



# Marshfield Medical Center Beaver Dam

## VOLUNTEER HANDBOOK



### **Volunteer Services**

Marshfield Medical Center – Beaver Dam

707 S. University Ave.

Beaver Dam, WI 53916

Office Hours: Monday – Friday, 7:30 a.m. – 4:00 p.m.

Dan Moritz, Manager

Phone: 920-887-5988

[moritz.daniel@marshfieldclinic.org](mailto:moritz.daniel@marshfieldclinic.org)



## Marshfield Medical Center Beaver Dam

### **Welcome!**

I am happy you have chosen to help serve our patients, their families, visitors and staff here at Marshfield Medical Center Beaver Dam. You will be serving in a vital capacity requiring dedicated effort, loyalty and enthusiasm. There are many volunteers, like you, who have discovered a new way of life by serving others.

Every volunteer is a vital link between the hospital and the community and, as such, promotes understanding by stimulating interest in the hospital's achievements, progress and future goals.

Volunteers provide services sometimes not available to our patients and their families. As a volunteer, you will maintain a regular volunteer schedule and serve a minimum of 2-3 hours per week.

The guidelines in this handbook will help introduce you to your new volunteer position. Please read it carefully before beginning your service. Then, refer to it often in order to answer your questions and make your volunteer efforts and experience as effective and rewarding as possible. I am always available to help you in your new position. Please feel free to seek assistance and contact me whenever necessary. Your comments, suggestions and concerns are very important to me.

I sincerely hope you enjoy your volunteer experience.

Dan Moritz

Manager, Volunteer Services  
(920) 887-5988

[moritz.daniel@marshfieldclinic.org](mailto:moritz.daniel@marshfieldclinic.org)





Marshfield Medical Center  
Beaver Dam

Marshfield Clinic Health System (MCHS) is an integrated health system serving Wisconsin and Michigan's Upper Peninsula with more than 12,000 employees including more than 1,600 providers comprising over 170 specialties, a health plan, and research and education programs.

## **MISSION**

### **WE ENRICH LIVES**

...to create healthy communities through accessible, affordable, compassionate health care.

## **VISION**

### **WE WILL INNOVATE AND DEFINE THE FUTURE OF HEALTH CARE FOR GENERATIONS**

...and will be the consumer's first choice for health care.

## **VALUES**

**PATIENT-CENTERED:** We listen, serve and put the needs of the patient first.

**TRUST:** We earn trust through honesty, integrity, respect and compassion.

**TEAMWORK:** We work together, respecting each other and our professional roles.

**EXCELLENCE:** Through research, education and best practice, we deliver exceptional quality.

**AFFORDABILITY:** We are accountable as we manage resources and deliver value-based care.

## ENVIRONMENT OF CARE – QUICK REFERENCE

- **MSDS (Material Safety Data Sheet)**

Details a single chemical product; its hazards and controls. All MSDS are accessible on the MMC-BD intranet.

- **Any Security Needs**

Call 888. A Security Alert will be announced to dispatch our security (maintenance employees) to the location.

- **Clean-Up Issues – Spills, Trash, etc.**

Notify Environmental Services – ext. 96214.

- **Any Defective or Failed Equipment**

Page MOD (Maintenance on Demand) – 8-1-920-576-6780.

- **Utility Failures**

Page MOD (Maintenance on Demand) – 8-1-920-576-6780.

- **Important Phone Numbers**

Volunteer Manager..... ext. 45988  
Environmental Services..... ext. 44151  
Employee Health..... ext. 44019  
Maintenance Dept. (non-emergency) .... ext. 44199  
Maintenance on Demand (emergency) 8-1-920-576-6780  
Security (emergency) ..... call 888  
Switchboard..... Dial “0”

**Security is for Everyone:** Any emergency situation should be reported by dialing **888**.

**NOTE:** When dialing a phone number (other than an extension) **press “8” first.**

## **Volunteer Pledge**

1. I will be punctual and conscientious in the fulfillment of my duties and will accept supervision graciously.
2. I will conduct myself with dignity, courtesy, and consideration for others.
3. I will consider as confidential all information which I may hear directly or indirectly concerning a patient, physician, or any member of the staff, and will not seek information in regard to a patient.
4. I will take any concerns, criticisms, or suggestions to the Volunteer Services Manager.
5. I will endeavor to make my work of the highest quality.
6. I will uphold the traditions and standards of this hospital, and will interpret them in a positive manner to the community at large.

## **Rights for Volunteers**

A volunteer has the following rights:

1. The right to be treated as a unique support to our hospital, not just as free help.
2. The right to a suitable assignment, with consideration for personal preference, temperament, experience, education, and employment background.
3. The right to know as much about the hospital as possible, including its policies, people, and programs.
4. The right to training for the job, through thoughtfully planned and effectively presented programs.
5. The right to continuing education on the job, as a follow-up to the initial training, including information about new developments and training for greater responsibility.
6. The right to sound guidance and direction, by someone who is experienced, patient, well-informed, and thoughtful; and who has the time to invest in giving guidance.
7. The right to a designated place to work which is orderly, conducive to work, and worthy of the job to be done.
8. The right to promotion and a variety of experiences, through advancement to assignments of more responsibility, through transfer from one activity to another, and through special assignment.
9. The right *to be heard*, and to have a part in planning to feel free to make suggestions, and to have respect shown for an honest opinion.
10. *The right of recognition*, through promotions, awards, and fair treatment on a day-to-day basis.

## Annual Volunteer Requirements

In October, a self-learning packet of important material covering Marshfield Clinic Health System policies, emergency response, and safety information will be mailed to your home. This material is being sent to you because Marshfield Clinic Health System and the Joint Commission on Accreditation of Healthcare Organizations require all associates and volunteers to review this information annually. It is Marshfield Clinic Health System's responsibility to give you the information and your responsibility to review it, sign off that you understand the information, and mail signed items back to Volunteer Services in the return envelope provided.

## Volunteer Benefits

Volunteers at Marshfield Medical Center-Beaver Dam receive some benefits designated especially for them.

- We can provide a **record of volunteer hours and letters of recommendation** when you need them for job applications, National Honor Society, or scholarships. Please note: Letters of recommendation will only be provided to volunteers in good standing who have served more than 50 hours. If you need a letter of recommendation or reference, please contact our office at least **two weeks in advance** of your need so we have adequate time to complete your request.
- **Health work:** ALL health work, must be completed before service area training/shadowing.
- **Annual Volunteer Appreciation Event:** The annual Appreciation to recognize your volunteer service.
- **Meal Discount:** Volunteers are eligible to receive a \$7.00 discount on their meal from the MMC-BD cafeteria each time they are here to volunteer. Volunteers must show their volunteer ID badge to receive this discount. The cafeteria is centrally located on the main floor of the hospital. Cafeteria hours are: Breakfast – 7:30-9:00 AM and Lunch – 11:00 AM-1:30 PM
- **Parking:** Employees and hospital volunteers are asked to park in the Employee Parking areas of our main parking lot. Please do not park in physician, handicapped or visitor parking areas.

