Volunteer Services

2019 CARING TEEN
SUMMER PROGRAM

Administrative Support
Patient Support
Customer Support
Offsite Programs
Special Programs

HOUSTON Methodist
LEADING MEDICINE
Welcome Volunteers

Dear Volunteers,

I want to personally welcome you to Houston Methodist Hospital Volunteer Services team. We understand that you have many options for volunteering, and we are honored that you have chosen Houston Methodist for your volunteer service. Each of you bring a unique set of experiences, skills and talents to our organization, and we value each individual for their contribution. You give us the irreplaceable gift of your time, and for that, we are extremely appreciative.

Although motivations for volunteering differ for each person, we all share the common goals of providing outstanding patient service and meeting the needs of the people we serve. Through your volunteer service, you have the opportunity to directly or indirectly touch lives in a very special way.

We strive to match your preferences, experience and skills with one of the many service positions we have available throughout the organization. Our volunteers are well trained to fulfill the requirements of their assignment so that they begin volunteer duty with confidence. We trust that your volunteer experience will prove rewarding and fulfilling.

Welcome aboard!

Sincerely,

Mandy Guest, MA
Director
Volunteer Services
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Background Information
Welcome to Houston Methodist Hospital Family! Houston Methodist Hospital has served the Houston Community with compassion and high quality care for more than 85 years. It is recognized by U.S. News & World Report as No. 1 on the “Best Hospitals” Honor Roll, is No. 46 on Fortune Magazine’s 2014 “100 Best Companies to Work For,” and is ranked in 12 of 16 adult specialties in 2013. In addition to having some of the nation’s best doctors, nurses and healthcare professionals on staff, our volunteers are also a vital part of our care team. It is for this reason that Houston Methodist Hospital invites you to become an integral part of its care team through volunteering. Our volunteers unselfishly give time, effort and compassion to enhance our healing environment and benefit our patients and guests.

Mission of Houston Methodist Hospital:

“To provide high quality, cost-effective health care that delivers the best value to the people we serve in a spiritual environment of caring in association with internationally recognized teaching and research.”

Vision of Houston Methodist Hospital:

“People will seek Methodist as a globally recognized leader of pioneering medical expertise and innovative personalized care.”

Values of Houston Methodist Hospital: ICARE

- **Integrity:** “We are honest and ethical in all we say and do.”
- **Compassion:** “We embrace the whole person and respond to emotional, ethical and spiritual concerns as well as physical needs.”
- **Accountability:** “We hold ourselves accountable for our actions.”
- **Respect:** “We treat every individual as a person of worth, dignity, and value.”
- **Excellence:** “We strive to be the best at what we do and a model for others to emulate.”
The Volunteer Services Department

The Volunteer Services Department provides assistance to hospital departments and staff as requested. Volunteers are trained and educated in each area of the facility where assistance from volunteers has been requested and are scheduled accordingly.

Each department manager or individual requesting volunteer assistance has the responsibility to orient and educate the volunteer on the tasks required to perform their duties in a specified area.

Every effort will be made to place you in a volunteer position that meets your interests and fulfills the hospital’s needs. The Volunteer Services Department is committed to ensuring you are comfortable with your assignment before you begin volunteering.

Office Main Number 713-441-3351
Office Fax 713-441-1292
Mandy Guest, MA, CAVS, Director ahguest@houstonmethodist.org 713-441-3352
Nazia Imrose, Administrative Coordinator nimrose2@houstonmethodist.org 713-441-3348
Cheronda Rutherford, MSW, Sr. Volunteer Coordinator clrutherford2@houstonmethodist.org 713-441-3359
Amanda Montoya, Volunteer Coordinator armontoya@houstonmethodist.org 713-441-3339
Angela Frazier, MPH, Caring Teen Volunteer Coordinator anfrazier@houstonmethodist.org 713-441-6264
Volunteer Guidelines

Program Requirements
It is a necessity for teen volunteers to conduct themselves with a high level of maturity and sensitivity in a hospital environment. Each teen has been conditionally accepted into the program pending the completion/passing of a background screen, health screen, and orientation. Summer session 1 runs from June 3rd—July 5th and summer session 2 runs from July 8th—August 16th. Each teen must select a summer session to attend, but are encouraged to complete both sessions. Teen volunteers are required to serve a minimum of 60 hours during the summer session. The summer session is longer than program requirements to allow time for other obligations during the summer break. Each teen must meet both requirements for duration and number of hours. Any commitment not met can be cause for the teen to either not be accepted into the program or not be invited to return in future programs.

Attendance and Tardiness:
It is your responsibility to notify your mentor or supervisor in your assigned area if you are going to be late or cannot make your scheduled shift. The departments of the hospital depend on your volunteer hours. You are not required to report to duty on days employees are not required to work (i.e. holidays). However, if you need to complete your service hours, check with your area of service to ensure your department will be open.

In Case of Illness:
If you are ill, please do not come in for your scheduled volunteer shift. Call your assigned area to inform them that you cannot come to the hospital due to illness and when you think you will return. If you do come, you will be asked to leave by the Director of Volunteer Services and/or the department manager. This is for the safety of our patients as well as your wellbeing.

Volunteer Status:
Please notify Volunteer Services and your mentor or supervisor for your service area if you are taking a vacation or if you need to take extended time off from volunteering. This will change your status to Leave of Absence and will give you 90 days of inactivity without requiring you to update competencies. This only applies to year round teens.

Volunteers who go 90 days with no activity will become Inactive status and will be required to update volunteer competencies (background, drug, in-service and possibly TB).

The Volunteer Services Department reserves the right to reject a request to return from any volunteer who reaches Inactive status before meeting their volunteer commitment of six months.

Gifts:
You are not permitted to accept monetary gifts or gifts that have a large monetary value. Politely decline the patient’s offer and explain that you cannot accept gifts from patients.
Volunteer Guidelines *continued*

**Loitering:**
Volunteers are asked to leave the premises as soon as they have completed their shift and signed out.

**Teen Volunteers will not be permitted to hang around the hospital before or after their volunteer shift. Any Teen Volunteer found on the hospital premises while not on shift will be asked to leave and/or escorted by security.**

**Meals:**
You will receive a 15% discount on all meals from the Houston Methodist Hospital’s cafeteria and The Bistro after presenting your badge to the cashier.

**Telephone Calls and Cell Phones:**
Please do not use the telephone in the department where you are volunteering to make personal phone calls. We understand that you may have a bona fide reason for making a personal phone call, such as obtaining transportation to and from the hospital, receiving calls from public schools, child care, etc. Although calls of this type are acceptable, you should not tie up business telephones for these phone calls.

There are many public phones throughout the hospital that you may use. We ask that you do not receive phone calls while volunteering. If it is an emergency, the operator will call Volunteer Services to find out where you are volunteering and transfer the call to you in that department.

