



SELF-REVIEW ORIENTATION MANUAL FOR RETURNING VOLUNTEERS

www.med.umich.edu/volunteer

UMHS Mission/Vision

Our vision is to create the future of health care through discovery and to become the national leader in health care, health care reform, biomedical innovation and education.



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RETURNING VOLUNTEER CHECKLIST

- Consent to Criminal History Check
- Update personal and emergency contact information (if needed)
- Meet with Volunteer Services staff to confirm schedule or request new placement
- TB Skin Test or Chest X-Ray
- Hepatitis B Vaccination (if applicable for the particular placement selected)
- Photo ID Badge (This is the property of UMHS Security)
- Return completed Processing Form
- Review Returning Volunteer Orientation Manual
- Complete Returning Volunteer Orientation Review
- Sign Code of Conduct Statement and Certification Form

The University of Michigan Health System has countless examples – every day – of the dedication and commitment of physicians, nurses, staff, and volunteers to our patients, families and students. These very real experiences are the cornerstone of the traditions and values of UMHS.

Volunteers are an integral part of our health system and their contribution plays a significant role in supporting patients, their families, and the community at large. Volunteers truly provide the service that represents the Michigan Difference.

OUR TRIUMPHS ARE NOT IN RESEARCH ALONE,
NOR IN THE HANDS OF A SINGLE DOCTOR,
BUT RATHER IN THE REWARDS REALIZED IN WORKING TOGETHER.



THAT'S THE MICHIGAN DIFFERENCE.

michigandifference.org

VOLUNTEER SERVICES DEPARTMENT CONTACT INFORMATION

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Volunteer Services Department office hours: 8:00am – 5:00pm Monday through Friday. Our office is closed during all University of Michigan Health System observed holidays.

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UMHS MISSION, VISION, VALUES AND GOALS

U-M Health System



Mission	Vision	Values	Demonstrating Values	Goals
<p>Excellence and Leadership in:</p> <p>1. Clinical Services</p> <p>2. Research</p> <p>3. Education</p>	<p>We will be:</p> <p>The first place people want to come when they need health care.</p> <p>The leaders in education and advancing medical and health science.</p> <p>The place where people prefer to work.</p>	<p>Respect</p> <p>Compassion</p> <p>Trust</p> <p>Integrity</p> <p>Efficiency</p> <p>Leadership</p>	<p><u>P</u>atients and families first</p> <p><u>A</u>ccountability for outcomes</p> <p><u>R</u>espect for individuals</p> <p><u>T</u>eamwork</p> <p><u>N</u>ever-ending improvement</p> <p><u>E</u>mpowerment</p> <p><u>R</u>esponsibility for cost effectiveness</p> <p><u>S</u>ervice to the Community</p>	<p>Service</p> <p>Financial Health</p> <p>Quality Care</p> <p>Academic Support</p> <p>People</p> <p>Community Health</p>

DEMONSTRATING OUR ORGANIZATIONAL VALUES

The U-M Health System exists to provide excellence and leadership in patient care, research and education. This mission is guided by our organization's **values**: respect, compassion, trust, integrity, efficiency and leadership.

Demonstrating our Values

The U-M Health System has identified statements that describe how our organization's vision will be achieved. The following statements are clearly defined and reflect action-behaviors that every employee and volunteer in our organization can understand, commit to, and demonstrate. In addition, the driving value of our organization - Patients and Families First - must take priority whenever conflicts in values or decisions occur.

We will work through partnerships across disciplines, programs and role boundaries. Partnerships will reflect a shared decision making process, shared authority and shared resources.

The following statements represent our organizational values in action, which have been created using the acronym "PARTNERS" to reinforce our focus:

Patients and Families First

All six of our values go into serving our Patients and families first.

Accountability for Outcomes

We show integrity in holding ourselves Accountable for all outcomes.

Respect for Individuals

We Respect all individuals.

Teamwork

We realize the best road to efficiency only comes through working together in a respectful environment – Teamwork.

Never-ending Improvement

We are leaders for the future with our resolution for Never-ending improvement and innovation.

Empowerment

We show trust, integrity and efficiency through the Empowerment we give our staff, patients, families, visitors, and volunteers

Responsibility for Cost Effectiveness

We are efficient and take the lead for the environment and the State of Michigan with our Responsibility for cost effectiveness.

Service to the Community

We regard the importance of being a health leader as we provide Service to the community.

DIVERSITY

Understanding Diversity: Respect for Individuals

Diversity is the set of human attributes, experiences and behaviors that differ from individual to individual and the groups to which they belong.

UMHS Definition: Diversity is the mosaic of people who bring a variety of backgrounds, styles, perspectives, values and beliefs as assets to the groups and organizations with which they interact.

Vision: The U-M Health System will achieve and sustain an environment that recognizes, respects, fosters and fully maximizes the strengths and differences among its employees to be the employer and provider of choice.

Attributes of diversity include any and all of the following:

- Age
- Gender
- Ethnicity
- Race
- Religion
- Sexual Orientation
- Values
- Education
- Occupation
- Socio-economic Status
- Language
- Parental Status
- Marital Status
- Abilities/Disabilities
- Weight
- And many more...



CULTURAL COMPETENCY

What is Cultural Competency?

Cultural competency is effectively providing services to people of all cultures, races, ethnic backgrounds and religions in a manner that preserves their dignity. (Medicare Quality Improvement Community, April 2005)

**Cultural competency is about respecting
cultural differences and similarities.**

Why is Cultural Competency important?