## Volunteer Responsibilities

### Dress Code & Personal Appearance

*(For a comprehensive description, see Document ID # 4FAR5N4RSFP7-3-229 Personal Appearance (Dress Code))*

As a service organization concerned with health, patient care, infection control, safety, and business relations, Marshfield Clinic Health System has criteria to govern attire and personal appearance at all of their sites. These criteria emphasize the value of projecting a professional image and are based on business necessity but attempt to recognize individual differences in taste.

## **Footwear**

### Appropriate

- Clean and in good repair
- Close toed shoes highly recommended
  - Professional, open-toed shoes may be worn in non-patient/non-lab areas ONLY if no safety issues. Open-toed shoes are not allowed in patient care areas.
- Athletic shoes acceptable

### Inappropriate

- NO flip flops, beach sandals, hiking boots or heels over 3 inches

## **Attire**

### Appropriate

- Simple, clean and professional
- Dress pants/slacks highly recommended
- Skirts, dresses and capris acceptable if they cover knees
- Shirts/tops should be professional and not expose shoulders, back, chest or abdomen

### Inappropriate

- NO mini-skirts or shorts
- NO hoodies
- NO excessive make-up or perfume (scents can make patients nauseous)
- NO suggestive or ill-fitting clothing
- Jewelry should not present a safety or infection control hazard and should reflect a professional appearance. Body and facial piercing is allowable provided it does not interfere with your ability to communicate with staff, patients, and volunteers, or impact safety or infection control practices.
- Tattoos found to be offensive must be covered. Examples include, but are not limited to: pictures or words of a sexual nature, gang affiliations, violence, profanity or derogatory words/images.
- When in doubt, don't wear it

## Identification Badge

Volunteers must wear provided nametag visibly on or near the neckline.

The nametag is a safety mechanism for identification to our patients and families, as well as a security mechanism to gain access to our building. The nametag also alerts other staff members that you have been cleared to be at this MMC-BD facility.

## Personal Belongings

Personal belongings must be kept in lockers in the Volunteer Conference room. If you require more room for belongings (i.e. backpacks, instruments etc.) please ask Volunteer Services staff for appropriate storage space options in the Volunteer Services office.

## Smoking Policy *(see Tobacco Free Environment policy Document ID# 4FAR5N4RSFP7-3-97)*

All MCHS facilities are tobacco-free, providing a safe and aesthetic environment. Use of tobacco products and/or any other smoking devices is not permitted anywhere in or on MCHS property at any time.

## Drug & Alcohol Policy *(see Drug & Alcohol Free Workplace Document ID #4FAR5N4RSFP7-3-23)*

Reporting for your shift at any MCHS facility while under the influence of alcohol, controlled substances, prescribed medications, or over-the-counter medications that impair your ability to safely and effectively perform your duties is strictly prohibited.

## Cellular Phone Use *(see Cell Phone and Personal Electronic Device Document ID #KT2N6QC5SZE5-3-1966)*

Maintaining patient privacy and confidentiality is a requirement of service. **Therefore, please refrain from using personal communication devices while volunteering.** The use of personal electronic devices is allowed **only** during break, meal periods or after your scheduled shift. Violations of MCHS policies in a public manner may result in corrective action up to and including termination of service, even if violation occurs when away from work. The use of camera phones is prohibited near patients or anywhere patient confidentiality could be compromised.

## Standards of Behavior and Professionalism *(see Standards of Behavior and Professionalism policy Document ID #4FAR5N4RSFP7-3-320)*

The System is committed to providing a patient-centered environment that fosters communication, teamwork, accountability and professionalism. Our Standards of Behavior and Professionalism are based on trust: Patients trust the System to provide exceptional quality and service; and colleagues trust each other, working as a team, to provide exceptional care. These standards are expectations to ensure that all physicians, staff and volunteers deliver exceptional service. Each person is a vital link in providing outstanding patient-centered service and expected to maintain the values set forth by the Systems' Mission-Vision-Values statement. These standards extend to all interactions physicians, staff and volunteers have in the communities the System serves.

**Volunteer/Employee Conduct** (see *Employee Accountability and Conduct policy Document ID #4FAR5N4RSFP7-3-293*)

The System strives to promote a culture of compassion, integrity, dignity and safety. All volunteers and staff are expected to maintain a positive, inviting and professional work environment, treating everyone with respect, kindness and courtesy. Patient and System needs will be met through serving customers in an efficient, timely and caring manner.

The System will not condone volunteer behavior that is offensive or harmful to the health, safety, or morale of other employees, or to the interests of the organization, its patients or other customers. In order to avoid such behaviors before they occur, the System has developed policies to describe the kinds of behaviors that are unacceptable and the rights and responsibilities of all parties.

The System uses corrective disciplinary action when a volunteer's conduct or performance is unsatisfactory or when the organization's rules and regulations have been violated. The purpose of corrective action is to address volunteer behavior in accordance with System policies and procedures.

**Corrective Action/Dismissal** (see *Performance Management and Corrective Action policy Document ID #4FAR5N4RSFP7-3-291*)

Some violations of work rules are serious. When a volunteer's performance is unsatisfactory or when the System's policies or procedures have been violated, disciplinary measures become necessary. The System has developed policies and procedures to reduce disciplinary issues by informing employees/volunteers in advance of the consequences of their behavior. These policies also encourage consistency in dealing with disciplinary issues. They provide a method for employees/volunteers to improve behavior. Offenders may receive an oral or written warning in order to facilitate positive change. Immediate suspension or dismissal may occur depending on the offense.

Reasons for corrective action or dismissal may include, but are not limited to:

- Breach of confidentiality: As a volunteer, you will be trusted to keep confidential any information you may learn about the patients you encounter.
- Inappropriate attitude or behavior:
  - o Verbal outbursts
  - o Insults or criticism against others or our organization
  - o Condescending language
  - o Physical threats or actions
  - o Not following policy/protocol
  - o Being disrespectful
  - o Harassment
- Failure in following dress code.
- Unexcused absences.

- Visiting with friends during your assigned volunteer hours, or having friends loitering in the hospital.
- Using computers for non-volunteer related business such as computer games, e-mail, instant messenger and other internet usage.
- Breach of work practices and rules (may be at Volunteer Manager's discretion).

## Volunteer News

It is your responsibility to read the newsletter as it will be providing important updates and information. *Volunteer News* is emailed (if email is provided) or mailed and copies are available in the Volunteer Conference Room.



## Etiquette

- Volunteers are asked to maintain a friendly attitude whenever they are on duty. Do not become emotionally involved with patients. In all cases, please use common sense.
- Even though you may report to a specific supervisor in the area where you work, remember that all volunteers are under the general supervision of the Manager of Volunteer Services.
- A good slogan to remember is: "When in doubt, ask." If you have any questions regarding your assignment, ask the Manager of Volunteer Services, or your immediate supervisor.
- Doctors or Ministers in Patient's Rooms: Do not enter a patient's room if a doctor, priest, minister, or chaplain is in the room. If one should enter while you are there, please leave promptly. You may return after they leave.

