



UNC
HEALTH CARE

Department of Volunteer Services

ADULT VOLUNTEER HANDBOOK

**UNC HEALTH CARE
VOLUNTEER SERVICES DEPARTMENT**

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WELCOME TO UNC HOSPITALS

Thank you for your decision to donate your time, skills and talents to UNC Hospitals through the Volunteer Services Program. You are very important to UNC Hospitals for the service you provide, your caring attitude and the valuable link you provide to our community. We sincerely hope that you will enjoy your time with us and that you will experience personal fulfillment and growth.

The Volunteer Services Office is open to serve you Monday through Friday from 8:00am to 5:00pm. Please visit us anytime. Have a question? Give us a call at 919-966-4793.

Department of Volunteer Services

Our mission is to assist the hospitals in their endeavors to provide comprehensive health care to the communities they serve, and provide a meaningful outlet for the human need to be of service to others.

Safety

Personal Safety

The UNC Hospitals Department of Public Safety provides around-the-clock services to protect the entire hospital community. Services include preventive patrols, escorts after dark, valuables pick-up and a shuttle to parking areas. Volunteers are encouraged to:

- It is preferred that you lock purses, wallets, or personal items in the trunk or your car.
- Avoid carrying valuables or large sums of money.
- Make sure "high theft" items such as calculators and VCR's are locked away securely, even when you leave your work area momentarily.
- Keep car keys in hand and walk with someone when going to and from work. In the evening, use the free Public Safety Shuttle to get to your car. The shuttle leaves every 10-15 minutes from the Hospitals from entrance between 6pm and 2am.
- Report any suspicious activity immediately to the Public Safety office (6-3686).

On-the-Job Safety

UNC Hospitals employees and volunteers are exposed to a variety of potential safety and health hazards. Because of this increased risk, it is important that employers protect you from on-the-job injuries and illnesses.

Safety is the act of conducting your daily routines in a way that protects you from injury or illness. Areas of concern include:

- Slips and falls
- Back injuries (from lifting)
- Infectious diseases
- Sharps (needle, knives and broken glass)
- Burns, including electrical and chemical
- Chemical exposures
- Explosions

While these are rare, should any of them happen to you while you are volunteering, please report the incident immediately to your supervisor and to the Volunteer Services Office.

If you are injured while volunteering please do the following:

- Report the injury to your supervisor or volunteer services staff immediately.
- Fill out an incident report and take to Occupational Health or the Emergency Department.
- During the week between 7:00am – 4:30pm go to Occupational Health for treatment. In the evenings or weekends report to the Emergency Department.

All charges are submitted to the volunteer's insurance carrier. As long as care is necessary for the treatment of a condition incurred while performing your specific volunteer duties, as specified in your assignment description, and the care is provided by UNC Hospitals or UNC Physicians and Associates, there will be no cost to the volunteer above the amount paid by the volunteer's insurance.

Fire Safety

Fire education is essential to understanding how to respond if a fire should occur. The cause of fires varies, from carelessness to unsafe equipment and unsafe conditions. Each year several thousand fires occur in health care facilities, primarily because of patient smoking. This is one reason UNC Hospitals is a smoke-free facility.

All volunteers should locate the red fire alarm nearest their work station. If a fire occurs, the Hospitals' first responsibility is to remove patients and visitors from the danger area and sound the alarm. There are fire emergency alarms located throughout the Hospitals for emergency reporting of fires.

IN THE EVENT OF A FIRE-THE FOLLOWING STEPS SHOULD BE TAKEN:

- R** - Remove or rescue individuals in immediate danger
- A** - Activate the alarm by pulling the closest fire pull station **AND call 911**
- C** - Contain the fire (close units, door and windows)
- E** - Evacuate to a safe area **OR** extinguish the fire with proper Extinguisher, **IF IT CAN BE DONE SAFELY**

To properly use a fire extinguisher, you only have to remember **PASS**

- P** - Pull the pin between the handles
 - A** - Aim the nozzle at the base of the fire
 - S** - Squeeze the handles together
 - S** - Sweep the extinguisher from side to side
- Discharge the extinguisher as you approach the fire to be sure it is working.
 - Aim at the base of the fire from 6 – 8 feet away. Extinguishing agent should be applied even after flames are extinguished. **NEVER** leave an extinguished fire unattended.
 - You should **REMAIN** until the fire department arrives.

PLEASE NOTE:

Prior to opening a door during a fire emergency, feel the door and door knob with the back of your hand. If it is **HOT, DO NOT OPEN THE DOOR.** If the door and knob are **COOL,** stand to the side of the door and open it **SLOWLY.**

If a fire is in a trashcan or ashtray, smother it with a pillow, towel, rug or blanket.

If electrical equipment catches fire, disconnect the equipment from the wall outlet.

If a person's clothing catches fire, wrap the person tightly in a large blanket to extinguish the flames.

If you catch on fire, STOP where you are DROP to the floor and ROLL.

Hazardous Materials

Hazardous materials are those substances that are potentially dangerous to your safety and health. Volunteers are not authorized to handle hazardous materials.

Each hazardous material in the Hospitals has a Material Safety Data Sheet (MSDS), a written document prepared and distributed by a chemical manufacturer or distributor that identifies a hazardous chemical. The Public Safety Department and each department using hazardous materials maintain copies of MSDS data sheets for each hazardous chemical in the workplace.

Know Your Codes

It is imperative that all UNC Hospitals volunteers know what to do during medical emergencies, fire, bomb threats and natural disasters. A copy of the Hospitals Disaster Plan is located behind the receptionist's desk in the Volunteer Services office. We encourage all volunteers to familiarize themselves with it.

Some of the more common codes are listed below for your review. Respond according to UNC Health Care System's Disaster Plan for the department where you volunteer. If you are not needed in that area, report to the Volunteer Services Department.

