



# Volunteer Handbook

This handbook will provide you with a helpful overview of important information at Newton Medical Center and key safety policies.

## Welcome

We are pleased to welcome you as a volunteer at Newton Medical Center. Your desire and dedication to helping others has enabled you to join a highly valued group of people. All will appreciate your special gift of service. You have our thanks for your very important and valuable contributions of time and talents. We believe this experience will be a rewarding one for you and of great benefit to our patients and staff.

## History of Newton Medical Center

In 1952, a group of concerned citizens began to gather support for a health care facility. Dr. and Mrs. R.M. Paty, Jr. led the effort, and with community support, raised \$180,000 to begin construction of Newton County Hospital. The total cost of the 32-bed facility was \$558,736. On October 18, 1954, the doors were officially opened for response to the health needs of the community.

Through the years, service areas have been added in keeping with advanced technology and a growing population. In 1983 the Hospital Authority announced that the name of the hospital would be Newton General Hospital, and major renovation and construction program would move the front of the facility to face the north. On June 10, 1984 dedication services were held on the front steps of the hospital. The image of the small rural county hospital disappeared forever. Senator Herman Talmadge was present, as he had been thirty years before for the first dedication. Congressman Elliott Levitas gave the dedication address.

At the 50<sup>th</sup> Anniversary Celebration on October 17, 2004, it was announced that Newton General Hospital would change its name to Newton Medical Center.

Today, Newton Medical Center is a 90-bed acute care facility fully accredited by the national Joint Commission on Accreditation of Healthcare Organizations. Its most recent addition is The Knox Surgical Center, named for Board Chairman, D.L. Knox. The Knox Surgical Center was dedicated on May 17, 2002, and the first surgery was performed in the new building on June 10, 2002. The not-for-profit hospital staffs more than 150 physicians and offers the latest in medical technology including nuclear medicine, magnetic resonance imaging, laser surgery, angiography and cardiac catheterization.

## Mission

The mission of Newton Medical Center is to benefit our community by providing the highest quality health care services to our patients in the safest, most hospitable, and fiscally sound manner.

## **Values**

Provide safe patient care.  
Operate in a fiscally sound manner.  
Function as a hospitable hospital.  
To have Satisfied patients.  
Identify and address community health problems.  
To have qualified staff.  
Act ethically and honestly.  
Engage in A team behaviors.

## **Vision**

The vision for Newton Medical Center is to be regionally renowned for having the best clinical care program in the eastern 1-20 corridor.

## **Equal Opportunity for All**

Newton Medical Center provides equal opportunity to all individuals and administers its personnel policies without regard to age, race, color, religion, sex or national origin. It is committed and adheres to all laws prohibiting discrimination on the basis of an individual's handicap or disability.

## **The Board of Directors of Newton Medical Center**

Newton Medical Center is governed by a legal, not-for-profit Board who operates it for this community. The Board meets regularly to review the professional and administrative management of Newton Medical Center and to plan for the long-range goals as they relate to the needs of the community. Authority for administration of Newton Medical Center's activities is delegated to the Hospital Administrator.

## **Newton Medical Center Administrator**

Mr. James F. Weadick

## **Board Members**

|                                       |                                 |
|---------------------------------------|---------------------------------|
| Mr. D.L. Knox, Chairman               | Mr. George Hart                 |
| Mr. William D. Fortson, Vice Chairman | Mr. Randall Meadows             |
| Dr. Melvin Baker, Treasurer           | Mr. Richard Brown               |
| Mr. Bob Richardson                    | Mr. Sam Hay, III                |
| Mrs. Esther Williams                  | Dr. Mark Hanson, Chief of Staff |
|                                       | Dr. Vince Eagan                 |

## **Volunteer Services Department**

The department consists of five paid staff; Director, Secretary, Gift Shop Manager, Cinderella Shop Manager, and First Steps Coordinator. The Volunteer Services Department office is open from 8:00 a.m. to 4:30 p.m., Monday through Friday. However, volunteers may serve seven days a week.

Phone 770-788-6553

FAX: 770-788-0358

**Director:** Martha Taylor  
[mtaylor@newtonmedical.com](mailto:mtaylor@newtonmedical.com)

**Secretary:** Marilyn Morris  
[mmorris@newtonmedical.com](mailto:mmorris@newtonmedical.com)

**First Steps**  
Coordinator: Cathy Williams  
Telephone: (770) 385-4396  
E-mail: [cwilliams@newtonmedical.com](mailto:cwilliams@newtonmedical.com)

**Gift Shop**  
Manager: Kathy Collins  
Telephone: (770) 385-4454  
E-mail:  
[kcollins@newtonmedical.com](mailto:kcollins@newtonmedical.com)

**Cinderella Shop**  
Manager: Peggy Chancey  
Telephone: (770) 784-733

## **Newton Medical Center Auxiliary History**

The Hospital Auxiliary, comprised of volunteers, was founded in 1960 and celebrated 50 years of service to NMC in 2010. Services first began with the collection of donations for a meals-on-wheels cart. Soon other volunteers came to help and on November 29, 1960 an Auxiliary organizational meeting was held. Mrs. Robert Fowler was elected president.

More than 200 volunteers serve approximately 34,000 hours per year providing support to hospital staff and working to raise funds for hospital equipment and services. Auxiliary Volunteers serve in most all departments of the hospital and lead most fundraising efforts. The hospital, patients and visitors all benefit and depend on the services of these talented and willing people.

### **Auxiliary Membership**

Senior Volunteers have an option to join the Auxiliary by paying annual dues. Members receive the Auxiliary newsletter, attend the general membership meetings, wear the official Auxiliary emblem on their uniform and are eligible for election or appointment to the Board.

Most long term senior volunteers choose to join the Auxiliary. This service organization is governed by an elected executive committee and appointed board of directors and serves under the auspices of the hospital board and administration.

The NMC Auxiliary provides services, educational information and emotional support in a caring, professional manner to patients, families, staff, other volunteers, and the community. This organization is a vital part of the hospital's mission and furthers this mission by:

- Assisting personnel, patients, and their families on a volunteer basis in many areas of the hospital and community.
- Educating its members about the hospital and health care issues.
- Raising funds for hospital equipment through the Gift Shops, Cinderella Shop and other fund raising activities.

### **Mission**

The mission of the organization shall be to provide quality services to the hospital and its patients; to assist in building a healthy community; to serve as ambassadors for the hospital; and to promote fundraising activities in keeping with the goals and objectives of the hospital. This organization exists exclusively for charitable purposes.

