

# **VOLUNTEER HANDBOOK**



## **GRACE HEALTH CAMPUS VOLUNTEER SERVICES**

October 2018

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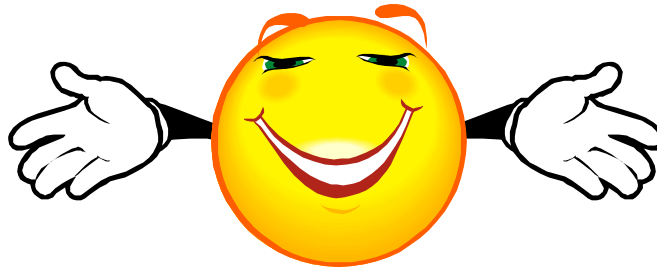
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## **WELCOME!**

We are thrilled to welcome you as a volunteer at the Grace Hospital.

Each and every volunteer plays a vital role in our shared efforts to provide the very best care possible. Volunteers make a difference and are an invaluable part of the Grace Hospital team. Volunteers have been the cornerstone of Grace Hospital since its inception over 100 years ago. We appreciate the commitment you have made to Grace Hospital and we hope your experience will be positive, rewarding and enjoyable.

The Volunteer/Organization agreement is intended to indicate the seriousness with which we treat our volunteers. The intent of the agreement is to assure you both of our appreciation for your services and to indicate our commitment to do the very best we can to make your volunteer experience a productive and rewarding one.



## **VOLUNTEER RESOURCES: STATEMENT OF PURPOSE**

Volunteer Resources is responsible for recruiting, interviewing, orientating, training, and supervising volunteers at the Grace. Please see our contact information below:

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& Ancillary Operations  
P: 204-837-0369  
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## **THE PHILOSOPHY**

The philosophy of the Volunteer Program closely follows that of the hospital. Grace Hospital is “committed to a high standard of health care”, and the Volunteer Resources Department works to enhance that commitment.

The department encourages the teamwork of staff and volunteers in order to offer our patients the best care possible. Volunteers contribute their unique talents, skills, and knowledge to our facility and our community to provide personalized attention to our patients, to enable employees to concentrate on the work for which they are trained, and to foster good relations between the hospital and the public which it serves. The volunteer is aware that the way in which he or she treats a patient or visitor, anywhere in the hospital, becomes a part of the overall perception of the care and service offered by the facility.

Volunteers are placed in a position of trust and responsibility with respect to patient and hospital information. The right to privacy is the legitimate expectation of every patient, and the volunteer appreciates that right. Thus, the maintenance of all information, given or overheard, is recognized as a condition of hospital volunteering.

## **VOLUNTEERING IN A HOSPITAL SETTING**

Many individuals of varying ages are in the hospital for a variety of reasons and we are here to assist them; whether it is transporting patients from patient registration or keeping patients company before going into a surgery.

These are some points we have to keep in mind:

- The patient could be stressed or anxious due to health reasons.
- Experiencing separation from loved ones.
- The patient is unsure of their health condition, etc...

When working in this environment it is very important to be a supportive listener and follow your roles and responsibilities as a volunteer.

## **RESPONSIBILITIES**

### ***PLACEMENT SUPERVISORS***

Your placement supervisor is the staff person who provides you with guidance and support while you are volunteering at Grace Hospital. They may be the Manager of Volunteer Resources, Coordinator, or the department staff in which you are volunteering. They are also responsible for:

- Interviewing and screening prospective volunteers for the placement(s) they supervise;
- Providing you with training, guidance, and supervision in your specific placement;
- Ensuring that you have a position description for your placement;
- Explaining the purpose of your volunteer work and how it fits into the program or service area;
- Showing you the workspace and where to find things;
- Orientating and training you to the specific duties of your placement;
- Introducing you to staff, fellow volunteers and persons receiving health services as appropriate;
- Answering any questions you might have about your placement responsibilities;
- Scheduling your shifts. **It is important to notify the placement supervisor of your schedule changes.**

### ***VOLUNTEERS***

In addition to performing the duties corresponding to your volunteer placement, you also have the following responsibilities:

- Be regular in your attendance and be punctual.
- Be a good-will ambassador for Grace Hospital. Present a positive image of the facility and Volunteer Resources at all times by being courteous, co- operative, sensitive, pleasant, and caring.
- Abide by the Personal Health Information Act (PHIA) and keep all patient information private and confidential at all times.
- Be well groomed at all times and comply with the dress code and ensure to always wear your uniform and id badge.
- Accept the guidance and direction from your supervisor and seek assistance from staff in any situation you are unsure of.
- If you are asked to do anything that is not included in your duties please inform your supervisor in Volunteer Resources; although you may like to assist, their request may not be a volunteer responsibility.
- By thoroughly reading the Volunteer Handbook, become acquainted with, and abide by the policies and procedures of Grace Hospital.