Code Triage (Response)	Multiple casualty incident (arrival 1-2hrs.)
Code Triage (Standby)	Multiple casualty incident (arrival > 2hrs.)
Code PINK	Missing or abducted person less than 18 years old
Code RED	Fire
Code BLACK	Utility Failure
Code BLUE	Cardiopulmonary Respiratory Arrest
Code GRAY	Security Threat (Suspicious package or person)
Code GREEN	Major Biological Exposure
Code ORANGE	Major Chemical Spill/Exposure
Code YELLOW	Bomb Threat
Code Silver	Hostage situation (Weapon involved)
Code WHITE	Major Radiological Exposure
Code WEATHER	Severe weather Event (tornado, snow)
Code STORK	Birth Emergency
Red or YELLOW TRAUMA	Emergency Dept. receiving patient needing immediate response of trauma care team

Patient Safety & Transportation

Volunteers may be asked to transport patients by wheelchair from one location to another. This is permitted provided the volunteer is comfortable doing so, the patient is in no obvious distress, and has no IV or oxygen attachments. After training, Pediatric Playroom volunteers may transport patients with IV's.

Please observe the following steps when transporting a patient via wheelchair:

1. Lock wheels (an important step that even professionals will forget).
2. Adjust foot and leg rests.
3. Back through doors and elevators, pulling the wheelchair, rather than pushing it.
4. Face the patient toward the front of the elevator so they can see what is going on.
5. Move at a slow, steady pace.
6. Need Assistance? **Ask for help.**

A volunteer may assist staff in transporting a patient with IV's or oxygen, but volunteers may NOT transport such a patient by themselves. Pediatric Playroom volunteers may transport patients with IV's if trained by Playroom staff. Volunteers are allowed to assist in transporting patients on stretchers. This is to ensure that should a patient need medical attention, a health care professional will be there to provide assistance.

Patient Elopement

All employees and volunteers must review the following information carefully in order to know how to respond to patients who are off their inpatient unit or who are attempting to leave the Health Care System without permission (elopement).

- **All patients must request permission to leave inpatient units unless attended by Health Care personnel.**
- **All patients who are off inpatient units must have on a green name badge.**
- If you see an inpatient in a non-patient area without a green name badge, please politely ask the person if they are an inpatient and if they need assistance returning to the appropriate unit. An employee should accompany the patient back to the appropriate unit if the patient cannot produce a green name badge.
- If the patient becomes belligerent, contact Health Care Police at 966-3686. If possible, stay with the patient until Health Care Police arrive to escort the patient back to the appropriate unit.

- **Inpatients may not leave the Health Care buildings for any reason.** If you see someone outside the Health Care System who appears to be an inpatient, please politely stop the individual and ask them if they are a patient and if so, accompany them back into the building. Once back in, have Guest Services call the patient's unit and someone will come from the unit to escort the patient.
- **Even if the patient has a green name badge, they should still be stopped if they are outside of the building because inpatients are not allowed outside the Health Cares' buildings for any reason.**
- If a patient has received permission to be off the unit and has a green name badge, they may only be off of the unit for one hour. If the patient does not return at the end of the hour, the patient will be overhead paged by name asking them to return to the unit. If they do not return within 15 minutes, a **Code Walker** will be initiated.
- When a **Code Walker** is announced, it will include the patient's first and last name and a brief description. During a **Code Walker**, all staff must be alert for anyone matching the description and assist in locating the patient and returning him/her back to the unit.
- **Patients cannot be authorized to leave the building to smoke.** Inpatients are not allowed to smoke during their admission. Please review the Tobacco Free policy located in the Safety Policy manual to review what steps should be taken for initiating nicotine replacement therapy.

Infection Control

The Infection Control Department helps provide a safer facility for patients, staff and volunteers by preventing the spread of infections and infectious diseases. Volunteers routinely visit patient care areas and often have contact with patients. For this reason, it is vital that volunteers comply with the following infection control policies to help prevent the spread of infections by:

- **Handwashing** is the single most important thing you can do to guard against infection. It is required:
 - * Before/after patient contact
 - * Before/after use of toilet
 - * After sneezing or coughing
 - * Before/after beginning your duties
 - * Before/after leaving work
- **Immunizations** must be up to date as certified by a physician. In addition, volunteers must obtain an annual TB test.

- **Exposure** or suspected exposed to a communicable disease or infection should be reported, by the volunteer, to their supervisor and fill out an incident report. Direct contact with patients should be avoided until the volunteer's condition has been evaluated by Occupational Health Services.
- **Pregnant** volunteers should be especially cautious when attending patients with certain communicable diseases.
- **Isolation/Precaution** signs, (blue or gold), on a patient door indicates volunteers should not enter the room. If you have any questions, please ask one of the nurses.
- **Hepatitis B vaccinations** will be offered to volunteers working in high-risk areas. Individuals may decline to have the vaccine administered, but if so, their decision to decline must be documented. Currently volunteers serving as pediatric cuddlers, interpreters, Doulas or Cystic Fibrosis Friends are offered hepatitis B.
- **Blood or body fluids** contact are not permitted for volunteers. Volunteers may not provide any services (including stripping or cleaning a patient bed) that may put them in contact with blood or body fluids.
- **Flu shots** will be provided free of charge to medical center personnel, including volunteers, through Occupational Health Services. Appointments for the shots may be made in October and November.

About Gloves

Health care professionals are allowed to wear gloves because they have received special training in infection control procedures. Since volunteers do not receive that special training, they are not allowed to wear gloves or to provide any services that require wearing gloves. Please decline politely if asked to do so, or call the Volunteer Services office (966-4793) if you have questions.

UNC COMMITMENT TO CARING

Caring for the people of North Carolina is our mission; it is the foundation of all we do.

To this end, UNC Health Care will advance to the next level of our mission through a focused initiative we are calling our Commitment to Caring.

Perhaps most significantly, two years ago we created a vision for UNC Health Care: ***to be the nation's leading public academic health care system.***

Commitment to Caring is much more than another "patient satisfaction improvement program." It places the patient at the center of everything we do, provides a strategic framework for all Health Care System initiatives and holds us accountable to achieve our measurable goals. The outcome we seek is a culture of extraordinary service and operational excellence.

