**Volunteer Services Department**

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**Appendices**

| 35 Terms and abbreviations |                                     |
Being part of a thriving healthcare organization like University Hospitals Cleveland Medical Center is both challenging and interesting. With sophisticated medical technology and specialized care, UH provides the best possible medical care available. Yet it’s the people who make University hospitals a special place. Some of our most special and important people are you - our volunteers.

Volunteers play a vital role on our healthcare team. Their responsibilities have grown with the hospital, and their contributions are essential in helping us achieve our mission:

**To Heal. To Teach. To Discover.**

**Volunteer Services Department mission statement**

To encourage and facilitate community engagement by providing systems to appropriately involve individuals and groups in service and/or learning opportunities which meet the needs of the individual, our patients and families, and the medical center at large.

**Volunteer Services Department staff**

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University Hospitals

For over 150 years, the people of Northeast Ohio have looked to University Hospitals as a trusted health care provider. Our roots date back to 1866, when civic leaders established a hospital in a small Cleveland home to care for the sick and disabled. From these humble beginnings, UH has grown into a multihospital system, serving 1 million people annually. The medical advancements made at UH touch lives worldwide, yet we remain true to our roots as a community health care provider.

The history of University Hospitals Cleveland Medical Center is linked to the history of Cleveland. We were nurtured and supported by Cleveland’s great industrial families of the late 19th and early 20th centuries – the same families that played key roles in the development of the city’s noted civic and cultural institutions, including the Cleveland Museum of Art, The Cleveland Orchestra, and The Cleveland Foundation.

Among the forward-looking thinkers in our early history was industrialist Samuel Mather, who served as a trustee for an astounding 47 years, including 32 years as chairman. In 1891, Mather visited the fledgling Johns Hopkins hospital and medical school. He returned to Cleveland convinced of the value of an academic medical mission joined with patient care. He understood the synergy created in an academic medical center that brings together the power of healing, teaching and discovery, and he recognized that the future of great medicine lay in the academic medical center model.

This vision for University Hospitals led in 1895 to our formal ties with what is now the Case Western Reserve University School of Medicine. As an affiliate of the medical school, we grew to become one of the nation’s great centers of academic medicine and the region’s leading provider of high quality healthcare. To the people of Greater Cleveland, we came to exemplify hope, mercy and humanity.

The University Hospitals Cleveland Medical Center houses:

- The Alfred and Norma Lerner Tower
- Samuel Mather Pavilion
- Lakeside Hospital for adult medical/surgical care
- University Hospitals Rainbow Babies & Children’s Hospital
- University Hospitals MacDonald Women’s Hospital, Ohio’s only hospital for Women
- University Hospitals Seidman Cancer Center
- University Psychiatric Center – University Hospitals Richmond Medical Center
- Rainbow Center for Women and Children
Our mission
To Heal. To Teach. To Discover.

Our vision
- We will lead our industry in developing and delivering the next generation of consumer-driven health care.
- Superior Quality. We will pursue breakthrough medical advancements and practices to deliver superior clinical outcomes.
- Personalized Experience. Our care will focus on our patients as individuals. We will provide every patient an experience customized to their medical, emotional, social, and spiritual needs.

Core values
- Excellence. We have a continuous thirst for excellence and are always seeking ways to improve the health of those who count on us.
- Diversity. We embrace diversity in people, thought, experiences and perspectives.
- Integrity. We have a shared commitment to do what is right.
- Compassion. We have genuine concern for those in our community and treat them with respect and empathy.
- Teamwork. We work collaboratively as an integrated team to improve patient care and performance.

Standards of service

Smile and be friendly

Focus on the patient - Remember that patients and their families are our #1 priority.

Respect others - Recognize others’ rights to privacy and confidentiality. Praise generously, criticize constructively.

Be courteous - Introduce yourself to others in person and over the phone. Display name tags properly so that you are easily identified.

Respond quickly. Explain delays - Explain procedures and expected time frames. Provide reasons for any delay in a timely fashion.

Be helpful - Offer assistance to whomever may need it. Provide directions without being asked.

Look the part - Take pride and care in personal appearance. Help keep facilities and work areas clean.
Commitment and attendance

Volunteer on boarding process

Step 1 - Application
Complete a volunteer application. Volunteer Services must have two completed, professional reference sources prior to interview. The Summer Youth Volunteer Program requires one guidance counselor evaluation.

Step 2 - Interview
Interview with the Volunteer Services Department, and, when required, by the department supervisor where the volunteer wishes to be placed. A group interview will be provided at orientation to college and high school volunteers.

Step 3 - Placement and service description
Accept and confirm placement. Review service description, area specific competencies and supervisor area specific information.

Step 4 - Orientation
Attend appropriate Volunteer Services orientation session or self-study orientation session prior to starting your volunteer assignment and specific departmental training.

Step 5 - Health screening
Have a clinician complete the Volunteer Health Screening Form. Volunteers may be required to have a Tuberculin (TB) skin test to check for exposure to Tuberculosis. Volunteers working in some areas are required to have a one-time blood test to determine whether they have the antibodies for childhood viral illnesses such as chickenpox, measles, mumps and rubella or submit immunization records. Flu vaccines are required during flu season.

Step 6 - Background screening
If you are 18 years of age or older, a background screening will be performed. You will be permitted to start your assignment before results of the screening are received. However, if there is a violation of law found on your record, you may be subject to immediate dismissal. Failure to disclose accurate background information may result in immediate disqualification or termination.

Step 7 - First day
On your first day, report to the Volunteer Services Department to receive sign-in/sign-out instructions and obtain your uniform and volunteer photo ID.

Commitment
Volunteer Services asks that all volunteers be reliable and dependable in coming at your scheduled day and time. This is vital for the staff, patients, families and visitors that depend on you. Please request a medical school recommendation at least 30 days before it is needed.
Sign-in procedures
All volunteers must sign in each time they volunteer using the Volunteer Information Center (VIC) - an automated touch screen system located outside of Volunteer Services. You will need to know your volunteer number in order to sign in and out. Your PIN (Personal Identification Number) is located on the back of your ID badge. Seidman Cancer Center (SCC) volunteers can sign in at the Volunteer Work Room located in the lower level of SCC and Rainbow Babies & Children volunteers can sign in at the RB&C lobby kiosk. Once you are signed in, proceed to your service area. You may also be required to sign in at your service area. (Your supervisor will inform you of his or her requirements.) When you are finished with your shift, return to the area where you signed in and sign out.

Notification of absence
You are expected to be available during your assigned shift. Volunteers are responsible for leaving a message with their supervisors with as much notice as possible when they realize they will be late or unable to volunteer as scheduled. Evening and weekend volunteers should call the division and speak to the charge nurse.