## Changes in Address, Schedule, Service

Please contact Volunteer Services at 920.887.5988 ext. 45988:

- Circumstances require you to change your volunteer schedule. We ask that you seek your own replacement whenever possible.
- Your address, phone number, or other information has been changed.
- You must terminate your volunteer service. At this time you will be expected to return your uniform and name badge to the department.

## Service Records and Liability Insurance

- It is very important for you to sign in when you come, and sign out when you leave, using the VIC net sign in process or completing your time sheet paper entry. If you forget to log in or sign in on your paper time sheet, please contact the Volunteer Services staff so this can be corrected as soon as possible.
- Another important topic is our liability insurance. Because volunteers are not considered employees, they are not eligible for coverage under Worker's Compensation; however, Marshfield Clinic Health System does carry Volunteer Accident Liability Insurance should you be injured while performing activities on behalf of Marshfield Clinic Health System.

## **Illness and Absences**

- If you have been ill, have been in contact with someone who has been ill, or are just not feeling well, **DO NOT COME IN**. It is best for you and for the associates and patients that you stay at home.
- If you are scheduled to work on a regular schedule, make arrangements with your area if you know ahead of time that you cannot be there. If you become ill and cannot come in, contact your work area. If you are unable to reach someone in your work area, then call Volunteer Services at 920.887.5988.

## **Children and Visitors**

- When volunteering, please do not bring children, relatives or other visitors with you. You have been cleared by our Employee Health Office and instructed in confidentiality, infection control, and other MMC policies and procedures. The friend/visitor who comes with you is not informed of our policies and is not covered by our liability insurance.

## **Excused from Volunteering**

- **HOLIDAYS** - When one of these holidays falls on your scheduled day, you are excused from volunteering: New Year's Day, Easter, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas Eve (afternoon), Christmas Day.
- **INCLEMENT WEATHER** - If school is canceled due to inclement weather, you are excused from volunteering.

## **In the Event of an Emergency**

If you happen to be volunteering in an area where there is a medical emergency, active shooter, threat, or fire, **dial 888 FROM AN INTERNAL MMC-BD PHONE** to activate the internal response team.

Questions you will be asked by our hospital operator:

- Identify yourself (name and that you are a volunteer)
- Location of incident
- Does the incident involve a patient, visitor or associate
- Brief description of what happen (i.e., fainting, chest pain, dizzy, etc.)

## **Safety Practices**

- When lifting, bend at the knees and hips; keep the back straight, holding the object close to the body.
- Wipe up all safe spills such as water or drinks. Never touch blood, body fluids or any unknown spills – report them instead to the nearest staff person.
- Be careful when rounding “blind corners.” Check the mirrors located on the walls in these areas.
- Pick up objects from the floor.

- Push wheelchairs down the center of halls to prevent hitting persons coming from rooms on either side.
- If an accident occurs while you are on duty, report it immediately to Volunteer Services or to your immediate supervisor. If Volunteer Services is closed, report the accident the next day. If you have been injured, or for an emergency, go to the Emergency Department.
- If a patient makes a request of you, please clear it with the nurse in charge before doing what is asked.
- Do not administer any medications.
- Do not bring into MMC-BD any unauthorized articles, such as drugs or alcoholic beverages.
- Do not remove patients from their units unless you have permission from the nurse in charge.
- Do not help patients in or out of a bed or wheelchair. Call a staff member for assistance.
- Please do not use your scheduled hours of service as a time for visiting a friend or relative who is a patient.
- We are a non-smoking facility. Please do not smoke on duty, or wear clothes that smell of smoke.

### **Incident Reporting**

If an incident or accident occurs while you are on duty, report it immediately to your supervisor or Volunteer Services so they can fill out an incident report. If you are injured, go to Urgent Care at Marshfield Medical Center – Beaver Dam. If Urgent Care is closed, go to Marshfield Medical Center’s Emergency Department.

### **Fire Safety**

The hospital has an overall fire response plan and each hospital unit has their own unit specific action plans in the event of a fire. What do you need to know if there is a fire?

- A fire will be announced through the overhead paging system as “Attention please – fire alarm + location”
- Response to a fire includes:
  - ✓ **R** = Rescue patients from smoke/fire
  - ✓ **A** = Alarm – pull fire alarm and call phone number 911
  - ✓ **C** = Contain the smoke/fire by closing all doors to rooms and corridors
  - ✓ **E** = Extinguish the fire (if safe to do so) or Evacuate
- To operate a fire extinguisher
  - ✓ **P** = Pull pin from extinguisher
  - ✓ **A** = Aim extinguisher at base of fire
  - ✓ **S** = Squeeze handle of extinguisher
  - ✓ **S** = Sweep back and forth on base of fire
- To evacuate
  - ✓ Through the adjoining smoke compartment (through the fire doors)
  - ✓ Horizontally into an adjoining building, if needed
  - ✓ Down the stairwells, if needed
  - ✓ Do not use elevators

## **\*DO NOT BLOCK FIRE EXTINGUISHER ACCESS AT ANY TIME.\***

### **Active Shooter Response** *(see Active Shooter Policy Document ID #V3JTWDA5CEX2-3-72)*

Active shooter situations are unpredictable and evolve quickly. Typically, the immediate involvement of law enforcement is required to stop the shooting and mitigate harm to victims. Active shooter situations are often over within 10-15 minutes, and possibly before law enforcement arrives. Individuals need to be prepared both mentally and physically to deal with an active shooter situation.

In the event an individual or individuals come into the facility displaying a firearm or as an "active shooter" employee, visitors, volunteers and patients in the affected area should quickly determine the most reasonable way to protect their own life. Remember that visitors are likely to follow the lead of employees during an active shooter situation.

- Run- if there is an accessible escape path, attempt to evacuate the premises. Be sure to:
  - Have an escape route and plan in mind
  - Evacuate regardless of whether others agree to follow
  - Leave your belongings behind
  - Help others escape, if possible
  - Prevent individuals from entering an area where the active shooter may be
  - Follow the instructions of any police officers and keep hands visible
  - Do not attempt to move wounded people
  - Call 911 when you are safe. If available, employees should call Switchboard at -0- to inform the operators to activate the Active Shooter/Armed Intruder Alert. The intent is for the employee to give as much information to the operator as possible. Contact Security to initiate a lockdown of the facility.
- Hide – If evacuation is not possible, find a place to hide where the active shooter is less likely to find you. Your hiding place should:
  - Be out of the active shooter's view
  - Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door)
  - Not trap you or restrict your options for movement. To prevent an active shooter from entering your hiding place:
    - Lock the door
    - Blockade the door with heavy furniture
    - Silence your cell phone and/or pager
    - Turn off any source of noise (i.e., radios, televisions)
    - Hide behind large items (i.e., cabinets, desks)
    - Remain quiet
    - Remain calm
    - Dial 911, if possible, to alert police to the active shooter's location
    - If you cannot speak, leave the line open and allow the dispatcher to listen

- Only leave the area after the “All Clear” is announced or directed by law enforcement
- Fight - As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by:
  - Acting as aggressively as possible against him/her
  - Throw items and improvising weapons
  - Yell
  - Commit to your actions

This is a link to a nearly 6 minute training video that explains what is discussed above and adds additional information that is useful in such an event.