This is an important group effort that includes everyone, from top leaders to front-line team members and volunteers. We need every person to be part of this effort if we are to accomplish and sustain our cultural transformation. By all of us working together in a concerted manner, we will fulfill our mission and provide the best care for the people of North Carolina.



The framework that will help us organize and integrate our efforts are symbolized by the six (6) pillars above. Everything we do will be guided by the each central core of these pillars.

People—Attracting and retaining the best team members

Service— Providing an exceptional patient experience

Quality— Achieving outstanding outcomes in a safe clinical environment

Finance— Maintaining financial viability to support our mission

Growth— Expanding services to meet the needs of all North Carolinians'

Innovation— Delivering state-of-the-art patient care

You will hear more about this initiative and the part we as volunteers will play in

helping UNC Health Care provide the best care for the people of North Carolina.

Leading to Create Customer Service

Creating Customer Loyalty

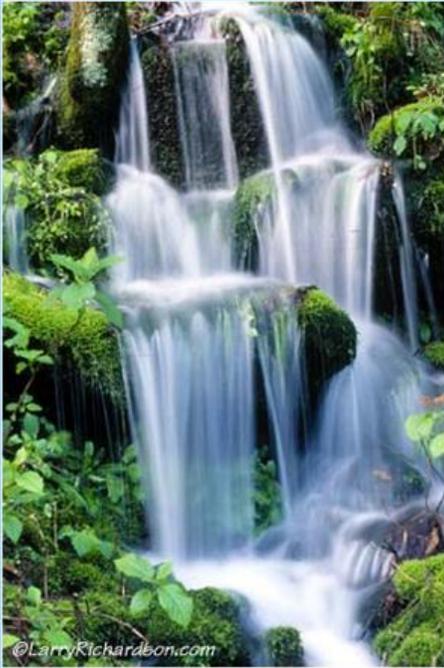
Leading to Create Customer Loyalty



- Just meeting expectations is not enough
- We need to deliver an emotional connection to our patients and customers
- Patients and customers remember us when we
 - Exceed their expectations or—
 - **DO NOT** meet their expectations

It's becoming increasingly more difficult to deliver that something extra, that something that the patient or customer did not expect. What is considered unexpected service today is the basic expectation for tomorrow. Simply satisfying patients and doing a "good" job is not enough.

Delivering the WOW Factor



- **W**illingness to go the extra mile
- **O**ffering first class service
- **W**inning patient and customer loyalty

These 3 things ensure a loyal patients and customers!

By committing to the WOW Factor, we can make an immediate difference every day, with every customer, every time we connect with them.

How to WOW



- Listen to the patients & customer and connect emotionally
- Perform spontaneous acts of kindness
- Create the connection around everyday occurrences
- Think outside the box! Where there's a will, there's typically a way.

WOWing isn't difficult. But it does take time and thought. Our patients and customers have so much to say to us. It's imperative that we take the time to listen, really listen, to them and to connect with them on an emotional level. Spontaneous acts of kindness can be as simple as walking patients/visitors to their destination or sitting and talking for a while—for those of us who are not familiar with all patient destinations, it means asking others on behalf that patient or visitor and finding out together. There are things that happen everyday that are predictable and give us opportunities to connect with and WOW our patients and customers.

Think outside the box. Offer to get water for the person, if they seem frail or sick offer a wheelchair and above all smile and converse with them to alleviate some of their stress.

Give suggestions to the staff about how we could provide better service in particular situations you encounter.

Patient Confidentiality

Volunteers come in contact with many different patients. Some may be neighbors and friends; others may be community leaders or public figures.

It is imperative that volunteers respect the privacy of these individuals by keeping any information about them absolutely confidential. Volunteers may not discuss any patient with anyone else, inside or outside the Hospitals, other than the patient's health care providers. If you are asked about a patient, simply but politely decline to respond.

Volunteers also may not provide any health status information to patients or families. This is the responsibility of health care providers.

HIPAA

HIPAA (*Health Insurance Portability and Accountability Act of 1996*) is the federal law to safeguard against a breach of patient confidentiality. The act includes **privacy** regulations to ensure information is handled in a confidential manner by all who have access. HIPAA also includes **security** regulations to ensure that protected health information (PHI) is protected from intentional or accidental disclosure and from alteration or destruction.

Protected health information includes any unique identifying number or characteristic such as the following and should not be disclosed without specific written consent.

Names	Telephone Numbers
Email addresses	Social Security numbers
Account numbers	Certificate/license numbers
Birth date	Hospital admission date
Address	Finger/voice prints
Full face photo	Vehicle identifiers
FAX numbers	Medical record numbers
Date of death	URL's
Vehicle serial number	Health plan beneficiary numbers

To do your part in helping to ensure patient confidentiality, please remember:

- Access only information you need to perform your assignment
- Discuss confidential information in private locations (not elevators, restrooms or cafeteria)
- Share patient information with members of the healthcare team on a need to know basis
- Do not leave a computer on and unattended
- Maintain patient information in a secure and private area that is not accessible by patients, visitors and others that do not have a need to know

Notary Witness: Volunteers can witness documents

I wanted to let you know that there has been a policy change concerning who may serve as a notary witness for patient advanced directives, Living Wills and Health Care Power of Attorney. The witness to this process may not be an employee of the health care system. Since our volunteers are here and easily identifiable by staff and patients, it is reasonable to ask that volunteers serve this role rather than asking visitors or family members of another patient.

If you are asked to witness the signature of the patient for their Living Will or Health Care Power of Attorney, please do so. You are only witnessing the signatures that are being notarized. This will typically only take a few minutes of your time and is very important to the patient.

Thank you in advance for your help.