## Auxiliary Presidents

|                               |                             |                                   |
|-------------------------------|-----------------------------|-----------------------------------|
| 1961-62 Mrs. Robert Fowler    | 1976-78 Mrs. M. H. Waggoner | 1991-93 Mrs. Wanda Bailey         |
| 1963-64 Mrs. Addison Terry    | 1978-80 Mrs. Neal Hinton    | 1993-95 Mrs. Hilda Patrick        |
| 1964-65 Mrs. Charles Starling | 1980-82 Mrs. J. S. Gainer   | 1995-97 Mrs. Becky Rutledge       |
| 1965-66 Mrs. James Purcell    | 1982-83 Mrs. Andrew Ewald   | 1997-99 Mrs. Loucy Hay            |
| 1966-67 Mrs. Nat Turner       | 1983-84 Mrs. A. J. Bruyere  | 1999-01 Mrs. Kim Trover           |
| 1967-68 Mrs. Thelma Towns     | 1984 Mrs. Shirley Sheridan  | 2001-03 Mrs. Juli Alderman        |
| 1968-69 Mrs. T. H. Bailey     | 1984 Mrs. Ruth Jones        | 2003-05 Mrs. Kim Trover           |
| 1970-71 Mrs. Felton Jones     | 1985-87 Mrs. Bennie Durden  | 2005-06 Mrs. Jane Wood            |
| 1972-73 Mrs. Hazel Gillette   | 1987-89 Mrs. Martha Tanner  | 2006-08 Mrs. Claudette Desrochers |
| 1974-76 Mrs. M. D. McRae      | 1989-91 Mrs. Norma Allgood  | 2008 Mrs. Michelle Green          |
|                               |                             | 2008- Mrs. Frances Rogers         |

## Auxiliary Newsletter

**Volunteer Vibes** is the Auxiliary publication mailed to the membership several times annually.

## Auxiliary General Meetings

**Auxiliary Members** enjoy four general meetings each year. These meetings are hosted by volunteers in selected departments. Speakers and programs are planned according to pertinent issues.

## Volunteer Categories

### Teen Program

High School students, ages 15 – 18 apply between January and April for an opportunity to participate in the summer Teen Program. Students are selected based on grades, application, and interview. An application, documentation of health requirements and a 2-step tuberculosis screening is required. The application is available in January each year at the front lobby information desk, in some school counselor's offices and at [www.newtonmedical.com](http://www.newtonmedical.com).

### Youth Apprentice Program

Students must be a high school junior or senior and referred by the school Youth Apprentice Coordinator to participate in the YAP Program during the school year. Most YAP students have served as Teen Volunteers. An application, documentation of health requirements and a 2-step tuberculosis screening is required.

### College Volunteers

College students may apply year round by submitting a completed Application Packet found on the website at [www.newtonmedical.com](http://www.newtonmedical.com). A background check and tuberculosis screening are required. Letters of recommendation will be written upon request for those students who actively serve a minimum of 12 weeks or 36 hours.

### Senior Volunteers (ages 18+ and not in college)

- Adults applying for volunteer service at Newton Medical Center will complete the Enrollment Packet found on the hospital website at [www.newtonmedical.com](http://www.newtonmedical.com). Assignments are made based on openings in the volunteer schedule and skills and interests of the applicant. A background check and 2-step tuberculosis screening are required.

●Annual mandatory education updates is a requirement for all adult volunteers for Safety Training, Competencies, Confidentiality and Tuberculosis Screening.

**Tuberculosis Screenings and Background Checks  
are required of all adult and college volunteers at Newton Medical Center.**

**Some costs may apply. This will be discussed during the interview.**

**All volunteers:** If you have had a TB screening within the last 6 months, please provide a copy of the screening or chest X-Ray result.

**Dress Code**

Volunteer uniforms are purchased for \$20 through the Volunteer Services. Uniforms should be clean and decorated only with the Volunteer emblem attached to the left sleeve, the name tag, service pin and special awards presented by the Volunteer Services Department. All decorations should be on the left side, except the name tag which is worn on the right collar. Old uniforms should be replaced periodically to maintain a professional appearance. All volunteers must wear shoes with closed toes. Shorts, crop pants or tights are not permitted. No denim. The gift shop and Cinderella Shop volunteers wear street clothes while observing the dress code policies of NMC.

|                                |   |
|--------------------------------|---|
| <b>Senior Ladies</b>           | Royal blue colored smock or shirt worn over a white blouse with white, black or khaki skirt (at least knee length) or slacks and comfortable <u>closed toe shoes</u> . (No denim) |
| <b>Senior Men</b>              | Royal polo shirt or royal dress shirt worn with black or khaki slacks, and comfortable closed toe shoes. (No denim)   |
| <b>Junior Girls &amp; Boys</b> | Green polo shirt, worn tucked in, with khaki skirt (at least knee length) or slacks with white tennis shoes. (No denim or mini skirts).   |
| <b>College Women</b>           | Green polo shirt, worn tucked in, worn with khaki slacks and closed toe shoes (No denim).   |
| <b>College Men</b>             | Green polo shirts with khaki slacks and closed toe shoes. (No denim or shirts with logos).  |
| <b>Court Ordered Service</b>   | White collard shirt with khaki or black slacks and closed toe shoes (No denim or shirts with logos)   |

**Personal Appearance for All Volunteers**

Good grooming and personal hygiene are essential for a professional image. The following is expected:

- Body cleanliness, including the use of deodorant.
- Minimum use of perfumes (not allowed in nursing) and hair sprays.
- Neatly trimmed hair, groomed and styled in a conservative manner. Males must have hair off the collar.
- Jewelry should be kept to a minimum. Earrings must be small and limited to two per ear. Visible ankle bracelets are not allowed. Males are not allowed to wear earrings.

- Facial hair must be neatly trimmed at a consistent length across the face.
- Make-up should be conservative and light in application. Tattoos must not be visible.
- Fingernails must be clean and maintained conservatively. Acrylic nails are not allowed in patient care areas.
- Hats will not be worn inside the building.
- No body piercing jewelry other than earrings worn in the ear is allowed.

### **Training**

Once you have attended orientation, received your Tuberculosis Screening, received your I.D. badge and purchased your uniform, you are ready to begin training in an assigned area. You must be in uniform to train. You will be assigned to a volunteer or an employee for training.

### **Volunteer Schedule**

Volunteers are assigned a schedule based on their availability. Most services are performed by volunteers in two shifts but may be flexible in some areas. The morning shift is either 8:00-12:00 or 9:00-1:00 and the afternoon is 12:00-4:00 or 1:00-5:00. If you serve the morning shift, please plan to serve until the end of your shift before going to lunch. If you serve the afternoon shift, please plan to come early enough to have lunch before going to your department. If you stay all day, lunch break should be taken at a time agreed upon by your supervisor. Morning and afternoon breaks are taken as needed.

### **Recording Service Hours**

All volunteers are required to sign in at designated stations when they arrive for service. Signing in and out is very important. Several sign-in stations are available. It not only helps the Volunteer Services office keep a total of the hours contributed, but it is legal proof that you are present and serving in a voluntary capacity which is needed under the hospital's liability insurance program. Also you may want to record volunteer experiences on applications when applying for a job or college. All volunteers are required to sign in/out and to record hours served. From your record we are able to track hours and active years of service on the volunteer database. A computer printout of total hours served is posted monthly at the Lobby Information Desks. Irregularities and questions regarding hours should be referred to the Volunteer Services office. Awards, based on the number of hours accumulated, are presented in May and December.