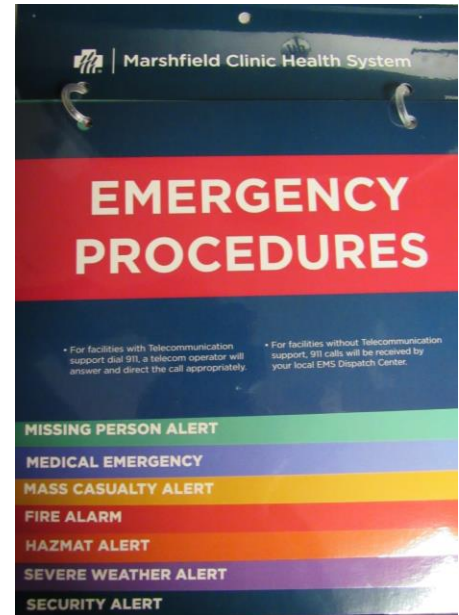
<https://www.youtube.com/watch?v=5VcSwejU2D0&t=2s>

### Emergency Procedures

Emergency procedure flip charts (see picture) are located throughout the MMC-BD campus, and provide information on dealing with various types of emergencies.

### Pain Management *(see Pain Management policy Document ID#KT2N6QC5SZE5-3-1616)*

Our MCHS mission is to provide compassionate health care; managing pain and alleviating patient suffering is part of the mission and patients have the right to have the highest level of pain relief that can realistically and safely be provided for them. Therefore, if you are interacting with a patient that expresses they are in pain or having pain, please alert a staff member right away.



### Cultural Diversity

The ability to understand, communicate with and effectively interact with people across different cultures is extremely important. It is extremely important that you, as a volunteer, are aware MCHS provides care to patients with many diverse values, beliefs and behaviors. Examples of ethnic categories within our demographics are: Hispanic, Latino, Asian, Amish, American Indian, African American and Hmong. MCHS values and respects the diversity of all individuals who interact with our health system.

**Interpreter Services** (see *Interpretation and Translation Services for Limited English Proficiency Patients policy Document ID# KT2N6QC5SZE5-9-149*)

If you come in contact with a patient/family that does not speak English, or speaks a minimal amount of English, please note that there are interpreter services available. Should you identify this need, please notify a charge nurse and/or manager to contact *Interpreter Services* (Ext. 1-877-746-4674, Monday – Friday, 8 a.m.-5 p.m.) and they should follow-up accordingly. After hours and weekend please dial “O” for the operators who will then manage the request.

**Patient Bill of Rights and Responsibilities** (see *Patient Bill of Rights and Responsibilities policy Document ID#TM7XN2FTXHRM-3-206*)

MCHS recognizes that each individual is important, unique, and deserves to be treated with respect and concern. This includes respecting basic rights and personal dignity of all patients without distinction and discrimination.

The Patient Bill of Rights and Responsibilities is based on federal and state laws, accreditation standards, and core values. Patients’ Rights and Responsibilities will be displayed on the public website, in prominent locations within the facilities, and given to the patient at time of hospital admission.

**Patients have the following rights in accordance with the Patient Bill of Rights:**

- Access to Care
- Considerate Care
- Privacy
- Notification of Admission
- Identity of Physicians and Staff
- Confidentiality
- Information
- Healthcare Decision Making
- Communication
- Informed Consent
- Personal Safety
- Continuity of Care
- Consult Another Physician
- Refusal of Treatment
- Transfer
- Research
- Advance Directives
- Pain Management
- Explanation of Healthcare Facility Charges
- Restraints and Seclusion
- Children's Rights

**Patients have the following responsibilities:**

- Provision of Information
- Compliance with Instructions
- Refusal of Treatment
- Payment of Charges
- Healthcare Facility Rules and Regulations
- Advance Directives
- Respect and Consideration
- Concerns or Complaints

**Resources to share complaints or concerns and resolve issues include:**

Patient Experience Liaison  
Marshfield Medical Center – Beaver Dam  
707 S. University Avenue  
Beaver Dam, WI 53916  
Phone: 1-920-887-5952, ext. 45952

**Caregiver Misconduct** (see *Responding to Allegations of Patient Abuse, Neglect, or Misappropriation of Patient Property* policy Document ID# TM7XN2FTXHRM-3-209)

It is the responsibility of all staff, physicians, allied providers and volunteers to honor **all patient rights** listed in the MCHS "Patient Bill of Rights and Responsibilities" policy, including the following:

- *Patients have the right to receive considerate, respectful care from qualified personnel who respect the patient's dignity, personal values, spiritual values, belief system and culture, and the right to be **free from all forms of abuse or harassment***
- *Medical providers and other staff will do everything possible **to ensure the patient's safety** while in the facilities*

**Patient Abuse and Reporting:**

Abuse is any action by a caregiver (also referred to as **caregiver misconduct**) that is not in line with MCHS policies or procedures, is not part of the patient's treatment plan and is done intentionally to cause harm (e.g. inflicting pain or injury, denying patient rights, causing mental or emotional harm, stealing a patient's belongings, etc.)

Examples of caregiver abuse include:

- Physical – hitting, slapping, pinching, kicking, shoving, pushing, forcible administration of a medication without a valid order, etc.
- Sexual – harassment, inappropriate touching, intercourse, assault, etc.
- Verbal abuse – threats of harm, saying things to intentionally frighten a patient, etc.
- Mental abuse – humiliation, harassment, intimidation, threats of punishment, threats of depriving care or possessions, etc.

Any volunteer who witnesses or becomes aware of any caregiver misconduct needs to report it as soon as possible and no later than 2 hours after the perceived misconduct was observed.

Volunteers need to report caregiver misconduct to the Administrator on Call. Using an internal phone, dial 0 to contact the switch board. If no one answers, continue until you talk to the supervisor.

### **Patient Safety or Quality of Care Concerns**

We strive to provide safe, high-quality patient care at Marshfield Medical Center. We design and monitor our processes to eliminate or minimize errors. If something does go wrong, we follow up to learn why and prevent reoccurrences.