**Teen Volunteers will not be permitted to have their cell phones or electronic devices out while they are on duty. If they are seen with their cell phone, headphones or electronic devices out while on duty, they will be asked to leave for the day. All calls not a part of the volunteer’s duties should take place in an off stage areas. Off stage areas include break rooms, private offices and areas clearly mark as an off stage area.**

**Personal Items:**
Volunteer Services has lockers for purses or backpacks. Please remove your personal items from the lockers before the volunteer office closes for the day.

**Photo Identification Name Tags:**
The hospital provides you with a photo ID badge. Once you are accepted into the Volunteer Services Program, a time will be set up for you to have your photo ID taken or picture will be taken at volunteer health screen or orientation. The photo ID must be worn, in plain and obvious view (above the waist on your lapel or shirt), whenever you are volunteering in the hospital.

**Signing IN and OUT:**
You are always required to sign in and out at the Volunteer kiosk directly outside of the Volunteer Services Office at Fondren 127. It is your responsibility to report all of your hours to the Volunteer Services department. Your signing in and out is important for accurate volunteer recognition, proof of hours, and most importantly, to ensure we have an accurate headcount of who is in the hospital in the event of an emergency.
Volunteer Guidelines continued

Safety:
Always be aware of your surroundings. If you see something that is unsafe, report it to your department manager immediately. The safety of our patients, visitors, staff and volunteers is of utmost importance.

Back Safety:
For your safety, always use proper body mechanics when lifting or moving objects. Lift with your knees; avoid bending when lifting or twisting while carrying a load.

Security:
Safety of patients, visitors, staff and volunteers is the responsibility of everyone. If you see someone or something that looks suspicious, do not hesitate to call Security. If you are volunteering outside of regular business hours and are not comfortable walking to your car, please call Security. Security Telephone Number: 713-441-9511

Smoking:
As of May 1, 2006, the entire Texas Medical Center, including Houston Methodist Hospital, is a smoke-free environment. Please refrain from smoking on TMC premises.

Accident/Injury:
If you experience any type of accident or injury, let your department manager and the Director of Volunteer Services know immediately. The department manager will help you complete an Incident Report Form. Incident Report Forms must be completed less than 24 hours after the injury occurs.

Physical Violence:
The hospital does not tolerate any form of physical violence in the hospital. Documented occurrences will result in actions being taken by this administration.

Bullying/Harassment:
The hospital does not tolerate any form of Bullying or Harassment in the hospital or social media. Documented occurrences will result in actions being taken by this administration.

Sexual Harassment:
The hospital does not tolerate any form of harassment, sexual or otherwise. Documented occurrences will result in actions being taken by this administration.

Termination:
You are directly responsible to the Director of Volunteer Services. The Director of Volunteer Services reserves the right to terminate your status as a volunteer if your performance or actions are not in the best interest of Houston Methodist Hospital. **Teen Volunteers who engage in fighting or have issues with electronic devices, cell phones, dress code, loitering, and/or attendance, tardiness or smoking are subject to termination at the discretion of the Director.
Uniforms

**Teen Volunteer uniform is a blue shirt with khaki, blue, black or brown pants and CLEAN closed toed shoes.** Teen volunteers who show up for their shift out of uniform (i.e. shorts, short skirts, blue jeans, denim, flip flops, sandals capri pants, athletic wear and open toed shoes) will be asked to leave. Please wear comfortable shoes.

Volunteers must wear a volunteer I.D. badge so that patients and staff may identify them more easily. Uniforms generally are purchased at the time of orientation for $25.00 and are a tax-deductible item. Dress code regulations for volunteers are the same as those of the paid staff. The volunteer uniform is worn with the appropriate length of dress, skirt, or slacks. Individual I.D. badges must be worn at all times on the uniform above the waist, and in plain view.

Please do not wear scented cosmetics, perfumes, aftershave, hairspray or colognes. These items may cause discomfort and/or allergic reactions to our patients. Volunteers that have patient contact are not permitted to wear false nails due to requirements set forth by infection control in our hand hygiene policies. Volunteers who fail to meet the dress code requirements may be asked by their mentor, supervisor or their Volunteer Coordinator to return home.

Personal Appearance and Hygiene:

Examples of Good Appearance:
- Professional attire such as approved uniform with business casual attire
- Clean and neatly pressed shirts/blouses, skirts/slacks
- Clean shaven or neatly trimmed facial hair
- Neatly trimmed hair
- Clean and neatly trimmed finger nails, clear or subtle nail polish
- No artificial nails in patient contact areas
- Appropriate stockings/leg wear

Examples of Poor Appearance:
- Blue jeans or other denim, Capri pants
- Flip flops, or open toe shoes
- Unclean or wrinkled clothing
- Blouses/shirts with open collars that provide inappropriate exposure
- Bare midriff tops, halters, or mini-skirts
- Untrimmed beards, sideburns, or mustaches
- Shaggy and unsightly hair, non-traditional hair coloring (blue, purple, pink, etc…)
- Excessively long and/or garishly colored finger nails
- Excessive number of rings, bracelets, necklaces, and earrings
- Exposed body piercing, facial or tongue studs (except for religious purposes)
- Exposed tattoos (reasonable effort should be made to cover tattoos)
- Hats/head coverings unless required for safety, hygiene, or religious purposes
Parking and Directions

Parking validation from the Volunteer Services Department is only available for volunteers. Spiritual Care must report to their departments to request parking.

Volunteer Services will only validate parking for the following areas:

1. Outpatient Center Garage (self parking or valet: ticket color is blue)
2. Smith Tower Parking Garage (self parking or valet: ticket color is orange)
3. Scurlock Tower Parking Garage (self parking or valet: ticket color is yellow)
4. Fannin Valet (Dunn Tower valet ticket color is red)
5. Neurosensory Garage valet ticket is pink

While we ask that all able volunteers to use the self parking options, valet is available to any who may need it. You must bring your parking ticket to the Volunteer Services staff for validation.

Volunteers who volunteer during non Volunteer Services Department hour may receive self parking validation at the Dunn Valet. Please contact your coordinator before hand during office hours to arrange for self parking validation. Volunteers are encouraged not to use the valet, during non office hours. For volunteers who valet during non office hours, please show your I.D. badges and the valet services should be able to validate your parking. If the valet services refuses your request, you may have to pay out of pocket. Please contact your volunteer coordinator if this occurs.

Directions from Outpatient Center Garage:  Take the elevator to the 2nd Floor. Walk through the lobby. Turn right at Starbuck’s and left after passing the front of Starbuck’s down the walkway to Smith Tower. Turn left at the information desk, walk past the elevator bank and take the bridge that crosses over Fannin Street until you come to another hallway intersection. Make a right at the hallway intersection and continue until you reach a bank of elevators. Take the elevator to the lobby level and look for the Volunteer Services sign (Fondren127).