Conflict of Interest/Vendor Relationship Form

Vendor Relationships

- Policy intended to identify, account for, and manage of financial relationships with Vendors (a vendor is a salesman, or any other representative of a company, group or other business entity that is a supplier of potential supplier to the UNC Health Care System of drugs, materials, supplies, equipment or services).
- Policy should limit inappropriate relationships that do not provide benefits to patients and trainees or that provide excessive benefits to individual (faculty, staff, students or volunteers).
- Policy intended to assure the safety and well-being of patients and the integrity of our institutions.
- Vendor relationships are not necessarily bad, but they must be approved and managed.

Applicability of the Vendor Relationships Policy

- Applies to all faculty, staff, volunteers, and students of the School of Medicine and the Health Care System.
- Addresses any financial relationships with vendors and research sponsors.
- Includes financial relationships of family and unmarried partners.
- Financial relationships can come from income, ownership (except through mutual funds), in-kind compensation, gifts, and royalties.

Gift Policy

- No gifts from Vendors regardless of the nature or value of the gifts.
- No gifts to family members or indirectly given through third parties or separate entities.
- No meals may be provided except as part of a general professional conference or meeting (also meals may be accepted as part of reasonable compensation on an approved consulting engagement).
- Gifts made to the University, HCS, Foundation, etc. that benefit an individual, their department, or their research are not prohibited but must be disclosed as a financial relationship.

Dress Code

Following the dress code listed below will allow you to be safe and comfortable while volunteering at UNC Hospitals. We expect a neat and clean appearance to be maintained at all times.

- Always wear your hospital issued photo I.D. badge, above the waist, when you are in the hospital volunteering (
- Adult, Academic and Junior volunteers must wear the appropriate jacket or polo shirt with slacks or skirts (**RED** – Junior Volunteers; **BLUE** – Academic Volunteers; **CRANBERRY** – Adult Volunteers).
- Academic and Junior volunteers must purchase the embroidered polo shirt and wear with khaki pants or skirts.
- For your safety and comfort wear closed-toe shoes with low heels and soft soles.
- No shorts or blue jeans are allowed.
- Perfumes and colognes should not be worn in patient care areas.
- Jewelry should be kept to a minimum. Do not wear dangling jewelry. If you have body piercings, other than in your ears, please remove them if you are working in a patient care area.
- Hats should not be worn unless you are volunteering outside.
- Do not chew gum while you are volunteering.
- When you are no longer going to volunteer, please return your uniform and photo ID badge to the Volunteer Services Department. **DO NOT** donate your uniform to any thrift stores. This is a matter of patient safety because someone could use the shirt to try to pass themselves off as a volunteer who forgot their ID.



DIVERSITY CELEBRATING THE DIFFERENCES

Diversity is a major issue to the organization that accredits UNC Health Care, the Joint Commission on Health Care Organizations (JCHO). It is imperative that the employees and volunteers recognize and react to the differing needs of our patients. Diversity includes, but is not limited to issues of religion and cultural and sub-cultural groups such as:

- Developmental disabilities
- Socio-economic status
- Substance abuse
- Race and ethnicity, etc...

Whenever we are faced with unfamiliar behavior, we go through various degrees of culture shock. Symptoms can vary from confusion and anxiety to feelings of inferiority, fear, depression and psychological withdrawal. Culture shock is often expressed as intense hostility toward another culture. Other people simply shut down. Not understanding the “rules” of another individual’s cultural background can lead to feelings of distress, helplessness and hostility towards the new environment.

We have great diversity in our patients, employees, and volunteers. Our job is to learn and respect our differences, and react accordingly.

TIPS FOR CULTURALLY COMPETENT CARE

- DO UNTO OTHERS... Don't apply the “Golden Rule” when dealing with members of other cultures. What is viewed as polite, caring, quality health care in one culture may be considered rude, uncaring or even evidence of poor standards of care in another culture.

HINT: Don't treat patients as you want to be treated. Try to learn how they want to be treated. Use the following:

THE PLATINUM RULE: “DO UNTO OTHERS AS THEY WOULD LIKE TO BE DONE UNTO.” Treat others the way they want to be treated.

Remember that a patient’s room is their temporary home. Please adhere to the following standards when entering a patient room.

Please knock.

Identify yourself and why you are entering the room.

Tell them what you are going to do before you do it.

Ask if there is anything you can do before you leave the patient's room.

- ADDRESS ALL ADULT PATIENTS BY THEIR SURNAMES UNLESS SPECIFICALLY TOLD TO USE A FIRST NAME.

Most other cultures are more formal than American culture, and many individuals born and raised in another cultural environment consider it a lack of respect to be addressed by their first names. This is especially true when there is a big difference in age among staff member/volunteer and patient.

HINT: If in question, ask the patient how they would like to be addressed.

- DON'T RAISE YOUR VOICE!

When speaking to a patient who seems to have a limited knowledge of English, don't shout! Remember, the patient may have difficulty understanding, but is not hard of hearing. Speak slowly and softly. Try to avoid words and expressions that are dependent upon one's knowledge and familiarity with American life and culture.

HINT: You can improve the patient's understanding of what you are saying by repeating it several times in different ways and using gestures, pictures, and other non-verbal forms of communication.

- EVERY CULTURE HAS ITS OWN RULES FOR TOUCHING AND DISTANCE.
HINT: Refrain from judging persons from other cultures by such culturally determined matters as the strength of the handshake, whether the person maintains eye contact, or keeps a distance that is comfortable. Observe the patient closely and try to "negotiate" distance so that it is acceptable to both of you.
- DON'T ASK A PATIENT WHO SPEAKS LIMITED ENGLISH, "DO YOU UNDERSTAND?"

If the patient nods his or her head and answers "Yes" to your question, it may only mean that the patient heard you, not that they understood your question and agrees with you.

HINT: Try to ask questions beginning with the words "when", "where", "what", "why" and "how". Listen carefully to the answers for clues to the patient's degree of understanding or real agreement. You can also check understanding and agreement by asking the patient to repeat to you, step by step, exactly what you have said.