At Marshfield Clinic Health System (MCHS), it is our top priority to provide patients with high quality and safe healthcare. Any staff member/volunteer who has concerns about safety or quality of care provided at Marshfield Medical Center may report these concerns. Please bring your concerns to Management/Administration, the Risk Manager, Compliance officer or the Laboratory Medical Director or quality Manager. Marshfield Medical Center will take no disciplinary action because an employee/volunteer reports safety or quality of care concerns. You may also contact the below agencies about issues concerning patient safety and quality of hospital care that has not been addressed to your satisfaction:

#### **The Joint Commission**

One Renaissance Boulevard  
Oakbrook Terrace, IL 60181  
Phone: 1-800-994-6610  
E-mail: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)  
[www.jointcommission.org](http://www.jointcommission.org)

**Livanta LLC** (for Medicare beneficiaries)  
BFCC-QIO Program  
10820 Guilford Road, Ste 202  
Annapolis Junction, MD 20701-1262  
Phone: 1-888-524-9900 or  
1-888-985-8775 (TTY)

#### **Wisconsin Division of Quality Assurance**

P.O. Box 2969  
Madison, WI 53701-2960  
Phone: 608-266-8481  
Fax: 608-267-0352  
[www.dhs.wisconsin.gov](http://www.dhs.wisconsin.gov)

For Laboratory Concerns:

#### **Center for Medicare & Medicaid Services (CMS) Central Office**

Division of Laboratory Services (CLIA)  
7500 Security Boulevard, Mail Stop S2-12-25  
Baltimore, MD 21244-1850  
Phone: 1-877-267-2323 ext. 63531

## Infection Prevention and Control

Please remember to follow the principles of infection transmission prevention:

Before entering a patient's room, look for an isolation sign under the room number. If you have received training and have been approved to enter isolation rooms, follow the instructions on the isolation signs. Practice proper hand hygiene before entering every room, after exiting every room, and always after removing gloves, gowns and/or masks. Practice hand hygiene in the presence of the patient whenever possible. This is the bare minimum required.

### **Following precautions correctly with every patient demonstrates our commitment to keeping the patient first.**

- Remember to stay home if you are sick, or if someone in your family has a communicable infection. If you have been exposed to an infectious disease (such as chickenpox, measles, mumps, or tuberculosis), notify Volunteer Services prior to working your volunteer schedule. They will notify the appropriate department as necessary. Volunteers exposed at work must notify Emergency Department immediately.
- All volunteers must be free of skin, eye, respiratory, or gastrointestinal infections.
- All volunteers should have their vaccinations up-to-date to prevent communicable diseases like measles and pertussis.
- All volunteers should get their annual influenza vaccination before November 30.
- Remember that volunteers should **not** clean up spills of blood or body fluid. In case of a spill, a staff member should be called immediately. The volunteer should avoid being exposed to blood or body fluid.

If a volunteer does experience a significant exposure to blood or body fluid:

- The exposed site must be thoroughly cleansed/rinsed as soon as possible
- The volunteer must **immediately** report the incident to the supervisor, who will begin appropriate follow-up
- A staff member will complete an incident report
- Do not rub or touch your eyes, nose, or mouth if your hands have been in contact with any blood or body fluid
- Gloves generally are not needed unless required by your service duties (i.e., cleaning toys on Peds, etc.) **or** you have skin rashes or broken skin and should always be removed and hands cleansed between patients

### **Hand Hygiene**

Hand hygiene is the single most important behavior to prevent infections. Hand hygiene means that you either use alcohol-based hand sanitizers or wash your hands with soap and water for 20 seconds.

**Hand sanitizers** are promoted by the CDC over traditional hand washing when hands are visibly clean. They allow freedom of movement away from traditional hand washing sinks and take less time. The sanitizer formulas (with emollients) are often easier on the skin than the antimicrobial

hand soaps. However, sanitizers cannot be used if the hands are visibly soiled (dirt, oil, blood, urine or feces). There is no residual action of the sanitizer once the alcohol is absorbed or evaporated. To be effective, the alcohol must be rubbed onto all surfaces of the hands, including between fingers and under fingernails.

**Handwashing** is the traditional method for cleaning hands and is required after using the bathroom. Antimicrobial soap has residual properties so your hands do stay cleaner longer. The down side is that you must have a sink available and it takes at least **20 seconds** of friction to thoroughly clean the hands. The whole hand washing procedure takes about 1 ½ -2 minutes. Over time with multiple uses antimicrobial soap may be irritating to the skin. Using a facility approved lotion can help your skin maintain its health and should be used frequently after washing your hands. **If your hands are visible soiled, find the nearest sink and thoroughly wash your hands with soap and water.**

### Cough Etiquette

**Cough into your elbow while turning away from others and then wash your hands.** Never cough into your bare hands; always use a Kleenex if you do not cough into your elbow and discard the Kleenex before cleansing your hands.

### Standard Precautions

A standard precautions sign is placed outside each patient's room (**under their room number**) and is only covered if the patient is in a specific type of isolation. These signs remind you that there are certain behaviors you must use for EVERY patient in order to protect yourself and them. They are not based on the patient's diagnosis but are used in every case when there is any possibility of contact with blood or other body fluids. Gloves protect your hands, gowns protect your clothes, masks protect your mouth and nostrils, and (when needed), eye protection is also used.

### STANDARD PRECAUTIONS: Okay to enter without training

Where do I find the room's precautions?  
*Example of standard room precautions posted outside of room.*

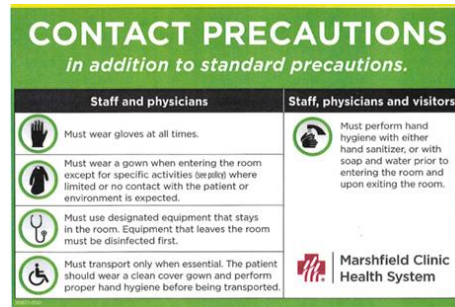


### CONTACT PRECAUTIONS: \*TRAINING IS REQUIRED TO ENTER\*

**Volunteers may not enter the room of any patient in isolation without training and the permission of the patient's nurse.**

Where do I find the room's precautions?

*Example of contact precautions posted outside of room.*



### Transmission-Based Isolation Precautions

Please be attentive for Marshfield Medical Center's isolation signs. These signs have pictures and written instructions to assist associates, visitors, and volunteers. **The signs have their own individual color coding and are always displayed under the room number.** Please see examples below, remember entering any patient room requires hand hygiene.

## **HIPAA: Awareness Training for Volunteers**

### **Health Insurance Portability & Accountability Act**

*Marshfield Medical Center has a strong tradition of protecting the privacy of patient information. Confidentiality has always been part of the hospital culture. However, now there is a law that sets a **national standard** to protect medical records and other personal health information. It is called the **Health Insurance Portability and Accountability Act or HIPAA**.*

#### **What is HIPAA?**

- HIPAA is a law passed by congress in 1996 and sets national standards for the protection of patient information.
- HIPAA applies to **ALL** health care providers: hospitals, physicians, associates, volunteers, insurance companies, labs, home care companies and surgery centers.
- HIPAA covers ALL forms of protected health information... oral, written and electronic.