It has long been acknowledged that a patient's health beliefs and communication style play critical roles in medical care. The issues of cross-cultural communication and variations in health beliefs not only impact patient satisfaction, but can also impact clinical outcomes. Demographics are changing rapidly throughout the nation, and the service areas of the UMHS are no different. As a leader in healthcare, the UMHS must remain at the cutting-edge of developments in culturally competent medicine.

Cultural Competence:

1. Makes more effective use of time with patients
2. Increases disclosure of patient information
3. Helps with negotiating differences
4. Increases patient compliance in treatment protocols
5. Positively affects clinical outcomes
6. Improves communication with patients
7. Decreases stress
8. Builds trust in a relationship
9. Increases patient and provider satisfaction
10. Meets increasingly stringent government regulations and medical accreditation requirements

VOLUNTEER AND STAFF PERFORMANCE EXPECTATIONS

1. **Customer Focus:** Relates work and job/placement purpose to UMHS mission and commitment to placing patients and families first.
2. **Teamwork:** Interacts effectively and builds respectful relationships within and between units and among individuals.
3. **Communication:** Communicates effectively in ways that enhance productivity and build respectful relationships. Demonstrates active listening, written, verbal, and information technology skills. Shares relevant information.
4. **Integrity:** Adheres to high standards of personal and professional conduct.
5. **Respect for Individuals:** Fosters mutual respect and supports UMHS commitment to diversity. Promotes community building and diversity initiatives that help employees learn and respect one another's differences.
6. **Safety:** Contributes to a safe and secure environment for patients, visitors, faculty, staff, and volunteers by following established procedures and protocols.
7. **Quality:** Adopts practices to improve work processes, enhance customer satisfaction and ensure excellence in daily work.
8. **Efficiency:** Accomplishes work in ways that maximize productivity and available resources while minimizing waste.
9. **Confidentiality:** Respects and maintains the confidentiality of sensitive information, including our patients' protected health information (PHI), research, and student data.

Commitment

Attendance and commitment are the foundation for any successful volunteer experience. Volunteers are expected to fulfill their weekly shift commitment. Volunteers agree to serve the University of Michigan Health System as follows:

- a minimum of two (2) hours per week, or
- a maximum of four (4) hours per week
- for a minimum of six (6) months, or two (2) complete terms for students.

➤ *We ask that you commit to volunteering as if it was a paid job. Patients, families and staff rely on the services volunteers provide.*

UM HOSPITALS AND HEALTH CENTERS VOLUNTEER COMPETENCIES

"Most organizations acknowledge that when a customer comes in contact with anyone from the organization, the customer experiences the total organization."

- Margaret Wheatley
Leadership and the New Science, 2006

1. Volunteer consistently demonstrates effective communication skills using active listening, written, verbal and information technology skills.
2. Volunteer protects confidential information.
3. Volunteer complies with safety instructions, observes safe work practices, provides input on safety issues and promotes a safe work environment.
4. Volunteer consistently demonstrates the organization's values: Patients and families first, Accountability for outcomes, Respect for individuals, Teamwork, Never-ending improvement, Empowerment, Responsibility for cost-effectiveness and Service to the community (PARTNERS).
5. Volunteer consistently meets the organization's expectation for exemplary customer service when working with patients and their families.
6. Volunteer works effectively and with team/work group and others to accomplish organizational goals.

UNIVERSITY OF MICHIGAN NON-DISCRIMINATION STATEMENT

The University of Michigan, as an equal opportunity/affirmative action employer, complies with all applicable federal and state laws regarding nondiscrimination and affirmative action. The University of Michigan is committed to a policy of equal opportunity for all persons and does not discriminate on the basis of race, color, national origin, age, marital status, sex, sexual orientation, gender identity, gender expression, disability, religion, height, weight, or veteran status in employment, educational programs and activities, and admissions. Inquiries or complaints may be addressed to the Senior Director for Institutional Equity and Title IX/Section 504/ADA Coordinator, Office for Institutional Equity, 2072 Administrative Services Building, Ann Arbor, Michigan 48109-1432, (734) 763-0235, TTY (734) 647-1388. For other University of Michigan information call (734) 764-1817.

THE HIPAA PRIVACY REGULATIONS

Federal regulations on Privacy and Security, the Health Insurance Portability and Accountability Act (HIPAA) are intended to maintain privacy and increase the patient's control over who may see or use the patient's "Protected Health Information" or PHI. Health Care Providers may use and disclose PHI for treatment, payment and health care operations only (such as infection control, quality assurance, sending reminder letters, accreditation and teaching). Where a disclosure is required by law, for example reporting child abuse, neglect, domestic violence, and certain diseases to public health authorities, no authorization is necessary. A written authorization is needed for most other purposes, such as research, and a patient may tell a health care professional which of the patient's family members the provider may talk to about the patient's care.

The regulations give patients the right to access their PHI and request amendments. They also require health care providers to be careful regarding how they handle PHI, using it only for permissible purposes, providing only the minimum necessary information, verifying the identity and authority of people who ask to see it, and taking security precautions to protect it. Failure to do these things can result in civil and criminal penalties.

As a Volunteer:

- Do not discuss anyone you have seen at the health system with family, friends or others who do not have the need to know to complete their job responsibilities
- Do not initiate contact with someone you recognize or know personally who may be visiting or using the services of UMHS
- Communication regarding patients and families via any social media (text, tweet, email, Facebook, etc.) is prohibited
- Log off and/or use time-sensitive time-outs on computers in public or community areas

Who must follow this law?