Directions from Smith Tower Parking Garage:  Take the elevator to the Crosswalk. Pass the information desk and take the bridge that crosses over Fannin Street until you come to another hallway intersection. Make a right at the hallway intersection and continue until you reach a bank of elevators. Take the elevator to the lobby level and look for the Volunteer Services sign (Fondren127).
Parking and Directions continued

Directions from Scurlock Garage: Take the elevator to the Crosswalk. As you exit the elevator, make a left by Christy Optical, and then make a right when you see a bank of elevators. Go straight and you will take the bridge that crosses Fannin Street over to Dunn Tower. Once you pass the information desk in Dunn Tower, make a left down the hallway. When you get to a bank of elevators, go to the lobby level. When you exit look for the Volunteer Services sign (Fondren 127).

Directions from the Main Entrance Valet: As you go through the glass doors, you will face the Crain Garden/ Dunn Lobby. Go through Crain Garden/ Dunn Lobby until you get to a hallway on your left (near the escalators). Take a left down this hallway; you will pass the gift shop on your left. Stay ahead until you reach a bank of elevators, and then make a left at the elevators and you will see the Volunteer Services sign (Fondren 127).

Directions from Neurosensory Garage Valet: Neurosensory garage entrance is located on John Freeman Boulevard. If you are coming to the hospital from Fannin Street, take a right at John Freeman Boulevard, and if you are coming from the museum district, take a left. Immediately after you turn you will see an entry ramp on your right. When you enter the hospital from valet, follow the walkway ahead. You will pass the Bistro on your right and then a bank of elevators. At the end of the hallway, make a left, going towards Dunn Tower. Follow the walkway until you come to another bank of elevators at Fondren/ Brown Building. Take the elevator to the lobby level and look for the Volunteer Services sign (Fondren 127).
Departments and Services at Houston Methodist Hospital

Admitting/Registration 713-394-6805
Pre-Admitting Finance 713-394-6807
Billing Office 832-667-5900
Blood Donor Center 713-441-3415
Care Management 713-441-3116
Cashier 713-394-6840
Chaplain’s Office 713-441-2381
Emergency Services 713-441-1016
Food & Nutrition Services 713-441-2500
Human Resources 713-441-5009
Medical Records 713-441-2401
Marketplace Menu Line 713-441-6368
Patient Information 713-394-6806
Patient Scheduling Services 713-394-6500
Radiology–Outpatient 713-790-6321
Security/Public Safety 713-441-2151

Waiting Room Telephones
Dunn 3 ICU 713-441-2374
Fondren 3 ICU 713-795-9063
Fondren 10 713-795-9525
CCU 713-795-9529
Cardiac Cath Lab 713-441-2529

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<th>Self-Park (Location)</th>
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<td>West Pavilion</td>
<td>6447 Main St.</td>
<td>Main St. Entrance 8 a.m.—5 p.m.</td>
<td>Just past Main Entrance to the right</td>
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<tr>
<td>Main Bldg. / Dunn Tower</td>
<td>6565 Fannin St</td>
<td>Fannin St. Entrance 24 hours</td>
<td>TMC Garage No. 1 Enter from Fannin St.</td>
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<tr>
<td>Fondren-Brown Bldg.</td>
<td>6535 Fannin St</td>
<td>Not available</td>
<td>TMC Garage No. 7 Enter from John Freeman</td>
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<td>Neurosensory/Jones Bldg.</td>
<td>6501 Fannin St</td>
<td>John Freeman Blvd. 5:45 a.m.—8:30 p.m.</td>
<td>Neurosensory Garage Enter from John Freeman</td>
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<tr>
<td>Smith Tower</td>
<td>6550 Fannin St</td>
<td>University Blvd. Entrance 6 a.m.—7 p.m.</td>
<td>Smith Tower Garage Enter from Fannin St or University Blvd.</td>
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<tr>
<td>Scurlock Tower</td>
<td>6560 Fannin St</td>
<td>Fannin St. Entrance 6 a.m.—6 p.m.</td>
<td>Scurlock Tower Garage Enter from Fannin St or Main St.</td>
</tr>
<tr>
<td>The Outpatient Center</td>
<td>6445 Main St.</td>
<td>6445 Main Street 5:30 a.m.—9:00 p.m.</td>
<td>OPC Tower Garage Enter from Main St.</td>
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Volunteer Bill of Rights

Every volunteer has:

THE RIGHT TO A SUITABLE ASSIGNMENT
Which will reflect personal preference, education and employment background, personality and life experience.

THE RIGHT TO TRAINING FOR THE POSITION
Well planned and effectively presented, which includes information on the organization, its policies, people and procedures.

THE RIGHT TO CONTINUING EDUCATION ON THE JOB
As a follow-up to initial training, information about new developments, and training for greater responsibility.

THE RIGHT TO A VARIETY OF EXPERIENCES
Through advancement to assignments with responsibility, through transfer to another service area presenting new opportunities and through special assignments.

THE RIGHT TO BE HEARD
To feel free to make suggestions and to have respect shown when offering an honest opinion.

THE RIGHT TO RECOGNITION
To be viewed as a contributing member of the health care team through day-by-day expressions and annual volunteer recognition events.

Volunteer Code of Conduct

Houston Methodist Hospital Code of Conduct is applicable to volunteers as well as to paid employees. The following warrant immediate dismissal from the volunteer program:

1. Being under the influence, having possession on one’s person or transporting intoxicant or controlled substance onto the premises of the institution.
2. Committing theft on institution or patient property including medical records and confidential information.
3. Possessing a weapon on institution property. A weapon is defined in Section 46.01 of the Texas Penal Code, including but not limited to handguns, illegal knives or clubs.
4. Using abusive, harassing or discourteous language or behavior to patients, visitors, employees or volunteers (including behavior consistent with sexual harassment).
5. With specific respect to patients:
   a. Breaching the confidence of a patient’s condition or treatment.
   b. Discussing treatments or counseling with patients in the guise of professional advisement.
6. Discussing anything related to a patient or family member with a physician.
7. Smoking or using smokeless tobacco is prohibited on Houston Methodist Hospital and Texas Medical Center premises.
POLICY AND GENERAL STATEMENT

The purpose of this policy is to outline the parameters for utilizing and managing volunteers under the age of 18. The goal is the policy is to ensure the safety of our patients, staff, and volunteers.

PROCEDURE

Volunteer positions and opportunities are available for ages 8 and up, with restrictions.

- Volunteers aged under 18 years must have a rest break of at least 30 minutes after every four hours of volunteering.
- During the school term, volunteers aged 14-15 years old can volunteer for a maximum of three hours per day and 12 hours per week, between the hours of 7am-7pm.
- During the school holidays, volunteers aged 14-15 years old can volunteer for a maximum of eight hours per day and 40 hours per week, between the hours of 7am-9pm.

For long term volunteer opportunities:

- Only minors over the age of 16, who have submitted a volunteer application, were accepted into the Caring Teens program, and have completed the onboarding process may volunteer on a consistent basis.

- Accepted Caring Teen volunteers must have the following forms in their file:
  - Application form (2 pages)
  - Parental Consent and Release of Liability for Minor
  - Letters of Recommendation (2)
  - Background Release
  - Employee Health Clinic Guardian Consent Form
  - State Issued Identification (2 copies)
  - Consent to be Photographed or Videotaped
  - Copy of report card
  - Volunteer Acknowledgement Form
  - Immigration & Export Control Questionnaire

For volunteer opportunities that occur on an episodic basis:

- Minors under the age of 18 must provide a signed Parental Consent and Release of Liability for Minor.