#### **What is Protected Health Information (PHI)?**

According to HIPAA, **all** of the following information can be used to identify a patient:

- Addresses
- Dates
- Patient Name
- Telephone or fax numbers
- Social Security Numbers
- Medical Records Numbers
- Patient Account Numbers
- Insurance Plan Numbers
- Vehicle Information
- License Numbers
- Medical Equipment Numbers
- Photographs
- Fingerprints
- Email addresses
- Internet addresses

This information is referred to as individually identifiable health information (IIHI). Removing a patient name from a chart is no longer sufficient to **de-identify** the patient. HIPAA refers to this information as **protected health information** or **PHI**. Any health information that identifies someone or can be used to identify someone **MUST BE PROTECTED**.

#### **Sharing Patient Information**

HIPAA, under the Consent Rule, allows for the provider of care to use health information for **Treatment, Payment and Operations (TPO)**. Before HIPAA, it was common to use patient information for other purposes and to share more than the **minimum necessary** information. Now patients need to give prior authorization for the use of their health information for non-TPO purposes.

Under the **Minimum Necessary Rule**, volunteers should only have access to the information they need to fulfill their assigned duties.

## What is TPO?

HIPAA allows us to share patient information for:

<b>Treatment</b>	Providing care to patients
<b>Payment</b>	Getting paid for caring for patients
<b>Operations</b>	Normal business activities such as quality improvement, training, auditing, customer service and resolution of grievances.

If use of the information does not fall under one of these categories, **you must have the patient's signed authorization, before sharing that information with anyone!**

If personal health information (PHI) is involved, **STOP** and ask yourself: Does my sharing this information involve TPO for that patient (Treatment, Payment, Operations)?

If the answer is NO, don't pass it along unless you have been authorized to do so!

This includes information you may see or hear about hospitalized volunteers, friends and acquaintances. Sharing information for non-TPO purposes requires authorization from the patient involved.

## Scenarios

**#1 - During your shift, you enter a patient room to find a fellow volunteer who has been hospitalized.**

**OK to:** Converse with the volunteer as you would normally do with other patients as part of your routine duties.

**NOT OK to:** Talk about the hospitalized volunteer, including sharing the information with the Volunteer Office, unless the patient has authorized the release of that information.

**OK to:** Mention if he/she chooses to have the Volunteer Office notified it would be best if he/she called the office directly.

**#2 – You work where you have access to the patient census. While performing your regular duties, you come across the name of a fellow volunteer or acquaintance.**

**OK to:** Continue with your regular duties disregarding the information you happened upon.

**NOT OK to:** Assume, because he/she is a volunteer, or a personal friend, it is OK to notify the volunteer office or others you know!

**NOT OK to:** Scan the census looking for people you know!

**OK to:** Only use patient census for minimum necessary to do your job, e.g., responding to a request for a patient room number.

**#3 - You are having lunch in the cafeteria with a group of volunteer friends and someone makes the statement, "Did you know that Mary is in the hospital?"**

**OK to:** Politely stop the conversation and remind your fellow volunteer that sharing personal health information for non-TPO purposes is not something we do. A reminder to all that we need to be HIPAA-wise would be a very appropriate comment.

**NOT OK to:** Talk about any person's health information, without authorization, EVEN WHEN AMONG FRIENDS.

### **What are the consequences of not complying with the HIPAA law?**

It has always been against hospital policy to improperly share, use or dispose of patient information in the wrong way. Under HIPAA, there are now fines and penalties for this that can involve jail time.

We treat privacy seriously, which is why every volunteer and team member is required to sign a confidentiality form.

A breach of privacy may result in termination.

### **Why should we protect patient privacy?**

- It is the right thing to do.
- It is in keeping with the values of our organization.
- Think about how you would feel if it was your information or that of a loved one being disclosed.
- It is the law.

### **What is with Patient Rights?**

Under HIPAA, patients have a right to know how their health information may be used or disclosed and that they have certain privacy rights. These rights (some new and some revised) are communicated to our patients through a document called Notice of Privacy Practices (NPP).

Patients have a right to:

- Obtain a list of who we have shared their health information with for the past six years
- Request to amend their medical record
- Request other communications such as asking to be notified of lab results only at work and not at home
- Review and copy their medical record
- Request restrictions on the use or sharing of their information, such as "opting out" of the hospital directory.

### **Providing for the security of patient information**

#### **With Computers**

We have to make sure all health information, no matter where it is, is secure. This includes information stored on computers. Everyone who uses a computer has a duty to keep health information secure.

HIPAA says we must protect all patient information on computers by:

- Properly signing-on with individual IDs and passwords
- Signing-off of computers if walking away from the desk
- Keeping IDs and passwords CONFIDENTIAL
- Protecting computer screens from unwanted viewing

### **Through Proper Disposal of Information**

We have to handle and dispose of patient information carefully, such as using a shredder instead of throwing patient information away. The procedure for the proper disposal of health information will be part of service-specific training!

RULE OF THUMB....NEVER dispose of patient information in any open area trash bin. When in doubt, ASK.

### **With the use of e-mail and faxes**

HIPAA says we must protect all patient information transmitted electronically. Volunteers involved with these tasks will receive special training.

### **Reporting Violations**

It is EVERYONE's responsibility to report violations, or wrong doings. Whether someone received patient information improperly, or shared patient information in the wrong way, everyone has a responsibility to report violations. HIPAA violations are punishable by fines (\$50,000) and imprisonment (up to 1 year). When in doubt...ASK!!

- Hospital Compliance Hotline: 1-877-373-0122
- Compliance and Privacy Specialist: 715-221-6044

### **What's next?**

This awareness training is intended to give you a general overview of HIPAA, and will satisfy your core training requirement. If you routinely have access to patient information, as a result of your regularly assigned duties, you will likely receive further training on how HIPAA related policies and procedures might affect your work.

Help us to keep the HIPAA Awareness level HIGH! Be HIPAA wise and model the correct behavior.

### **Remember to.....**

- ALWAYS STOP, and ask yourself, should I be sharing this patient information?
- If it doesn't pertain to TPO, don't discuss it!!!
- Think of patient information about fellow volunteers, neighbors and acquaintances as protected information, not for sharing!!!
- Dispose of patient information by placing in appropriate shredding bins...never in an open wastebasket.
- Log out or lock computers if you leave the workstation for any reason.
- Report all violations....enforcing the regulations is everyone's responsibility!

## **Confidentiality – it concerns us all!**

**What you see here,  
What you hear here,  
Should stay here,  
When you leave here!**

Because of your responsibilities at MCHS, you may have access to confidential business and protected health information (PHI). This may include information concerning MCHS's financial status, business practices, strategic and marketing plans, employee records PHI (individually identifiable information derived from a relationship between patients and health care professionals). This information is to remain **CONFIDENTIAL**.

Access to PHI while performing service duties is on a minimum necessary basis only. Confidential information must not be disclosed to or discussed with anyone outside the facility or in public areas within the facility. Discussion of patient information by employees/volunteers is permissible only to the extent necessary to carry out their job responsibilities. Gossip and careless remarks regarding a patient, in or out of the system, are violations of trust and the confidentiality policy, as well as potential violations of state and/or federal privacy laws.

