

SANFORD HEALTH
Marshfield Clinic

VOLUNTEER
HANDBOOK



Volunteer Services

West Region: Rice Lake/Eau Claire/Ladysmith
Office Hours: Monday – Friday, 8:00 a.m. – 4:30 p.m.

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SANFORD HEALTH Marshfield Clinic

Welcome!

Thank you for choosing to serve our patients, their families, visitors and staff within the Marshfield Clinic. Our volunteers serve a vital role requiring dedicated effort, loyalty and enthusiasm. The sharing of your time, talent and compassion truly impacts the experience of all those entering our hospital.

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.

As a new volunteer, you'll be looking at our processes with a "new set of eyes" and your comments, suggestions and concerns are very important to me. Please don't hesitate to stop in my office for a visit, email or phone me with your thoughts.

I sincerely hope you enjoy your volunteer experience!

Jody Greiner
Manager, Volunteer Services
(715) 236-6255
Jody.greiner@sanfordhealth.org

It is one of the beautiful compensations of this life that no one can sincerely try to help another without helping himself.

Charles Dudley Warner
American Journalist

Mission

To care, comfort and cure.

Vision

To be the premier rural health system in the United States.



Values

Service

Caring for our people, patients and communities through compassion, acceptance and sincerity.

Stewardship

Safeguarding the resources that have been entrusted to us to advance the mission of Sanford Health.

Humility

Practicing respect of self and others and approaching our communities and colleagues with modesty.

Courage

Having strength to persevere, innovate, use our voices and take action.

Family

Celebrating the connection and commitment we have to each other through it all.



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 with 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

Marshfield Clinic and the Joint Commission on Accreditation of Healthcare Organizations require all staff and volunteers to review policies, emergency response and safety information annually. You will also be asked to provide documentation of a flu vaccine.

Volunteer Benefits

Volunteers at Marshfield Clinic 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 30 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.
- **Annual Volunteer Appreciation Event**
- **10% off most Gift Shop purchases:** Discount does not apply on flowers/plants, candy or cards. (Rice Lake campus)
- **Scholarships:** As a volunteer, you and your family are eligible to apply for scholarships offered by our Volunteer Partner organizations. (Rice Lake campus)

And the intrinsic benefits as well!

- Flexibility—variety of shifts and positions
- Continue to do worthwhile work
- Share your skills
- Stay active
- Looks great on your resume
- Gain practical experience

Volunteer Responsibilities

Personal Appearance (Dress Code)

As a service organization concerned with health, patient care, infection control, safety, and business relations, Marshfield Clinic (MC) 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 difference 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
- Jeans acceptable but MUST be clean and without holes
- 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 piercings are allowed 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

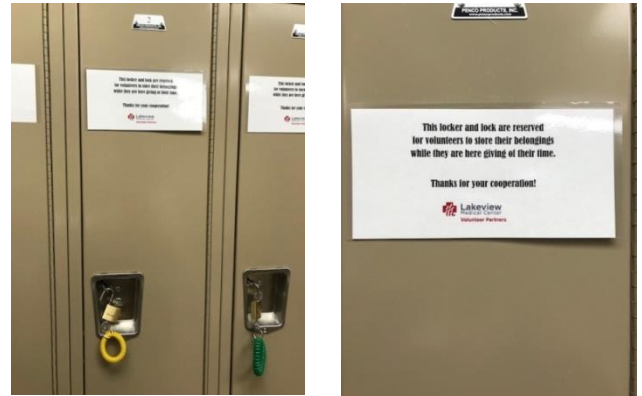
Volunteers must wear provided nametag visibly on or near the neckline.

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 MCHS.



Personal Belongings

Personal belongings must be kept in the locker room. Lockers have been designated specifically for the volunteers. After locking up your belongings, take the key with you. When leaving the campus, be sure to leave the key in the lock for the next volunteer.



Smoking

For the health and safety of our patients and visitors, the sale or use of tobacco products (cigarettes, cigars, chewing tobacco, snuff, pipes, etc.) or electronic smoking devices, such as e-cigarettes, is prohibited in or on all MC owned or leased buildings, grounds, parking lots, and company vehicles.

Drugs & Alcohol

Reporting for your shift at MC 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.

Electronic Devices

You may use an iPad/kindle during slow periods at desk positions. Be alert to your surroundings and guests or patients approaching you for assistance. Cell phones should be stored in a locker or secured in a safe place; they should not be carried while on duty. If you need to make a personal phone call, please step away from the area and do so in a private place. *NO TEXTING during your shift.* The use of camera phones is prohibited near patients or anywhere patient confidentiality could be compromised.