## **SCHEDULE CHANGES**

If you are unable to fulfil your scheduled shift, please notify the Volunteer Resource Department at least 24 hours in advance so that a replacement volunteer can be found.

If you are calling after these hours please leave a message including your full name, contact information and department in which you volunteer.

During **statutory holidays**, such as Christmas and Canada Day, Volunteer Resources is closed.

## **DRESS CODE/PERSONAL HYGIENE**

All volunteers will be provided with and must wear a navy blue uniform and a name tag in order to be identified as a volunteer within Grace Hospital.

Note: Please ensure that your uniform is kept clean and laundered at all times.

Clothing under the uniform must be neat, clean and presentable. Casual attire including slacks, cords, or jeans must be clean and neat in appearance. Walking shorts are acceptable during the summer. Blouses, shirts and sweaters should be appropriate for a work setting. Revealing clothing such as halter/crop tops, short shorts/skirts, jeans with holes and rips and spandex leggings, or clothing with inappropriate slogans are not allowed.

Safe, comfortable and clean shoes are recommended (i.e. runners). Sandals are not allowed as they are unsafe when operating a wheelchair or when handling meal trays with hot food items. Any volunteer assisting on the units, in a food area or patient care area must wear closed toed shoes.

Long hair must be tied back when delivering meal trays and/or preparing nourishments. Moustaches, beards and sideburns should be neat and well-trimmed.

Wearing heavy jewellery which can be lost or cause injury to patients or others is discouraged.

Hands must be clean and washed frequently and fingernails must be neat and clean

Please refrain from wearing perfume, cologne, aftershave as Grace Hospital is designated a "scent free environment".

## **LOCKERS**

Lockers are provided to volunteers on a daily basis. We recommend that all valuables be left at home as the hospital is not responsible for their safekeeping.

1. Bring a lock from home
2. Pick an empty locker to use for the day.
3. Lock all belongings in locker. Keep your key with you until the end of your shift.
4. Empty your belongings out of the locker for the next volunteer to use.

## **SIGN-IN PROCEDURE**

Volunteer Resources uses a computerized database to keep track of all volunteers' information and total hours completed by each individual.

Each volunteer is required to sign in at the beginning of their shift and to sign-out upon leaving using the computerized touch screen located by the front door in the Volunteer Resources Department. Volunteers assisting in Hospice are able to sign in and out of a binder and these sheets will be totalled monthly.

Any volunteers who are receiving credit for their volunteering are required to keep track of their hours.

## **BREAKS AND MEALS**

Volunteers will be entitled to a \$7.00 meal allowance if they have completed at least four (4) hours of volunteering. Youth Volunteers are entitled to a \$4.00 snack voucher when volunteering on afternoon shifts. Volunteers are responsible for picking up a meal voucher from the Volunteer Department and they must present a voucher to the cashier in the cafeteria in order to have their meal covered. If you go over the \$7.00 allowance you must pay the difference.

Volunteers are entitled to a break from their volunteer duties but it is recommended that you inform your supervisor or other volunteers that you are working with before you do so.

## **PARKING**

All volunteers who need will receive a parking pass to park in the front (south) lot. This pass is to be used only when volunteering.

## **BUS ROUTES**

***Transit Bus Information*** – The city bus stops on Pearl McGonigal Way, right in front of Grace Hospital. Please consult the Winnipeg Transit web site ([www.winnipegtransit.com](http://www.winnipegtransit.com)) or Telebus (287-7433) for detailed schedule information.



## **WRHA STAR DISCOUNT PROGRAM**

Staff and volunteers are entitled to discounts at many companies in Winnipeg. In order to get a discount you must present your WRHA ID badge to the company.

For a complete listing of companies please visit <http://www.wrha.mb.ca/professionals/star/discounts.php> or see the Bulletin Board in Volunteer Resources for a listing.

## **RECOGNITION AND AWARDS**

There are recognition and appreciation events that take place throughout the year to acknowledge the hard work and commitment that volunteers have donated.

The main recognition event is held in the spring and at this time recognition pins are awarded to volunteers who have met specific criteria:

### Youth Criteria:

25 Hours	Letter of Recommendation
50 Hours	Certificate
100 Hours	Certificate
250 Hours	Certificate
And So on...	

### Adult Criteria:

3 Years	3 Year Pin
5 Years	5 Year Pin
10 Years	10 Year Pin
15 Years	15 Year Pin

## ***OUTSTANDING VOLUNTEER AWARD***

- Every year this award is presented to a volunteer.
- Nominations can be submitted by anyone in the hospital.
- A review committee will choose the award recipient.
- Award presented at yearly recognition event.

## **POLICIES AND PROCEDURES**

Throughout the hospital you will see very important signs that read: Respect and Personal Safety... you expect it and so do we. This facility does not tolerate aggressive behaviours, verbal abuse or harassment towards staff, patients/clients/residents, visitors or volunteers.

Inappropriate actions may result in refusal of service, being asked to leave or contacting local authorities.