- Most doctors, nurses, pharmacies, hospitals, clinic, nursing homes and many other health care providers
- Health insurance companies, HMOs, most employer group health plans
- Certain government programs that pay for health care such as Medicare and Medicaid

To report a HIPAA violation:

Refer to: [Code of Conduct and Compliance Program](#) booklet for the Anonymous Compliance Hotline, Online reporting and Email address information.

SAFETY AND SECURITY PRECAUTIONS

Emergency Management and Disaster Preparedness

Scope of Emergency Management

- External events with clinical implications, i.e. large-scale hazardous materials incidents, multi-vehicle accidents
- External/internal events affecting the facility or operations, i.e. communications failure (paging, telephone, computer), catastrophic fire/explosion, flooding
- An "ALL CLEAR" will be given when essential services have been restored and normal hospital operations are possible.

Your Role in Emergency Management

- Cooperate with authorities, including your supervisor, administrators, and emergency personnel (i.e., Fire, Police and Security)
- Be prepared to return to your unit/department

Emergency Codes

Code Blue	Cardiac or Respiratory Arrest
Code D	Disaster
Code D Drill	Disaster Drill
Code E	Non-Clinical Emergency
Code E Drill	Non-Clinical Emergency Drill
Code F	Fire
Code F Drill	Fire Drill
Code Pink	Infant abduction
Code Silver	Violent situation
Code R-1	Bomb threat
Code R-2	Bomb discovered
Yellow Card	Discreet distress signal to call for Security urgently

NOTE: Tornado warnings are announced in "plain language" over the PA system.

**UMHS Emergency Reporting Number: 999 from in-house phone
(Dialing 911 also works)**

For Security-related non-emergencies: Dial 6-7890 on any UMHS in-house phone.

Critical Incident Plan

A critical incident is defined as any unplanned event involving a disruption of service; threat to a patient, family or staff security; or a need for a response to a life-threatening situation.

- Each department/unit has a critical incident plan that describes a planned response to critical incidents
- Contact your placement supervisor to learn about your department/unit plan

Stairwell Security

To enhance the infant and child protection system, doors in C.S. Mott and Von Voigtlander Women's Hospital stairwells are locked. Use elevators. Stairwell ID badge card-readers in this building are for use by designated staff only.



Cell Phone Usage

To avoid interference with some medical devices by electromagnetic energy, the use of cellular telephones, radio transmitters, and walkie-talkies is prohibited in designated areas. Restricted areas include: patient rooms, waiting rooms that adjoin patient rooms, pre-op, operating rooms, the Post Anesthesia Care Units, diagnostic areas, pathology labs, elevators, and any other locations displaying a "No Cell Phones" sign. Please leave your cellular phones at home or turn them off completely while in these areas.



FIRE SAFETY

- Follow directions given by your department or supervisor during a fire emergency
- Dial 911 and report the location of the fire, alert occupants, and pull the alarm

RACE =

<u>R</u>escue	Move people out of immediate danger area
<u>A</u>larm	Dial 911 and report location using "Code F" language, alert occupants, and pull alarm (DO ALL THREE)
<u>C</u>ontain	Close doors and windows, clear corridors of equipment and supplies; shut off medical gas valve (the charge nurse will assign this role to staff)
<u>E</u>xtinguish	If trained and safe to do so (small trash can size fire)

To activate an extinguisher, remember the acronym P-A-S-S:

Pull the pin.
Aim at the base of fire.
Squeeze the handle.
Sweep from side-to-side.

Evacuation:

Inpatient areas and surgery centers:
➤ Smoke compartments (prevent spread of fire/smoke)
➤ "Defend in Place" concept
➤ If evacuation necessary: horizontal, vertical and total building routes

Clinics and office buildings:
➤ No smoke compartments
➤ Refuge areas

Learn about multiple ways to evacuate your area!

Fire Triangle: 3 Elements

1. Heat source – i.e. space heater, faulty wiring, electrocautery device
2. Oxidizer – i.e. oxygen and/or regular room air
3. Fuel – i.e. paper, wood, clothing, flammable gases/chemicals

Hazard Communication/Right-to-Know Law

- Covers employees who may be exposed to hazardous substances during routine work or in a foreseeable emergency
- Gives you the right to access information
- Describes health and safety risks associated with chemicals
- Lists resources for chemical information – Chemical Inventory and Safety Data Sheets (SDS)
- Requires proper secondary container labeling

“Hazardous” Defined: A hazardous chemical is a chemical with a physical or health hazard

Examples of hazardous chemicals

- Office products
- Chemicals used for instruments
- Maintenance supplies
- Products used for procedures
- Sterilization/preservative products

Routes of chemical exposure

- Mouth/nose – Breathing it in (respiratory tract)
- Skin absorption – Bloodstream
- Mouth – Eat or drink it (gastrointestinal tract)

Safety Data Sheets (SDS) contain information including:

- Physical hazards
- Health hazards
- Safe handling precautions
- Emergency first aid procedures

Container labeling

If you transfer a chemical into another container, the secondary container must be labeled with the identity of the hazardous chemical and health and/or physical hazard warnings. (This information can be found on the primary container or the SDS.)

Giving Care While Taking Care

- Many injuries/illnesses ARE preventable.
- It is your responsibility to stay informed and follow procedures/guidelines.
- Safety takes a proactive team approach!