- STUDIES HAVE SHOWN THAT FOR MANY PATIENTS, SATISFACTION WITH TREATMENT IS HEAVILY INFLUENCED BY THEIR "COMFORT LEVEL" WITH THE PHYSICIAN AND THE OFFICE STAFF AS WELL AS BY THE QUALITY AND/OR SUCCESSFUL OUTCOME OF TREATMENT.

This includes having patience, a willingness to take the time to explain, making sure the patient understands, and responding to the patient's needs and expectations.

HINT: The best place to start and end is to never assume that a patient wants what you want or expects the same type of care and service that you want.

Instead, take the time to learn about a patient's culture, traditional health/wellness beliefs and practices, and to demonstrate your knowledge and

interest by customizing rules of courtesy, procedures, and treatment plans to suit a patient's needs and expectations.



THE TEN COMMANDMENTS OF INTERCULTURAL SENSITIVITY

- I. Thou shalt be aware of the impact of culture on behavior, especially on communication.
- II. Thou shalt be prepared to look at people's responses to situations from points-of-view other than thine own.
- III. Thou shalt learn to deal with ambiguity, including unexpected demands and unanticipated approaches to resolving disputes.
- IV. Thou shalt understand that biases and stereotypes often get in the way and need to be recognized.
- V. Thou shalt carefully observe the behavior of others before coming to any conclusions.
- VI. Thou shalt challenge thy assumptions about other cultures and help others challenge theirs.
- VII. Thou shalt always be willing to seek out answers to difficult questions about culture.
- VIII. Thou shalt strive to build rapport with people having different values.
- IX. Thou shalt be willing to adapt thy communication style when the situation demands it.
- X. Thou shalt always keep in mind the three cardinal rules of mediating across cultures:

Patience, Patience & more Patience!

ATTENDANCE

Patients, staff and visitors will be counting on you! Thus, it is important to be regular and punctual and let the Volunteer Office staff and/or your immediate supervisor know if you will be unable to volunteer.

- **Sign in:** At the Volunteer Office, the locker room or in your volunteer area at the beginning of your shift.
 - **Sign Out:** At the end of your shift please sign out in the Volunteer Office, the locker room or in your volunteer area.
 - **Absences:** Volunteers are expected to be present as agreed on and punctual. Excessive absences may lead to another volunteer being assigned your duties. If you are unable to volunteer at your assigned time, please notify your service area chairperson, immediate supervisor or the Volunteer Office. In some instances, (ED, ICU waiting room and surgery waiting room) you will be asked to get your own substitute.
 - **Leave of Absence:** A leave of absence form is available in the Volunteer Office for those volunteers who will be gone for an extended period of time for vacations, surgery, or family situations. If possible, we will ask someone to substitute for you during this time and will temporarily hold your assignment for you.
 - **Inclement Weather:** Volunteers are not expected to come to work if the roads are hazardous or there are other adverse weather conditions. However, we welcome anyone who can make it to the hospitals on those days.
 - **Holidays:** Volunteers are not expected to work on hospital holidays. However, we welcome volunteers who wish to come on those days. Holidays that are observed by the hospitals include:
 - * **New Year's Day**
 - * **Martin Luther King's Birthday**
 - * **Good Friday***
 - * **Memorial Day**
 - * **Independence Day**
 - * **Labor Day**
 - * **Veteran's Day***
 - * **Thanksgiving Day**
 - * **Post Thanksgiving Day**
 - * **Christmas Eve***
 - * **Christmas Day**
-
- Denotes Floating Holiday and the Volunteer Office may be open.

CONDUCT

Nothing should be said or done to diminish the doctor/patient, nurse/patient or family/patient relationship or the relationship of any other professional staff member such as social workers or therapy staff and the patient.

- **Confidentiality:** Is a must! HIPAA (Health Insurance Portability and Accountability Act of 1996) states that staff, including volunteers, must safeguard against the breach of patient confidentiality. The act includes privacy regulations to ensure patient information is handled in a confidential manner by all who have a need for access. HIPAA also includes security regulations to ensure that medical information is protected from intentional or accidental disclosure and from alteration or destruction. Violations of confidentiality will result in a volunteer's dismissal.
- **Task:**
 - * Volunteers may not provide any service that would expose them to blood or body fluids.
 - * Volunteers should not perform medical procedures or give medical advice.
 - * Volunteers should not transport a patient on a stretcher or in a wheelchair with an IV or oxygen.
 - * Volunteers should not sit or lean on a patient's bed.
 - * Strict **hand hygiene** procedures must be followed before and after contact with a patient or their belongings.
 - * Volunteers should always let a staff member know about patient/family requests or information that may impact the care of the patient.
- **Privacy:** Volunteers should always knock on a patient's door, open the door just a little and wait for a response or tell them you are a volunteer and what you are entering the room for. Do not enter a room when a physician, nurse or other clinicians are in the room.

COMMUNICATION

Volunteers have the time to slow the pace and give one-to-one time to patients. Volunteers do not have to have all the answers, they just need to listen. This is particularly true for volunteers in the ICU Waiting Room, Emergency Department, Cancer Hospital, Cuddlers in the Children's Hospital and the Patient and Family Advisory Board members.

Press Ganey Patient Satisfaction surveys tell us that patients place high value on emotional and spiritual needs. Thus addressing emotional and spiritual needs is a top priority for quality improvement. Evidence exists to indicate a relationship between patient satisfaction with emotional and spiritual care profitability.

It is important to remember that in a tense situation, we respond with what makes us feel better.

What is emotional support?

- Start where the patient and family are and go on their journey with them.
 - Leave your own "stuff" at the door of the hospital when you come to volunteer
 - You must actively listen to what they are saying
- Being Human with another human being
 - Expressing warm, caring and supportive behavior towards the patient
 - Empathy – trying to put yourself in the patients' situation
 - How does it feel to be them and going on their specific journey
 - What are their challenges
 - How might they be feeling
 - What might they need
- Being present (LISTENING)
 - Slowing the pace – volunteers have time to do this
 - Listening is not a passive skill! Quiet the inner voice.
 - Example: If a patient tells you they have just been diagnosed with cancer and I am going to die.
 - I have two small children...
 - Response: May I sit with you while you talk thru this news.
 - Don't say you know how they feel
 - Say I remember what it was like for me
 - Don't show shock, surprise or disgust
 - People in crisis just need you to sit and comfort
 - Don't tell the story of your own illness and treatment
 - Make the conversation about the patient
 - Help them focus on the family strengths
 - Skills: paraphrasing and reflective feelings.