### ***PERFORMANCE AND CONDUCT***

Volunteers play important and responsible roles at Grace Hospital. When a volunteer is unable to fulfill their role or violates Grace Hospital policies or procedures, Volunteer Resources staff are authorized to initiate corrective action. The degree of action will depend upon the gravity of the concern, the implications for the patient's well-being and security of property, and the number of previous incidents. Unless the gravity of the concern dictates otherwise, a volunteer will receive at least three oral/written warnings before action is taken to terminate the volunteer's placement.


Volunteer Resources Staff may terminate volunteers for lack of attendance. All other terminations of a volunteer's placement must have the prior approval of the Manager of Volunteer Resources.

All corrective measures, including verbal warnings, will be documented in the volunteer's file. This may include verbal and written warnings and if necessary, termination of the volunteer.

# ***PERSONAL HEALTH INFORMATION ACT (PHIA – CONFIDENTIALITY)***

**Personal Health Information Act  
(PHIA)**

**For Volunteers within the Winnipeg  
Health Region**

 Winnipeg Regional Health Authority  
Office régional de la santé de Winnipeg  
Caring for Health / À l'écoute de notre santé

**dignity care respect**

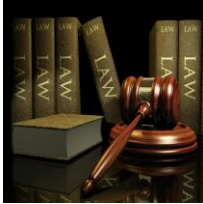
**WHAT IS PHIA?**


**Manitoba Law**

Provides individuals with the right to access their personal health information, get a copy and request a correction

Protects individual's privacy rights

Establishes rules related to how personal health information can be collected, used, disclosed, protected and destroyed



 Winnipeg Regional Health Authority  
Office régional de la santé de Winnipeg  
Caring for Health / À l'écoute de notre santé

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## DEFINITIONS

### Personal Health Information is...

#### THE ACT:

Recorded information about an **identifiable** individual that related to:

- Name
- Health or health care history
- Provision of health care
- Payment for health care
- PHIN or other identifying number/symbol
- Any other identifying information about the individual

**\*PHIA requires that we keep all personal health information-private-safe and secure.**



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## POLICY

### Confidentiality of Personal Health Information



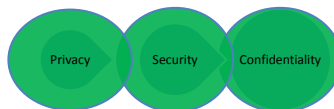
1. All employees/agents are responsible to protect personal health information during its collection, use, storage and destruction that is obtained, handled, learned, heard or viewed in the course of their work.
2. Accessing, using and disclosing health information is acceptable only when required to do your job based on minimum amount need to know.
3. Discussions about identifiable individuals should not take place in public places or in the presence of people who do not need to know the information.
4. This is a [WRHA Policy](#).



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## YOUR RESPONSIBILITIES

As a healthcare volunteer, it is your **responsibility** to hold all personal health information in the highest confidence.



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## MINIMUM AMOUNT NEED TO KNOW

- Access only the information you need to do your job
- If you are found “snooping” information of people you are curious about, it is a **BREACH** and will result in disciplinary action.

## COLLECTION

- Individuals must be **Notified** of the **Purpose** for collection
- **Minimum Amount Need to Know** is key
- Collected from individual the information is about with limited expectations

## Disclosure of Personal Health Information

Health information can be disclosed:

- **Without consent** where permitted by the Act, such as
  - through another legislation i.e. Child Protection Act, Mental Health Act or Vulnerable Persons Act
- or
- **With consent** from the individual, where the Act does not permit the disclosure

In both situations, disclosure must be:

- On an need to know basis to do one's job; and
- Not take place in public places (e.g. waiting room, parking lot, etc.)

## SAFEGUARDS

<p><b>Administrative include:</b></p> <ul style="list-style-type: none"> <li>▪ Complying with WHRA Policies and procedures</li> <li>▪ Accessing only the information needed to do your job, and</li> <li>▪ Signing the WRHA Personal Health Information Pledge of Confidentiality</li> </ul>	<p><b>Technical include:</b></p> <ul style="list-style-type: none"> <li>▪ Passwords and Log-offs</li> <li>▪ Email</li> <li>▪ Social Media</li> <li>▪ Portable Electronic Devices</li> </ul>	<p><b>Physical include:</b></p> <ul style="list-style-type: none"> <li>▪ Confidential waste</li> <li>▪ Protection</li> <li>▪ Information</li> <li>▪ Physical Locks</li> </ul>
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## SECURITY OF PERSONAL HEALTH INFORMATION

- Personal health information should not be left in unsecured areas
- Personal health information must be transported in a secure manner
- Disposal of materials (paper, electronic, graphic) containing personal health information must be by an approved method

❖ You need to be aware of where confidential waste is to be placed



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## BREACH OF CONFIDENTIALITY

A **Breach of Confidentiality** is when **you...**

- Access or request personal health information you DON'T NEED to do your volunteer role
- Share personal health information with another person within the WRHA who DOESN'T NEED it to do their job
- Share information with someone outside the WRHA who has NO NEED to know the information
- Collect more Personal Health Information than you need to do your job
- Do not appropriately safeguard Person Health Information