A breach of confidentiality can occur in a number of ways. Here are some common examples of PHI breaches:

1. Unauthorized Disclosure or Sharing
  - a. Discussing a patient situation on social media (Even if the situation is discussed generically and no PHI is shared, a patient could be identified by the context of the situation.)
  - b. Sharing sensitive patient information (e.g., patient listing) with others without a business need
  - c. Talking about a patient in a public setting
2. Unintentional Disclosure
  - a. Leaving printed information containing PHI (e.g., patient listing) face-up next to a printer in an area where others may see it
  - b. Leaving PHI information in a pocket, smock or vest

Staff and volunteers should take the following steps to protect patient privacy and avoid breaches:

1. Discard confidential patient documents by shredding or placing them in labeled recycling containers
2. Place patient documents face down on desks so they cannot be viewed by others
3. Do not leave computers, laptops, convertibles, iPads, etc., unattended
4. Log off or lock the computer before walking away

## Transport of Patient/Visitor

Volunteers *must* be trained how to use a wheelchair before they may transport patients or visitors. **If a volunteer ever feels uncomfortable transporting a patient/visitor, for whatever reason, please do not transport.** Volunteers are not expected to handle/transport patients/visitors whom they feel unqualified to handle. Talk to a staff member and explain why you are unable to transport.

Only patients who are *medically stable* are to be transported by volunteers. **Evaluating “stability” is the responsibility of the requesting department.**

## Evaluation Guidelines

Patient must be:

- Under 300 pounds
- Able to get into and out of wheelchair without lifting assistance
- Transported via wheelchair; not in a cot, gurney, or striker chair
- Able to have their ride pick them up at an entrance to our facility

Patient must NOT:

- Be attached to an IV or hospital oxygen tank (patients with capped off IVs or personal portable O2 tank are okay).
- Be identified as a “fall risk” or “video monitored” patient

Patients considered at risk for falling will be identified by:

- **yellow** sticker on armband
- **yellow** socks
- **yellow** sticker on chart
- a magnetic star on the patient’s door frame.
- If you enter a fall risk room and see a patient trying to get out of bed/chair alone, walking around, or on the floor, press the call light immediately to notify a staff member. Try to encourage the patient to wait for help.

Volunteers may guide a patient into or out of a wheelchair if needed. **Never lift a patient or adjust any medical equipment.** Volunteers may **assist** a staff member in transporting patients with oxygen that is attached to the wheelchair or with an IV.

When arriving for a patient transport, to maintain confidentiality, please use patient’s first name only and room number or destination.

## GENERAL REMINDERS:

- For extra security, stand behind wheelchair and hold the handlebars when staff is assisting patient into or out of wheelchair.
- Ask the patient to place hands in lap so elbows do not extend beyond armrests.
- The person being transferred should have shoes or slippers on – no stocking feet.
- Do not allow patients to pull on you when transferring **AND DO NOT LIFT PATIENTS.**
- Turn blind corners cautiously. Check mirrors at corners in hallways for oncoming traffic.
- Use staff elevators whenever possible. Avoid using the visitor elevators.
- Use automated doors at entrance/exit and whenever possible. Ask for help opening doors if needed. **DO NOT** allow doors to close on patients.

## **WHEELCHAIR PROCEDURES:**

- Put wheelchair close to patient.
- Introduce yourself and explain your role using AIDET (see following section).
- Lock the brakes.
- Move footrests out of the way (bend at knees to do so).
- Guide patient into or out of the wheelchair.
- Ensure patient comfort/safety.
- Place patient feet on footrests.
- Release the brakes.
- Use good body mechanics when transporting.
- Get staff assistance for transporting patient with extra equipment.

## **ELEVATOR PROTOCOL:**

- Put elevator on HOLD before wheeling patient in or out.
- **BACK CHAIR INTO ELEVATOR** so patient is facing doors.

Volunteers may also provide wheelchair transport to outpatients or visitors within the hospital. If an outpatient or visitor has a problem getting into or out of a wheelchair or you are unable to push them an associate from the area should be notified.

## ***AIDET: The Five Fundamentals of Patient Centered Care***

- Acknowledgment
- Introduction/Welcome
- Duration/Time Expectation
- Explanation
- Thank you

### **Acknowledgment**

As a Marshfield Medical Center Volunteer committed to patient care, every time you meet a patient, staff or visitor acknowledges their presence:

- **STOP** what you are doing and provide a visible sign that you are acknowledging the presence of the person, so that the patient, visitor or staff knows they are important.
- Do this by **calling them by name.**
- Do this by **making eye contact.**
- Do this by **smiling.**

**When you acknowledge the people around you, you show that you care.**

### **Introduction/Welcome**

- **WELCOME** the patient to Marshfield Medical Center, extending to them a warm greeting.
- **INTRODUCE** yourself by name and by title
- **Explain YOUR ROLE** as a Volunteer on campus.
- Get up and offer your **ASSISTANCE** to help with way finding.
- Make the first impression powerful!

You may ask: Why are we asking you to focus on the Five Fundamentals of Patient Centered Care?

The answer is that the Volunteers at Marshfield Medical Center are committed to providing the best patient care possible.

**When you introduce yourself, you show that you care.**

**A good patient experience means a favorable recommendation of Marshfield Medical Center to family and friends.**

### **Duration/Time Expectation**

You are asked to inform people of Duration/Time Expectations by:

- Informing your customers how soon you will get their information to them. For example, if you need to call someone for further information state, "It will just be a minute while I call the register/house supervisor/that dept."
- If a patient has a procedure scheduled, you may state, "You will need to take a few minutes and stop at the registration desk through those doors"
- Informing the people you are helping about the typical distance to their location. For example, "It is a bit of a walk to HealthWORKS on Warren Street – you may want to move your car to that lot" or "I'll take you to HealthWORKS." Then get up and walk them to that area.

**When you inform the patient of how long something will take or how long they may have to walk, you show that you care. Remember, what you may consider to be routine, may be a first-time experience for the patient.**

### **Explanation**

When working with visitors/patients/staff, please:

- **Explain** who you are and what your role on campus is.
- **Speak positively about the hospital and its providers.**
- **Explain what they need to do once they get to their destination.** "Here is the café, there is a grill up front, and inside there are entrée's, your drinks and dessert, the silverware is outside past the cash register."
- If you have a "helpful hint" for about finding their way out or filling their time while waiting, share it with the patient/visitor
- Offer to answer any questions or concerns and refer any complaints to the appropriate staff that can address it immediately.

**When you take time to explain what people can expect, you show that you care.**

### **Thank You**

When working with others you are asked to show your gratitude for the opportunity to serve them by:

- Exercising courtesy by using the words "**PLEASE**" and "**THANK YOU**" frequently in conversations.
- Saying, "**Thank you for the opportunity to help you out today.**"
- Expressing your gratitude at having met them today! "**Thanks for stopping in today, I hope all goes well**" when your service is complete.