IMPORTANT! If you are injured or become ill during your volunteer shift, report to your placement supervisor immediately. Supervisory staff has the responsibility of notifying Volunteer Services.

Standard Precautions

The UMHS's infection prevention system is called Standard Precautions (SP). It is consistent with recommendations from the Centers for Disease Control and Prevention. This system bases precautions on interaction with a patient's moist body substances rather than on a diagnosed infection. It focuses on protecting people from exposure to moist body substances (blood, urine, oral secretions, wound drainage, fecal material) primarily by barrier use and hand hygiene. This concept directs staff members to wear barriers such as gloves when they anticipate direct contact with moist body substances.

GLOVES are used for any anticipated contact with patient's blood, wound or other skin drainage, feces, urine or respiratory and oral secretions. These barriers are not required for contact with unsoiled articles or skin. **HANDS MUST BE CLEANED BEFORE PUTTING GLOVES ON, AND AFTER GLOVE REMOVAL.**

Note: Gloves are not a substitute for cleansing hands. If gloves are put on with dirty hands, the exterior of the glove may become contaminated with the microorganisms on your hands. Those germs will then be transmitted to the patient or the environment. While removing gloves, your hands can also become contaminated with the microorganisms that were picked up while caring for the patient. If you do not cleanse your hands after removing gloves, those microorganisms will then be spread to the environment, your next patient or to yourself.

MASKS AND PROTECTIVE EYEWEAR are worn to protect oral, nasal and eye mucous membranes in situations where splatter of blood or body fluids may occur.

GOWNS/APRONS are worn when needed to prevent soiling of personal clothing by moist body substances.

- Laboratory specimens are processed with standardized precautions. All specimens are placed inside a clear PLASTIC TRANSPORT BAG prior to delivery to the laboratory.
- Needles and other sharps are placed in a SHARPS CONTAINER without cutting, bending or recapping.
- Gloves, face protection and gowns are available in all patient care areas.

Protective equipment is available in all patient care areas. If you have any questions, please direct them to your placement supervisor and/or Volunteer Services.



Hand Hygiene

EXPECTATIONS:

If a volunteer's job includes "hands-on" direct patient care:

- Nails are to be kept short (cannot extend past the tip of the finger) and clean.
- Nail polish may be worn if well-manicured; chipped polish must be removed.
- If you have artificial nails or artificial nail products (e.g. tips, jewelry, overlays, wraps, acrylics, etc.) **YOU MUST USE GLOVES.**

Hands must be cleansed in each of the following situations:

1. Before and after direct patient contact.
 2. After any direct patient contact where there is some likelihood of contamination with moist body substances.
 3. Whenever a hospital policy/procedure requires hand washing.
 4. Before preparing/handling sterile items or supplies.
 5. After glove removal, if gloves contacted moist body substances or non-intact skin or potentially contacted body fluids or items contaminated with body fluids in conjunction with the Infection Control Committee Body Substance Precautions Policy.
 6. Before the use of gloves if contact with mucous membranes, non-intact skin or sterile body sites is anticipated.
 7. Before and after eating.
- Hands shall be washed using **soap and water** in each of the following situations:
1. When hands have been potentially soiled with moist body substances.
 2. After handling used dressings, sputum containers, soiled urinals, catheters, bedpans, or changing a diaper.
 3. Following personal hygiene (after using the restroom, blowing your nose, etc.)
- An alcohol-based **hand sanitizer** may be used in each of the following situations:
- When hands are not visibly soiled with blood, body fluids or any organic matter.
 - Where hand-washing facilities are not available.

Cleansing Procedures:

➤ Soap and water:

1. Wash hands with friction for a total of at least 15 seconds. Pay particular attention to under fingernails and between fingers.
2. Rinse well. Blot hands, dry with paper towel.
3. Use a dry paper towel to turn off hand-operated faucet.

➤ Alcohol-Based Hand Sanitizer:

1. Apply the product to palm of hand.
2. Spread across hands, rub hands together briskly, until dry.

Body Substance Exposures

- **Report all suspected exposures to your supervisor IMMEDIATELY. Do not wait. Do not procrastinate.**
- After notifying your supervisor, report a body substance exposure as follows: **Call (734) 936-6266 and page beeper #5356.** This page will be answered by Occupational Health Services (OHS) staff during clinic hours, and forwarded to appropriate staff in the Emergency Department after hours.
- When calling OHS, have **source's name**, registration number if available, hospital location and phone number where you can be reached.
- Do not evaluate the **potential risk** yourself. Let Occupational Health Services staff evaluate your potential risk in this situation; their job is to take care of you. Appropriate counseling, therapy and follow-up will be done on a case-by-case basis.
- If you have questions, call Occupational Health Services at **(734) 764-8021.**

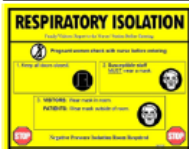
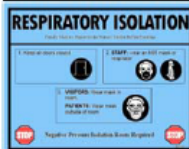

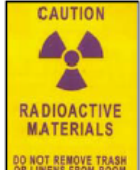
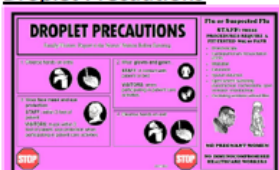



Isolation Precautions

Patients with certain infections are placed into Isolation Precautions in addition to Body Substance Precautions. Because of the risk of spread to other patients, volunteers or personnel, volunteers are not permitted to care for patients in Isolation, except for Protective Precautions.

