



Marshfield Clinic
Health System

VOLUNTEER HANDBOOK



Volunteer Services

Marshfield Clinic Health System Foundation

611 Saint Joseph Ave.

Marshfield, WI 54449

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

Keresa Kilty, Manager

Phone: 715-387-7106

kilty.keresa@marshfieldclinic.org

Melissa Darr, Volunteer Services Coordinator

Phone: 715-387-7198

darr.melissa@marshfieldclinic.org

Welcome!

I am happy you have chosen to help serve our patients, their families, visitors and staff here at Marshfield Medical Center. 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.

Keresa Kilty



Manager, Volunteer Services
(715) 387-7106

kilty.keresa@marshfieldclinic.org



Dear Volunteers,

On behalf of the Marshfield Clinic Health System Board of Directors and myself, I am sincerely happy to welcome you as a Marshfield Medical Center volunteer.

No doubt, volunteers have long played important roles in helping hospitalized patients as they continue through their health care journeys.

No matter what you choose as your volunteer efforts, you are helping patients. Whether it's providing comfort, distributing reading materials, staffing a family waiting room, connecting family and friends with their loved ones through the Lobby reception desk or serving as a Volunteer, you will make an incredible difference.

Many volunteer opportunities await you, in clinical and non-clinical areas, and I'm glad you choose to share your time and talents with those who will truly appreciate them. Through your volunteering, I hope you feel a true sense of accomplishment as you help patients and a true sense of pride for the role you play in living our mission of enriching lives.

Our patients have come to expect the very best, compassionate care and you, now, are a vital part of that care.

Sincerely,

Dr. Susan Turney
Chief Executive Officer
Marshfield Clinic Health System





Marshfield
Medical Center

MARSHFIELD MEDICAL CENTER LEADERSHIP



Vicky Varsho, BSN, RN

*Administrative Director of Patient
Care Services*



Brian Hoerneman, MD

Hospital Medical Director



**Pam Jochimsen, MSN,
MHA, RN**

*Administrative Director of
Patient Care Services*



Marshfield Clinic Health System

Marshfield Clinic is the largest private group medical practice in Wisconsin and one of the largest in the United States, with more than 700 physicians representing over 80 different medical specialties, more than 6,000 additional employees, and over 50 locations in northern, central and western Wisconsin.

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.



Marshfield Children’s Hospital is proud to be one of just 170 Children’s Miracle Network Hospitals (CMN Hospitals) throughout the United States and Canada. We are the region’s only dedicated children’s hospital and have been a CMN Hospitals partner since 1989. 100% of all funds raised stay local to benefit kids in central and northern Wisconsin, regardless of their illness or injury. CMN Hospitals support allows Marshfield Children’s Hospital to have life-saving technology and equipment, child life services and expressive therapies, direct assistance to families, and more.

More than 10 million kids enter a children’s hospital like Marshfield Children’s Hospital across North America every year. To provide the best care for kids, children’s hospitals rely on donations and community support. Since 1983, various fundraising partners and programs have helped support the nonprofit’s mission to save and improve the lives of as many children as possible.

The CMN Hospitals program is part of the Marshfield Clinic Health System Foundation.



*Amanda Lancour, Program Manager-
Children’s Miracle Network Hospitals*





Marshfield Clinic Health System Foundation

WE ENRICH LIVES...

by shaping the future of Marshfield Clinic Health System through philanthropy.

Since the 1970's, over 37,000 donors have raised over \$100 million to enrich the lives of Marshfield Clinic patients. Marshfield Clinic Health System Foundation will continue to innovate and define the future of health care for generations by offering philanthropic opportunities to support patient care, research and education at Marshfield Clinic Health System.

Looking back on Marshfield Clinic's 100 year legacy, a simple, but profound saying comes to mind: "If you want to go quickly, go alone. If you want to go far, go together." When six physicians founded Marshfield Clinic a century ago, they were committed to going far together, and their dedication is what has brought us to this milestone.

Our founders' vision fuels our mission today: to enrich lives. Philanthropy remains at the core of this mission.

Moving forward into the next century, the newly-created Marshfield Clinic Health System Foundation will position our organization to assume new fundraising responsibilities and strategic initiatives. A Marshfield Clinic Health System Foundation board, dedicated to philanthropy, will allow us to continue to grow and pursue new opportunities.

The Marshfield Clinic Health System Foundation will allow us to continue the legacy of our founders: compassionate, innovative care to the generations of patients who receive care from Marshfield Clinic Health System every day. Thank you for helping us to go far and enrich lives, together, for generations.



*Teri Wilczek, Chief Philanthropy Officer
Marshfield Clinic Health System*

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.