Standard of Behavior and Professionalism

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 that physicians, staff and volunteers have in the communities the system serves.

Volunteer/Employee Conduct

The system strives to promote a culture of compassion, integrity, dignity and safety. All 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 interest 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 behavior 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

Some violations of work rules are serious. 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 dismissal include:

- 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.
- 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).

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 in Patient's Rooms: Do not enter a patient's room if a doctor is in the room. If one should enter while you are there, please leave promptly. You may return after they leave.

Volgistics

Volgistics is the data base we use to house volunteer records, manage schedules, create reports and communicate with volunteers. You will be asked to log in and out on the kiosk each time you volunteer.

VICNET is a module within Volgistics that gives volunteers online access through the web. You'll receive more information about how to set up your account.

Changes in Address, Schedule, Service

Please contact Volunteer Services at 715-236-6255 if:

- Circumstances require you to change your volunteer schedule.
- Your address, phone number, email or other information has been changed.
- You wish to resign your volunteer position. You will be expected to return your name badge to volunteer services.

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 computer kiosk. If you forget to log in or out, please contact the Volunteer Services staff so this can be corrected as soon as possible.
- 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 staff and patients that you stay at home.
- If you are scheduled to work on a regular schedule and know ahead you will be unable to volunteer, please make every attempt to find a replacement. If you need assistance, contact the Volunteer Service Manager at 715.236.6255.

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 MC 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, Good Friday (afternoon), Easter, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas, Christmas Eve.
- Inclement Weather: Students; 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 MC 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.
- Be sure you have adequate training prior to pushing people in wheel chairs.
- If an accident occurs while you are on duty, report it immediately to Volunteer Services or to your immediate supervisor. 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 an MC campus 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 wheelchairs. 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.

Reporting an Incident

- Definition of an "Incident": An incident is broadly defined as any happening (occurrence) which is not consistent with the routine operation of the facility. Included in this broad spectrum are accidents (with or without injury) involving staff members/volunteers.
- It is the responsibility of each and every staff member/volunteer to report any and all incidents/injuries which may occur at MC.
- Contact Volunteer Services Manager at Ext#46255 immediately to report the incident—EVEN IF YOU BELIEVE YOU ARE WITHOUT INJURY. If you are unable to reach the Volunteer Services Manager, contact the Nursing Supervisor.
- You will receive assistance in completing an Incident Report within ReadySet.
- It is the responsibility of each staff member/volunteer to seek assistance and advice about matters of concern regarding safety at MC.

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 – a Fire Alarm Situation (or drill) has occurred, stand by for further information". After determining location from remote alarm panel, switchboard sampe page: Attention please, Fire Alarm Situation (or drill)+ location"
- Response to a fire includes:
 - ✓ **R** = Rescue or remove persons from immediate danger, using evacuation routes, move behind nearest fire doors
 - ✓ **A** = Alarm – notify switchboard of location of fire situation if smoke detector has not been activated
 - ✓ **C** = Confine fire/smoke by closing doors at fire site
 - ✓ **E** = Extinguish fire only if safe to do so
- 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

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(s) come into the facility displaying a firearm or as an "active shooter", employees, 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.

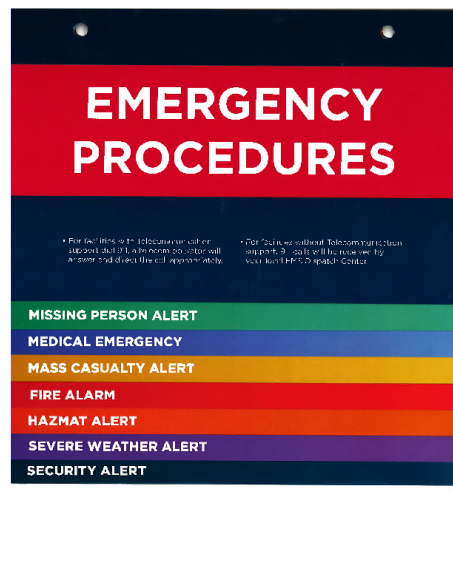
- **Run**-if there is an accessible escape path, attempt to evacuate the premises. Be sure to:
 - Have an escape route and plan in mind
 - Evacuate regardless of whether others agree to follow
 - Leave your belongings behind
 - Help other escape, if possible
 - Prevent individuals from entering an area 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, dial 911 from any telephone within the hospital and inform the operators to activate the Active Shooter/Armed Intruder Alert
- **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

You'll receive a link to an 11-minute training video that explains what is discussed above and adds additional information that is useful in such an event.