Protective Precautions (red sign) is for patients who are at an increased risk of infection (immuno-compromised). Volunteers may care for these patients, provided they are not ill themselves, such as with a cold or other respiratory infection. Check with unit staff and cleanse hands before entering the room.

Other types of isolation/precautions are identified with colored signs on the patient's room door: Respiratory Isolation (yellow sign or blue sign); Contact Precautions (lime green sign); Droplet Precautions (pink sign); SARS (orange sign). Volunteers are not allowed to enter these rooms.

PRECAUTION SIGNS

<p><u>Respiratory Isolation</u></p> 	<ul style="list-style-type: none"> ➤ You are permitted to enter these rooms ➤ You must wear a standard mask ➤ Do Not allow the patient to circle their own menu ➤ Patient meal preferences may also be obtained by calling the patient
<p><u>Respiratory Isolation</u></p> 	<p><u>(N95 mask/PAPR required)</u></p> <ul style="list-style-type: none"> ➤ You are permitted to enter these rooms ➤ You must wear an N95 mask or a PAPR ➤ Do Not allow the patient to circle their own menu ➤ Patient meal preferences may also be obtained by calling the patient
<p><u>Enhanced Contact Precautions</u></p> 	<ul style="list-style-type: none"> ➤ <u>DO NOT ENTER</u> this room, only essential personnel are able to enter ➤ Please call the patient to obtain their meal preferences
<p><u>Radioactive Materials</u></p> 	<ul style="list-style-type: none"> ➤ <u>DO NOT ENTER</u> this room, only essential personnel are able to enter ➤ Please call the patient to obtain their meal preferences
<p><u>Droplet Precautions</u></p> 	<ul style="list-style-type: none"> ➤ When entering these rooms, if you do not get within 3 ft. radius of the patient, no garb required ➤ If high risk procedures are going on <u>do not enter</u> this room. If entering is necessary wear an N95 fit tested mask ➤ If within 3 ft. radius of patient or contact with patient equipment; gown, gloves, mask with eye protection required
<p><u>Protective Precautions</u></p> 	<ul style="list-style-type: none"> ➤ If sick, wear yellow mask
<p><u>Contact Precautions</u></p> 	<ul style="list-style-type: none"> ➤ Put on gloves <u>before</u> entering these rooms ➤ Gown needed for contact with patient'(s) immediate environment ➤ Remove gloves or gown <u>before</u> exiting the room and wash hands with soap and water or use sanitizer
	<ul style="list-style-type: none"> ➤ See garb rules for CP sign ➤ Hand sanitizer will <u>NOT</u> effectively remove germs in these rooms. Hands must be washed with soap and water when leaving room

How to Spot a Stroke

FAST: Spot a Stroke



F: FACE Ask the person to *smile*. Does one side of the **face droop**?

A: ARMS Ask the person to *lift both arms*. Does one **arm drift downward**?

S: SPEECH Ask the person to *repeat a common phrase*. Does the **speech sound slurred** or strange?

T: TIME If you see *any of these symptoms*, it's time to **call 911!**

Know the Sudden Signs of Stroke

Stroke is a medical emergency. Every minute counts when someone is having a stroke. Learn how to recognize the symptoms of stroke and what you can do to improve the chances for a successful recovery.



Did You Know?

Survival Flight, one of the top air ambulance programs in the nation and the first in Michigan, has three American Eurocopter EC155 helicopters. These helicopters serve as mobile trauma centers and intensive care units, complete with state-of-the-art lifesaving technology and the latest navigational equipment that allow them to fly safely in all types of weather situations, flying at speeds of up to 164 mph.



PERSONAL SECURITY

- Emergency Reporting: Dial **999**
- Security Escort: From any University telephone, dial **6-7890**.
Off-campus, dial **734-936-7890**