- If a group of minors are volunteering together, each minor is required to have the above stated forms, as well as one adult chaperone for every two volunteers under the age of 15.
Safety and Infection Control
Safety and Infection Control

The following pages highlight major safety and infection control initiatives at HMH. For a complete listing of study guides and tests, please visit our web page at www.methodisthealth.com/volunteer.

Emergency Procedures

When there is an emergency situation at the hospital, volunteers will hear the announcements over the hospital intercom.

NOTE: Proper identification is necessary to gain entry into the hospital.

In the event that Volunteer Services or its employees have sustained injuries and it is an unsafe meeting location, the following locations will be designated as safe gathering places:
• Houston Methodist Business Office across from Alonti’s Deli on the crosswalk level of Smith Tower.
• First floor or the John P. McGovern Building (across the street from the Bertner entrance).

In the event that Volunteer Services phone is not working, the alternate phone number to call for further instructions is the Incident Command Center (713) 394-6937. Use of this phone number is restricted and should be used only if the volunteer office is inoperable and there is a need for further instruction.

The following are codes Houston Methodist Hospital uses for specific emergency situations. All volunteers should be knowledgeable of these codes:

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<th>Meaning</th>
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<td>Code Blue</td>
<td>Cardiac Arrest</td>
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<td>Code Pink</td>
<td>Infant/Child Abduction</td>
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<tr>
<td>Code Orange</td>
<td>Bomb Threat</td>
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<tr>
<td>Code Purple</td>
<td>Security Needed</td>
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<tr>
<td>Code Yellow</td>
<td>Disaster</td>
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<tr>
<td>Code Silver</td>
<td>Active Shooter (New, completed by 12/31/12)</td>
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<tr>
<td>Code Gray</td>
<td>Severe Weather</td>
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<tr>
<td>Code Gold</td>
<td>Accreditation</td>
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Did you know?

Safety, when it is a factor, has the highest priority in all decisions.
**Fire Safety**

Always be observant no matter where you are in the hospital. Make sure you know where the exits, fire alarm stations and fire extinguishers are located. Be aware of the evacuation route maps located on every patient care unit and throughout the hospital.

**The proper response to fire or smoke is R.A.C.E.**

**R=Rescue** patients in immediate danger from fire or smoke area. Rescue individuals from the immediate fire or smoke area and go to a safe place. Always rescue people before pulling the fire alarm.

**A=Alarm** Pull fire alarm station and call emergency number (3300) to give exact location.

**C=Contain** the smoke or fire by closing all doors to rooms and corridors and clearing hallways of people and equipment. The doors to the fire exit stairway must ALWAYS remain closed unless you are moving through them.

**E=Extinguish** the fire (when it is safe to do so). If you can do so safely, and you feel comfortable using the fire extinguisher, use it. If not, don’t put yourself at risk.

**To use a fire extinguisher, follow the P.A.S.S. procedure**

**P=Pull the pin** at the top of the extinguisher out. This is the pin that keeps the handle from being accidentally pressed when not needed.

**A=Aim the nozzle** of the hose toward the base of the fire.

**S=Squeeze the handle** to discharge the extinguisher standing approximately 8 feet away from the fire. If you release the handle, the discharge from the extinguisher will stop.

**S=Sweep the hose and nozzle** back and forth at the base of the fire. You must watch the fire carefully to assure it is completely extinguished, as fires may re-ignite.

---

**Did you know?**

You must act quickly if you discover a fire since they can double in size in about 2 minutes.
Infection Control and Hand Hygiene

All staff members and volunteers of Houston Methodist Hospital should do everything they can to prevent the spread of infection. One of the most important ways you can do this is to always follow standard precautions and wash your hands.

Please wash your hands:

- Before coming on duty
- Before and after each patient encounter
- At the end of your shift
- When your hands are soiled
- After coming in contact with bodily fluids, dressings, mucous membranes, etc..., even if hands are not visibly soiled (e.g. handling sputum containers, bedpans, or urinals).
- After contact with medical equipment/supplied in patient areas
- After removing gloves
- After using the restroom
- After blowing or wiping your nose
- Before and after eating

Tips for proper hand washing:

- Keep clothing away from sink.
- Lather well. Soap reduces surface tension enabling the removal of bacteria.
- Don’t forget to clean wrists and fingernail area (bacteria may be harbored beneath fingernails).
- Wash hands thoroughly, using rigorous scrubbing action for at least 15 seconds (or as long as it takes you to sing the “Happy Birthday” song twice).

You may also use the alcohol-based hand gels to cleanse your hands. These are available outside of every patient room and throughout the hospital.

Hand Hygiene…Absolutely!
National Patient Safety Goals

It is everyone’s responsibility, including volunteers, to ensure the safety of our patients. The following are the National Patient Safety Goals that every hospital should abide by.

Goal 1 – Improve the accuracy of patient identification.
+ Use of Two Patient Identifiers
Volunteers are not permitted to place an identification arm band on a patient.

Goal 2 – Improve the effectiveness of communication among caregivers.
+ Volunteers are not permitted to receive patient testing results.
+ Volunteers who become aware of patient safety issues are trained to immediately communicate the information to paid staff specifically involved in patient’s care.
Hand-Off Communications - Volunteers who answer the phone in patient service areas immediately communicate their volunteer status and “hand off” the phone call to a staff member.

Goal 3 – Improve the safety of using medications.
+ Volunteers never administer medications (prescription or over-the-counter).
Volunteers never label medications

Goal 4 – Not Applicable

Goal 5 – Not Applicable

Goal 6 – Not Applicable

Goal 7 – Reduce the risk of health care-associated infections.
Meeting Hand Hygiene Guidelines

Goal 8 – Accurately and completely reconcile medications across the continuum of care.
+ Volunteers are not permitted to handle or dispense medications or comment on patient medication information at any time.
When discharging patients, transportation volunteers may inquire if the patient has all medications, prescriptions, and discharge documents.

Goal 9 – Reduce the risk of patient harm resulting from falls.
+ Know appropriate action for Houston Methodist’s Fall Reduction Program
+ Patients at risk for falls wear yellow armbands and yellow socks
Report any fall or observed situation that may lead to a fall
National Patient Safety Goals continued

Goal 10 -- Reduce the risk of influenza and pneumococcal disease in institutionalized older adults.
Volunteers are encouraged to receive vaccinations.
Volunteers should sneeze into the inside crook of their elbow.
Volunteers who are sick do not report back for duty until they are completely well.

Goal 11 – Reduce the risk of surgical fires.
No volunteers in these areas

Goal 12— Not Applicable

Goal 13 – Encourage patients’ active involvement in their own care as a patient safety strategy.
Patient and family may report safety concerns to volunteers. Volunteers should report these concerns to the department supervisor or to a Volunteer Services’ staff member. Volunteers are instructed to refrain from commenting or offering suggestions about the patient’s diagnosis, prognosis, care or treatment.