### **Awards**

Award pins are given to Auxiliary volunteers who perform designated hours of service beginning with the first 100 hours. Awards are then given for cumulative hours at 250, 500, 700, 1000, 1200, 1500, 1700, 2000, 2500, 3000, etc. Years of service is also recognized.

### **Departmental Transfers**

Transfers from one work assignment to another are easily accomplished. Volunteer assignments need to be mutually enriching, productive and fulfilling for the patient, the supervisor, the volunteer and the hospital. If you are not happy for any reason after a reasonable trial period, discuss a transfer with the Director of Volunteer Services.

### **Resignation from Volunteer Services**

Should you no longer be able to volunteer, notify Volunteer Services verbally or in writing of your impending exit. Please explain why you are leaving so we can have a clear understanding of the reason for leaving. **Please turn your ID badge in to the Volunteer Office at your time of exit.**

## Visiting/Phone Calls

Please do not have friends come to visit you while you are volunteering. Wait to visit a relative/friend in the hospital after you have finished your volunteer service. When a personal call is necessary, please be brief, keeping calls to no more than two minutes to keep hospital lines free.

## Conversations with Employees

Your friendly professional conversation encourages employees. The employee team values what you have to say. However, while on duty, it is best to limit your conversation with employees to hospital business. Your professional discretion on when and what to say, helps the employee staff to focus on the needs of our patients and other customers.

## Conversations with Patients

Conversations with patients should be limited to cheerful, non-controversial subjects. Patients may divulge information that is highly personal. If this is the case, volunteers should listen with compassion and understanding, but should not invite confidences. Volunteers should never offer opinions on personal affairs, medical treatment, administering of medication, choice of physicians or referral of services.

When visiting patients, do not discuss their illness or your own. Do not discuss patients with others outside their rooms. Remember, even a patient who appears unconscious (or asleep) may hear. Each patient is an individual, so please respect their privacy. Patients who seem unhappy or angry may well be masking fear, worry, or loneliness.

## Conversations with Visitors

Visitors are also guests of our hospital. They should be treated with warmth and respect. Listen with compassion and understanding. Answer their questions professionally and with competence. Treat visitors as you would like to be treated. Treat everyone the same, regardless of age, race, color, creed, financial condition, appearance, and disability.

## Volunteer Bill of Rights

**The right** to be treated as a team member.

**The right** to a suitable assignment with consideration for personal preference, temperament, life experience, education and background.

**The right** to know as much about the organization as possible – the policies, the people, and the programs.

**The right** to be trusted with necessary confidential information.

**The right** to continuing education on the assignment as well as follow-up to initial training.

**The right** to guidance and direction by someone who is experienced, patient, and well-informed.

**The right** to be heard, to have a part in planning, to feel free to make suggestions, to have respect shown for an honest opinion.

## Volunteer Code of Conduct

**Be Positive:** Display a *positive* image of Newton Medical Center by demonstrating courteous and professional behavior toward patients, physicians, associates and visitors and by adhering to the values of Newton Medical Center.

**Be Sure:** You really want to help others. Know your own limits.

**Be Convinced:** Believe in the value of what you are doing.

**Accept the Rule:** Don't criticize what you don't understand. There may be a good reason.

**Speak Up:** Ask about things you don't understand.

**Be Willing to Learn:** Training is essential to any job well done. Prepare for each assignment.

**Keep on Learning:** Know all you can about your hospital and your assignment. Use time wisely; don't interfere with others' performance.

**Welcome Supervision:** Consult with your supervisor when unclear on policy or action. You will do a better job and enjoy it more if you are doing what is expected of you.

**Be Dependable:** Your word is your bond. Do what you have agreed to do. Don't make promises you can't or won't keep.

**Be a Team Player:** Find a place for yourself ON THE TEAM. Constructive feedback will improve effectiveness.

## Diversity

One of the goals of Newton Medical Center is to actively support Diversity:

- Be mindful of your language; avoid stereotypical remarks and challenge those made by others.
- Speak out against jokes and slurs that target others.
- Your silence sends a message that you agree. It is not enough to refuse to laugh.
- Speak up when people take positions that work against understanding and communication.
- Welcome new people into your life and seek opportunities to meet others.

## Patient Rights

In accordance with its mission and values, Newton Medical Center treats each patient as a whole, irreplaceable, unique, and worthy person. Patients in this facility enjoy the following rights:

1. The right to considerate care that respects the patient's personal value and belief systems.
2. The right to receive from his/her physician current information concerning his/her diagnosis, treatment and prognosis in easily understood terms. When it is not medically advisable to give such information to the patient, it should be shared with an appropriate person on his/her behalf. The patient has the right to know the name of the physician responsible for coordinating his/her care.
3. The right to receive from his/her physician information necessary to give informed consents prior to the start of any procedure or treatment. Except in emergencies, the information should include, at minimum, the specific procedure and/or treatment, the significant risks involved and the expected length of recuperation. When alternatives for care or treatment exist, or when the patient inquires about alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
4. The right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of this action.
5. The right to formulate advance directives and appoint a surrogate to make health care decisions on his/her behalf to the extent permitted by law.
6. The right to receive every consideration of privacy and confidentiality concerning his/her own medical care and treatment.
7. The right to expect that all communications and records will be treated as confidential.

8. The right to expect that Newton Medical Center will make a reasonable response to the patient's request for services.
9. The hospital will provide evaluation, service and/or referral as indicated. The patient may be transferred to another facility only after he/she receives complete information and explanation concerning the needs for and the alternatives to a transfer.
10. The right to obtain information about any relationship of the hospital to other health care and educational institutions which could impact care of the patient.  
Also, the patient has the right to obtain information concerning any professional relationships among individuals who are providing treatment.
11. The right to know if there are plans for the hospital to engage in or perform human experimentation affecting his/her care or treatment. The patient has the right to refuse to participate in research projects.
12. The right to expect continuity of care and to know in advance what follow up plans and services will be needed after discharge.
13. The right to examine and receive an explanation of his/her bill regardless of the source of payment.
14. The right to know what hospital rules and regulations apply to patient behavior.

### **Customer Service**

Newton Medical Center employees and volunteers have been recognized in the community as both competent and caring individuals. It is the desire of all of us to continue to deserve that reputation. As hospital employees and volunteers, we are the heart of the hospital. These are some of the ways volunteers can show that they care about our patients, their families, and one another.

#### **Simple Courtesies**

- Do not allow anyone to feel ignored.
- Initiate a friendly greeting with immediate eye contact, smile and say "hello."
- Introduce yourself by your first name. Tell the customer who you are and what you will be doing.
- Name badges should be worn on the right collar for clear visibility.
- Address patients as they wish to be called. Do not refer to patients as honey, sweetie, etc.
- Address all patients older than yourself as Miss, Mrs., Mr., Dr., etc. unless they request to be called something else!
- Face the patient or family member when speaking, using clear, distinct words.
- Listen attentively and do not interrupt.
- Knock on the patient's door before entering. Check the name beside the door to verify you have the correct patient. Also check arm bands to verify the correct patient.
- Observe visitors. If someone appears to need directions, offer to help and **TAKE** the customer to his or her destination. If you are unable to personally escort a customer, take him or her to someone who can.
- Use the age appropriate communication techniques located on page 12.