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## BREACH OF CONFIDENTIALITY

### What happens if a breach is confirmed?

A confirmed breach may result in a disciplinary action including:

- a verbal or written warning
- Suspension
- Termination of employment, contract, association or appointment with the WRHA
- A report to your professional regulatory body

❖ **Offenses under PHIA may be punishable by law.**



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## BREACHES

### Who is responsible for reporting a breach?

**All WRHA employees, volunteers, physicians and others** who are associated with the WRHA are required to report any breach they become aware of

You must immediately notify your Supervisor, Manager or the Site Privacy Officer of the breach



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## PLEDGE OF CONFIDENTIALITY

The Pledge is a condition of employment, contract, association, or appointment with the WRHA and is required from anyone Associated with the WRHA:

- All employees
- Physicians
- Researchers
- Agents and employees from other health organizations
- Board Members
- Volunteers
- Contractors
- Educators and Students
- Accreditation Team



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**WHAT DO YOU THINK**

**WHAT IS PHIA?**

Name 4 examples

**WHAT DO YOU THINK**

A patient in the hospital has a family member visiting them. The family member immediately begins to ask you questions about the care the patient is receiving and how their health situation is doing?

**Can you tell the family member anything?**



# ***ACCESSIBILITY FOR MANITOBAS: CUSTOMER SERVICE TRAINING***

## **Introduction**

The Accessibility for Manitobans Act (AMA) provides legislated standards to make Manitoba as accessible as possible. The AMA consists of 5 different standards that are to be implemented by 2023. The 5 standards are: Customer Service, Employment, Information and Technology, Transportation and Built Environment. Customer Service is the first legislated standard. It requires training on providing accessible customer service, which is the focus of this course.

This standard requires all organizations in Manitoba to establish and implement measure, policies and practices that:

- Identify and remove barriers to accessible customer service in relation to the services it provides.
- Seek to remove existing barriers so that persons with disabilities can reasonably obtain, use, or benefit from the services provided by the organization, and
- If an existing barrier cannot be removed, seek to ensure that persons with disabilities are provided access to the services by alternate means.

The AMA builds on the Manitoba Human Rights Code- the provincial human rights law that protects individuals and groups in Manitoba from discrimination. It is administered by the Manitoba Human Rights Commission, and sets out a process for filing a human rights complaint.

Now that the AMA has been introduced, the remainder of the training is divided into 3 sections.

1. The Customer Service Standard
2. Accessible and Respectful Communication with Persons with Disabilities
3. Serving Persons with Disabilities using Personal Supports

## **The Customer Service Standard**

In healthcare, our focus is to provide client centered care and the words “customer service” aren’t often used. Regardless of the terms, the goal is to achieve respectful, barrier free, client care or customer service.

Take a moment to think about what the customer service you provide within your role. Have you experienced or noticed any of the people you support experiencing barriers to accessible service? What will you do differently?

## **Accessible and Respectful Communication with Persons with Disabilities**

An important part of accessible service is knowing how to communicate and interact respectfully with people with different disabilities. Throughout this section, we will look at how we can strengthen communication and interaction in a way that takes into account each person's level of ability.

In order to provide accessible service to our customers, it is important to understand who we serve. In the healthcare system, any Manitoban can become our customer. Considering the large and diverse population that we serve, note that nearly 1 in 6 Manitobans are disabled by barriers where they work, live or play. You can probably think of several persons in your own circle of family, friend, colleagues, and acquaintances that live with disabilities. Therefore, we must ensure that all of our programs and services are accessible to all members of our public.

The range of disabilities is diverse and unique to individuals. Disabilities, aging, an injury, or other life event may temporarily or permanently affect a person's mobility, dexterity, vision, hearing, mental health, communication, and understanding, and consequently alter how they need to access service. Some people have disabilities that are easy to see, while others aren't outwardly visible. With this in mind, it is important to focus on understanding what a person needs to access your service, and remove the barrier, rather than identifying the disability.

Accessible and respectful communication focuses on the person, not the disability. When speaking or describing a person with a disability, use language that emphasizes the person and avoids judgment. For example, say "person with diabetes" rather than "afflicted with" or "suffers from". Use "person with a disability" rather than "The Disabled" or "Handi-capped". Terms like slow, delayed, mute, crippled, are demeaning and disrespectful and are not to be used.

Knowing that we serve a diverse population, there are some things that you can do to make your communication accessible for more people. Here are a few ideas:

- Consider providing information in alternate formats or include an active offer to provide alternate formats upon request.
- Preparing a text only document can facilitate translation to other formats, such as Braille.
- Before you communicate with someone, consider the various alternatives and approaches you can use to make your communication more accessible

depending on the situation and the person's needs. Paper and Pen? A quiet room? Ask instead of making assumptions. For example, if you need someone to complete an online form, offer alternate ways to access/complete the forms if needed.