Goal 14 – Prevent health care associated pressure ulcers (decubitus ulcers).
Not Applicable

Goal 15 – The organization identifies safety risks inherent in its patient population.
Volunteers who identify individuals at risk for suicide must immediately report their observations to appropriate staff.

Goal 16 – Improve recognition and response to changes in a patient’s condition.
Volunteers who observe changes in a patient’s condition that indicate a patient’s condition could be worsening must immediately report observations to appropriate staff.
This can include, but is not limited to difficulty breathing, possible pain, flushed or perspiring skin, and/or unresponsive behavior.
Fall Prevention

Fall facts:
- 1.6 million falls are reported each year in healthcare facilities across the country
- 30% of falls in acute care setting result in serious injury
- 50% of patients that fall and uninjured, but unable to get up for an hour or more will die within 6 months
- Recent study results indicate up to 50% of falls are related to toileting needs*
  *Washington University School of Medicine, University of Virginia Health Systems

How to identify fall risk patients:
- Patient has on yellow non slip socks
- Patient has on a yellow arm band
- Patient has a yellow fall risk sign on their door
- Yellow dot on their room sign and the spine of their chart

Patients fall for many reasons:
- Intrinsic risk factors (i.e. integral to the patient’s system, many are associated with age-related changes):
  - Previous fall
  - Urgency to use the bathroom
  - Reduced vision
  - Musculoskeletal system
  - Mental status
  - Acute illnesses
  - Chronic illnesses
- Extrinsic risk factors (i.e. external to the system and relating to the physical environment):
  - Medications
  - Bathtubs and toilets
  - Condition of ground surfaces
  - Type and condition of footwear
  - Improper use of assistive devices
  - Poor lighting

What you can do to prevent our patients from falling:
- Remind all patients to call for help before getting out of bed
- Keep beds in a low position
- Keep floors dry and free from clutter
- Ask family members to alert staff when they are leaving the room
- Remind patients to wear non slip shoes, socks or slippers while ambulating
- Remind patients not to wear bathrobes or pajamas that drag on the floor
- Offer assistance to a patient who seems unsteady on their feet
Fall Prevention continued

What should you do if you see a patient fall?

- If possible, attempt to ease the patient gently to the floor
- If patient complains of pain or you suspect for any reason the fall has caused harm; call the Operator to page the CERT team to assess the patient
- Remain with the patient until help arrives
- Once it is determined that the patient is unharmed, call Central Dispatch (1-4246) for patient lifting equipment to assist with transporting the patient
- Report the incident to your supervisor
Confidentiality
Confidentiality

It is the policy of Houston Methodist Hospital to maintain an individual’s right to privacy and confidentiality of information.

All staff members and volunteers of Houston Methodist Hospital having access to information concerning patients must hold all information in strict confidence and shall abide by the Health Insurance Portability and Accountability Act (HIPAA) regulations. There are strict penalties (including steep fines) for persons and/or hospitals that violate HIPAA privacy regulations.

In the course of performing volunteer responsibilities, information is considered confidential with regard to patients, their families, their physician and/or the hospital. As a condition of working at Houston Methodist Hospital, all staff and volunteers are cautioned not to discuss any such information with others. Casual comments with fellow coworkers in the hallways, lobby, or cafeteria may be overheard and violate the trust others have place in our staff.

In addition, one’s personal life and problems should not be discussed with patients, their visitors or the medical staff. Staff and volunteers are asked to conduct themselves with professional poise and dignity.

Newspaper, magazine, TV and radio reporters and photographers requesting information about patients or personnel via phone or in person at the hospital are to be referred to administration.
## HIPAA Privacy Rule—Quick Help Tips for HMH Volunteers

| Notice of Privacy Practices | • See the Notice Quick Tips. The answer will likely appear on that sheet.  
|                            | • If you cannot determine the answer from the Notice Quick Tips, refer the patient to your Entity Business Practices Officer for handling. |
| Patient Inquiries | • Do not release any information if a visitor or caller does not provide the patient’s name.  
|                | • If you are given the patient’s name, unless the patient is a “No Information / Confidential Patient,” you may:  
|                | - Indicate that the patient is in-house and provide the patient’s room number, and  
|                | - Transfer a call to a patient’s room  
|                | • Never give out a patient’s room telephone number  
|                | • Questions regarding a patient’s general condition must be referred to the nursing unit. |
| Notice of Privacy Practices | If the patient is a “No Information / Confidential Patient,”  
|                            | • Do not release any information  
|                            | • You may tell the caller or visitor, “I’m sorry. We do not have any information on that person.”  
|                            | • If the call or visitor is insistent, you may say “We understand you are concerned. We would suggest you contact a family member for any information about the person to whom you are referring.”  
|                            | • If the call or visitor is unsatisfied that you cannot release any information and is insistent about speaking to or seeing a “No Information / Confidential Patient,” then refer the caller or visitor to a supervisor in admitting services. |
| Patients of the same name | • Ask the visitor or caller to confirm the town or city in which the patient resides, or the patient’s age.  
| The visitor or call provides the patient’s name, but there is more than one patient with the same name. | • Do not volunteer information to an individual inquiring about a patient. |
| Media Inquiries | • Do not release any information directly to the media, even if the media provides the patient’s name when calling.  
| A member of the media calls asking about a patient. | • Refer all media inquiries to Houston Methodist Strategic Planning, Marketing and Corporate Communications for handling. |
| Clergy requests | • Refer community clergy members who want religion census lists to the Pastoral Services Department. |
| A member of the community clergy wants a religion census list. | • Tell him/her that you are not a health professional and should not be discussing his/her care.  
| Talking to patients | • If he/she insists on talking to you, do not repeat any of the conversation to others who are not involved in his/her care and use reasonable precautions such as lowering your voice. |
| A patient wants to talk about his health condition, however, others are nearby. | • A patient has the right to file a complaint about his/her health information.  
| Filing Complaints | • Refer the patient to your Entity’s Business Practices Officer.  
<p>| A patient wants to file a complaint about the handling of his/her health information. |</p>
<table>
<thead>
<tr>
<th>What is PHI?</th>
<th>• Protected health information (PHI) is patient identifiable information, such as demographics and financial information.</th>
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<tbody>
<tr>
<td>What is the Notice of Privacy Practices?</td>
<td>• The Notice of Privacy Practices describes individuals’ health information rights at HMH; how individuals can act upon these rights; HMH’s legal duty and responsibilities to protect health information; and how HMH is permitted or required by law to use and disclose health information.</td>
</tr>
<tr>
<td>Where can I find the Notice?</td>
<td>• The Notice is publicly posted and is posted electronically on Houston Methodist’s internet website.</td>
</tr>
<tr>
<td>When does the patient receive the Notice?</td>
<td>• The Notice must be given to the patient at the time of first services at HMH.</td>
</tr>
</tbody>
</table>
| How do you document that the patient received the Notice?                | • The patient must sign an Acknowledgment of receipt of the Notice.  
  • A good faith effort must be made to obtain an acknowledgment of receipt of the notice, but if the patient refuses to sign the acknowledgment you may continue with treatment. |
| When do I have to get the patient’s permission to use his/her protected health information (PHI)? | • A patient’s authorization is required for any use or disclosure of PHI that is not for treatment, payment or health care operations, and permitted or required by law. |
| What is use?                                                             | • Use refers to what HMH does with PHI internally. |
| What is meant by disclosure of information?                              | • Disclosure refers to how PHI is released to outside entities. |
| What does minimum necessary mean?                                       | • Limit access to the minimum amount of information necessary to accomplish your duties as a student when using or disclosing PHI. |
| Who is a qualified personal representative (QPR)?                       | • A QPR is a person who has the legal authority to act on behalf of the patient. |
| Who is responsible for HIPAA compliance at Houston Methodist?           | • The Corporate Business Practices Officer is the Privacy Official and is responsible for overseeing all ongoing activities related to privacy of health information practices. |
| Who handles complaints?                                                  | • The HMH Business Practices Officer (BPO) is the contact person to handle communications and complaints related to privacy. |
| What government agency is enforcing HIPAA?                               | • The U.S. Department of Health and Human Services’ Office of Civil Rights (OCR) is responsible for enforcement of the Privacy Rule. |
| What happens if Houston Methodist or its employees don’t comply with HIPAA? | • There are civil and criminal penalties for failure to comply and for wrongful use and disclosure of PHI. |
| Don’t Repeat                                                             | • Anything that you observed or learned about a patient to family, friends or others.  
  • Anything heard during the treatment of a patient when you are away from the patient treatment area. If you are discussing the treatment of a patient in a treatment area, always lower your voice and never discuss a patient in the hallways or elevators. |
| Don’t Copy                                                               | • Any documents containing Houston Methodist’s patient information. |
| Don’t Take                                                               | • Any documents pertaining to any Houston Methodist’s patients.  
  • Any documents containing Houston Methodist’s patient information. |
| Don’t Share                                                              | • Any user ID(s) or password(s) with anyone.  
  • Any access codes to entrance doors of secure areas. |
HIPAA Privacy Rule—Quick Help Tips for HMH Volunteers