Volunteer Recognition

 **Hub City Times**
March 28 at 8:00am ·  

Marshfield Medical Center announces March volunteers:



MMC announces March Volunteers
Jebina Devadas has donated more than 50 hours of service. Jebina has volunteered with the House of the Do ...
HUBCITYTIMES.COM

- 50 hours – Recognition in Hub City Times.
- 100 hours – \$10 MACCI gift certificate
- 200 hours (your name is engraved on a Hospital plaque which hangs in the hallway).
- 300 hours - \$30 MACCI gift certificate + Story recognition in newsletter
- 400 hours – \$40 MACCI gift certificate + Story recognition in newsletter + “Featured Volunteer” frame recognition + Partners Board Meeting recognition
- 500 hours - \$50 MACCI gift certificate + Story recognition in newsletter + “Featured Volunteer” frame recognition + Partners Board meeting recognition
- Note: All milestone service levels will be submitted to the Hub City Times.

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 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 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

TEENS MUST WEAR VOLUNTEER SMOCKS OR VESTS, hanging up and available in the Volunteer Office



Smocks in Volunteer Services



Correct Way to Wear Smock

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 MCHS facility. You are required to leave your volunteer badge in the Volunteer Services office – **DO NOT TAKE HOME** (unless you need it for Wellness Access).



Personal Belongings

Personal belongings must be kept in lockers in the Volunteer Services alcove. 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. Smoking is not permitted in our buildings or on our campuses.

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. All volunteers will be required to complete a drug screening as part of the application process (*per Substance Abuse Policy Document ID #4FAR5N4RSFP7-3-202*).

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 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 *Corrective Action policy Document ID #4FAR5N4RSFP7-3-22*)

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 Chat Newsletter

It is your responsibility to read the monthly newsletter as it will be providing important updates and information. *Volunteer Chat* is emailed monthly (if email is provided) and copies are available in the Volunteer Office.



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 715.387.7198 if:

- 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 touch screen computer software located in the Volunteer Lounge. If you forget to log in or out, 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 715.387.7198.

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, **dial 911 FROM AN INTERNAL MMC PHONE** to activate the internal response team; it will not bring in local EMS, fire, or police---only our internal medical team. If you dial "0" you will not be calling an emergency response—you *must dial 911 from an internal phone*.

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 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 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 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.

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 Clinic. If Urgent Care is closed, go to Marshfield Medical Center's Emergency Department.

Urgent Care Hours:

- Monday – Friday: 7:30 a.m. – 8:00 p.m.
- Weekends: 8:00 a.m. – 4:00 p.m.

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

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 situations.

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 Telecom at 911 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 MCHS 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.

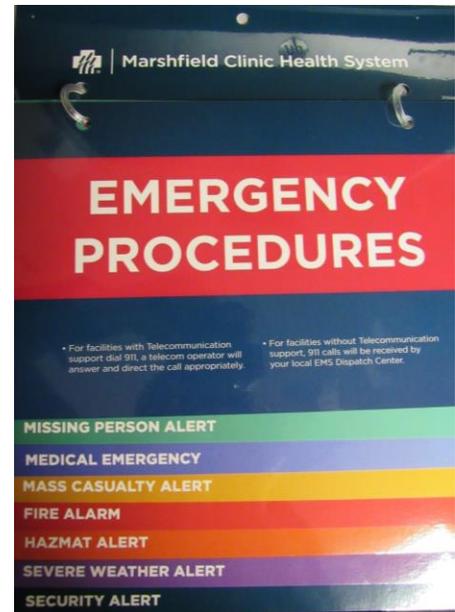
Interpreter Services *(see Interpretation and Translation Services for Limited English Proficiency Patients policy Document ID#KT2N6QC5SZE5-3-294)*

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. 1-5500, 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 Clinic Health System
1000 N. Oak Avenue
Marshfield, WI 54449-5777
Phone: 1-800-782-8581, ext. 7-5300

Caregiver Misconduct (see *Caregiver Misconduct 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 nursing supervisor. Using an internal phone, dial 94208. If no one answers, continue until you talk to the supervisor.

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

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
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

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 1.
 - **Provided free of charge through Employee Health. Note, 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 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.

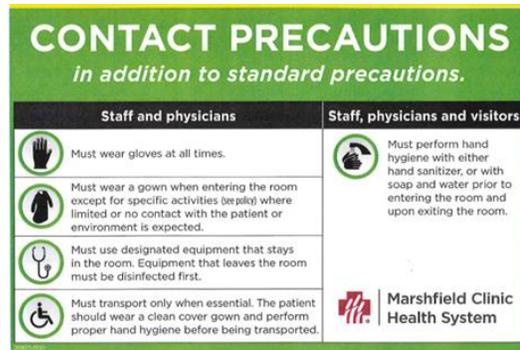


CONTACT PRECAUTIONS: *TRAINING IS REQUIRED TO ENTER*

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.

Employee Health

MMC requires that all volunteers and employees complete health work. The Hospital provides this health work at no charge to you.

You will be responsible to make your own appointment with the Central Lab Office after your interview with Volunteer Services —phone 715.389.4700. Drug screen and lab work are to be completed within 72 hours of the interview.

Due to the timeliness of getting blood samples to the lab, this appointment will have to be scheduled between 8:30 a.m. and 1:00 p.m., Mondays-Fridays.

