

VOLUNTEER POSITION DESCRIPTION

POSITION DETAILS

Title:	Community Speaker
Department:	Policy, Information & Programs
Work Location:	<i>MOVE muscle, bone and joint health</i> 263–265 Kooyong Road, Elsternwick
Reports To:	Community Programs Coordinator
Version Date:	May 2016

MOVE STATEMENT OF PURPOSE

The purpose of *MOVE* is to improve the quality of life of people who have, or are at risk of developing, muscle, bone and joint conditions.

Vision

To be a leader in promoting excellence in muscle, bone and joint health and wellbeing.

Values

Our values are vital to who we are and our success in what we do:

- Respect and Integrity
- Service and Stewardship
- Excellence and Knowledge
- Collaboration
- Leadership

OBJECTIVE

The Community Speaker provides information sessions to a wide range of community groups about arthritis and osteoporosis and the services offered by *MOVE*.

KEY RESPONSIBILITIES

- Present the standardised presentation provided by *MOVE* and keep within the guidelines.
- Present to community groups when rostered.
- Promote *MOVE* services.
- Remain impartial and refrain from providing personal opinion or advice.
- Keep up-to-date with news and developments relevant to the position through the training sessions (Updates). Attend a minimum of two Updates each year.
- Complete an evaluation form after each presentation and return to the Community Programs Coordinator..
- Maintain confidentiality of all consumer and organisational information.
- Adhere to *MOVE* policies and procedures.
- Contact the Community Programs Coordinator via telephone or email for any queries.
- Undertake other duties and responsibilities, as reasonably requested by the Community Programs Coordinator or other *MOVE* staff.

Position descriptions are subject to review from time to time, variations will be advised to you.

COMPETENCIES

- Have an understanding of the issues faced by people living with a muscle, bone and joint condition.
- Demonstrates patience, tolerance and respect for others.
- Have confidence when speaking to groups and be able to present with a clear and pleasant voice.
- Flexible, reliable and punctual.
- Have an understanding of reflective practice.
- Basic computer skills including Internet skills – desirable.

ORIENTATION

- Attend a 2 day theory and practical training session.
- Observe 2 presentations of current Community Speakers.
- Present the standardised presentation to relevant *MOVE* staff members.
- Present the standardised presentation to a community group under supervision from a *MOVE* staff member.

ONGOING TRAINING & DEVELOPMENT

- Quarterly four (4) hour update sessions. Volunteers must attend at least two (2) per year.
- Notification of access to regularly updated information and resources provided as approved.
- Quarterly four Consumer Information Bulletins for you to read.

LOCATION AND HOURS OF WORK

Presentations may occur on weekdays and weekends, during the day or in the evening. Presentations usually run for an hour including question time. Presentations are held across the state. The presentations will occur in a range of locations in your preferred area.

DRESS CODE

- Community Speakers are required to wear smart clothing when giving a presentation to a group. For example, this would include smart trousers and collard shirt for men and smart trousers/ skirt and a blouse for women.

CONDITIONS OF VOLUNTEERING

- All volunteers are subject to a satisfactory Police Check.
- All volunteers must be over the age of 18 years.
- This position is freely undertaken, is an unpaid position and will not replace any paid position within the organisation.
- A minimum of six (6) months commitment from you is required from commencement date.
- Successful completion of orientation program plus ongoing participation in training and development activities.
- Insurance coverage is provided for Volunteers as prescribed *MOVE's* insurance policy.

VOLUNTEER STATEMENT

I have read, understand and accept the above Position Description.

Volunteer name: _____	
Volunteer signature: _____	Date ___/___/___
Contact number: _____	

Community Programs Coordinator signature: _____
Date ___/___/___

Please return to the Community Programs Coordinator and retain a signed copy for your records.