Emergency Procedures

Emergency procedure flip charts like the one below are located throughout the MCHS campus and provide information on dealing with various types of emergencies.



Pain Management

Our MC 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 to them. Therefore, if you are interacting with a patient that express 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 MC 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. MC values and respects the diversity of all individuals who interact with our health system.

Interpreter Services

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 and they will follow-up accordingly.

Patient Bill of Rights and Responsibilities

MC 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 the 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
- Health care 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

Caregiver Misconduct

It is the responsibility of all staff, physicians, allied providers and volunteers to honor **all patient rights** listed in the MC "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 MC 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 nursing supervisor. Using an internal phone, call the nursing supervisor. If no one answers, continue until you talk to the supervisor.

Additional information on Caregiver Misconduct can be found in MC's policy titled "Reporting Allegations of Patient Abuse, Neglect, or Misappropriation of Patient Property (Caregiver Misconduct.)"

Grievances

Patient Safety or Quality of Care Concerns

We strive to provide safe, high-quality patient care at MC. 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.

Our top priority is to provide the best in quality health care at MC. Any associate who has concerns about safety or quality of care provided at MC may report these concerns. We rely on individual staff members to identify and report concerns and risks. We want you to bring your concerns to Management/ Administration; the Risk Manager or Patient Safety Manager; the Environment of Care, Patient Safety, or Safety Committee; or the Laboratory Medical Director or Laboratory Quality Manager. Marshfield Clinic will take no disciplinary action because an associate reports safety or quality of care concerns. You also may contact these 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
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

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

Patients have the right to complain about the quality of their care. Many patient complaints can be addressed quickly. Please use the following script for a complaint. *"I'm sorry you had a bad experience. We care about your comments and I'd be happy to call a staff member for you to speak with. Please have a seat and I'll contact someone right away."*

Please call: Nursing Supervisor. If you have questions or are uncomfortable, please call the Volunteer Services Manager or Administration; their numbers are listed on your quick reference phone listing.

When complaints cannot be addressed quickly and easily, patients have the right to file a grievance. A grievance is a formal complaint. If a patient wants to file a grievance a staff member will:

- Explain the grievance process at MC and the name of the staff person to contact.
- Explain how grievances may be filed with the state agencies. This is true whether or not the patient has already used the facilities internal grievance process.
- Give the patient the phone number and address for filing a grievance with the state.

Corporate Compliance means following business laws. In recent years, government agencies have started to look more closely for healthcare fraud and misconduct. A lot of Federal money has been used to investigate and prosecute suspected fraud. Laws for Healthcare are:

- Medicare regulations; *meet standards of care and bill accurately*
- Federal False Claims Act; *illegal to submit a falsified bill to a government agency*
- Stark Act; *illegal for physician to refer patient for financial gain*
- Anti-Kickback Statute; *illegal to give or take kickbacks, bribes, or rebates for healthcare*
- Sections of the Social Security Act; *illegal to pay physicians to limit services to Medicare patients or offer gifts to Medicare patients to get their business*
- Mail and wire fraud statutes; *illegal to mail a fraudulent bill to Medicare*
- The Emergency Medical Treatment and Active Labor Act (EMTALA); *must screen patients who may have an emergency and stabilize patients who have an emergency condition regardless of ability to pay*
- HIPAA
- "Red Flags" Rule; *protect patients from identify theft*

When a provider is convicted of breaking any of the laws for healthcare, penalties can include:

- Criminal fines
- Civil damages
- Jail time
- Exclusion from Medicare or other government programs
- In addition, a conviction can lead to serious public relations harm.

The Corporate Compliance Program is designed to prevent any accidental and intentional violations of the laws, detect violations if they occur, and correct any future noncompliance. For any compliance/privacy questions or concerns, contact the MC Corporate Compliance Office at Ext. # 1-6044 or 715-221-6044.

Sexual Harassment in the Workplace.

Title VII of the Civil Rights Act of 1964 defines sexual harassment as:

- Sexual advances
- Requests for sexual favors
- Other sexual conduct

When these actions are unwelcome and:

- Affect job status
- Interfere with work performance, or
- Create a hostile work environment

To work toward eliminating sexual harassment in our facility:

- Be aware of the definition.
- If you are a victim, confront the harasser directly, if you feel able to do so.
- Report the behavior to the Volunteer Services Manager or Human Resources.