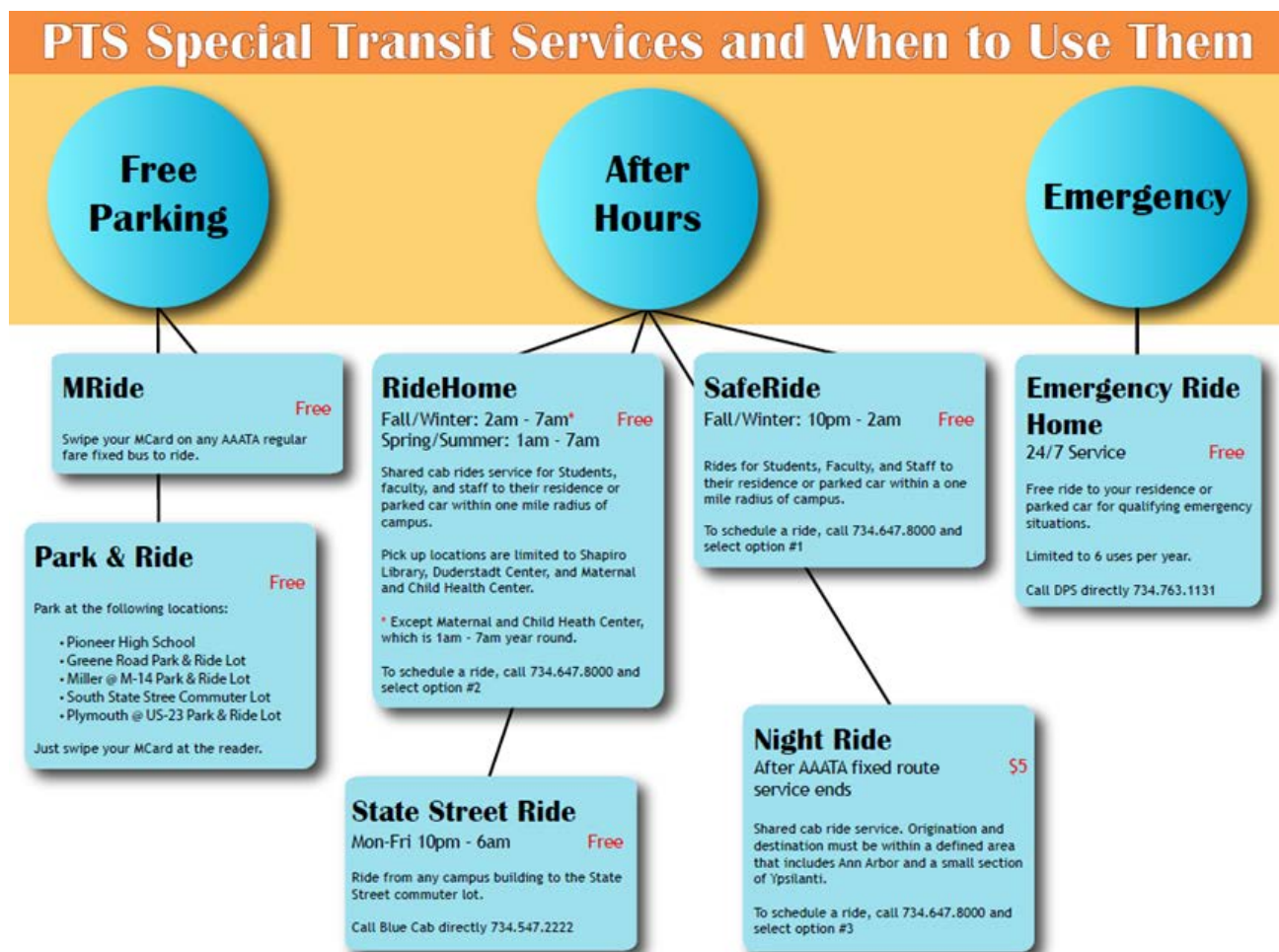
All volunteers should feel secure coming to and going from their volunteer placements at the University of Michigan Health System. There are several options available to ensure the safety of our volunteers:

Emergency Escort Service 734-763-1131

In case of emergency, a FREE escort service is provided to and from campus by the UM Campus Police 10 pm – 3 am. A guard will escort volunteers to their cars 24 hours a day. To request service, call security at 734-936-7890 or stop at an information desk.

Offsite Parking Lots:

There are routine inspections of off-site parking lots to ensure adequate lighting during night-time hours. If you have safety concerns around getting to your vehicle or walking between Health System buildings, please call 734-936-7890 to request a Security Officer escort to your location.



PROCEDURES AND LOGISTICS FOR VOLUNTEERING

ATTENDANCE

YOU ARE REQUIRED TO SIGN IN AND OUT EACH TIME YOU COME TO VOLUNTEER. This is important in order to receive messages in the event of an emergency, and for liability issues, recognition, and recording attendance. Volunteer Services will keep track of your volunteer hours. **If you need to miss a shift, you are required to notify both your Supervisor and Volunteer Services. Please give them as much advance notice as possible.**

Keep your Placement Supervisor's contact information available! After signing in, volunteers should report to their Placement Supervisor.

Recording Hours

Volunteers are **REQUIRED** to sign in and out each time they volunteer via kiosk, log book, or [timesheet](#) (see page 32). This is important in the event of an emergency, liability, recognition, and future recommendation requests.

ILLNESS

Do not come to volunteer if you have a FEVER or any COMMUNICABLE DISEASE (e.g. cold or flu) including the following airborne-spread communicable diseases:

- **Chickenpox or Herpes Zoster (Shingles)**
- **Chickenpox exposure**
- **Pertussis (Whooping Cough)**
- **Tuberculosis, pulmonary (TB)**
- **Diarrhea (acute onset)**
- **Influenza (flu)**
- **Staph Skin Infection**
- **Strep Infection (skin or throat)**
- **Conjunctivitis (Pink Eye)**

For more information and details regarding when you can return to work following onset of these illnesses, please refer to:
http://www.med.umich.edu/ice/policies/pdfs/personnel/work_restrictions.pdf

If you are sick or otherwise unable to come in, you are required to notify both your Supervisor and Volunteer Services.

Placement: _____

Location: _____

Supervisor: _____

Contact Info: _____

Grace Period: May, August, December

SUPERVISION

- Check in with unit staff when you arrive at your placement, and check out when you leave.
- Accept, willingly, the supervision from the staff to whom you are assigned.
- Accept only those assignments or responsibilities for which you have been trained.
- Learn the names and titles of persons in the department and always maintain a professional relationship with them. Learn the contact information for your supervisor and unit.
- You must contact your Placement Supervisor, as well as Volunteer Services, if you are unable to come in to your assignment.