- Refraining from telling the patient how they should be feeling...just be in the moment and really hear what the patient is communicating both verbally and nonverbally.
- Nonverbal Care: smiles, gestures, eye contact, body language.

Barriers to connecting with patients

- Race/culture, language, gender, generational, socio-economic, personality, disabilities
- What are your biases, what is your background, what are your politics, what is the norm in your family?
 - Patients may try to hook volunteers with conversations regarding politics and religion.
 - Save subjects include weather, pets, children/grandchildren, sports
- How do you perceive people? Are you quick to judge?
- Staying non-judgmental and unbiased!!
 - Remember that people loose control when they go to the hospital.
 - There are 3 sides to every story

Putting Emotional Support to the Test – Difficult Things to Hear...

- The food is horrible, this hospital is the worst, I hate the nurses! Why is this happening to me? ...and then crying. (misdirected anger, blame, fear)
- "What is happening? It is taking so long to get the test results back. Usually when it takes this long to get results it's bad news, right? What do you think? (anxiety, fear)
- I know why this is happening...it is because I wasn't always nice to my wife... (guilt)
- "can I have a blanket.. can I have more water... when will my doctor be here to see me...can I have more medication... can I have another pillow..." (loneliness, needy)
- "We have already made a connections, I feel so comfortable with you. I am going to be discharged today. Can we stay in touch when I am discharged?" (manipulation, needy)

Strategies/Possibilities

- Do you want to tell me more about that?
- It is hard not knowing... (about the test results, diagnosis, etc)
- Yes, I know it must seem unfair what is happening.
- What do you think?
- Sounds like you're really struggling with what to do.
- So let me make sure I am hearing you right...
- Would you like to talk?
- Sounds like you're angry about ...
- It's ok to cry... (ok to sit quietly with a patient)
- **Avoid saying:**
 - I know just how you feel

- It will get better
- It will be ok
- Don't cry, don't be angry, don't be sad, don't be afraid (or any other feeling the patient might be expressing)
- When the "right words" don't come to you...please know that SILENCE, not saying anything at all, yet staying in the room and being present with the patient expresses care and support towards them.
 - A newly diagnosed oncology patient was admitted for surgery the following day. Her husband stayed with her all day and well into the evening when she finally convinced him to go home and get some rest before her surgery the next day. As soon as he left she crumbled in tears. When her nurse came in and found her crying, she turned off the lights and went to the bedside and took the woman's hand and sat quietly holding her hand. Finally the woman rolled over and looked at the nurse and thanked her. She explained that she had held back her emotions all day to ensure that her husband was ok. She told the nurse that she just needed a good cry.

BOUNDARIES

- Refrain from talking about yourself too much...always try and turn the conversation back to the patient and/or family. We never want patients and/or families to feel they are entertaining us...**Be Aware** of when it is time to leave the room!
- Don't make promises you can't keep
 - "I promise to come back at the end of my shift..."
- Never give out personal information
 - If a patient would like to contact you, they may do so through the Volunteer Services office.
- Remember, there are often underlying factors contributing to the "connection" a patient feels to you.
- No "shoulding" allowed.

DIFFICULT PEOPLE and SITUATIONS

- Promise: You will encounter difficult people and difficult situations!
- Please do not internalize or personalize what people may say to you.
- Most people you will encounter are polite and grateful for your help! With that said, because of the stress of being in a hospital or worrying about loved ones, you will also deal with people who may be abrupt or rude.
- Please know that what patients and/or families say or do is not really aimed at you, but comes from frustration.

- Don't get hooked into feeling that you have to respond the way you would like to respond, but that you know that you have the control to decide on the appropriate way to respond.
- **Listen, Listen, Listen!!!**
 - "Do you want to tell me more about that..."
 - Everyone wants to be heard. Allow patients/families to vent with an open ear. Do not interrupt.
 - Refrain from taking a side or point-of-view, instead, acknowledge the other person's concerns while remaining neutral (do not blame or argue).
 - Remember, there are 3 sides to every story!
 - Do your best to resolve the issue through chain of command.
 - In most cases it is best to go to the supervisor in the area where you are working and let them know the situation
 - If additional help is needed, please talk with the Volunteer Services staff or Patient Relations staff.
 - Report any unresolved issues to the Volunteer Services Department.

RELATIONSHIP BUILDING

- Relationships are the foundation of good work – this program is no exception.
- Nurture relationships with the nursing staff and social workers on each unit.
- If you know the person you are connecting with is busy, timing is poor or staffing is low, acknowledge this. It will keep the person from having to let off their frustration by telling you how busy understaffed, etc. they are.
- Thank the person for taking the time to help or listen to you... reinforce the end result of their time ("thank you for taking the time to talk with the patient, I know they will be relieved.")
 - Provide a "High 5" as indicated.
 - Let Volunteer Services know if we need to do something special for the staff
 - Take candy in your pocket for give them a boost

RESOURCES

- Know your RESOURCES!!!
 - Volunteer Services Department
 - Case Management/Social Work
 - Patient Relations
 - Pastoral Care
 - Guest Services

BENEFIT TO PATIENTS

- Why is meeting the emotional needs of patients important to you, patients, staff and the hospital? Research shows:
 - Causal relationship between social support and physical health
 - Depressed patients = longer hospital stays (opposite... happy patient/shorter stays)
 - Patients who have their emotional needs were met will come back to the hospital in the future (patient satisfaction).
 - Patients HIGHLY value their emotional needs while in the hospital.