Research/Studies

Can I use patient information to write a paper?
- If the paper is for research, (i.e. study designed to develop or contribute to generalizable knowledge) or for publication, the protocol must be approved by the IRB and patient authorization or waiver of patient authorization must be obtained. Follow Houston Methodist policies on research.

Can I get patient information to see if I have enough of a population for a study?
- Houston Methodist policy requires record reviews preparatory research to be approved by the IRB. Patient authorization is not necessary. Follow Houston Methodist policies on research.

Can I use patient information for a class assignment?
- If the purpose is not for research, as described above, IRB approval and patient authorization is not necessary. However, you may not disclose any patient identifiers (see below) in your assignment.

Can I use aggregate data for my paper?
- Health information that does not contain any patient identifiers (see below) may be used without IRB approval or patient authorization. Follow Houston Methodist policy on de-identification of patient information.

Can I use dates relating to the patient (e.g., DOB, admitting & discharge dates) in my paper?
- This information may be used without IRB approval or patient authorization by using a Limited Data Set. Follow Houston Methodist policy on limited data sets.

18 Patient Identifiers:
- Names of the individual, and relatives, employers, or household members of the individual
- Geographic identifiers of the individual, including:
  - Subdivisions smaller than a state
  - Street addresses
  - City
  - County
  - Precinct
- Zip code — at any level less than the initial three digits (e.g. NNNxx-xxxx). However, if the initial digits cover a geographical area of 20,000 or less people, then it has to be reported as 000
- All elements of dates (except year) directly related to an individual, including:
  - Birth date
  - Admission date
  - Discharge date
  - Date of death
  - All ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated to a single category of age 90 or older.
  - Telephone numbers
  - Fax numbers
  - E-mail addresses
  - Social security numbers
  - Medical record numbers
  - Health plan beneficiary numbers
  - Account numbers
  - Certificate/license numbers
  - Vehicle identifiers and serial numbers, including license plate numbers
  - Device identifiers and serial numbers
  - Web Universal Resource Locators (URLs)
  - Internet Protocol (IP) address numbers
  - Biometric identifiers, including finger and voice prints
  - Full-face photographic images and any comparable images
  - Any other unique identifying number, characteristic, or code

For further information, visit the Privacy Practices Office Home Page at http://www.tmh.tmc.edu/dept/privacypractices/ppo_home_page.htm
Customer Service
Houston Methodist Experience Service Standards

Expected Behaviors for all Patient & Guest Interactions
• Smile, make eye contact, greet all our Guests
• Seek out Guests to assist them, be their guide
• Use our Patient’s preferred name, to personalize their experience
• Interact with our Patients & Guests, we are here for them
• Display On-Stage behaviors in all public and patient areas
• Honor diversity, we are all individuals
• Take 5 minutes every day to go above and beyond for our Patients and Guests
• Anticipate Patients and Guests needs and address them
• Thank all our Patients & Guests, they have a choice

Elevator Etiquette
• Allow people to get off the elevator before attempting to get on.
• Hold the elevator door for someone trying to enter.
• If you are on the elevator and a patient on a gurney needs to enter, please get off and catch the next elevator.

Customer Service Scripting Examples

Opening and Closing:
• “Hello, Mr./Mrs. (insert name). Welcome to Houston Methodist Hospital. My name is (insert volunteer name) and I will be your (service area) volunteer today.”

• “How are you feeling? Don’t worry, we will take excellent care of you.”

• Is there anything else I can do for you before I leave?”

• “What is the most important thing I can do for you before I leave?”

• “My pleasure”
Customer Service Scripting Examples continued

Handling Bad News:
- “I appreciate your understanding.”
- “I will take care of this for you.”
- “This upsets me too. I am not sure that we can resolve this by blaming someone. If you agree, I will contact ____________ and get this re-scheduled for you.”
- Use words like obstacle or hurdle

Refusing a Patient Request:
- “I hear what you are asking, but I don’t think I am the right person to give you the help you need. If you don’t mind my suggestion, let me get in touch with your patient liaison, who can better assist you.”
- “Safety is a very important part of our culture here at Houston Methodist, and I don’t want to compromise your safety. I hope you can understand that.”

Dealing with Difficult Patients:
- “First and foremost, how are you (is your family member) feeling? Are you o.k.?”
- “Thank you for bringing this to my attention. I will discuss this issue with the appropriate staff and make sure that it doesn’t happen again.

General Guidelines:
- Be mindful of what you are saying in the presence of your patient or guest. Avoid statements like “I don’t know how to do this.” “I don’t know what’s wrong with this machine.” “I don’t know how to fix this.” Instead, “I will get this taken care of for you.”