Volunteers should perform only those duties to which they have been assigned, properly trained and supervised. When in doubt, ask questions about what to do.

- **DON'T** chew gum when volunteering (doesn't look professional).
- When visitors ask you where something is located, **DON'T** give directions, but rather **TAKE** them there if at all possible. This is giving 110% for our customers and makes a wonderful impression.

- NEVER sit on a patient's bed.
- Perform only those duties to which you have been assigned, properly trained and supervised.
- When in doubt, ask questions about what to do.
- Try volunteering for more than just your 4 hours per week (or whatever your level of commitment). Try to say "yes" when asked to substitute or work on a sale or are asked to serve on the Board. It's fun. You get to meet more people and will get more out of your volunteer experience.
- Never leave a patient unattended if you are responsible for transporting them to a destination.
- Your responsibility is to get them safely to their destination and hand them off to a designated person. NEVER take a patient to their patient room. ALWAYS go to the nurse's station and let them know you and the patient are there.
- Recognize the *we have a sense of urgency*, and value the time of our patients and visitors. They are not an interruption of our work; they are our reason for being here.
- Treat every person as if he or she is the most important person at Newton Medical Center
- Listen carefully and with an open mind to what people have to say
- Show a sincere interest. Avoid unnecessary interruptions.
- Be receptive to comments, suggestions, questions and complaints.
- Use good manners.
- Rudeness is never tolerated.
- Meet an individual's immediate needs, or gladly take him/her to someone who can. Proudly exceed expectations.
- Always be eager to help patients under any circumstances. Never say: "It's not my job." Or "I don't have time."
- Assists in making sure patients are taken directly to areas you have been assigned to take them to. The patient is your number one priority. Don't stop to chitchat with a coworker or friend. Your mission is the patient!
- Before leaving, ask, "Is there anything else I can do for you?"

### **Responsive to Concerns**

- Inform staff if a patient needs assistance in any way.
  - If the patient has a comment or concern, help them contact the appropriate office. Call the nursing office, hospital operator if unsure about where to refer a patient.
  - Respond quickly; speed of service is the key to satisfaction.
  - If a patient or visitor complains about something, don't argue or offer excuses. Simply say, "I'm sorry you have had difficulty." Then report it to the appropriate person. Comments or complaints regarding direct patient care should be directed to the charge nurse or unit manager. If the comment/complaint needs to be heard immediately by someone in authority, contact the following offices in this order:
    - Unit Manager for the unit that's affected.
    - Director of Acute Care Services
    - House Supervisor, call the operator for assistance.
- Be a team player. If you, the volunteer, have a complaint or problem, report it immediately to the Director of Volunteer Services.

### **Elevator Etiquette**

- Our customers always have the right-of-way while using elevators and navigating hallways. Use this as an opportunity to make a favorable impression.
- Back patients into elevators.

- Do NOT allow patients in beds or stretchers to be surrounded by other visitors or staff – politely ask others to wait for another elevator.

### **Telephone Etiquette**

- Your volunteer assignment is important and valuable to the hospital. Be proud of it! To the caller YOU are the hospital.
- Answers all calls within 3 rings
- Give your department or location
- State your name and that you are a volunteer
- “How may I help you?”
- SMILE! Smiles are recognized in your voice.
- Explain, “I will locate someone who may be able to help you. Can you please hold? Wait for the response, then ... Thank you”.
- Communicate name of the party you are transferring to and his/her extension destination
- Repeat messages back for accuracy
- Deliver messages promptly
- Always end the conversation pleasantly with “goodbye” or “have a nice day”
- Let the caller hang up first.

### **Telephones and Personal Pagers**

Hospital telephone lines are designed for patient care or hospital business use and should be used for personal calls only in an emergency. Pay phones located throughout the hospital are available for personal use. Use of personal cellular telephones is prohibited within the hospital building or work unit as they could interfere with the functions of sensitive medical equipment.

## **Effective Communications for All Age Groups**

- Be patient.
- Take time to listen.
- Show respect with active listening and without passing judgment.
- Convey warmth, understanding and interest.
- Use eye contact.
- Speak clearly and use short sentences
- Be aware of body language.
- Use a friendly tone.
- Treat everyone with respect and dignity.
- Ask questions when you do not understand.
- Repeat what you think you heard.
- Ask for clarification.
- Report concerns of behavior or language that you do not understand or further interpretation.

### **Newton Medical Center defines ages of patients as follows:**

Infants: 0-1 yr

Toddlers: 13 m - 3 yrs

Preschool: 4 - 6 yrs

School-age: 7 - 12 yrs

Adolescent: 13 - 17 yrs,

Young/Middle Adult 18-49 yrs.

Late Adult 50+ yrs.

### **Infants and Small Children**

- Rely on the parent.
- Approach slowly and calmly.
- Initially allow space between yourself and the child.
- Use quiet soothing voice
- Position yourself at the child's eye level.
- Be honest.
- Allow child to hold a familiar object.
- Acknowledge positive behaviors no matter how small.

### **Older Children and Adolescents**

- Respect privacy.
- Speak clearly and ask if he/she understood.

### **Visually Impaired**

- Get person's attention before talking.
- Identify yourself before entering the room.
- Explain what you are doing.
- Ask for feedback to check for understanding.
- Assist with eyeglasses.

### **Hearing Impaired**

- Get person's attention before talking.
- Get close to person and speak clearly. Do not shout.
- Face the person when talking
- Speak to the side where hearing is best.
- Maintain eye contact.
- Ask for feedback to check for understanding.
- Eliminate unnecessary noises.
- Check if the patient wears a hearing aid.
- Use gestures if necessary.
- Avoid looking away while talking.
- If necessary, you may need to write information for the person to read.

## **General Information and Regulations**

### **Attendance**

Reporting on time to your assignment is important. You are part of the hospital team. The staff depends on you. If you are unable to volunteer and it is the practice of the department to have a volunteer on duty at all times, please refer to the list of other volunteers serving in your area to find a replacement. Please contact the department to which you are assigned and the volunteer office to let them know who will be substituting. Whenever possible, find a substitute for yourself. Please ask only those volunteers who have been trained in your area to substitute for you.

### **Benefits**

Active **Senior** volunteers at Newton Medical Center receive the following benefits:

- One complimentary meal in the cafeteria while on duty and while wearing proper identification badge and uniform.
- Free parking in designated areas at Newton Medical Center.

- Annual flu shots at no charge, if available.
- Annual TB screening at no charge.
- Participation in certain events.
- Volunteers can request letters of recommendation after actively serving 12 weeks and 36 hours.