Inclement weather
During extreme inclement weather, please use your judgment concerning your safety. We do not expect you to endanger yourself in the event of a storm by coming into the hospital. Please notify your supervisor if you will not be reporting for your shift.

Leave of absence
If you will be unable to volunteer for four or more weeks in a row, you will need to take a leave of absence. Please inform your volunteer supervisor of your need to take a temporary leave. Also contact Volunteer Services and let us know your last day and when you expect to return. You will be inactivated in the volunteer system. To resume volunteering, you must call the Volunteer Department in order to:

- Confirm if placement in the same area is still available
- Establish a schedule and start date
- Be reactivated in the volunteer system
- Update TB testing as needed

Resignation – When you stop volunteering
- Inform your supervisor and the Volunteer Services Department of your last day.
- Return your uniform and ID badge to receive the refund of your deposit.
- Complete exit evaluation within 60 days of the last day of service.
- If you wish verification of your volunteer hours, please contact the Volunteer Services Department.

Parking
Volunteer parking is available in the UH Drive parking garage located off Euclid Avenue. Parking is free if you are volunteering two hours or less. If you are volunteering over two hours visit the Volunteer Services Department during regular business hours for parking validation. Please visit the Rainbow Babies and Children’s Hospital desk for parking validation if you are volunteering on the evening or weekend. Volunteer ID is required.
Termination

Volunteer Services reserves the right to terminate volunteer status as a result of:

- Failure to comply with organizational policies, rules and regulations
- Continuing absences without notification
- Unsatisfactory attitude, work, or appearance
- Any other circumstances which, in the judgment of the Director, Volunteer Services, would make continued service as a volunteer contrary to the best interests of the hospital

Corrective Action

If, at any time, a volunteer’s performance or conduct needs improvement it may become necessary for him/her to have a discussion with an immediate supervisor. Depending on the situation, specific improvements may be agreed upon; additional training may be necessary; reassignment, or time off pending reassignment, may be appropriate; or if the problem can’t be resolved satisfactorily for all involved, the volunteer may be terminated.

The hospital reserves the right to terminate your service as a volunteer if the action is in the best interest of both parties. Infraction of the hospital policies cannot be allowed and a warning to this effect will be issued as necessary. Any breach of patient confidentiality, harassment, theft and any other standing hospital policy will be grounds for immediate and permanent dismissal from the program.

If there is a concern that cannot be resolved with your assigned supervisor, please direct the concern to the staff of the Volunteer Services Department for resolution. Volunteers are also asked to bring any suggestions or ideas to the Volunteer Department staff’s attention.

Substance Abuse

To ensure the safety and well-being of patients, employees and the general public, UH CMC is committed to maintaining a campus that is free of illegal substances, and or drugs and alcohol used illegally. Violation of the hospital’s substance abuse prohibitions is cause for termination or other appropriate action.

Social Media Usage

Volunteers engaging in social media sites, blogs, forums or other public internet sites do not share Protected Health Information or any other information that would compromise patient privacy or confidentiality. When communicating in social media sites or public internet sites that specifically mention UH CMC related issues, volunteers must disclose their connection with UH and avoid any maliciously false statements or untruths which may result in liability for UH. Any comments or information that would be considered malicious, slanderous or threatening is prohibited. Volunteers are not permitted to connect with patients on social media.

Whether social media sites are accessed via computer or mobile device, volunteers’ online activities should not interfere with daily volunteer responsibilities. When in doubt, “Leave it out”.

To Heal. To Teach. To Discover. 7
Change of schedule or personal information
If your work, school or other commitments change and you need to change your volunteer schedule, please notify the Volunteer Services Department and volunteer supervisor as soon as possible. Every effort will be made to assign you to another day, time, and/or service area or position.

Also, please notify the Volunteer Services Department if you move to another address or your home, school, or office telephone number changes. In addition, please notify the office of any name changes.

Attention college students!
At the beginning of each semester, contact Volunteer Services to let us know:
• If you will be volunteering this semester
• When you can volunteer
• Changes in your address and phone number

At the end of each semester, contact Volunteer Services to let us know:
• If you will be volunteering during the winter and/or summer break
• Any changes needed in your volunteer schedule
• Any changes in your contact information

Compliance training
Volunteers and employees complete compliance training. This training promotes a culture of integrity throughout the organization. University Hospitals strives to be a leader both internally and externally in ethical practices and organizational integrity.

The volunteer’s code of ethics
Volunteers are an integral part of the hospital team. As such, you are asked to follow established guidelines, just as hospital employees are. You represent University Hospitals to the public. Your actions and attitudes should reflect well upon the hospital and you personally.

Because the hospital is a place for patients to rest and recuperate, we ask you keep the "three P's" in mind while on your volunteer shift: Polite. Pleasant. Professional.

By observing these you can help make a patient's stay more comfortable and relaxing.
Some general rules that should be observed include, but are not limited to:
• Uphold the standards and traditions of the hospital.
• Do not ask for clinical or personal information regarding a patient.
• Maintain a professional appearance. Be dignified and pleasant at all times.
• Keep the noise level to a minimum to help patients get the rest they need.
  • Speaking in low tones throughout the hospital is requested.
• Patients are entitled to their privacy. You must always knock before entering a room, even if the door is open.
  • Introduce yourself and your reason for being there. If a staff member is with the patient, excuse yourself and tell the patient you will return when he or she is free.
• Any complaints or concerns should be communicated to your Volunteer Supervisor, Charge Nurse on the floor or the Volunteer Services Department.
Policies

Uniform and dress code
Most volunteers are required to wear a uniform. Volunteers wear either a red vest, jacket, or volunteer t-shirt, available in the Volunteer Services Department. We ask for a $20 vest deposit, refundable on your last day of volunteering when you return your uniform and ID badge. If not returned on your last day, it must be turned in within 60 days to receive a full refund. Some volunteer assignments require the purchase of a volunteer t-shirt for $5.00. There is no refund on this uniform as it becomes yours to keep.

Some areas require a different uniform. Summer Youth Program volunteers wear provided shirts that are free of charge. Pet Pals volunteers wear a red short or long sleeved shirt.

Volunteers are viewed as members of our health care team and therefore need to maintain a professional appearance. In addition, patients, families and staff identify you as a volunteer by your uniform. As representatives of University Hospitals Cleveland Medical Center, we expect you to adhere to the following dress code:

- Wear your volunteer uniform during your entire volunteer time in the hospital.
- ID Badge must be worn above your waist.
- Sweaters and jackets may not be worn over your uniform while on duty.
- Halter tops and sleeveless tops and tops which expose your midriff are not permitted.
- Legs must be covered. Skirts and Capri pants may be worn with nylons. Jeans and shorts are not permitted.
- Clean comfortable shoes must be worn. Tennis shoes are allowed but must be tied.
- Open toed shoes (sandsals, flip-flops) are not allowed under any circumstances.
- Hats are not permitted.
- Do not wear excessive or dangling jewelry. Tongue or in-face piercings are not allowed.
- Do not wear perfume or cologne as patients may be sensitive to smells.
- Long hair should be kept out of your face and out of the way of patient care.
- Acrylic nails are not allowed in patient care assignment areas.
- Gum chewing is not permitted.