Scripting — Telephones

Greeting the Caller:
- “Good morning/afternoon, (department name), this is (your name). How may I assist you?”
- “I can help you with that.” **If there is a problem, acknowledge it and apologize for the inconvenience. Find a solution.
Scripting — Telephones continued

Transferring the Caller:
- Ask the caller if he/she minds being transferred.

- “Let me transfer you, and thank you for calling (department name).” **Tell the person you are transferring the call to the caller’s name and nature of the call. (NEVER blind transfer).

Placing Call on Hold:
- “Let me check if (____) is available. Are you able to hold?” (Wait for caller to respond yes or no.) After the caller responds “yes,” say “thank you,” then place the person on hold.

- “Thank you for holding. (____) is not available. May I transfer you to his/her voicemail or would you like to leave a message?
  ** If the caller needs to be placed on hold for more than 1 minute.
  - Return to the caller, explain the delay, ask him/her to continue holding, or ask if you can call him/her back.

Ending the Call:
- “Is there anything else I may assist you with today?” OR

- “Did I answer all of your questions?”

- “Thank you for calling.”

Scripting — Information Desk/Front Desk

Greeting Walk In
- “Hello, how may I help you?”

- “I can help you with that.” Then take appropriate action.

Closure Walk In
- “Is there anything else I can help you with?” OR

- “Did I answer all of your questions?”

- “Thank you.”
Houston Methodist Experience

Houston Methodist Experience is made up of three important components.
- ICARE Values
- Culture of Safety
- Personalized Service

Consistency of the feeling our patients and guest receive and the consistent behaviors of the staff at any Methodist Hospital in the system. The Methodist Experience is not just customer service, it is about our culture. Patients and guests are looking for a “WOW” experience in healthcare

I CARE for Safety Behaviors

- Support Team Members:
  - Showing commitment, respect and appreciation to other individuals on the team.
  - Encourage participation in acts of safety
  - Acknowledge

- Act Courageously
  - Doing the right thing in the face of opposition, either internal or external.
  - Speak up for patient safety: STOP THE LINE

- Focus on the moment
  - Maintaining a central focus point during an activity while minimizing distractions.
  - Understand the task and the potential risks to patient safety

- Eyes wide open
  - Constantly observing the environment and the people interacting with it for safe practices.

- Talk to one another
  - Communication essential information vertically and horizontally so that the intention of the message is clear to all
  - Ask for clarification if you feel unsure about what was communicated

- You are not alone
  - Realizing that you are part of a team that creates a safe environment that identifies and corrects risks to patient safety
Houston Methodist Experience

Why would demonstrating on stage behaviors be important to HMH?

Expected Behaviors for All Patient and Guest Interactions
- Honor diversity, we are all individuals.
- Take 5 minutes everyday to go above and beyond for our patients and guests.
- Anticipate patient and guest needs and address them.

Responding with Service Recovery

Houston Methodist Hospital Communication Service Recovery Process: Be L.A.S.T.
Be the last person to hear a customer’s complaint
• Be aware of concerns
• Listen, actively
• Apologize, blamelessly
• State the concern, resolve and act
• Thank the customer
Acknowledge examples:
- Eye contact
- Knock on the door
- Smile
- Appropriate touch
- Make the patient and family feel that you expected them.

Introduce examples:
- Give your name, department, your role, how long you have worked at the Hospital
- If appropriate, skill set, experience, training, manage up yourself
- Coworkers and their skills
- Other departments and their competency and technology

Duration examples:
- How long will the interaction be?
- Give a time expectation that will surely be met.

Explanation examples:
- Why are you doing this?
- What will happen, what you are doing, and what I should expect
- What questions do you have?

Thank examples:
- Allowing you to serve them
- For cooperating
- For being patient

Choosing TMH

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Patient Interaction
End of Life Issues

Advanced Care Planning
- Learning about treatment options
- Thinking about your values
- Talking about your decisions
- Documenting your wishes

Documenting Decisions
- Advance directives document healthcare decisions at the end of life
- It is a tool to help you think through and communicate your choices
- Two legal forms are available:
  - Healthcare Power of Attorney
    A. Document who makes medical decisions about your healthcare.
    B. Authorized to speak ONLY if you can’t
    C. Can be anyone over 18
    D. Can be a family member, loved one or close friend
  - Living Will
    A. States what you want and do not want for medical treatments at the end of life
    B. Should reflect your wishes
    C. Lawyers are not needed
    D. Not all documents are legally valid in every state
    E. A witness or notary may be required — volunteers may serve as a witness for the signing of a living will
    F. Does not expire and can be updated as needed
Age-Specific Competencies

Age-specific competencies are skills the volunteer should use to give care that meets each patient’s unique needs. Every patient should be treated as an individual with their own likes or dislikes, feelings, thoughts, beliefs, limitations, abilities, and life experiences. Everyone grows and develops in stages that are related to their age and share certain characteristics and commonalities with those in their age group. As a result, putting age-specific competencies into practice enables the volunteer to care for individuals at every stage of life. The following information lists key age-specific health care issues to keep in mind while tending to patients.

Infants and Toddlers:

**Communication** — provide security, physical closeness; promote healthy parent-child bonds.

**Health** — keep immunizations/check ups on schedule; provide proper nutrition, sleep, skin care, oral health and routine screenings.

**Safety** — ensure a safe environment for exploring, playing and sleeping.

Young Children:

**Communication** — give praise, rewards and clear rules.

**Health** — keep immunizations/check ups on schedule; promote health habits (good nutrition, personal hygiene, etc.).

**Safety** — promote safety habits (use of bike helmets, safety belts, etc.).

Older Children:

**Communication** — help child to feel competent and useful.

**Health** — keep immunizations/check ups on schedule; give information on alcohol, tobacco, other drugs and sexuality.

**Safety** — promote safety habits (playground safety, resolving conflicts peacefully, etc.).

Adolescents:

**Communication** — provide acceptance, privacy; build teamwork and respect.

**Health** — encourage regular checkups; promote sexual responsibility; advise against substance abuse; update immunizations.

**Safety** — discourage risk taking (promote safe driving, violence prevention, etc.).
Age-Specific Competencies continued

Young Adults:

**Communication** — be supportive and honest; respect personal values.
**Health** — encourage regular checkups; promote healthy lifestyle (proper nutrition, exercise, weight control, etc.); inform about health risks (heart disease, cancer, etc.); update immunizations
**Safety** — provide information on hazards at home and work.

Middle Adults:

**Communication** — keep a hopeful attitude; focus on strengths, not limitations.
**Health** — encourage regular checkups and preventative exams; address age-related changes; monitor health risks; update immunizations.
**Safety** — address age-related changes (effects on senses, reflexes, etc.).

Older Adults:

**Communication** — give respect; prevent isolation; encourage acceptance of aging.
**Health** — monitor health closely; promote physical, mental, and social activity; guard against depression and apathy; update immunizations.
**Safety** — promote home safety, especially preventing falls.