Please take a moment to think about what you can do within your role to improve accessibility. How can you change what you typically do in order to make your interactions and communications with persons with disabilities more accessible? What is the most effective way to communicate with a person in order to find out their needs?

### **Serving Persons with Disabilities using Personal Supports**

Many persons with disabilities rely on service animals, support persons, and/or personal assistive devices to support their independence and allow them to carry out their daily lives.

#### Service Animals:

The following information is important to know when providing services to a person who is accompanied by a service animal: Service animals are protected by the Human Rights Code and have the right to be wherever the public has access. So, do not request that the owner leave the animal in a different location. The owner is responsible for maintaining control over the animal at all times. Remember to avoid petting or talking to a service animals. If you are uncertain whether an animal is a service animal, it is okay to ask the owner for clarification.

#### Support Persons:

A person with a disability may be accompanied by a support person. This person does not necessarily require special training or qualifications and may be a paid personal support worker, a volunteer, a family member/spouse or friend of the person with a disability. Support persons can provide different types of assistance depending on need, such as: transportation, personal care, guiding, or communication.

When interacting and communication with a person accompanied by a support person, here are some things to keep in mind: a person with a disability may not introduce you. So, if you're not sure, it's appropriate to ask to clarify the role of person. When you know that a person brings a support person, plan for their presence. Remember to make space for two seats, or ensure that an interpreter has site lines to do their work. While communicating, speak to and look directly at the person with the disability even though the message may be coming through the support person. And remember the support person, especially interpreters, communicate everything to the person, so avoid engaging in side conversations as this will be conveyed to the person with the disability.

### Assistive Devices:

An assistive device is anything that is used, designed, made or adapted to assist people in performing a particular task. These devices enable persons with disabilities to do everyday tasks and should not be moved or touched without permission from their owner. Your workplace may have assistive devices available for use when needed. The Customer Service Standard requires that staff members are familiar with what devices are available and can either provide access and assistance, or know who to contact for help. Examples of devices that may be available include: wheelchairs, adjustable desks and workstations, assistive listening devices.

Your final reflection is to recall situations where you were interacting with a person who was using a personal support. Were you able to meet the person's need effectively and respectfully? Consider some of the assistive devices you've used in your work. How can you improve the experience for the person using these devices? Please remember that you don't need to become an expert in the use of assistive devices; rather, you need to be aware of what is available and who has information about the devices in case you need it in your work. Can you identify what is available at your work and who you would access for support?

### Conclusion:

Most times the best course of action when you see someone disabled by a barrier, is to simply ask **"How can I help?"** In other words, please remember that accessible customer service does not require special expertise and does not have to be complicated, it begins with respectful communication.

What can I do?

Please consider how you currently interact with people to provide service. How can you improve the experience for people experiencing barriers?

## ***DRUGS AND ALCOHOL***

Volunteers may not report for their assignment while under the influence of alcohol or illegal drugs. If you are taking a prescription or over-the-counter medication that affects your ability to perform your duties safely, do not report for your assignment.

## ***CONFLICT OF INTEREST***

Volunteers should avoid any situation which might be viewed as a potential or actual conflict of interest. For example, conducting personal business, asking for personal favors or using your affiliation with Grace Hospital for personal gain.

## ***PERSONAL GIFTS***

It is inappropriate to receive any gifts that have a significant monetary value from persons receiving services from the Grace Hospital. Sometimes a person may wish to thank volunteers and offer small gifts as their way of saying thank you. Please do not accept a gift that could be considered a form of payment, such as something that has resale or return value. If you wish to give a person a gift, you are encouraged to check with the Manager of Volunteer Resources beforehand.

## ***RELIGIOUS AND POLITICAL INFORMATION***

Please do not distribute unsolicited religious and/or political materials to patients or staff at Grace Hospital.

## ***PATIENT LIFTING OR TRANSFERRING OR WASHROOM ASSISTANCE***

Volunteers should not lift or transfer persons using wheelchairs or other mobility aids. This includes not transferring persons in and out of vehicles. If a person requests you to do this, notify the nearest staff member.

Should a patient request washroom assistance, staff should be consulted, as this is not a volunteer role.

## ***SUGGESTIONS & COMPLAINTS***

We are always looking for ways to improve our program. If you have any suggestions, please feel free to approach the staff in Volunteer Resources.

If you have a concern or a complaint regarding the hospital or the volunteer program, please speak to the Manager or Coordinator of Volunteer Resources privately. The complaint will be investigated and you will be informed of the outcome.

You can also expect to receive a New Volunteer Checkpoint Evaluation once you have been volunteering for two to three months. Your feedback will be appreciated as it will allow for any necessary changes or improvements to the Volunteer Department/Program.