Employment

Volunteering does not assume employment. Employment information can be found at the following website www.careers.uhhospitals.org or by contacting the Department of Human Resources at 216-844-1686.

UH CMC Employee Volunteers
Volunteers who are employees of UH CMC must adhere to the Fair Labor Standards Act. The following restrictions apply:
A. An employee cannot volunteer his/her services to an employer to perform the same type of services performed as an employee.
B. The tasks performed by the volunteer may not be the same as those performed by an employee.
C. Volunteer must sign the “Employer as Volunteer Acknowledgement Form.”
Evaluation
The volunteer and the volunteer's supervisor are requested to complete an annual assessment evaluation. These evaluations are an opportunity for the volunteer supervisor and volunteer to discuss whether their expectations are being met, review basic competencies of the volunteer position and determine the satisfaction levels of the volunteer's service.

Guests policy
Please do not bring guests or children to the hospital on your volunteer shift. While we appreciate your enthusiasm about your volunteer position, it is not appropriate to bring a family member or friend to watch and/or help you volunteer. If you know someone possibly interested in volunteering, please let us know and we will be happy to talk with him/her.

No smoking policy
University Hospitals maintains a smoke-free environment. Smoking is prohibited on hospital property.

Cell phone usage
In general, cell phones may be used in waiting areas except where signage is posted prohibiting their use. These areas will have signs visibly posted. Cell phones may not be used to take photos of patients or staff.

Harassment

**Harassment includes:** Threats, demands, retaliation, or other conduct that results in the creation of a hostile workplace, whether that conduct is verbal, non-verbal, physical or visual. **Sexual harassment** includes any unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature. Any volunteer found to have engaged in harassment will be subject to appropriate disciplinary action up to and including termination.

Benefits of volunteering
- *Free parking during your volunteer shift*
- *Annual recognition event*
- *Free flu vaccine*
- *Discounts in the cafeteria, twice yearly volunteer discount coupon in atrium shop*
- *Career exploration*
- *Free and reduced rate UH education and training classes*
- *Opportunities to fulfill educational and community service requirements*
- *Ability to stay active, involved and meet new and interesting people*
- *Meal coupon for volunteers who work four or more hours per shift*  
  (maximum three times a week)
Role of the volunteer supervisor

Your supervisor oversees your orientation to your division, area or department. He or she will help introduce you to staff that may be resource people, especially if you are volunteering at a time when your supervisor is not available (i.e., evenings or weekends). He/she will complete a departmental training checklist as you are trained in your area. Your supervisor is responsible for communicating information with you either in person or via phone, voice mail, e-mail or handwritten messages.

In return, volunteers are asked to provide their supervisors with the following information:

- Which patients were identified to you by a resource person and which patients you interacted with on that day.
- Questions or concerns regarding your position, type of work, or patients or situations that may have occurred during your assignment.

Role of a resource person

A resource person may be a registered nurse, patient care assistant, child life specialist, child life assistant, secretary, art or music therapist, experienced volunteer or student of nursing, child life or medicine. This person may inform you of a patient who may benefit from the helpful interaction of a volunteer. He or she can be expected to give you information about the patient that will help prepare you to best meet the safety and developmental needs of the patient. Many times a resource person can be the person with whom you interact and receive direction from most often. This is especially true of individuals who volunteer in the evenings or on weekends.

Interacting with staff

- ask questions
- check in at the beginning of shift for specific instructions
- check out at the end of shift and relay any pertinent information
- ask for clarification if you do not understand
- contact your supervisor if you will be late or cannot attend your volunteer shift (supervisor emails are located on your service description)
Confidentiality of patient information

As a volunteer, you are governed by the same code of ethics that applies to physicians, nurses and all other hospital employees. Patients expect the hospital to keep their charts, medical information, and their presence in the hospital confidential. This understanding between the patient and the hospital, regarding confidentiality of information, is an implied contractual arrangement and is legally enforceable.

All volunteers are required to sign a statement regarding patient confidentiality. The signed statement becomes part of the volunteer's permanent record and a copy is given to the volunteer. Volunteers under age 18 are also required to have a parent or guardian sign this statement.

Privacy

What is HIPAA?

• HIPAA stands for the Health Insurance Portability and Accountability Act of 1996.
• HIPAA requires that you take action to make sure that patient's medical information is kept confidential.
• The term "Protected Health Information" (PHI) is used to describe all the healthcare-related information we collect and use on behalf of our patients.
• HIPAA also says that patients have some rights to review the PHI we have collected on them and to control the way we share some of their PHI.

What is Protected Health Information? (PHI)

HIPAA creates and defines the term Protected Health Information as individually identifiable health information that is transmitted or maintained in any form or medium. Health information becomes "protected" when it is combined with any piece of information that could identify the patient.

Examples of identifiers are:

• Patient's name, address, phone number
• Name of physician treating the patient
• Patient medical record number, social security number, date of birth
• Discharge date

For the most part, the majority of information we work with in healthcare is classified as "protected" information.

Remember

• Leave patient information where it belongs: at the hospital
• Access information only on a "need to know" basis
• Do not leave written information unguarded
• To say anything about a patient is to say too much
Who is allowed to have access to PHI?

- You are allowed access to the PHI you need to do your job as a volunteer: no more, no less
- Other volunteers are allowed to have access to the PHI they need to do their jobs
- Patients have the right to their own PHI
- Family members, close friends of the patient and personal representatives of the patient are allowed to access PHI only if it is appropriate for their relationship to, and involvement with, the patient
- At times, legal representatives, law enforcement workers and regulatory investigators have the right to have access to patients’ PHI
- If you aren’t sure the person has the right to access information they are asking for, always check with your supervisor before releasing information. Then give only the information that is really needed: no more, no less.

Examples of PHI

- Medical chart/record and all the information contained within
- Lab test results faxed or viewed online
- X-ray film with a patient’s name or medical record number on it
- Billing statement with patient’s name and services provided
- Surgery schedule listing patients and procedures
- List of patients/room numbers for visitation or to provide diversionary activities

What is the importance of the phrase "Treatment, Payment and Operations" (TPO)?

HIPAA permits health care workers to share PHI without the need for specific patient authorization as long as the staff member or volunteer is using it for "Treatment, Payment and Operations".