### **Change of Name or Address**

Notify the Volunteer Office immediately whenever your name, address, telephone or emergency information changes. The department endeavors to keep records as current as possible.

### **Solicitation/Distribution**

To avoid disruption in the operation of the hospital or interference with patient care, Newton Medical Center's policy prohibits persons to solicit for any product, service, doctrine or organization. The distribution of literature is prohibited. All fundraising activities are to be coordinated through the Director of Volunteer Services and are to benefit NMC.

### **Drug and Alcohol Use**

Newton Medical Center prohibits the use and/or abuse of drugs and alcohol in the workplace. All volunteers are expected to abide by the terms of this policy as a condition of being able to work within the hospital. Any volunteer who is found to have violated its prohibitions is subject to disciplinary action, including suspension and/or discharge.

### **Employment Opportunities**

Volunteering is not an entry to employment. All employment matters are handled through the Human Resources Department. A hospital employee may apply to serve as a volunteer in an area completely removed from their department and responsibilities of employment. Employees who are retired from this facility may volunteer at Newton Medical Center with consideration for prior employment.

### **Equal Opportunity**

The Volunteer Services Department shall select and place volunteers based on the application process and openings in the volunteer schedule. Newton Medical Center shall provide Equal Employment and Volunteer Opportunity to all people in all aspects of volunteer relations without discrimination due to race, color, religious creed, sex, national origin, ancestry, marital status, age or qualified disability. It is the hospital's policy to maintain a working environment free of sexual harassment and intimidation.

### **Competency Evaluation**

Volunteer Services requires an annual competency evaluation. Volunteers may be asked to complete an evaluation of their placement. Departments with volunteers classified as "Teen" or "Youth Apprentice" will be asked to complete an evaluation of the volunteer at the end of the volunteers' assignment. Departments with volunteers classified as "Adult" or "College" will be asked to complete an evaluation of the volunteer on an "as needed" basis. All evaluations are confidential and are kept in the volunteer's file in the Volunteer Services Office.

### **Food and Beverages**

Food or beverages are never to be consumed in reception, registration, information or public areas of a unit or department.

## **Identification Badge**

All volunteers are required to have an identification badge made. Badges are to be worn visibly on the right collar while on-duty. No person may borrow or loan an identification badge.

The ID badge should be returned to Volunteer Office when you are no longer a volunteer for the hospital.

## **General Guidelines**

- Uniforms should be clean and pressed.
- Soft-soled shoes (no sandals).
- Hair neat in appearance.
- Jewelry and makeup kept to a minimum
- No perfumes, aftershave, or cologne (some patients may be allergic)
- No gum chewing
- No denim, shorts, sandals or slipper-type shoes, sweat pants or exercise clothes, biking apparel, leggings worn with tops shorter than skirt length, printed T-shirts and tank tops, skirts more than 2 1/2 inches above the knee, or Capri style pants.

Some modifications may apply based on specific requirements of the department based on their safety or infection control procedures. This includes scrubs for volunteers assigned to surgery and other departments. Volunteers in this category must adhere to standard dress code when not in their designated area.

## **Smoking**

NMC is a Tobacco Free Facility

-No one is allowed to smoke inside the hospital.

-Never allow smoking in an area where oxygen is used or stored.

-Prohibit smoking wherever flammable or non-flammable gases or flammable liquids are used.

## **Volunteer Placement with Employee Relatives**

The placement of volunteers with immediate relatives within the same department is discouraged and will normally not be permitted. Immediate relatives within the same department will only be allowed when such individuals are scheduled on different shifts from one another and are not involved in the supervision of one another. In no case will an individual supervise an immediate relative. This placement must have final approval of the Director of Volunteers, and the Director of the specific department.

## **Confidentiality/ HIPAA Privacy and Security: Our Values and Ethics at Work**

Confidentiality is an enforced requirement at Newton Medical Center. All information regarding patients, staff, volunteers, physicians and visitors is confidential. Volunteers are required to sign an annual Confidentiality Agreement acknowledging their understanding. A violation of confidential information is a violation of hospital ethics, and a volunteer may be dismissed immediately by the Director of Volunteer Services for such a violation.

### **HIPAA Privacy and Security**

HIPAA (Health Insurance Portability and Accountability Act) is a Federal regulation imposed on health care organizations including hospitals, home health agencies, physician offices, nursing homes, other providers, health plans and clearinghouses.

**HIPAA Privacy Rule:**

- Gives patients a right to access their medical records and restrict (in some ways) who may access their health information.
- Requires organizations to train its workforce and to take measures to safeguard patient information in every form.
- Provides penalties for individuals and organizations who fail to keep patient information confidential. Criminal penalties under HIPAA: maximum of 10 years in jail and a \$250,000 fine for serious offenses. Civil penalties under HIPAA: maximum fine of \$25,000 per violation.

**HIPAA Security Rule:** Pertains to electronic patient information and requires physical, technical and administrative safeguards.

**Protected Health Information (PHI):** PHI is any patient information which identifies a patient directly or indirectly. PHI in any form (written, faxes, electronic, photographs/images, conversations, labels, monitor strips) must be protected.

**HIPAA Privacy Official and HIPAA Security Official:** Manage the privacy and security standards, policies, and procedures, oversee education and training of the workforce, enforce the rules, and investigate potential violations.

- NMC Privacy Officer: Chantal Goulbourne, Health Information Management Director 770-385-4383

**HIPAA Privacy Tips:**

- Do not look at PHI unless you need to know the information to do your job.
- Use the minimum amount of PHI necessary to perform your job duties.
- Do not use your work privileges to access, view or print your own PHI or the PHI of your spouse, children, other family, friends or coworkers.
- Be conscious of who else may be listening when speaking with patients or family members. Lower your voice when appropriate or move to a more private location.
- Dispose of PHI by shredding it or placing it in a locked confidential storage container. Do not place PHI in the regular trash.
- Before giving out paperwork, make sure each page is for the correct patient.
- Patients (including you) should go to the Health Information Management (HIM) department to complete the required paperwork to obtain copies of their PHI. HIM associates will verify identity and legal rights to the information and release it as appropriate.
- Do not discuss what you overhear about a patient or share information gained in the course of work with your family, coworkers, or friends.
- Do not discuss PHI with others who do not need the information to perform job duties such as those you encounter at Walmart, church, or grocery stores.
- Do not discuss patients in public areas such as elevators, hallways, or cafeterias, where individuals outside the healthcare team may hear you.
- Do not leave an individual without identification in a confidential or secure area. Offer assistance and ask for identification if necessary.
- Do not leave patient records lying around where visitors or other unauthorized persons may view them. Keep them secure.
- Keep PHI in folders, turn it face down or use a cover page.