## ***NO SMOKING POLICY***

Employees, volunteers and visitors of Grace Hospital shall observe the NO SMOKING policy in the building, and on the grounds. In accordance with WRHA policy and the City of Winnipeg by-law, Grace Hospital is a smoke free facility. Smoking is not permitted anywhere on the property of Grace Hospital, including all entryways, grounds, and park areas. The City of Winnipeg will issue fines if the by-law is breached.

## ***REQUESTING A REFERENCE***

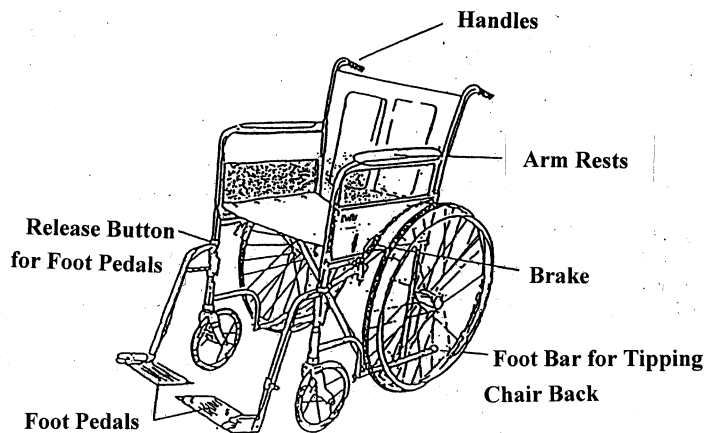
1. The staff in the Volunteer Resources Department are authorized to provide verbal or written references for volunteers who have volunteered a minimum of 3 months and/or 25 hours and/or at the discretion of the staff in the Volunteer Resources Department.
2. Requests for general reference letters must be made a minimum of 1 week in advance before the reference is due.
3. Requests for specific references such as for education institutions and scholarships/bursaries must be made a minimum of 4 weeks before the reference is due.
4. If the staff in the Volunteer Resources Department has limited personal knowledge of the volunteer, the reference will be limited to the placement(s), dates and hours of service.
5. Staff in the Volunteer Resources Department may decline a request for a reference if the volunteer has not given the Volunteer Resources Department sufficient notice, have limited service hours, are unfamiliar with the volunteer or if they believe the reference would not be of benefit to the volunteer.

# **SAFETY RULES**

## ***WHEELCHAIR SAFETY***

Depending on your volunteer role, you may be called upon to assist a person using a manual wheelchair. Here are some guidelines to wheelchair safety:

1. Always introduce yourself. ASK the person if they would like assistance. Whenever possible, speak to the person at eye level. Try not to feel insulted if the person does not want your help, as they may be able to manage independently.
2. Always check the hand brakes located on both back wheels. Make sure that the brakes are locked when the wheelchair is not moving.
3. Always make sure that the hand brakes are off when moving the chair.
4. Always ask the person if they are ready before you begin moving the wheelchair. Inform the person where you are taking them.
5. Always ensure that the person's arms are either resting inside or directly over the arm rests, not over the side of the wheelchair.
6. Always ensure that the person's feet are securely placed on footrests. Check for anything, i.e. blankets or sweaters which may get caught in the wheels.
7. Always turn the wheelchair around so that it is descending backwards when going down an incline, entering an elevator or going over a curb.
8. Avoid quick short stops as this may jar the person forward.
9. Do not transfer patient out of wheelchair.



## ***SHARPS AND SPILLS***

Volunteers are not authorized to handle sharps and spills at any time. Volunteers must report any sharps and spills to staff. Volunteers are not authorized to handle any bodily fluids. If a volunteer comes in contact with bodily fluids or any unknown substance they must report directly to a nursing station for direction.

## ***INCIDENT REPORT***

In case of illness, injury, or “near miss”, report to your supervisor. Volunteers are required to report all injuries to the staff in the Volunteer Resources Department as an incident report form may need to be completed.

## ***MOBILE DEVICES***

Use of a cell phone or other electronic devices are not permitted while you are conducting your volunteer assignment. Please ensure your phone is on vibrate or silent while you are on duty.

## ***I-PODS/MUSIC DEVICES***

Any hand held music devices are either to be left at home or are to be locked up during your volunteer shift. It is not acceptable for volunteers to listen to their headsets during their volunteer shift. If a volunteer is found to be wearing their headset they will be given a warning and it will be written in their file.



## ***INFECTION CONTROL***

Washing hands with soap and water is the most important thing we can do to prevent the spread of infection.

### **Hands should be washed:**

- \* Before starting work.
- \* Before and after contact with every patients or their environment.
- \* Before and after serving each meal tray or after every water jug delivery or pick up.
- \* Before and after your meals and coffee breaks.
- \* Before and after using bathroom facilities.
- \* After touching your nose or mouth when you have a cold or a cold sore.
- \* After completing your volunteer assignment.

Please see the power point hand-out on Infection Prevention and Control.