CODE OF CONDUCT

The Code of Conduct does not permit volunteers to:

- Take pictures of patients, their families or their friends for personal use
- Use social media devices during your volunteer shift
- Give money to patients, their families or their friends
- Buy gifts for patients, their families, or their friends
- Accept gifts/tips from patients, their families or their friends
- Pay for meals for patients, their families or their friends
- Take patients outside the UM Hospital grounds
- Give “piggy-back” rides to pediatric patients
- Lie in bed with a patient or sit on a patient’s bed
- Accompany an adolescent patient to a treatment or procedure in place of the parents or legal guardians
- Bring personal guests, friends, children or visitors when they come to volunteer
- Ask the hospital staff for medical advice or medicine
- Campaign, lobby, or distribute flyers for any political candidate or religious purposes on UMHS premises
- Smoke, either indoors or outdoors on any UMHS-owned property, including the parking structures and courtyard areas. A map of the smoke-free boundaries is online:

<http://www.med.umich.edu/i/policies/umh/05-03-001.html>



DRESS CODE AND APPEARANCE

The University of Michigan Health System (UMHS) expects employees to project a professional image that gives patients and visitors confidence in their expertise and commitment to provide care and services of the highest quality possible. Volunteers are held to the same standard.

Each volunteer is responsible for practicing acceptable standards of personal hygiene and grooming, as well as for assuring that the clothing worn during their volunteer shift is appropriate for their job responsibilities.

Volunteers are expected to wear their UMID badge above the waist during their shift, and the uniform provided by Volunteer Services. The exceptions to this policy are those volunteers whose placement requires that they wear appropriate clothing for their duties (e.g. scrubs). Clean, soft-soled shoes are recommended, and athletic shoes are acceptable.

The uniform is either a smock or jacket, which is ON LOAN and must be returned to Volunteer Services upon completion of your volunteer service. It is the volunteer's responsibility to keep the uniform clean and presentable.

At **no time** should a volunteer wear any of the following:

- Denim jeans of any color
- Shorts (of any length)
- Mini-skirts
- Low-cut, revealing shirts/blouses/halter-tops,
- Clothing that exposes the mid-riff
- Leggings (unless covered by skirt or dress)
- Sweat suits/pants
- Open-toed shoes, sandals or flip-flops of any kind
- Caps or hats (other than headwear worn for religious reasons)
- Dangling earrings, necklaces, bracelets, etc.
- Fragrances or perfumes

Volunteers who arrive dressed inappropriately will be asked to return home and change. This may result in being tardy or missing a shift altogether.

Be sensitive about how you present yourself so that patients and families do not feel uncomfortable with your appearance because of unconventional piercings, tattoos, or fashion statements.

Perfume, cologne, scented soap, scented body lotion, and other fragranced products are not permitted due to allergies and chemical sensitivities of patients, families and staff. Please use only unscented products prior to your volunteer shift. Health and wellness are our top priorities!

REQUIREMENTS FOR VOLUNTEERING

Two of the many elements which can affect job satisfaction are volunteer expectations and training. A successful match between volunteer and assignment area is dependent on a clear and complete understanding of specific job responsibilities and requirements, as well as adequate training to carry out those tasks. Please share any questions or concerns you may have regarding your placement with Volunteer Services.

Summary of Requirements for Volunteering at UMHS

- ✓ **Attendance** – Fulfill your shift commitment
- ✓ **Absence** – Report absence to Supervisor and Volunteer Services
- ✓ **Reporting Hours** – Log in/out at kiosk or submit timesheet to Volunteer Services
- ✓ **Dress Code** – Follow Dress Code rules
- ✓ **Uniform** – Follow Care of Uniform instructions. Return uniform at end of service.
- ✓ **ID Badge** – Return to Volunteer Services at end of service. U-M Students exchange ID at SAB at end of service.
- ✓ **Grace Period** – Contact Volunteer Services for renewal/reassignment of your placement

INSURANCE AND LIABILITY

The hospital carries liability insurance on volunteers just as it does employees. You are not personally liable for injury to a patient in your care PROVIDED THAT you are performing, in a responsible manner, a duty **for which you have been properly trained and which falls within your assigned duties**. Volunteers are responsible for declining assignments for which they have not been trained.

No matter how insignificant an incident may seem, report it **immediately** to the staff person in charge as well as to Volunteer Services.

UMHS does not provide coverage for injuries to volunteers, and Worker's Compensation is not applicable. The volunteer is responsible for his/her own expenses. Most volunteers are covered by their own health insurance for any injury to themselves while volunteering. If you are injured or have a sudden illness while on duty, you may be seen in Occupational Health Services or in the Emergency Department. A report will be sent to both Volunteer Services and the Placement Supervisor.

Renewal/Reassignment of Placement

- **Community Residents** - Placement day, time and assignment continue *indefinitely* until you change or terminate the position with Volunteer Services.
- **College Students** - Placements end at the end of each semester (session). To keep your current position or change assignments, you must reschedule by calling, e-mailing, arranging an appointment, or walking into Volunteer Services during the appropriate Grace Period.*
- **High School Students** - Placements must be renewed each summer. Please contact Volunteer Services in April during the Spring/Summer Grace Period.*

***Grace Period:** The optimum time period for current and returning volunteers to schedule volunteer shifts for the upcoming term. Grace Periods occur 3 times per year: April for Spring/Summer, August for Fall, and December for Winter. Specific dates are noted on the Volunteer Services website:

<http://www.med.umich.edu/volunteer/about/returningvolunteers.html>

Confirmation of Hours

Volunteer Services will provide a confirmation of your volunteer hours contingent upon:

- Attendance record
- Returning your uniform at the end of service (if applicable)
- Returning your ID badge (if applicable)

It is not the policy of the Volunteer Services Department to provide letters of recommendation. Confirmation of hours can be provided on request for those who have fulfilled their volunteer commitment. Contact Volunteer Services.