- Lock the office door if you leave it unattended.
- Remove PHI from printers, fax and copy machines in a timely manner.
- Do not post or write down your passwords. Never share your password.
- Make your password (if issued by the IT Department) something you can remember but difficult for others to guess. Do not include personal information others may know about you in your password (name, date of birth, spouse or children's names, pet names).
- Log out of patient information systems when you leave your work area.
- Turn patient information monitor screens away from public view.
- If you need to email PHI to perform job duties, you must encrypt 100% of your messages containing PHI sent outside of the NMC network. You can encrypt any email message from your NMC email account by asking for the process.
- Double check the "To" line before sending an email to verify correct recipient.
- Verify you have entered the correct fax number before faxing PHI.
- Use a fax cover sheet with appropriate confidentiality language.
- Be mindful of your location when discussing PHI on a cell phone.
- Avoid using speakerphones when discussing PHI.
- Be careful about how much PHI you leave on home answering machines.
- Keep laptops and other mobile devices secure at all times.
- Always wear your identification/name badge where it is visible to others.
- PHI on labels must be removed and placed in a locked confidential storage bin, or marked through with a black permanent marker or placed in hazardous waste container if appropriate.
- If you are not involved in the care of the patient or the welfare of the family, remove yourself from the area of confidential patient discussions.
- After asking their permission, put phone calls on hold to prevent overhearing background conversations about other patients.
- Knock and pause before entering the patient's room.
- Ask visitors to leave the room if the patient would like them to do so before discussing PHI.
- Direct media inquiries to Public Relations or Administration.
- Report potential violations to your Volunteer Director or Privacy Officer.
- If a government agent needs computer access to view PHI, you must introduce him to your supervisor who will verify his ID.
- Posting advertisements on bulletin boards for personal businesses, like selling candles or cosmetics, etc. is not permitted because the policies of NMC prohibit these activities.

**TPO (Treatment, Payment and Operations):** HIPAA permits employees to share information for treatment, payment or operations (coding, billing, quality review, risk, etc.) without authorization from the patient when there is a need.

**Authorization:** NMC must obtain a signed and dated authorization form from the patient before using or sharing PHI for reasons other than TPO unless the use or disclosure is mandated by law. **Only employees have authorization to share PHI.**

**Marketing:** In most cases, we may not use or disclose PHI to market or film or photograph a patient for marketing purposes without obtaining a valid signed and dated authorization form from the patient. If an outside entity is involved in filming, photographing or interviewing a patient, Public Relations must be involved.

Certain forms must be signed by the patient and by those filming, photographing, or interviewing the patient.

**Legal Personal Representatives:** Persons having the authority (under federal and state laws) such as Durable Power of Attorney with a healthcare designation or Health Care Surrogate or Court Order to act on behalf of a patient in making healthcare decisions have the same rights to access the patient's information unless the involvement of the personal representative would put the patient at risk. Only a designated employee has the right to make these determinations.

**Legal Personal Representatives for Minors:** Parents, guardians, and others who have authority (under federal and state laws) to act on behalf of a minor in making healthcare decisions also may have access to the minor's health information as his/her personal representative unless the minor is emancipated.

**Discussing PHI with a Patient's Friends and Family:** HIPAA permits designated hospital employees to share *information that is directly relevant to the level of involvement* of a family member, friend, or other person identified by a patient, in the patient's care or payment for health care.

**Facility Directory:** A patient has the right to *opt out* of the facility directory.

**Access is Monitored:** Electronic access to PHI is monitored. Inappropriate access or sharing of PHI results in disciplinary action up to and including termination.

**Complaints:** If a patient or personal representative wishes to file a HIPAA complaint, notify your Supervisor and/or the Hospital Privacy Officer.

## **General Safety Information**

### **Body Mechanics**

#### **Protecting YOU from Work Injuries**

Good body mechanics is good back protection for YOU.

- Adjust the height of your chair to achieve proper posture.
- Your ear, shoulder, and hip should be in a straight line.
- Sit with your head and neck in an upright position, even when on the telephone.
- After testing the weight of an article ask for help if it is too heavy to lift.
- Lift with your legs, not your back, keeping the item close to your body. Keep your body straight with the item that you are lifting.
- Do not twist or turn your body while lifting.
- Think about using carts. Do not put unnecessary strain on yourself. Plan ahead for the assigned job.
- Using a lumbar roll (a rolled towel) in the small of the back when sitting will provide additional support and less injury to the back.
- Back injuries are usually the result of improper body mechanics over a period of time.

### **Accidents including Slips, Trips, Falls**

There is no such thing as an unimportant accident. Any accident is a danger signal that an unsafe condition or working habit exists. Report **any** accident to the department manager immediately and complete the **generic incident report form**. Also notify the Volunteer Office. Your prompt action may help save yourself or someone else from painful or serious injury. You should do this **EVEN** if you believe no real injury has occurred!

### **Housekeeping practices:**

Wet floors may occur in the work place unexpectedly because of plugged drains, spills and leaks. Wet floors are also a natural result of certain housekeeping, food service, and maintenance activities. STOP and...

- Notify housekeeping for assistance.
- Mark the area with a wet floor sign.

### **Watch your step:**

● Problem areas to be especially careful around are entranceway carpets and tile, liquid soap on restroom floors, painted/waxed floors, metal doorsills and steps, plastic carpet protectors.

### **Work surfaces and walkways and stairs:**

- Keep floor area free from clutter.
- Wear appropriate shoes for you job.
- Pick up pencils, paperclips and other objects that might cause a slip.
- Beware of telephone and electrical cords lying across floors.
- Use handrails on stairways and take one step at a time.
- Avoid obstructing your vision with large loads.
- Don't hurry, especially around corners.
- Report out-of-order lights promptly.

### **Wheel Chairs - W/C - Transporting Patients**

Always use good body mechanics when using a wheelchair. Good body mechanics include: keeping your back straight; keeping your body close to the wheelchair when moving it; bending at the knees to lock/unlock the brakes; and bending at the knees to adjust footrests.

### **Transferring patients into and out of wheelchairs**

- Be sure to check with the nurses' station prior to transporting a patient. **Volunteers do not lift patients in and out of wheelchairs. They may assist staff.**
- Introduce yourself to the patient and explain who you are and where you are going.
- Verify that you are transporting the right patient by asking for his/her name and destination.
- On a flat surface, push wheelchair forward at a smooth walking speed.
- If you have to push the wheel chair on an incline, **BACK** the wheelchair down inclines to prevent runaway wheelchairs!
- Gently and slowly **BACK** wheelchairs over bumps or curbs and onto elevators.
- Always walk at a normal to slow speed.
- Watch where you are going!
- Lock the brakes on wheels of the wheelchair before the patient transfers in or out! **Most important detail.**
- Do not leave a patient unattended in a wheel chair. Be sure to hand them off to the appropriate employee.

### **Safe Medical Devices Act**

If you realize a piece of equipment is not working properly, contact a supervisor who will remove the equipment, tag it "Do Not Use" and take care of the patient immediately. Any item used for patient care is considered equipment including, but not limited to, wheelchairs, outlets, call buttons, medical devices and machinery.