This means information about a patient's care can be shared openly with others directly involved in that care. Information can also be shared for billing purposes. Also, UH can share patient information when it needs the information to complete certain business "operations" such as quality assessment, risk management, performance evaluations, employee training and development and service improvement. Volunteers are considered part of the operations of the hospital and as such fall under this part of the legislation.

Examples of communications allowed under "TPO"

- A discussion between a doctor and nurse about patient care or between staff and a volunteer
- A billing clerk's request for information needed to process a patient’s bill
- Analysis of a patient’s PHI as part of a risk management inquiry
- Information shared by a nurse to a transporter of special needs patient may have
- Patient information provided to an insurance company to clarify a claim for payment
What is meant by "minimum necessary?"

Minimum necessary is the term used by HIPAA to describe the level of information sharing that is appropriate when PHI is being communicated to others. Avoid giving out more information than really needs to be given - no more, no less. Volunteers should only be given access to information needed to do their work.

Actions to protect patient privacy

Protection of patient health care information is a major goal of HIPAA. UH staff and volunteers must take reasonable steps to maintain the confidentiality of this information. These steps include:

- Keeping documents and charts with patient information out of sight
- Avoiding discussing patient information in public areas
- Keeping computer screens turned away from open view
- If someone asks for patient information, make sure he/she has the right to receive this information.
- When you give out patient information, give only the information needed, not extra information.
- When discussing a patient, lower your voice. Patient care should be discussed in private, not public, areas
- Keep documents and reports that have PHI in safe areas, out of view
- When using the phone, fax, or email to share PHI, make sure it is going to the correct person
- Always follow proper procedures for logging in and out of computers. Never share your password with anyone
- Sometimes staff or volunteers are also patients at UH. Protect their privacy just as you would any other patient
- It is never appropriate to share private health information about patients with family, neighbors, friends, or clergy unless the patient has specifically said we may

A few important final thoughts about privacy

It is natural to want to talk to others about what is happening with patients at the hospital and your volunteer experiences, but it is critical that privacy and confidentiality be upheld. Talk about your volunteer experiences with others, however remember to discuss these experiences in general terms, never disclosing the names of patients to anyone.
Customer service in health care
As volunteers, part of our mission is to make those difficult times in the lives of our patients, families, visitors, staff and fellow volunteers more manageable.

Definition of “customer”
A customer is someone who receives a product or service from us and our organization. The customer may be a patient, family member, client, coworker, volunteer or other department or community member. Anyone who counts on the results of our work is our customer.

The top 10 ways to provide customer service while volunteering at UH
1. Warmly greet each and every guest encountered. Make full and friendly eye contact.

2. SMILE! Conduct yourself in a professional and courteous manner.

3. Ask the guest how he/she would like to be addressed.

4. Listen attentively and actively when the guest speaks.

5. Before rendering any service, explain what you propose to do and why.

6. Be kind and gentle.

7. Respect guest privacy. Preserve confidentiality at all times.

8. Be helpful. Escort guests when possible, rather than giving directions.


10. Look the part.

Here are a few tips to managing the situation when patients or families are disappointed with service:

1. Listen intently to the patient or family member. Acknowledge the fact that they are upset. Patients and families want us to notice or they wouldn't take the time to say something about the problem.

2. Tell the patient or family member that you are sorry that we didn't meet their expectations, but thankful they took the time to bring the situation to our attention.

3. Let the patient or family member know that you will get him or her in contact with a nurse manager or other administrator to resolve the situation. If you are unsure of who to contact, feel free to ask the nearest staff person or the Volunteer Services Department for assistance.
Dealing with distressed people

**Distracted guests**
Arrive with baggage - bad mood/tired/hurried/ health concerns
- Move quickly to welcome them
- Empathize, show you understand - and assure them you will do what you can to make things go smoothly

**Disappointed guests**
For some reason have not had their expectations met - may have little/nothing to do with you
- Check your own baggage
- Be aware of your body language
- Don't take their reaction personally

**Disruptive guests**
Disappointed and feel an injustice, insult, embarrassment, or disrespect
- Move the guest away from other people
- Help the guest to be calm by lowering your voice, making eye contact, being aware of your body language

YOU are University Hospitals Cleveland Medical Center

*You are what people see when they arrive here.*

*Yours are the eyes they look into when they're frightened and lonely.*

*Yours are the voices people hear when they ride the elevators, when they try to sleep and when they try to forget their problems.*

*You are what they hear on the way to appointments that could affect their destinies and what they hear after they leave those appointments.*

*Yours are the comments people hear when you think they can’t.*

*Yours is the intelligence and caring that people hope they’ll find here. If you’re noisy, so is University Hospitals. If you’re rude, so is University Hospitals. And if you’re wonderful - so is University Hospitals.*

*And so we have a stake in your attitude and in the collective attitudes of everyone who works at University Hospitals. We are judged by your performance. We are the care you give, the attention you pay, the courtesies you extend.*

Thank you for all of your efforts. Your time, energy and compassion truly make a difference in the lives of our patients and their families.
Policy and procedure

PR-1 Patient rights and responsibilities

• Reasonable access to care.

• Have a family member (or friend of the patient's choice) notified upon his/her admission to the hospital.

• Have his/her own physician notified of his/her admission to the hospital.

• Receive written notice of his/her rights as early as possible when receiving care.

• Receive timely clinical attention, including appropriate pain management.

• Have his/her family participate in care decisions.

• Know the names and roles of all persons involved in his/her care.

• Receive care in a safe setting.

• Be informed about the outcomes of care, including unanticipated outcomes.

• Receive assistance with physical disabilities and limitations.

• Receive care that recognizes cultural or religious needs.

• Receive care that is free from abuse or harassment.

• Receive services regardless of ability to pay, age, sex, religion, race or national origin.

• Be addressed in a civil and courteous manner.

• Communicate with people outside of the hospital. Any communication restrictions are made with the patient's participation (or the family's, if appropriate).

• Refuse care and receive information on the expected consequences of refusal of care.

• Have his/her spiritual and pastoral needs respected.

• Be involved in all aspects of his/her care and assist in the development and implementation of his/her own plan of care.

• Choose a post-acute care provider.
• Receive complete information regarding his/her status (e.g., diagnosis, treatment, and prognosis) in terms the patient can understand.

• Provide informed consent (after being advised of the risks, benefits, and alternatives) before receiving treatments, procedures, blood or blood components, anesthesia or sedation.

• Be advised of the expected benefits of research, investigation, and clinical trial projects, as well as the potential discomforts and risks, and alternative services.

• Refuse participation in research, investigation, and clinical trial projects. The patient's refusal will not compromise access to service.