Infection Prevention and Control

The MC Infection Prevention and Control department would like to thank you for all the valuable support you provide to our patients. Here is what you need to do to protect yourself and to prevent the transmission of infection at MC campuses.

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, COVID-19, 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 are required to receive an annual influenza vaccination, provided free of charge through Employee Health. If under the age of 18, parent consent is required.
- 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 surfaces, 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 visibly 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.

Transmission-Based Isolation Precautions

Please be attentive for MC Precaution signs. These signs have pictures and written instructions to assist staff, visitors, and volunteers. **The signs have their own individual color coding and are always displayed under the room number.** Please see examples below.

Where do I find the room's precautions?

Example of contact precautions posted outside of room.



A LEAF WITH A TEARDROP will appear on the door near the room number in the Women's Health department if the family has experienced a miscarriage, stillborn, or other infant loss. **STOP! Do not escort guests into a room with this sign. Take them to the nurse's station for assistance.**



Employee Health

MC requires volunteers to provide proof of yearly flu vaccine.

HIPAA: Awareness Training for Volunteers

Health Insurance Portability & Accountability Act

*MC 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:

Treatment Providing care to patients

Payment Getting paid for caring for patients

Operations 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 wrongdoings. Whether someone received patient information improperly, or shared patient information in the wrong way, everyone has a responsibility to report violations. HIPAA violations can be subject to civil and criminal penalties, including monetary penalties and imprisonment. When in doubt...ASK!!

Hospital Compliance Officer: 715-221-5411

Privacy Officer: 715-221-7011

Corporate Compliance department: 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 MC, you may have access to confidential business and protected health information (PHI). This may include information concerning MC'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

Patient Transport

Volunteers *must* be trained in how to use a wheelchair before they may transport patients. Always try to use the correct sized chair. **If a volunteer ever feels uncomfortable transporting an assigned patient, for whatever reason, please do not transport the patient.** Volunteers are not expected to handle/transport patients 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. If the patients is over 300 pounds, use electric wheelchair mover located in the main lobby
- Able to get into and out of wheelchair without lifting assistance
- Able to have their ride pick them up at an entrance to our facility

Volunteers may guide a patient into or out of a wheelchair if needed. **Never lift a patient or adjust any medical equipment.** When arriving for a patient transport, to maintain confidentiality, please use patient’s first name only and room number or destination.

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 a staff member from the area should be notified. When escorting an ambulatory patient or visitor, please use the elevators (do not offer the option of using the stairs).

Patients must NOT:

- Be attached to an IV or hospital oxygen tank (patients with capped off IV’s or personal portable O2 tanks are OK)
- Be identified as a “fall risk” patient. Patients considered at risk for falling will be identified by: colored armband.
 - o 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.

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 Clinic 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 Clinic, 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 Clinic 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 Clinic 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 the Marshfield Clinic – you may want to move your car to lot #1" or "I'll take you to the Birth Center elevators, it's a little bit of a walk" Then get up and walk them to the elevators.

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 restaurant, 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" 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 Clinic 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 MC 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.

Confidentiality Statement

I understand and agree that in performance of my duties as a Volunteer at Marshfield Clinic (MC), I must hold as absolutely confidential all information which I may obtain directly or indirectly concerning patients, patient's family members, physicians, and MC personnel in accordance with HIPAA regulations. I will not seek out confidential information in regard to patients, patient's family members, physicians, or MC personnel.

I understand that intentional or involuntary violation of confidentiality may result in disciplinary action including termination, by Marshfield Clinic and/or possible legal action by patients or families.

Name (Please Print)

Signature

Date

Release for Use of Information, Photographs and/or Videotapes

I hereby consent to the use, for news release publication, web site use, and educational purposes by Marshfield Clinic (MC) and publications whom the forgoing may authorize, of my name, photographs and/or videotapes of me and/or digital manipulations.

I agree that all such photographs, negatives and/or videotapes are and shall remain the property of Marshfield Clinic (MC) or publications authorized by MC.

