purpose of reducing the risk of transmission of COVID-19 to individuals present on the premises, and agree that the City of Raleigh's actions have been reasonable
- B. Assume full responsibility for any personal injury or any damage to his or her property, which may occur, directly or indirectly, in the course of coaching or assisting with athletic league programs.
- C. Fully and forever release, and discharge the City of Raleigh, its agents and employees, from any and all claims, demands, rights of action or cause of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of the above-described activity.
- D. Agree that it is the intent of the undersigned that this Release and Indemnity Agreement shall be in force and effect any time after the execution hereof.

As of September 17, 2021, all Raleigh Parks volunteers that will be working indoors will be required to be fully vaccinated. I understand this requirement and will be required to show proof of full vaccination.

Volunteer Initials: _____

Staff signature: _____

****By signing you certify that you have verified the volunteer's vaccination status.****