• Access the court guardianship process and county adult and child protective services.

• Access assistance in domestic violence situations.

• Freedom from restraints of any form that are not medically necessary.

• Personal privacy.

• Confidentiality of his/her medical information.

• Information from his/her medical record within a reasonable time frame.

• Initiate advance directives and have UH Cleveland Medical Center employees and medical staff honor these directives.

• Be involved in resolving ethical issues relative to his/her care.

• Receive information about care that he/she will need after discharge.

• Receive an explanation of his/her bill upon request.

• Ask for and receive prompt review and resolution of a complaint. If the resolution is unacceptable, the patient will be advised of the patient grievance mechanism.

• File a complaint with The Joint Commission (1-800-994-6610), Health Care Financing Administration (1-312-353-7180), Ohio Department of Health (1-800-342-0553), or Medicare Peer Review Organization (1-216-447-9604).
Each patient has a responsibility to communicate with UH employees and medical staff.

Each patient has a responsibility to:

- Bring medical problems to the attention of his/her physician
- Advise UH of his/her primary care physician and/or referring physician
- Provide information to caregivers about personal health, including past illnesses, hospital stays, and use of medicine
- Report perceived risks in his/her care
- Ask questions when he/she does not understand information or instructions
- Provide information to UH and payors to assist the hospital in obtaining payment for services rendered
- Be considerate of the needs of other patients
- Speak in a civil and courteous manner
- Recognize the effects of lifestyle on personal health
Age-specific competencies

Age specific competencies benefit you, our patients, and our organization by:

- Ensuring quality care
- Improving job performance and customer service
- Meeting The Joint Commission standards

Volunteers deal with people of all ages. Although most fall into the below categories, some people don’t reach expected potential at the same rate. To help you effectively interact with patients and families, assess each contact for the following:

- Physical impairments: speech, hearing, or sight disabilities; walking limits, etc.
- Learning abilities: ability to comprehend and respond appropriately
- Cultural differences: be cautious of certain gestures that are offensive to other cultures (direct eye contact, touching, etc.)
- Emotional stress: depression, anxiety or fear
- Language barriers: seek assistance rather than prolong confusion

Infants and toddlers 0-3
Characteristics
- love to explore
- strong bond to caregiver
- often respond to strangers

Keys to success
- provide safe environment
- smile, talk softly to him/her
- assist caregiver when possible

Young children 4-6 years
Characteristics
- identify with individuals
- sensitive to other’s feelings
- involved in structured classroom settings
- very inquisitive

Keys to success
- give praise
- ask questions
- encourage appropriate behavior with clear rules

Older children 7-12 years
Characteristics
- “doers”
- focus on fitting in
- negotiate for independence

Keys to success
- allow them to make decisions
- ask them for help
Adolescents 13 - 20 years
Characteristics
• in transition
• concerned about appearance
• challenge authority
• build close relationships

Keys to success
• provide acceptance and privacy
• don’t be authoritative unless safety and respect are issues

Young adults 21 - 39 years
Characteristics
• establish closeness with others
• set values and career goals

Keys to success
• recognize choices without condemnation
• encourage healthy lifestyle

Middle adults 40 - 64 years
Characteristics
• use life experience to learn, create, and solve problems
• like to contribute
• are productive
• going through changes

Keys to success
• maintain hopeful attitude
• focus on strengths, not limitations
• encourage talking about change

Older adults 65 - 79 years
Characteristics
• enjoy new opportunities
• natural decline in some physical abilities
• continue to be active learner
• take on new roles

Keys to success
• give respect
• prevent isolation
• encourage acceptance of aging
• encourage physical, mental, and social activity

Adults 80 and older
Characteristics
• physical abilities continue to decline
• continue to learn, but memory skills and/or speed of learning may decline
• may be easily confused

Keys to success
• encourage expression of feelings
• use humor and positive responses
• encourage safe choice
Therapeutic relationships

Volunteers have the opportunity to interact with patients and their families in a very special way. A key element in fulfilling your role is being able to relate to the patient, yet remain separate enough to distinguish between the patient's own feelings and needs and your own. Establishing and maintaining this balance is not always easy. If you have questions regarding the needs of a patient and/or family, please discuss it with your supervisor.

Characterizing the therapeutic relationship

<table>
<thead>
<tr>
<th>Underinvolved</th>
<th>Therapeutic</th>
<th>Overinvolved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cold, uncaring, detached</td>
<td>Empathetic, compassionate</td>
<td>Assumes emotional burden</td>
</tr>
<tr>
<td>Judgmental</td>
<td>Mutual respect and trust</td>
<td>Exaggerated sense of responsibility</td>
</tr>
<tr>
<td>Standardized approach</td>
<td>Individualized care</td>
<td>&quot;No one else cares like me&quot;</td>
</tr>
<tr>
<td>Avoider</td>
<td>Advocate</td>
<td>Rescuer or savior</td>
</tr>
<tr>
<td>Patient/family feels neglected</td>
<td>Patient/family feels empowered</td>
<td>Patient/family dependent</td>
</tr>
<tr>
<td>Provider centered</td>
<td>Patient centered</td>
<td>Provider centered</td>
</tr>
<tr>
<td>Values of provider/patient clash</td>
<td></td>
<td>Provider has unmet needs for love, belonging, approval, need to be needed</td>
</tr>
</tbody>
</table>

McAliley, Dull, Lambert, et al. The Rainbow Therapeutic Relations Decision Making Model

Boundary ground rules for volunteers

Volunteers must not:

- Accept or ask for money, tips or gifts from patients
- Give gifts to patients and families, basic needs should be reported to staff and wish lists are available for general donations
- Give patients and families their phone numbers or call patients when they are off duty
- Socialize with patients and families outside the hospital setting including connecting with patients online even if the connection is patient initiated
- Solicit medical staff for professional advice
- Attempt to sell items to patients, hospital staff or a patient’s family members
- Visit areas or patients outside your scope of service
- Have friends or relatives (including children) visit or shadow them while on duty
- Share their own personal information or health history under any circumstance
- Discuss religion or politics with patients, unless specifically part of the volunteers service description
- Participate in any idle gossip with patients, staff or other volunteers regarding inappropriate subjects and/or items regarding hospital policy and procedures discuss the costs of hospitalization with the patient
Health and safety

As a volunteer, your safety at UH is a team approach. You, your supervisor and staff of the department all have specific roles. You are to perform your assignments safely. The Department of Hospital Safety (Safety Office) can assist you and your supervisor reach the goal of an environment safe for all.

In addition to your management team and the Safety Office, UH has many systems in place to continually improve the environment. The Hospital's Environment of Care Committee meets on a monthly basis to review issues (Fire Prevention, Hazardous Material and Waste, Safety, Security, Medical Equipment, Emergency and Utilities Management) and recommends changes in operations.