## **Utilities Management**

### **Electrical Power**

If there is an electrical power failure, the emergency generator or its backup should kick in. Only the RED OUTLETS will be operational. **Employees** will plug all life support equipment into the RED outlets should there be a power failure.

### **Elevators Out of Service**

In the event that elevators are out of service, associates will:

- Use stairwells.
- Use runners for supplies.

### **Radiation Safety**

Radiation, including X-rays and radiation therapy, can provide many benefits for our patients, but must be managed with caution. Do not enter any area where the radiation symbol is displayed.

### **Sentinel Events**

A Sentinel Event is an unplanned event that has resulted in serious physical or psychological injury or risk thereof, such as an unexpected death or major permanent loss of function unrelated to the patient's illness.

#### **Some examples of sentinel events:**

- Child abduction or discharge to wrong family
- Rape of a patient
- Suicide of a patient in a 24-hour care facility
- Wrong blood or blood product transfusion
- Surgery on a wrong body part or wrong patient

**If you feel that a Sentinel Event has occurred or a “near miss” has occurred, please notify Administration, the Risk Manager, a supervisor, or a House Supervisor IMMEDIATELY. Dial “0” for number information.**

### **Infection Control & Risk Management**

Infection Control provides guidelines and standards for recognition, prevention and control of communicable infections of patients, personnel and visitors within the hospital community. Volunteers and Employees are subject to the policies and guidelines of the Infections Control Office.

Infection Control practices includes:

- Hand Hygiene
- Standard precautions (gloves for volunteers. No other protective measures are necessary as volunteers do not enter isolation areas)
- Transmission-based precautions
- After transporting a patient in a wheelchair, volunteers are asked to put on gloves and wipe down the back arms and hand rest with the disinfectant wipes before transporting another patient.

### **Hand Hygiene**

Hand hygiene is the single most important precaution for preventing the spread of infection.

To protect yourself and patients perform hand hygiene:

- Before and after patient contact

- Before eating, drinking, or feeding patients
- Before invasive procedures
- After using the restroom
- After contact with non-intact skin, body fluids, secretions or excretions
- After removing gloves

Wash hands with soap and water for at least 15 seconds when hands are visibly soiled or contaminated with materials.

If your hands are not visibly soiled, use an alcohol-based waterless hand cleanser for routine cleaning of your hands. Let patients and families see you perform hand hygiene.

### **Isolation Rooms**

Volunteers do not enter Isolation Rooms. If there is a question about the status of the room, ask at the nurse's desk before entering.

### **Standard Precautions**

Standard Precautions are mandatory precautions for ALL PATIENTS, employees and volunteers to avoid becoming soiled by blood or body fluids from the patient.

ALL PATIENTS carry the risk of being infected with unknown germs. Various protective items are available to give protection and can be found in every area: Gloves, Gowns, Face Masks, Eye Goggles. (Only masks are needed for volunteers who do not enter isolation areas.)

**Use Standard precautions with each and every patient to provide a safe environment for the patients, associates, visitors, healthcare workers, medical staff, volunteers and other customers.**

- Hand Hygiene
- Personal protective Equipment (PPE) - PPE provides a barrier to reduce the risk of infection in healthcare workers (HCW) and to minimize their exposure to infectious agents or blood/body fluids that may contain infectious agents.
- Environmental Controls – All patient care areas, reusable equipment and furnishings are routinely cleaned and disinfected using EPA registered products.
- Infectious Waste Management is the proper disposal of:
  - Linens—will be placed in a covered linen cart
  - Sharps— Safety products will be utilized where possible. Used needles will not be bent, broken, manipulated, or recapped. All contaminated needles, syringes, scalpel blades and other sharp items will be placed in designated puncture resistant containers.
  - Medical Waste—should be handled and transported in a manner to prevent exposure. Medical waste other than sharps will be placed in red bags or medical waste barrels.

In addition to Standard Precautions, do not enter a patient's room if an isolation sign is on the door. Check with a staff person!

- Cover all open cuts
- Use good work practices
- Do not eat, drink, smoke, apply lipstick or lip balm or handle contact lenses in areas where blood, body fluids, secretions or excretions are present.
- Do not place food items in areas where blood, body fluids or other potentially infectious materials are present.
- If you have any accidental exposure to blood, body fluids, secretions or excretions, including being stuck with a sharp, report it immediately and seek medical treatment.

## Medical Gas Safety

A volunteer may be asked to transport a patient who is using an oxygen tank.

Volunteers **SHOULD NOT** handle oxygen tank cylinders! If the patient needs assistance with the oxygen tank cylinder, please ask an employee for assistance.

REMEMBER: An oxygen tank cylinder can become a deadly missile if compressed gas is not controlled.

**USE UNIVERSAL PRECAUTIONS.** Anyone entering the Hospital may have a contagious disease such as hepatitis B or AIDS, perhaps not even knowing about it. For that reason, we observe the same precautions for all patients:

- (a) If you pick up any soiled item such as tissue or paper, wash your hands.
- (b) When asked to transport specimens to the lab, the specimen will be bagged by unit personnel and you should wear gloves. Wash your hands after delivery.
- (c) Never push trash down in container with hand or foot. Sharp objects could cause injury or infection.
- (d) Respect isolation signs. Ask nurses to make your deliveries.

**Volunteers** should not report to work with a fever, nausea, vomiting or other signs of illness. A report of absence should be made to your assigned department as soon as possible.

## Emergency Plans

### Tornado and Dangerous Weather!

If a tornado is in the area, the operator will announce “Tornado Watch/Warning” over the intercom system three times.

● **A Tornado Watch** is paged when conditions are favorable for a tornado to develop in your hospital’s area.

● **A Tornado Warning** is paged when an actual tornado has been seen in your hospital’s area.

● Stay as far away from windows as possible and move to a central hallway.

● You may be asked to assist with moving patients to a central hallway. If a patient cannot be moved, close their drapes or blinds, cover the patient with blankets, close all doors completely, and stay away from windows. *If you can see outside, you are not safe.*

● When a “Tornado Warning” is announced, all staff and volunteers will remain on the floor or the unit.

● No one should go outside of the building or make personal phone calls during a “Tornado Warning”.

● Upon termination of the Tornado Warning the operator will announce “Tornado Warning” All Clear” five times.

## SAFETY CODES

You may hear safety codes announced on the hospital intercom system. You should be familiar with the meaning of each and know what to do.

## CODE BLACK

The Code Black is activated upon notification of a bomb on site, usually by a call from outside the hospital. Recent FBI reports have indicated that U.S. hospitals are a specific terrorist target for explosives.

If you are the person answering the phone and receiving the bomb threat:

- Remain calm – keep your voice under control.
- Do not transfer the call to anyone.
- Ask questions and try to get the following information:
  - Who are you?
  - What does the bomb look like?
  - What time will it go off?
  - What type of explosive is it?
  - Where is it?
  - Why are you doing this?
- Write down as much information as you can regarding what the caller is saying
- Exact time of call.
- Sex of caller.
- Possible race of caller.
- Background noises (overhead paging systems, sirens, machines, etc.).
- Exact words of the caller.
- Probable age of the caller.
- Whether caller seemed intoxicated.
- Peculiar or identifiable accent.
- Stay on the line until the caller hangs up – then notify the switchboard Operator by dialing “0”.
- The House Supervisor
- Security.
- The House Administrator will notify the Fire Department and the Police Department.