Closing Out Your Volunteer Service

Volunteers are required to contact Volunteer Services upon completing their volunteer commitment. Follow these steps to close out your record:

- 1) Notify your placement supervisor **and** Volunteer Services of your last day.
- 2) Return your uniform. Note: Students must return the uniform after each session.
- 3) Return your ID Badge (if applicable)
- 4) Submit the date of your last shift, and your final hours served.

"People will forget what you said, people will forget what you did, but people will never forget the way you made them feel."
- Maya Angelou

RECOGNITION

As important as recognition is, the true rewards are the smiles you bring to the face of a scared and lonely patient, the thank-you received for running an errand or holding a hand, or the skills you learn and the knowledge you gain. Wherever you have chosen to help, we hope you find your service both rewarding and challenging. **Thank you** for sharing your time and yourself with the patients, staff and visitors at the University of Michigan Health System!

- **Volunteer Services Service Award**

Volunteers are formally recognized annually by the UMHS for their efforts in making the health system a better place. In recognition of the service volunteers provide to the Health System, awards are presented for 24 months, 5, 10, 15, 20, 25, 30, 35 years of service and beyond.

In addition, volunteers and staff are invited to submit nominations for Distinguished Service Awards presented annually to volunteers and volunteer supervisors.

- **“Making A Difference” Award**

Patients, visitors and staff may nominate staff or volunteers for special recognition. Those who are nominated will receive a Making A Difference pin and an invitation to attend a quarterly reception.

TERMINATION OF SERVICE

People’s lives and schedules do change, which may prevent you from continuing your service to UMHS. Please discuss scheduling conflicts/changes with your volunteer coordinator and notify Volunteer Services when you can no longer fulfill your volunteer commitment.

The Volunteer Services Department also reserves the right to terminate a volunteer's service if such action is in the best interest of patients, families, staff, and/or volunteers at UMHS. Such termination could result from:

- **FAILURE TO COMPLY** with UMHS rules and volunteer regulations
- **POOR ATTENDANCE** or frequent absences
- **FAILURE TO DISCLOSE FELONY CHARGES OR CONVICTIONS**
- **BREACH OF CONFIDENTIALITY** or other codes of conduct
- **FRAUDULENT USE OF PARKING OR BUS TOKEN PRIVILEGES**
- Incidents where **HOSPITAL SECURITY** is called to escort a volunteer from the premises for unruly, disruptive or inappropriate behavior

Although extenuating circumstances may be taken into consideration, the above actions will be considered grounds for dismissal and/or non-renewal of volunteer status.

On termination of services, the uniform and ID, if applicable, must be returned to the Volunteer Services office.

QUIET POLICY



Here are a few reminders as to how you can contribute toward a culture of quiet on behalf of our patients and families:

- Minimize conversations in hospital hallways and waiting rooms and encourage others to do the same especially at night.
- Encourage patients and staff to respect others by turning down the volume on cell phones, televisions, radios, pagers and other devices.
- Set your pager to vibrate when medically appropriate.
- Close doors quietly.
- Consider wearing soft sole shoes to minimize hallway noise outside patient rooms.

With all of us working together, we will improve our patients' overall experience, and in particular, their perceptions of a quiet place for health care.



HOSPITAL TERMINOLOGY AND ACRONYMS

Units/Departments

BSRB	Biomedical Science Research Building
C&W	Children's & Women's Hospitals
CCC	Comprehensive Cancer Center
CVC	Cardio-Vascular Center
ED	Emergency Department
ENT	Ear, Nose and Throat
GAP	Guest Assistance Program
GOA	Gifts of Art
GWN	Get Well Network
Hem/Onc	Hematology/Oncology
HERC	Health Education Resource Center
ICU	Intensive Care Unit
MedInn	Med-Inn Hotel
MedSci	Medical Science Buildings - #1,2,3
MGDE	Michigan Game Day Experience – Game Room, Mott 8 th Floor
MPB	Medical Professional Building
MPU	Medical Procedures Unit
MSRB	Medical Science Research Building
NCAC	North Campus Administrative Center
NCRC	North Campus Research Complex
NIB	North Ingalls Building
NICU	Brandon – Newborn Intensive Care Unit aka UH Neuro-Intensive Care Unit
OB/Gyn	Obstetrics and Gynecology
OT	Occupational Therapy
PACU	Pediatric Ambulatory Care Unit aka Post-Anesthesia Care Unit (UH, Mott, CVC)
PCTU	Pediatric Cardio Thoracic ICU
PERC	Patient Education Resource Center – Cancer Center, Ground Level
PFAC	Patient & Family Advisory Council
PFCC	Patient & Family-Centered Care
PICU	Pediatric Intensive Care Unit
PM&R	Physical Medicine and Rehabilitation
PT	Physical Therapy
SOAR	Survivors Offering Assistance in Recovery (Trauma Burn Center)
UH	University Hospital
UMHS	University of Michigan Health System

Dietary Fluids

I & O	(intake & output) Recording fluid intake & urinary output
I.V.	(Intravenous) Fluids given by vein
NPO	No food or drink is to be given by mouth or tube

Miscellaneous

HIPAA	Health Insurance Portability and Accountability Act
JCAHO	Joint Commission for the Accreditation of Healthcare Organizations*
PHI	Protected Health Information
*TJC	The Joint Commission, or Joint Commission, formerly called JCAHO
TLC	Tender Loving Care