The Joint Commission
The Joint Commission is a non-governmental, private agency hired by hospitals and healthcare facilities to conduct a survey, an inspection of sorts, of these organizations in order to grant accreditation. It sets forth standards related to Safety and Patient Care while supporting Performance Improvements.

The Joint Commission sets forth standards in a number of area, which focus on processes, activities and outcomes related to both the patient and hospital. The Joint Commission divides the Areas of Standards into three main function groups.

Surveys occur periodically and are unannounced.

The governmental agencies, Medicare and Medicaid, along with private insurance companies, require medical treatment be completed in “accredited” facilities to pay patient claims.

Environment of Care
The Environment of Care (EOC) is the setting in which care is given to patients and their families and consists of 3 components:

1. Buildings (Lakeside, Horvitz Tower, MacDonald, Lerner, etc…),
2. Equipment (IV pumps, defibrillators, monitors, computers, etc…) and
3. People (Administrative, Support Staff, Patient Care and Volunteers).
Infection control: Protecting yourself and our patients

All volunteers must follow University Hospitals infection control policies and procedures. These policies and procedures are in place to protect patients, visitors, staff and volunteers from getting an infection while in the hospital.

Everyone has microorganisms on his or her skin. If you are healthy and have no breaks in your skin, these microbes probably do not cause any problems. If you are very ill, very young, or have a surgical wound or other break in the skin, normally friendly microbes may cause problems. Microorganisms that frequently cause illness (cold or flu viruses, strep, etc.) often spread from person to person through hand contact. It is very important that you wash your hands frequently to prevent the transmission of infection to and from others.

Hand washing is the single most effective method of preventing transmission of infections. Hand washing is a 15 - 30 second process that should include wetting your hands, lathering them for 10 - 15 seconds and then rinsing and drying them. Use a paper towel to turn off the faucet. The use of hand sanitizers (Purell, etc.) is an acceptable alternative to hand washing unless otherwise posted.

You should wash your hands:
• Before and after contact with patients
• After using the restroom
• After sneezing, coughing or blowing your nose
• When hands are dirty
• Before and after meals and breaks
• Before going home

Universal precautions

As a hospital volunteer, you will have no more risk of being exposed to an infectious disease than you would in your daily life. At University Hospitals, we consider ALL blood and body fluids as potentially infectious. This is called BSI: Body Substance Isolation. To follow Body Substance Isolation procedures, wear personal protective equipment such as gloves, gowns, and/or masks if contact is likely with any blood or body fluids.

Your exposure to blood or body fluids is unlikely but may happen on rare occasions. If you have an exposure - a splash of body fluids, a needle prick - immediately wash or rinse the area and report the incident to your supervisor.

Also, advise your supervisor if you think you may have been exposed to a contagious disease by a respiratory route, such as chickenpox or tuberculosis. You will be referred to the Infection Control nurses for additional follow up.
Isolation signs
Volunteers should never enter a room of a patient who is in strict isolation unless authorized by a nurse and then only after the necessary precautions have been explained to the volunteer. Under certain isolation procedures, a volunteer may enter the patient's with the proper personal protective equipment. Check with your supervisor so you understand how to proceed on your unit. Occasionally a door may be open so it is important to always look for a sign on the door. Pet Pals volunteer/dog teams must never enter the room of a patient who is in isolation.

If you are ill
To protect patients, do not work your volunteer shift if you have a cold, sore throat, diarrhea, rash, boil or any other type of infection. If you have been sick and are not sure whether it is wise to volunteer, please check with your supervisor or Volunteer Services.

Health screenings
You may be required to have a Tuberculin (TB) skin test to check for exposure to tuberculosis. Volunteers placed in Rainbow Babies and Children’s Hospital and MacDonald Women’s Hospital are required to provide vaccination records or may be required to have a one-time blood test to determine whether they have the antibodies for childhood viral illnesses, such as chickenpox, measles, mumps and rubella. Testing will be provided to you by Corporate Health at no charge. Corporate Health is located on the 4th floor of the Medical Center Company (MCCO building). Corporate Health's hours are 7:30 a.m. to 3:45 p.m. weekdays. Volunteer Services can provide you with directions or will be happy to escort you to Corporate Health. College and youth volunteers placed in these areas must have their clinician complete a health screening form listing vaccination dates.

Fire safety
You need to know what to do if a fire occurs. Be aware of your surroundings.

• Know where the closest pull stations (fire alarms) are.
• Know where the closest fire extinguisher is located.
• Know (two) ways to exit the area.

UH uses the term "Code RED" to mean "FIRE." There are two types of fire alarm systems at UH.

The newer buildings, Lerner Tower and Hanna House have an announcement of "Code RED, Floor #" heard on ALL floors. The older buildings, such as Lakeside, Bolwell, and MacDonald Hospital, have fire alarm systems consisting of chimes. The number of chimes tells the building number / floor of the fire.

When you hear either the message or chimes, you are to start "Code Red" emergency procedures. The letters "R-A-C-E" tell you how to proceed. When you see smoke or flame:

R - Rescue any people in the fire room by moving them out. Note: Volunteers are only to "assist" in the rescue phase. Close the door to the fire room to contain fire and smoke.
A - Activate the fire alarm by pulling the alarm pull station and call 5555 using a hospital phone.
    Tell the operator your name, the building, floor, room number and what kind of fire it is (smoke, flame).
C - Confine the smoke and fire by closing all the doors in the area.
E - Exit the area or extinguish the fire only if you have been trained and can do it without danger to yourself.
    Note: Volunteers should not open a closed door to extinguish a fire.
Extinguishers
If using an extinguisher, remember P-A-S-S and choose the correct extinguisher. At UH, we currently have three different types of extinguishers. Extinguishers are identified below. The type of fire will dictate which extinguisher should be used.

**Remember: P-A-S-S to use an extinguisher.**
P - PULL (the pin to release the handle)
A - AIM (at the base of the fire)
S - SQUEEZE (the handle)
S - SWEEP (back & forth)

![Extinguisher Types]

**Type A**: A pressurized water extinguisher used mainly on paper, wood, or fabric fires (combustibles); and not on a chemical or grease fire

**Type BC**: A fog/vapor releasing extinguisher, best used on a computer or chemical fire (non-combustibles)

**Type ABC**: The bright red extinguisher, containing multi-purpose dry chemicals that can be used on most any type of fire (found in patient care areas)

**Elevator safety**
Elevators are used for the movement of patients, employees and supplies. Patients receive first priority for elevators.
If you are in a stalled elevator:
1. Check to see if the "STOP" button has been activated. Move it to the "RUN" position
2. Activate the emergency alarm
3. Utilize voice communication and/or shout for help
4. DO NOT try to leave the elevator until instructed by the elevator personnel
If you hear someone in a stalled elevator:
1. Ask if patients are in the elevator and if anyone is hurt.
2. Tell the occupants that steps are being taken to get help.
3. Keep someone outside to talk with the occupants and send someone to call the UH Police Department at 44357 (4-HELP).