## CODE RED

If there is a fire in the building, the operator will announce “Code Red” over the intercom system three times.

In the event of a fire, remember R-A-C-E:

- **Rescue** people who are in immediate danger by moving them away from area.
- **Alarm.** Pull the alarm and call the operator at the phone number located on your “Hospital Emergency & Codes” card behind your badge. Tell the operator "Code Red" and location.
- **Contain** the fire. Close all doors. Reassure patients who stay in their rooms.
- **Extinguish/Evacuate.** Fight the fire only if it is small and contained, like a wastebasket fire. Use the right fire extinguisher to put out the fire. All hospital fire extinguishers are marked “ABC”, which can be used on any type of fire. Be sure that you have a clear exit path for escape. Evacuate as instructed.

**The automatic fire doors will close when the fire alarm is pulled. The metal FIRE ZONE doors contain both smoke and fire protection, a longer length of time to save lives. In addition to the fire doors, all other doors to offices and patient rooms are to be closed for additional protection and fire/smoke containment. Never block the fire doors or prop open.**

To use a fire extinguisher, think P-A-S-S

- **Pull** the pin. Twist the pin to break the plastic tie.
- **Aim** at the base of the fire.
- **Squeeze** the trigger.
- **Sweep** from side to side continuing to aim at the base of fire.

### **CODE BLUE                      Patient Arrest/Mock Code**

If you are in the immediate area of a Code Blue:

- Assist with clearing the hall of obstacles.
- Stay out of the way of others.
- Get patients and visitors out of the way.
- Do not enter the room unless asked by a nurse or doctor.
- Remain calm.

### **Life Threatening Situation**

If you discover someone experiencing a life threatening medical emergency, call 7000 and announce code Blue or call the **emergency extension 4444** and give your name, location and the situation **and do not attempt to move the person**. Complete the incident report form found in all patient care departments.

### **Non-Life Threatening Situation**

If you discover someone experiencing a non-life threatening emergency (falls, vomiting, broken bones, etc.):

- If you are in a patient care area, locate a nurse immediately to assess the situation. **Do not attempt to move the person.**
- If there is no medical staff in the area (i.e. bathroom, hallway, etc.) then look for a hospital wrist band to determine if the person is a patient. If yes, contact the appropriate patient care area, and they will give you further instruction. If the person is not a patient, provide comfort and have someone contact the ER for assistance.
- The basic rule of thumb is to get the quickest assistance available without causing unnecessary alarm. If in doubt whether an injury is life threatening, assume it is. Dial 4444.
- Remember that billing for a patient or visitor who might need emergency treatment is a matter for the Admissions Department to determine.
- Complete the appropriate incident report form in all patient care areas and give to your supervisor.

### **CODE PINK                      Infant/Child Abduction**

Should you hear Code 10-10, move to the closest exit and look for people who might be attempting to abduct a baby. Be prepared to call 4444 if someone suspicious is sighted.

### **CODE WHITE                      Internal Disaster**

An internal disaster would be called if an event happened in the hospital to cause a disruption of service (i.e. a chemical spill, water outage, etc.). Follow the instructions of your supervisor.

### **CODE GREEN                      External Disaster**

An external disaster is most often for community disasters resulting from weather conditions, hazardous chemical spills, multi-victim accidents, etc. A destructive tornado is an example of a Code Green.

**CODE SEAL**                      **Seal the building off**

**DR. ARMSTRONG**              **Security**  
If there is a need for security personnel in your area, you dial 7000 and announce “Dr. Armstrong” to your location three times

**DR. MUNICH**                      **Hostage Situation**

**CODE ORANGE**

Code Orange is the plan for the safe treatment of patients who have been exposed to a hazardous substance such as a biological agent or other disease-causing substance in the environment, which poses a threat to health or life. The hospital has a special team, which has been trained to deal with hazardous spills--the Haz Mat Hospital Team. The procedures for a Code Orange are as follows:

- The decontamination site is outdoors, outside of the Emergency Department.
- The operator will announce “Code Orange” over the intercom system and alert the appropriate hospital personnel.
- When the Code Orange is completed, the operator will announce: “Code Orange – All Clear” over the intercom system.

**Disaster Plan**

- A “disaster” (Internal or External) is called when the number of injured people is larger than the hospital’s ability to effectively provide care. Additional staff and resources will be needed.

## INDEX

- Accidents, 17
- Attendance, 12
- Awards, 6
- Auxiliary General Meetings, 4
- Auxiliary History, 3
- Auxiliary Membership, 3
- Auxiliary Mission, 3
- Auxiliary Newsletter, 4
- Background Checks, 5
- Benefits, 12
- Body Mechanics, 17
- Change of Address, 13
- Codes, 21
- College Volunteers, 4
- Communications -All Age Groups, 11
- Competency Evaluations, 13
- Confidentiality, 14
- Conversations with Employees, 7
- Conversations with Patients, 7
- Conversations with Visitors, 7
- Court Ordered Community Service, 6
- Courtesies, 9
- Customer Service, 9
- Departmental Transfers, 6
- Diversity, 8
- Dress Code, 5
- Drug and Alcohol Use, 13
- Elevators Etiquette, 10
- Emergency Plans, 22, 23
- Employment Opportunities, 13
- Equal Opportunity, 13
- Food and Beverages, 13
- General Information and Regulations, 12
- General Safety Information, 17
- Hand Hygiene, 19
- HIPAA Privacy and Security, 14,15
- History of Newton Medical Center, 1
- Identification Badge, 14
- Incident Report Form,17
- Infection Control & Risk Management, 19
- NMC Board of Directors, 2
- NMC Mission, 1
- NMC Values and Vision, 2
- Patient Rights, 8
- Personal Appearance, 5
- Personal Information Changes, 13
- PHI—Protected Health Information, 15
- Preventing Work Injuries, 20
- Recording Service Hours, 6
- Resignation, 6
- Response to Concerns, 10
- Safety Codes, 21
- Schedule, 6
- Senior Volunteers, 4
- Sentinel Events, 19
- Smoking, 14
- Solicitation/Distribution, 13
- Telephones and Pagers, 11
- Teen Volunteers, 4
- Training, 6
- Tuberculosis Screenings &  
    Background Checks, 5
- Uniform General Guidelines, 14
- Universal Precautions, 21
- Visiting/Phone Calls, 7
- Volunteer Bill of Rights, 7
- Volunteer Code of Conduct, 7
- Volunteer Groups, 4
- Volunteer Placement and Relatives, 14
- Volunteer Services Department, 3
- Wheelchair Safety, 18
- Youth Apprentice Program, 4