Name (Please Print)

Signature

Date

Health Insurance Portability and Accountability Act (HIPAA) Quiz

1. What does HIPAA stand for?

- Health Insurance Portability and Accountability Act
- Hospital Information Protection and Accountability Act
- Honest Information Protecting All Americans

2. Who does HIPAA pertain to?

- Only Hospitals
- All health care providers
- Only pharmacies and insurance companies

3. PHI stands for:

P _____ H _____ I _____

4. TPO stands for:

T _____ P _____ O _____

5. Placing patient information in a wastebasket is okay as long as it is behind a desk.

True False

6. Reporting HIPAA violations is everyone's responsibility.

True False

7. Is it possible for a volunteer to be fined and imprisoned for disclosure of health information?

YES NO

I have completed HIPAA training and have been given the opportunity to ask questions. I agree to comply with HIPAA regulations and to follow Marshfield Clinic privacy and confidentiality policies.

Name (Please Print)

Signature

Date

Infection Prevention and Control Quiz

1. **The influenza vaccination is mandatory for both staff and volunteers.**

True False

2. **How many seconds does proper hand-washing require?**

- a. 20 seconds
- b. 15 seconds
- c. 25 seconds

3. **If you notice your hands are visibly soiled, what should you do?**

- a. Find the nearest alcohol sanitation dispenser to clean your hands.
- b. Wipe your hands on your volunteer vest.
- c. Find the nearest sink and thoroughly wash your hands with soap and water.

4. **The best way to manage a cough is:**

- a. Cough into my hands then wash my hands.
- b. Cough into my elbow then wash my hands.
- c. Cough into my elbow while turning away from others and then wash my hands.

5. **Where do you find a patient's contact precautions?**

- a. On signage right under their room number.
- b. Inside the patient's room on the whiteboard.
- c. On signage taped to the patient's door.

6. **If you have been asked to deliver something to a patient's room but find an Airborne or Droplet Precaution sign, what should you do?**

- a. Go in anyway and give the items to the patient.
- b. Go to the nurse's station and explain who the items are for and that you do not have training for their contact precaution.
- c. Leave the items outside the patient's door.

I understand that I am responsible for following infection prevention/control etiquette and best practices and should ask if I do not understand or need clarification.

Name (Please Print)

Signature

Date

Volunteer Acknowledgement

I am interested in providing volunteer services for Marshfield Clinic. I understand that I will receive no pay or other benefits for the volunteer services I provide to Marshfield Clinic. MC has made no promise of pay or benefits now or in the future. I wish to volunteer my time to support Marshfield Clinic's goal of creating healthy communities through accessible, affordable, compassionate health care.

I understand and agree that I am voluntarily offering my services to Marshfield Clinic freely and without pressure or coercion, direct or implied, from Marshfield Clinic or any of its employees or representatives. In addition, I understand and agree to abide by all policies and procedures governing my volunteer work as determined by Marshfield Clinic.

Name (Please print)

Signature

Date

Wheel Chair Essential Functions

Volunteer is to initial each competency block. If the competency is not applicable to the volunteer write in "N/A." This checklist must be completed and returned to the Volunteer Services Department prior to the volunteer performing associated duties. If a patient is over 300 #, **use the wheelchair mover.**

A. Ensure the chair is locked before the patient sits or gets up from the wheelchair.	
B. Be sure to hold chair, even if the brakes on the chair are set. Activate Patient Assistance page if patient is dependent on transfer technique.	
C. Foot plates should be up as patient backs up to chair and sits. This is to avoid stepping on the foot plate, causing the chair to tilt forward. After the patient is seated, swing foot plates into position and have the patient place both feet in the foot plates.	
D. Do not exceed a normal walking pace while pushing the wheelchair.	
E. Never try to "hop" a curb with a wheelchair. Wheelchair accessible areas are available at entrances and exits.	
F. Be sure the patient keeps both arms inside the wheelchair (in his/her lap) at all times while being transported.	
G. A distance of 6-12 inches away from the wall should be maintained while pushing the wheelchair.	
H. When going through doorways, be sure you have appropriate clearance on both sides of the wheelchair and double check that the patient's arms are inside the chair.	
I. Lock the wheelchair and swing the foot plates out, allowing the feet to touch the floor before the patient is allowed to get up.	
J. Patients should be pushed forward and pulled backwards (some patients may become disoriented).	
K. Use added care when approaching corridor intersections.	
L. Make sure that loose clothing and sheets will not get caught in the wheels as this could injure the patient.	
M. If possible have someone hold the elevator door open when entering or exiting with a wheelchair. Wheelchairs should be BACKED into elevators & BACKED out whenever possible OR when floor is uneven.	
	Signature
Volunteer	
Volunteer Manager	
	Date