We need your help. Call the 4-ELEV Line (4-3538) to report problems with elevators. Things such as burned out lights, elevator movement when doors are open, or problems with doors can indicate more serious problems that may need attention.

Wheelchair safety
- If the patient needs assistance to transfer into the chair alert nursing staff. Volunteers never initiate transfers.
- Be sure that the patient’s hands are in his/her lap and feet are on the footrests.
- Patient should be well covered. Blankets are available.
  - Alert nursing any time a patient is being taken from his/her nursing unit and when he/she is returned.
- Always put the wheelchair’s brakes on as soon as the destination has been reached.
- Use caution at corners and doorways.
- In the patient’s room, apply the wheelchair brakes after you have positioned the patient’s chair sufficiently close to the bed to allow the patient to reach the nurse call button and the telephone.
- If you cannot get the wheelchair over a doorsill try to slowly back over the bump.
- When getting a patient in and out of an elevator, always back the wheelchair in and out of an elevator.

For your own safety call Patient Transport for special circumstances.

Electrical safety
Electrical fires are caused by failures on electrical wiring or equipment. Once the equipment is unplugged, the fire usually stops. If smoke develops, unplug the equipment and/or sweep the equipment with a red fire extinguisher. NEVER USE WATER ON AN ELECTRICAL FIRE. Two of the biggest causes of electrical fires are overloading outlets and using extension cords. University Hospitals prohibits the use of extension cords unless the use has been approved by the Electrical Foreman or the Safety Officer. Power strips are allowed for personal computers. Do not use electrical equipment and appliances around standing water. Dry your hands before switching power on and off. REMOVE the plug from an outlet by grasping the plug, not the wire. Inspect each piece of electrical equipment before plugging it in. NEVER use a piece of equipment needing repair. Let your supervisor know if you have a problem with equipment.
Hazard communication

Whether you realize it or not, you may come in contact with chemical substances daily. These may include disinfectants and cleaning materials.

If you come in contact with something and have a question, your supervisor will be able to help you.

Whether at work or at home, the first place to look for the hazards of a material is on the label. Each label will have the common name of the chemical, the name and address of the company making the chemical and the main hazards. UH will place an additional label on the material, or print labels for containers without labels.

Labels do not tell the whole story. To get complete information, you need to read the Material Safety Data Sheet (MSDS) for the chemicals with which you work. The MSDS will tell you the different names of the chemical, emergency phone numbers, hazardous ingredients, physical and chemical properties, physical hazards, health hazards, precautions for safe handling and use, how to store and what protective equipment to wear.

No matter what chemical you work with, accidents occur.
If you see a chemical spill at UH, call 4-SPIL (47745).

Radiation safety

Radiation and radioactivity are used in the departments of Radiology, Cardiology, Clinical Pathology and in many hospital research labs. Employees who work in these areas are classified as radiation workers and are subject to radiation controls, which include additional training. If you are located near a radiation area or need to enter a room posted with a radiation symbol, check with your supervisor. Your supervisor will advise you of the precautions to be taken and identify all procedures you need to follow. The Radiation Safety Officer and Committee ensure every activity involving radiation lessens exposure for employees, volunteers, patients and visitors.

This ‘propeller’ symbol indicates “Radiation” (on equipment, materials, waste). Located on doors, cabinets, & other items. Do Not Touch! Unauthorized Area - Stay Out!
Hospital Emergency Operations Plan (EOP)

To minimize the confusion and chaos that can be experienced by a hospital at the onset of a medical disaster, University Hospitals Cleveland Medical Center will utilize the Hospital Incident Command System (HICS). This emergency management system employs a logical management structure, defined responsibilities, clear reporting channels and a common name to help unify hospitals with other emergency responders.

Since many hospital departments already utilize volunteers to assist with their day-to-day functions, volunteers do have a role in this emergency management plan. The Volunteer Services Department would be involved at Level 3. The Director of Volunteer Services (or designated replacement) would be notified via an FYI page to respond to a voicemail message regarding the nature of the disaster. Based upon the type of disaster and assistance needed, the Director would notify other Volunteer Services staff to assist with the mobilization of the volunteers. Volunteers may choose to be on the Volunteer Disaster Team. The role of volunteers, regardless of where they are assigned, would be similar: to provide emotional, social and/or spiritual support to patients and their family members.

This could include but is not limited to the following things:

- **Assisting staff by visiting patients to assure that all needs are being met and notifying nursing of medical-related concerns**
- **Visiting and comforting patients and/or providing for their spiritual needs**
- **Directing and/or escorting people entering in/around the hospital**
- **Assisting staff with non-medical duties; (i.e., bringing patients blankets and pillows, snapping gowns together, locating wheelchairs & carts, stocking supplies)**
- **Light cleaning such as wiping and making beds**
- **Providing snacks or food for patients and families, as appropriate**
- **Assisting with the children in the dependent day care; disinfecting children's toys, cleaning up the area**
- **Answering telephones**

If a disaster occurs while you are on your appointed shift, report to your department volunteer supervisor for instruction on whether you need to continue your volunteer shift. If it is felt to be more appropriate for you to leave your volunteer area, please report to the Volunteer Services Department prior to going home. Depending on the circumstances, you may be reassigned to help in another area.
**Security**

**Police Department**
The Police Department of UH Cleveland Medical Center provides a safe and secure environment for all patients, volunteers, visitors, staff and employees. Officers are on duty 24 hours a day, seven days a week. The Police Department is located in the basement of Lakeside.

**You can help by following these safety precautions**
1. Notify Police Department of suspicious activity you observe in your area or around the hospital.
   Suspicious activity may include:
   - Persons loitering in or near a patient's room.
   - Persons in uniform without proper identification.
   - Individuals repeatedly asking detailed questions about UH Rainbow Babies & Children's Hospital or UH MacDonald Women’s Hospital policies and procedures and daily practices.
   - Staff carrying a baby in his/her arms off a patient division.
2. Don't leave any area unattended without first securing the area. Lock doors, desks and file cabinets. Make sure at least one person is responsible for locking the area at the end of the day. Secure personal and hospital property.
3. Do not leave personal belongings such as valuables, purses, etc., in the open on the floor, desk or cabinets. Keep them out of sight and secured.
4. ALWAYS wear your identification badge above the waistline so that you can easily be identified as a volunteer.
5. When walking to and from your vehicle, stay aware of your surroundings.
6. At night, park in a well-lit area. Drive and walk on main traveled routes. Take no shortcuts!
7. Use Police Department mobile escort service after dark to get to parking lots and garages.
8. Reduce the amount of valuable items carried in your wallet or purse such as cash, credit cards, etc. Only carry what is necessary.
9. If you lose or misplace a hospital key or identification badge, notify the Police Department immediately.