BENEFITS TO THE VOLUNTEERS

- Being able to connect with patients as human beings (seeing the person behind the patient).
- Volunteer satisfaction, resulting from smiles, appreciation and understanding from patients.
- Relationship building with staff (AND increased nurse morale). When nurses see volunteers effecting positive change in their patients by their presence, they will gravitate towards the volunteers and appreciate their role on the unit and in the health care system.
- When volunteers take the time to listen, support and understand the patients, they will reap the rewards.
- When volunteers are trained appropriately and are placed in the right area, they will always "get" more than they "give".

Miscellaneous

Other useful information to know.

Incident reports: *All accidents or incidents must be reported to your supervisor and Volunteer Services immediately.* Volunteers or their supervisor must fill out an employee incident form when an on-the-job injury occurs and take it with you to Occupational Health (M-F 7:30-4:30) or the ED at all other times. You are covered by accident and liability insurance while performing your specific volunteer duties (please refer to your volunteer assignment description).

Telephones: If you need to make a personal phone call, try to use the phone in the volunteer office. All phones in the hospital require that you dial "9" for an outside line. Do not use a phone in a patient room. Please make calls short. Answer a phone by identifying the department and yourself. Messages should include the date and time of the call, the message and your name. Be sure to repeat the phone number to the caller to ensure the number is correct.

Solicitation: No solicitation other than the State Employee Combined Campaign, Juvenile Diabetes Walk, Health Walk and Children's Promise Radiothon are allowed at UNC Hospitals.

Education: All volunteers are required to have general orientation, on-the-job training, and annual required reviews. Service area meetings are required twice annually. Volunteers may attend hospital educational seminars as appropriate. The Volunteer Association provides speakers on various health or hospital related topics for all volunteers each spring and fall.

Age Specific Competencies: The hospitals provides guidelines in how people develop from birth through their later years in life. Each person will go through certain stages of development and have some common needs during each stage. By learning about how people in different stages respond to others and their surroundings we can be better prepared to help meet their needs. This information is provided in your Volunteer Orientation packet.

Performance Improvement: Volunteer Services continuously works with all UNC Hospitals departments to improve the quality of services we offer patients and visitors. UNC Healthcare uses Impact Care, a quality assessment and quality improvement methodology system. It is based on the principles of: meeting and exceeding customer needs, focusing on the process, not the people and continuous improvement by identifying and reducing errors in the system. Continuous improvement begins when we realize that ERRORS are not mistakes to be hidden, that they are pearls of information that can tell us what is wrong and how to fix it.

Volunteer Benefits and Awards

Although emphasis is placed on service to others and the satisfaction of helping others, our goal at UNC Hospitals is to make the volunteer experience meaningful for each volunteer. In appreciation of and recognition for your time and service, UNC Hospitals offers:

- Complimentary meal tickets to the Hospitals' Grapevine Cafeteria, The Café, The Coffee Shop and Wendy's on the day you volunteer.
- Free parking in the visitor's parking deck when on duty during regular daytime hours.
- Treatment for job-related accidents or illness through Occupational Health Services, 7:30am to 4:30pm on weekdays.
- Free TB test, blood pressure check, tetanus shot, and flu shots are available.
- Discount tickets and passes for various theaters around the area. Tickets can be obtained at the Employee Recreation Services Satellite office, Main Lobby, 7:30-8:30am and 3:30-5:30pm on weekdays.
- Discount tickets and passes for Busch Gardens, Carowinds, Emerald Point Water Park and Kings Dominion. These can be obtained through Employee Recreation Services Satellite office, Main Lobby, 7:30-8:30am and 3:30-5:30pm on weekdays.
- Recognition reception given by UNC Hospitals for all active hospital volunteers. Volunteers are recognized for their first 100 hours of service, and for each additional 500 hours of service with a UNC Hospitals award pin.
- References given for employment and school applications.
- Job experience or shadowing for those interested in health care careers.
- Opportunity to attend educational classes offered by UNC Healthcare.

Tax Deductions

Mileage and the cost of uniforms incurred by volunteers are tax deductible. Please review current tax laws/and or contact your tax accountant. The Volunteer Services Department will provide documentation of hours and dates of volunteer services as requested.

UNC Hospitals Volunteer Association

The UNC Hospitals Volunteer Association was organized in 1952 to advance the objectives and interest of patients and the Hospitals by providing service in a volunteer capacity and resources through approved fund-raising activities. The Association also seeks to provide better community understanding of the Hospitals' mission.

The Association is a semi-independent organization with its own board of directors, officers and by-laws. Association activities are related to the budget approved by the membership. The association's by-laws are approved by the Hospitals board of directors.

The UNC Hospitals Volunteer Association, in conjunction with the Department of Volunteer Services, conducts, sponsors and assists in the following activities:

- Cranberry Corner Gift Shop and Butterfly Boutique
- Our signature handmade sock monkeys for every admitted pediatric patient
- Health Careers Symposium for all North Carolina high school students
- Volunteer newsletter, *The Courier*
- Refreshments for ICU waiting rooms and other special needs
- Toys for pediatric patients
- Selected hospital services and programs for neonatal critical care and pediatric clinics
- Scholarships for medical allied health students, nursing, employees, and junior and college volunteers
- Lending library for patients and staff
- Patient Tea Service
- Hospital School sponsor
- Pet Therapy
- Art Programs including Door-to-Door
- Clothing closet
- Pediatric Parents Night Out dinners and Parent to Parent Support Brunch
- Annual Elves and Angels Boutique for pediatric patients
- GI Surgery pillows
- Oncology patients Heartfelt Hats

All volunteers are members of the UNC Hospitals Volunteer Association. Activities sponsored and conducted by the association provide many educational opportunities both for service to the community and to explore mutual areas of interest with other volunteers. Lasting friendships are formed through sharing common interests and activities.