Washing your hands properly, **for 15—20 seconds** will protect yourself, patients and staff from infections. If soap and water is not available, there are waterless hand washing stations located throughout the hospital.

Please refer to the 4moments of Hand Hygiene included in your orientation package.

### **Volunteers should not come to work if you have:**

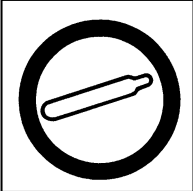

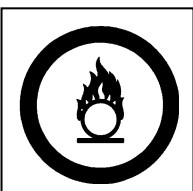

- \* A bad sore throat, sever cold, or flu-like symptoms.
- \* A stomach flu including diarrhea.
- \* Open wounds or a skin rash such as shingles.
- \* Been in contact with someone with a communicable disease such as measles, mumps or chicken pox.





### **It is also important to practice good respiratory etiquette at all times:**

- \* Coughing and sneezing into your elbow.
- \* If sneezing or coughing into a Kleenex discard the Kleenex and wash your hands.

Please report any cuts, sores, redness, rashes on hands or on body to the volunteer office staff. **Also, to ensure your protection from infections please do not enter a patient's room if a Precaution Sign is on the door.**

## WORKPLACE HAZARDOUS MATERIAL INFORMATION SYSTEM

This symbol represents...	It means that the material...
 <p>Class A – Compressed gas</p> <p><b>Oxygen Cylinder, Acetylene for welding, Propane</b></p>	<ul style="list-style-type: none"> <li>▪ poses an explosion danger because the gas is being held in a cylinder under pressure</li> <li>▪ may cause its container to explode if heated in a fire</li> <li>▪ may cause its container to explode if dropped</li> </ul>
 <p><b>Class B – Combustible and flammable material</b></p> <ul style="list-style-type: none"> <li>▪ Acetone (flammable), Formalin (combustible), Kerosene, Propane</li> </ul>	<ul style="list-style-type: none"> <li>▪ is one that will burn and is therefore a potential fire hazard</li> <li>▪ <u>may burn at relatively low temperatures</u>; flammable materials catch fire at lower temperatures than combustible materials</li> <li>▪ may burst into flame spontaneously in air or release a flammable gas on contact with water</li> <li>▪ may cause a fire when exposed to heat, sparks, or flames or as a result of friction</li> <li>▪ may be solid, liquid or gas capable of catching fire in presence of sparks or open flame</li> </ul>
 <p><b>Class C – Oxidizing material</b></p> <ul style="list-style-type: none"> <li>▪ Hydrogen Peroxide, Chlorine, Compressed O<sub>2</sub></li> </ul>	<ul style="list-style-type: none"> <li>▪ poses a fire and/or explosion risk if it contact flammable or combustible material</li> <li>▪ oxidizing – may or may not burn itself but will release oxygen or another oxidizing substance → combustion of something else</li> <li>▪ may burn skin and eyes upon contact</li> </ul>
 <p><b>Class F – Dangerously reactive material</b></p> <ul style="list-style-type: none"> <li>▪ Flourine</li> </ul>	<ul style="list-style-type: none"> <li>▪ is very unstable (may self-react)</li> <li>▪ may react with water to release a toxic or flammable gas</li> <li>▪ may explode as a result of shock, friction or increase in temperature</li> <li>▪ may explode if heated when in a closed container</li> </ul>

This symbol represents...	It means that the material...
 <p><b>Class D, Division 1 – immediate and serious toxic effects</b></p> <ul style="list-style-type: none"> <li>▪ Methanol, Sodium Cyanide, Carbon Monoxide</li> </ul>	<ul style="list-style-type: none"> <li>▪ is a potentially fatal poisonous substance</li> <li>▪ may be fatal or cause permanent damage if it is inhaled or swallowed or if it enters the body through skin contact</li> <li>▪ may burn eyes or skin upon contact</li> </ul>
 <p><b>Class D, Division 2 – other toxic effects</b></p> <ul style="list-style-type: none"> <li>▪ Chloroform, Benzene, Asbestos, Ice Dust</li> </ul>	<ul style="list-style-type: none"> <li>▪ life threatening and serious long-term health problems as well as less severe but immediate reaction in someone repeatedly exposed to small amounts (e.g. immediate skin/eye irritant, allergic sensitization, cancer)</li> </ul>
 <p><b>Class D, Division 3 – biohazardous infectious material</b></p> <ul style="list-style-type: none"> <li>▪ Blood, Body Fluids</li> </ul>	<ul style="list-style-type: none"> <li>▪ may cause a serious disease resulting in illness or death</li> </ul>
 <p><b>Class E – Corrosive material</b></p> <ul style="list-style-type: none"> <li>▪ Sulfuric Acid, Javex, Ammonia</li> </ul>	<ul style="list-style-type: none"> <li>▪ causes severe eye and skin irritation upon contact</li> <li>▪ causes severe tissue damage with prolonged contact</li> <li>▪ may be harmful if inhaled</li> <li>▪ eats through metal</li> </ul>

## ***PERSONAL SAFETY***

- If you are feeling unsafe about a situation or person; or something is suspicious, do not hesitate to call Grace Hospital Security at 204-837-0366 or 70366 on any internal phone.
- Carry your cell phone on you during your shift. We ask that you program the Grace Hospital Security phone number into your cell phone and place your phone on silence or vibrate, only use in an emergency.
- Always be aware of your surroundings. When going to and from your shift, do not become distracted (checking cell messages or making phone calls etc...). When leaving the building at the end of your volunteer shift, if you do not feel secure, contact security to escort you to your vehicle in the parking lot.
- If you are unsure as to what to do, and you feel in harm's way call 911.