**When you say thank you, you show they matter and that you care.**

***You may ask: Why are we asking you to focus on the Five Fundamentals of Patient Centered Care - AIDET? The answer is that the Volunteers at Marshfield Medical Center are committed to providing the best customer service possible.***

## **Joint Commission**

Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care. Joint Commission seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. To earn and maintain The Gold Seal of Approval from The Joint Commission, an organization undergoes an on-site survey by a Joint Commission survey team at least every three years (Laboratories are surveyed every two years).

### **Why is this important to volunteers?**

A Joint Commission Surveyor can ask questions to any staff member or volunteer about MCHS policies, procedures, and other hospital related topics. If a surveyor asks you a question and you don't know the answer, it is okay to tell him/her that you don't know the answer, but that you know where to go FIND the answer. Locate the closest employee for assistance or come to the Volunteer Office and we will help you.

Handbook Updated: 4/2025

## **VOLUNTEERS IN ACTIVITY THERAPY AREAS:**

Hillside Manor, Eagle's Wings or Remembrance Home

Volunteering is a rewarding experience when all participants in the relationship have a mutual respect and desire to cooperate in meeting designated needs. The following identify the responsibilities of the volunteer and the ethics of Hillside Manor and Marshfield Medical Center – Beaver Dam (MMC-BD).

1. Should a resident ask you to move or lift him/her, politely state that you are not permitted to do so as a volunteer.
2. **Patients wearing YELLOW slippers or socks are at risk for fall.** Should you encounter a resident / patient wearing yellow slippers / socks walking alone notify staff immediately.
3. A leaf on a residents / patient door signifies they are at risk for fall. If you see someone with yellow slippers or socks standing up without staff push the call light for help and encourage them to sit down.
4. Please inform the nursing staffs if a resident / patient needs assistance; respect their judgment in handling the situation.
5. Should a resident fall or injure himself/herself, DO NOT attempt to lift or administer aid; summon help immediately.
6. Residents/patients are to be returned to their unit to use the bathroom.
7. Always knock on a resident's/patient's door before entering.
8. When volunteering in the nursing home, remember that it is the residents' home. Provide obvious kindnesses for them as long as it does not involve physical care; guard against emotional reactions to resident's problems. Favoritism should not be shown.
9. Introduce yourself to the resident/patient and ask his/her name. Please learn names. Terms to avoid are: "honey," "dear," "mom," "pop," "grandma," "grandpa." Please show respect at all times.
10. Socialize with the resident/patient rather than with other volunteers. Remember, the resident is THE most important person in the nursing home/hospital.
11. Ill people do not always respond normally to situations. Make allowances for this.
12. Respect all information as confidential.
13. Strive toward empathy, not sympathy. Empathy is the ability to relate to another and understand his/her feelings without condescension and over-involvement.
14. Do assignments WITH, not for the resident/patient. Never do anything for them that can be done by them.
15. To communicate with a resident/patient who wears a hearing aid or is hard of hearing, talk slowly and distinctly. Do not shout.
16. To communicate with a resident/patient whose vision is impaired, do not startle them. Knock on the door. Introduce yourself upon entering their room, talk through what you are doing. To touch a blind person is good, but speak first as you approach. Explain what you are doing, and when you leave, tell them you are leaving.
17. Learn the wheelchair safety guidelines and abide by them.
18. Be aware of special diets and alcohol restrictions; adhere to them.

## RECORDING YOUR VOLUNTEER HOURS

As a volunteer, you are donating your services without contemplation of compensation or future employment. Your time is given for humanitarian and/or charitable reasons.

Then, **WHY** would you need to record your volunteer hours?

The simple answer is, "Because we need to know!" But there is more to it than that. You are asked to record your volunteer time (to the nearest quarter hour) so that:

- I can include your volunteer hours in my monthly and annual reports.
- MMC-BD can report your hours as part of the organization's Annual Report.
- I know who volunteered, when and where.
- I can keep track of your services for recognition purposes.

WHERE should you record your volunteer hours? Volunteers are asked to enter their volunteer time EACH time they come in to volunteer. **All volunteers will be registered in VIC net to record their volunteer hours on line.** Instructions on how to access and use this system are part of their orientation.

Paper logs are available for those who do not record their hours in VIC net.

**Hillside Manor Volunteers** – in the Activity Room for all HSM volunteers, EXCEPT church and chapel volunteers; church and chapel volunteers have their timekeeping binder in the chapel area.

**Eagle's Wings & Remembrance Home Volunteers** – there is a binder in each place. If you are not sure where it is, ask one of the staff members to show you.

**Hospital Volunteers** – there is a binder at the volunteer desks in the Lobby, the Gift Shop, 2nd Floor and the Emergency Dept. Each volunteer will have their own page in these binders to record their hours.

HOW should you record your volunteer hours?

The Volunteer Hours tracking page looks similar to the illustration below. As a volunteer, each time you are here to volunteer simply fill in the information needed.

### VOLUNTEER HOURS

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

DATE	AREA	VOLUNTEER HOURS
Enter the date here with month/day/year	Enter the area where you are volunteering.	Enter your time here to the nearest quarter hour.

Remember to do this EACH and EVERY time YOU volunteer! Thank you!

## **Hospice Volunteers**

### **Training**

There will be additional training for hospice volunteers to learn about hospice mission and values, what to expect while working with a hospice patient and how to care for a hospice patient in a volunteer role.

### **Recording of hours for Hospice Volunteers**

#### WHERE should you record your volunteer hours?

Volunteers are asked to enter their volunteer time EACH time they come in to volunteer with a client or in the office on the paper timesheet they will receive each month and with each new client.

The volunteer will then turn in the timesheet at the end of EACH month in person or by mail.

#### HOW should you record your volunteer hours?

Hillside hospice volunteers record their hours on a paper timesheet that will be shown to you upon completion of the on-boarding process.

Each month the hours from all visits are tabulated and a report is generated. Federal regulation states that all Hospice organizations need to meet 5% of their volunteer hours against the paid hours of hospice staff. Your documentation of hours is very important. Please do not overlook this part of your service.

## Next Steps

### **Interview:**

Contact Volunteer Services at 920-887-5988 or email [moritz.daniel@marshfieldclinic.org](mailto:moritz.daniel@marshfieldclinic.org) to schedule an interview to review volunteer opportunities at Marshfield Medical Center in Beaver Dam.

### **Paperwork:**

Complete all required paperwork to bring to your interview. Volunteer Services will begin your on boarding process to prepare you to volunteer.

### **Influenza:**

Flu season is from November 1 – March 31. All MMC BD volunteers must receive an annual flu vaccination, if you choose to not receive the flu vaccine, you must complete a medical/religious exemption form. If you would like to complete a medical/religious exemption form, please contact Volunteer Services.

### **Service Area Training/Shadowing:**

Once all required paperwork and health work are completed, someone from Volunteer Services will be in contact to set up training and shadowing in your designated volunteer area.