The Volunteer's Pledge

- I will be punctual and conscientious in the fulfillment of my duties and accept supervision graciously.
- I will conduct myself with dignity, courtesy and consideration.
- I will consider as confidential all information that I may hear, directly or indirectly, concerning a patient, doctor or any member of personnel and will not seek information regarding a patient.
- I will take any problems, criticisms, or suggestions to the director of Volunteer Services.
- I will endeavor to make my work of the highest quality.
- I will uphold the traditions and standards of UNC Hospitals and interpret them to the community at large.

A Bill of Rights for Volunteers

Every UNC Health Care volunteer has the right . . .

- To be treated as a co-worker.
- To a suitable assignment, with consideration for personal preferences, temperament, experience, education and employment background.
- To know as much about the hospitals as possible, its policies, people, and programs.
- To training for a job, thoughtfully planned, and effectively presented.
- To continuing education on the job, including information on new developments and training for greater responsibility.
- To promotion and a variety of experiences through advancement of assignments, transfer, or special assignments.
- To be heard, to feel free to make suggestions, and to be respected for an honest opinion.
- To recognition in the form of awards and expressions of appreciation.

Abbreviations

Departments:

ACC	Ambulatory Care Center
AOB	Administrative Office Building
CCU	Coronary Care Unit
CT ICU	Cardiothoracic Surgery Intensive Care Unit
EHS	Employee Health Service
ER/ED	Emergency Room/Department
OB/GYN	Obstetrics and Gynecology
Int. Med	Internal Medicine
MED ICU	Medical Intensive Care Unit
NEURO ICU	Neurosurgery Intensive Care Unit
NICU	Neonatal Intensive Care Unit
OCCHS	Orange Chatham Comprehensive Health Service
OR	Operating Room
OT	Occupational Therapy
PT	Physical Therapy
PACU	Post-Anesthesia Care Unit (recovery room)
PEDS ICU/PICU	Pediatric Intensive Care Unit
RESP ICU	Respiratory Therapy Intensive Care Unit
SURG ICU	Surgery Intensive Care Unit
Surg	Surgery
VR	Vocational Rehabilitation

Staff:

Dr./M.D	Doctor/Physician
HUC	Health Unit Coordinator
LPN	Licensed Practical Nurse
LPT	Licensed Physical Therapist
MT	Medical Technologist
NA	Nursing Assistant
PA	Physician Assistant
RT	Respiratory Therapist
RN	Registered Nurse
SW	Social Worker

Medical Terms:

ad lib	as much as needed
adm	admission
AMA	against medical advice
amb	ambulatory (not confined to bed)
anes	anesthesia
b.i.d.	twice daily
BP	blood pressure
BR	bathroom
CAD	coronary artery disease
cath	cathererization
CHF	congestive heart failure
CPR	cardiopulmonary resuscitation
cult	culture
CVA	stroke

Medical Terms Continued:

CXR	chest x-ray
D/C	discontinue
d/c	discharge
DM	diabetes mellitus
ECG/EKG/EEG	electroencephalogram
ENT	ear, nose and throat
FTT	failure to thrive
GI	gastrointestinal
HBP	hypertension (high blood pressure)
I & O	intake and output
IV	intravenous
lac	laceration
LOC	loss of consciousness
meds	medications
MVA	motor vehicle accident
NAD	no acute distress
N & V	nausea and vomiting
NPO	nothing by mouth
OOB	out of bed
p.o.	orally
p.r.n.	whenever necessary
pt	patient
q.d.	every day
q.h.	every hour
q.h.s.	every night at bedtime
R/O	rule out
SOB	shortness of breath
s/p	status post
Stat	at once
TB	tuberculosis
temp	temperature
t.i.d.	three times a day
trauma	wound or injury
triage	prioritizing patient care according to severity of illness or injury
Tx	treatment
vs	vital sign
wt	weight

Other Common Terms:

JACHO – Joint Commission on Accreditation of Healthcare Organizations. JACHO is a national agency that sets voluntary standards for health care. Hospitals submit to surveys to demonstrate compliance with meeting these national standards of service. Hospitals must maintain accreditation to qualify for funding from certain government agencies.

OSHA – Occupational Safety and Health Administration. A branch of the U. S. Department of Labor, OSHA is responsible for assuring that working men and women have safe and healthful working conditions. Failure to comply with OSHA standards can result in fines up to \$70,000.00 for each violation.

CDC – Centers for Disease Control and Prevention. A branch of the U. S. Department of Health and Human Services, CDC is responsible for providing leadership and direction in the prevention and control of disease and other preventable conditions and responding to public health emergencies; it provides guidelines to health care facilities for prevention and control of infection.

CMS – Center for Medicaid and Medicare Services.

Patient Self Determination Act – This act is designed to educate patients about advance directives, documents that state a patient's wishes to refuse or accept needed treatment should a patient become incapacitated and unable to speak for himself or herself. Living wills and health care powers of attorney are examples of advance directives. Volunteers and Hospitals employees may **NOT** serve as witnesses for these documents.

Universal Precautions means practicing blood and body fluids precautions for all patients. All human blood and other potentially infectious materials are treated as if known to be infectious. Only trained health care professionals are involved in practicing these precautions.

MSDS – Material safety data sheets. When appropriate, volunteers should check their work areas for the location of MSDS which include information on ingredients, first aid, spill procedure, etc.

CQI – Continuous Quality Improvement. CQI encourages everyone to look for ways to improve by evaluating systems and processes of interaction among various departments; then, as a team, find ways to improve job efficiency and effectiveness.

Important Telephone Numbers

Emergency	966-4111
Employee Recreation	966-4833
Environmental Health & Safety	966-0749
Gift Shop	966-8740
Hospitals Operator	966-4131
Hospital Police	966-3686
Housekeeping	966-5611
Infection Control	966-1637
Legal – Claims & Risk Management	966-3041
Occupational Health	966-4480
Pastoral Care	966-4021
Patient Information	966-4311
Patient Relations	966-5006
Volunteer Services	966-4793

(Inside the Hospitals, enter/dial 6 and the last four digits)