**Remember**
Safety and security is everyone's responsibility. Help the Police Department help you by being the eyes and ears of the hospital.

**Escort Services**
Escort services are available through the UH Cleveland Medical Center Police Department for all patients, volunteers, visitors, staff and employees. If you would like an escort to your vehicle, please call 44357 (4-HELP).

**Lost and found**
UH Cleveland Medical Center Police Department maintains a lost and found for UH.
University Circle Incorporated (UCI)

University Circle Incorporated (UCI) is a non-profit development and service organization and UH is a member institution. UCI provides parking, transportation, police and security, as well as other services.

Disasters

Disaster drills can take place at any time and are typically unannounced. In the instance of a drill or "real event" which may include a lockdown, UH personnel and volunteers are required to provide an ID badge for entry into the hospital at the six card access locations listed below:

1) Adelbert/Visitor Parking Garage – Basement Level to Horvitz
2) Adelbert Road into Horvitz Tower (main entrance)
3) Bolwell main entrance
4) Cornell Road into Mather Pavilion
5) Cornell/Mayfield Visitor Parking Garage – at Bridge entrance (garage side)
6) Lakeside Front Entrance
7) University Hospitals Drive entrance into Lerner Tower
8) Cornell Road Entrance into Seidman Cancer Center
9) Visitor Garage 2 (UH Drive) – Second Floor bridge into Lerner Tower

Regulatory and accrediting agencies including The Joint Commission and OSHA (Occupational Safety and Health Administration) require all hospitals to participate in two disaster drills a year.

What events or conditions cause a LOCKDOWN?

A lockdown drill tests a facility’s ability to protect its patients, visitors, staff and property during an event. It restricts unauthorized movement in certain areas and involves closing down a division, building(s) or the entire UH campus. Some areas within UH, such as the psychiatric units and newborn nursery, already operate in lockdown mode 24 hours a day, 7 days a week.

Examples of lockdown include:

- Civil disturbances such as rioting or demonstrations
- VIPs with injury or here for treatment
- Terrorist threats or incidents involving nuclear, biological or chemical agents
- Domestic threat or violence towards patients or staff

In the event of an internal or external emergency, the Police Department locks down the facility as the University Hospitals/Hospital Emergency Incident Command Center (UH/HEICS) procedure is activated. A lockdown prevents either an external threat from entering UH or further movement of a high risk event within UH.
Things to remember during a lockdown:

- Wear your UH ID badge
- Employees and volunteers may only enter through the designated access entries
- Use entrances farthest away from the event
- If your ID badge is coded for access to an area, swipe it to gain entry
- Do not call the Police Department for disaster information. It will be provided when possible
- Do not prop open locked doors
- Do not open doors to anyone you do not know: he/she may be the perpetrator of the event
- Immediately report unauthorized persons/suspicious materials to Police Department at x4357
- Before leaving, check in with your supervisor and Volunteer Services

Note: During drills, employees and volunteers who are not directly involved in the drill, especially those in "patient care" areas, should conduct business as usual. Drill facilitators will be stationed at main entrances to make sure employees are wearing ID badges and are knowledgeable of disaster procedures. The drill should NOT impede the flow of traffic entering into the hospital as steps will have been taken to document participation.

Volunteer liability

Liability insurance coverage is provided through the University Hospitals Program of Self-Insurance for all volunteers working within the guidelines established by Volunteer Services. If a claim is made that a volunteer is responsible for injury to a patient, visitor, employee or other volunteers, the volunteer is covered under the hospital insurance program, provided that the volunteer was acting within the scope of his or her assigned duties in the hospital. All new volunteers are provided a service description which will outline their duties. Sound judgment must be exercised and reasonable care taken in the transportation and handling of patients.

If you sustain an injury or are involved in an accident while on duty, you must follow the steps outlined on the Volunteer Liability and Incident Reporting Procedure Form.

They are:
1. Report the incident/accident to your supervisor and the Volunteer Services Department.
2. Complete an incident report. This can be completed at the Police Department or call 4/4357 (4-HELP) for a Police Officer to visit you.
3. Go to the Corporate Health or Emergency Department as needed for treatment.

Never perform a task that is not included in your service description.
## Appendices

**Glossary of terms and common hospital abbreviations**

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<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>BP</td>
<td>Blood Pressure</td>
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<tr>
<td>CBC</td>
<td>Complete Blood Count</td>
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<tr>
<td>CCLS</td>
<td>Certified Child Life Specialist</td>
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<tr>
<td>CEM</td>
<td>Center for Emergency Medicine</td>
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<tr>
<td>CF</td>
<td>Cystic Fibrosis</td>
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<tr>
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<td>Children's Miracle Network</td>
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<td>Do Not Resuscitate</td>
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<td>DOB</td>
<td>Date of Birth</td>
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<td>Family Resource Center</td>
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<td>GI</td>
<td>Gastrointestinal</td>
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<td>MVA</td>
<td>Motor Vehicle Accident</td>
</tr>
<tr>
<td>N/A</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>NICU</td>
<td>Neonatal Intensive Care Unit</td>
</tr>
<tr>
<td>NPO</td>
<td>Nothing by Mouth</td>
</tr>
<tr>
<td>NSU</td>
<td>Neuroscience Intensive Care Unit</td>
</tr>
<tr>
<td>OR</td>
<td>Operating Room</td>
</tr>
<tr>
<td>OT</td>
<td>Occupational Therapy</td>
</tr>
<tr>
<td>PACU</td>
<td>Post Anesthesia Care Unit</td>
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<tr>
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<td>Pediatrics</td>
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<tr>
<td>PFAC</td>
<td>Patient Family Advisory Council</td>
</tr>
<tr>
<td>PICU</td>
<td>Pediatric Intensive Care Unit</td>
</tr>
<tr>
<td>prn</td>
<td>Whenever necessary</td>
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<tr>
<td>PT</td>
<td>Physical Therapy</td>
</tr>
<tr>
<td>RB&amp;C</td>
<td>UH Rainbow Babies &amp; Children's Hospital</td>
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<tr>
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<td>Prescription</td>
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<tr>
<td>SCC</td>
<td>Seidman Cancer Center</td>
</tr>
<tr>
<td>STAT</td>
<td>Immediately</td>
</tr>
<tr>
<td>TB</td>
<td>Tuberculosis</td>
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