Components for the health assessment:

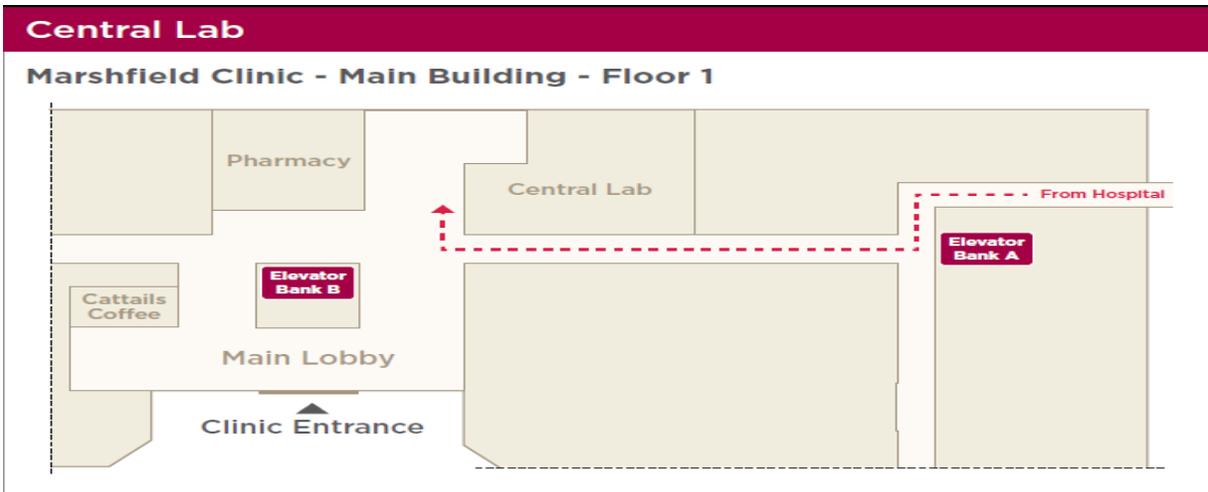
- **Volunteer Assessment Questionnaire:** Please complete and mail back in the prepaid envelope provided during interview.
- **Initial lab visit (appointment needed):** blood draw to check for immunity to measles, mumps, rubella and chicken pox, and TB exposure and mandatory drug screening (approximately 20 minutes total).

IMPORTANT REMINDERS FOR THIS APPOINTMENT:

- Complete the assessment questionnaire and mail back in the prepaid envelope.
- Call Central Lab (located in the Marshfield Clinic) at 715.389.4700 to schedule your appointment.
- Volunteer must bring a photo ID (driver's license, passport) to this appointment.
- Since the drug screening will be a urine test, please come with a full bladder.

- If the Volunteer is a minor, the consent form for minors must be completed and brought to this lab appointment. The parent /guardian would not need to be present if the Volunteer has a valid photo ID (driver's license, passport) and this form is signed and presented.

Depending on results, approval for volunteering will be sent directly to Volunteer Services. Note: If you are non-immune to one of the titers tested, you may need to get the vaccination on your own expense to be cleared to volunteer.



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:

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 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 Officer: 715.221.5411
- Risk Manager: 715.389.3968

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 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" 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: 1/2020

12/2019 - Review by the following subject matter experts:

- Suzie Smith – Performance Improvement Specialist
- Jessica Bell –Patient Safety and Risk Manager
- Michelle Kaiser – Infection Preventionist,
- Krissy Flick – Employee Relations Manager
- Lisa Lobner –Hospital Compliance Officer
- Jeremiah Glamann – Security Manager

Next Steps

Paperwork:

Complete all required paperwork given at your interview and return to the Volunteer Services office or in the prepaid envelope if provided.

Health Work Appointments:

ALL health work must be completed before service area training/shadowing

You will be responsible to make your own appointment with the Central Lab Office after your interview with Volunteer Services —phone 715.389.4700. Due to testing requirements, appointments need to be between 8:30 a.m. and 1:00 p.m. Monday-Friday.

Components for the health assessment:

- **Volunteer Assessment Questionnaire:** Please complete and mail back in the prepaid envelope provided during interview.
- **Initial lab visit (appointment needed):** blood draw to check for immunity to measles, mumps, rubella and chicken pox, and TB exposure and mandatory drug screening (approximately 20 minutes total).
 - Complete the assessment questionnaire and mail back in the prepaid envelope.
 - Call Central Lab (located in the Marshfield Clinic) at 715.389.4700 to schedule your appointment.
 - Volunteer must bring a photo ID (driver's license, passport) to this appointment.
 - Since the drug screening will be a urine test, please come with a full bladder.
 - If the Volunteer is a minor, the consent form for minors must be completed and brought to this lab appointment. The parent /guardian would not need to be present if the Volunteer has a valid photo ID (driver's license, passport) and this form is signed and presented.

Depending on results, approval for volunteering will be sent to directly to Volunteer Services. Note: If you are non-immune to one of the titers tested, you may need to get the vaccination, which is covered by Employee Health.

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.