## **FIRE PROCEDURES**

### **IF YOU DISCOVER A FIRE (R.A.C.E.)**

1. Remove those in immediate danger
2. Activate fire alarm
3. Close doors/Call Switchboard at "55"
4. Extinguish fire if safe to do so

### **WHEN THE FIRE BELLS RING:**

1. Code Red and the location of the fire will be paged. If the area you are located in is the fire scene, go to the appropriate Fire Marshalling area so you will be available to assist as necessary.
  - Every unit has an orange contingency binder. Under the Code Red section will be a SURP – Service Unit Response Plan. You will become familiar with this SURP so you know where your Marshalling area is located if you have to evacuate. If you don't have access to your SURP, your placement supervisor will update you on this information.
2. If you are not in your own department:
  - Wait for the all clear to be sounded by staying in the area/department that you were in when the Code Red was announced. (ie. If you are delivering newspapers and the Code Red was announced when you were in Emergency, you would wait there until the Code Red is ALL CLEAR)
  - And are accompanying a patient in an area other than your own, remain with the patient. If you are in the elevator, get off when the doors open.
  - Visitors entering the hospital are asked to remain in the entrance lounges until the "ALL CLEAR" is announced.

3. The fire doors will close on the involved floor. You can still walk through these doors, if required. Do not hold the fire doors open.
4. **DO NOT** use phones or elevators until the “All Clear” is paged.
5. On stairs and in hallways keep to the right; if you are pushing any equipment in the involved area, place the cart out of the way until the “All Clear” is paged. Do not leave it in the hallway.

If your area is **NOT** involved, carry on with your normal duties and listen for further paging in case you need to take other action.

***IF THE FIRE BELLS GO INTO FAST MODE:***

All fire doors in the building will close. Proceed to the appropriate dispatch area and await further direction. If there is a decision to evacuate, you will receive specific instructions regarding your role.

\*\* Review the closest exit map located in the Volunteer Department.

**EMERGENCY PAGING CODES**

The following are the codes used to page emergencies over the public address system:

**CODE**

STAT , discipline, location  
 '25' discipline, location  
 Code Black  
 Code Blue  
 Code Brown  
 Code Grey  
 Code Orange  
 Code Pink  
 Code Purple  
 Code Red  
 Code White  
 Code Yellow

**EVENT**

Non-Medical Emergency  
 Medical Emergency  
 Bomb Threat  
 Cardio-Pulmonary Arrest  
 Chemical Spill  
 Air Contamination  
 External Disaster  
 Abduction  
 Facility Peak Demand  
 Fire  
 Violent Person  
 Missing Patient

For all codes dial '55' for the switchboard

## QUESTIONS AND ANSWERS

Do not be overwhelmed by the number of questions you may have. They are necessary to provide our patients with the best quality of care and to provide you, the volunteer, with a happy satisfying experience.

1. **May I use the washroom in the patient's room?**

*You may use the sink for washing your hands. Otherwise, please use the washroom located beside the volunteer department, the staff washrooms located on each floor or any of the public washrooms throughout the hospital.*

2. **May I take a patient outside of the building?**

*No, not on your own. However, the nursing staff often ask our Friendly Visiting Volunteers to escort patients outside for some fresh air. When doing so, please inform the nursing staff when you are leaving the unit.*

3. **I enter an elevator with a patient and a high pitch ringing noise is sounded. What do I do?**

*The patient is wearing a device called "roam alert" for their safety or it may be attached to the wheelchair. Please escort the patient off the elevator to the communication clerk's desk to ensure the patient is able to leave the unit and if so, have the roam alert removed.*

4. **May I give a patient candy, food or liquid?**

*Please check with the nursing staff first as they may be diabetic, allergic to a particular item or on the NPO list, which does not allow patients to have any liquids and/or solid foods.*

5. **If the bed curtain is closed in a patient's room should I enter and approach the patient?**

*Please announce yourself first as you should respect their privacy. Curtains are drawn for many reasons (i.e. treatment and rest).*

6. **May I continue my relationship/involvement with a patient once they have been discharged from the hospital?**

*Under no circumstances is a volunteer to continue their relationship/involvement with a patient once the patient has been discharged from the hospital.*