Adults Ages 80 and Older:

**Communication** — encourage the person to express feelings, thoughts, and avoid despair; use humor and stay positive.
**Health** — monitor health closely; promote self-care; ensure proper nutrition, activity level and rest; reduce stress; update immunizations.
**Safety** — prevent injury; ensure safe living environment.

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We think about diversity —
It’s not just about race and religion.
It’s much more than the color of eyes
Or where you worship, it includes generations.
Patient Visitation Guidelines and Tips

Houston Methodist Hospital Patient Visitation is designed to help improve the quality of life for patients and their families. The following are hints for those volunteers who represent Houston Methodist Hospital:

1. Always knock before entering a room, even if the door is open or ajar.
2. Always ask permission to visit upon entering the room. Respect a patient’s wishes if he or she does not want visitors.
3. Any discussion with a patient or family member must be held in sacred confidence. Any information you learn through visitation is strictly confidential.
4. A pleasant, positive demeanor is essential.
5. Be sensitive to the mood of the patient. Avoid talking too much and concentrate on being a good listener. Maintain a calm and confident presence without being overly cheerful or overly somber — aim to be quietly persistent.
6. Keep your curiosity in check and avoid asking questions about tubes, devices, etc. unless necessary in order to carry out your responsibility.
7. Always observe hygiene and personal infection control. Wash your hands before each visit and avoid contact with potentially contaminated items.
8. Do not enter a patient’s room if a doctor or nurse is with the patient. If a doctor enters while you are there, excuse yourself from the room.
9. If a person is too sick to be visited, respect his/her need for undisturbed rest. Do not wake a sleeping patient.
10. Avoid giving medical advice and “comparing stories.” Don’t compare doctors or judge the quality of medical care received. Such activities may discourage the patient or upset him or her.
11. Do not ask doctors or nurses for medical information or professional services for yourself or family members.

[Image of group of people]
Patient Visitation Suggested Interactions

Introduction

“Good morning/afternoon/evening! I’m (your name), a volunteer. May I visit with you for a few minutes?”

Helpful phrases:

“Is it okay if I come in?”
“What is this like for you?”
“It sounds as though this has been difficult for you.”
“Would you like for me to sit with you.”

Phrases to avoid:

“I know just what you mean.” or “I understand.”
“So-and-so had the same thing happen to them and it was awful.”
“What you really need to do is think positive.”

It’s time to end a visit when:

• A nurse or doctor enters the patient’s room.
• The patient is more interested in doing something else than speaking with you.

Remember:

• There are problems related to entering the hospital (trauma of coming, depersonalization, etc.). Patients often respond the way they do because of what they are going through, not necessarily because of the volunteer.
• Physical illness dramatically changes ones life. The impairment of freedom of movement and physical strength is difficult to accept, so patients may appear touchy, angry or just plain “grouchy” and out-of-sorts.
• Each person responds to pain uniquely. Physical pain and the misery often inflicted by medical treatment may leave a person feeling helpless.
• Physical illness creates anxiety about finances, loss of job and the ability to earn a living.
• Physical illness also affect the world of the patient’s family, often creating financial and emotional anxiety for them as well.
Effective Listening

Volunteer patient visitors aim to be good listeners, for the most important skill of communicating is to be an effective listener. An effective listener leaves his own thoughts, problems and concerns at home and only focuses attention in the speaker and concentrate on how to be facilitative to him/her. When we listen, we give the patient an opportunity to share and ventilate his/her feelings. Therefore, silence on the part of the listener, will give the patient the opportunity to reflect on what they are going to say.

Sympathy: sharing the feelings of another.
Empathy: identification with and understanding of another’s situation, feelings and motives.
Understanding why people feel the way that they do.

In general, patients want to be heard, understood and accepted as they are. Most patients don’t want sympathy. They want empathy. Empathy is listening with your heart as well as your head. Many patients resent being told, “I know how you feel,” for no two people have the same experience nor same histories, therefore, there is no way anyone can know how exactly how others feel. But it is helpful to know that a person cares how you feel and has some understanding of what you are going through.

Show understanding and prove that you heard the patient by mirroring what you understand:  
A. Ask a question about what the patient said.  
B. Summarize the patient’s words.  
C. Validate the patient’s feelings.  
D. Share your thoughts if appropriate.

Good Listening Body Posture

1. Lean toward the speaker.  
2. Face the speaker.  
3. Establish eye contact.  
4. Put yourself on the same level as the speaker.  
Sit when talking to patient in beds or chairs.  
5. Position yourself at an appropriate distance (3 feet is recommended).  
6. Avoid distracting movements such as playing with coins, drumming fingers, swinging a crossed leg up and down or tapping a pencil.
Professional Boundaries in Healthcare Relationships

A boundary is a system of setting limits that enhances a person’s ability to have a sense of self, and to protect and take care of the self. Boundary systems have two parts: external and internal. An external boundary allows us to physically choose our distance from other people, and enables us to give or refuse permission for them to touch us. An internal boundary protects our thinking, feelings and behavior and keeps them functional.

Self-awareness is key to establishing and maintaining health boundaries. Pay close attention to the situations when you lose energy, want to avoid the person or situation, or find yourself over-doing, feel a knot in your stomach or want to cry. Identifying where you need more space, self-respect, self-care, energy or personal power is your first step.

When Boundaries Become Blurred

- **Self-Disclosure:** Although in some cases self-disclosure may be appropriate, volunteers need to be careful that the purpose is for the patient’s benefit. Avoid shifting the focus from patient to volunteer.
- **Giving or receiving significant gifts:** Giving or receiving gifts of more than token value is contrary to professional standards because of the risk of changing the nature of the relationship, and the volunteer could feel pressured to reciprocate by offering “special care.”
- **Becoming friends:** Although there are no explicit guidelines that prohibit friendships from developing once the volunteer relationships has terminated, you must use your judgment in assessing the appropriateness of this for the individual patient.
- **Maintaining established conventions:** Ignoring established conventions that help maintain a necessary distance between volunteers and patients can lead to boundary violations. Examples include blurred boundaries about availability as a volunteer vs. being a friend with unlimited phone and home access.
- **Physical contact:** Volunteers must be cautious and respectful when any physical contact is involved, recognizing the diversity of cultural and generational norms with respect to touching and cognizant that such behavior may be misunderstood.

Questions to Consider in Examining Potential Boundary Issues

Is this in the patient’s best interest?
Whose needs are being served?
Will this have an impact on the service I am delivering?
How would this be viewed by the patient’s family or significant other?
How would I feel telling a peer or mentor about this?
Am I treating this patient differently?
Am I taking advantage of this patient?
Houston Methodist Hospital New Volunteer Orientation

COMMITMENT TO CONFIDENTIALITY

I, ________________________________, understand my obligation to maintain complete confidentiality of information in order to protect patients, families, and members of the Houston Methodist Hospital staff from improper disclosure of confidential information.

I also understand that confidentiality must be maintained regardless of the source of information, i.e., the spoken word, the medical record (patient chart), computer records, financial reports, statistical data, minutes of meetings, personnel files, or other records of the Houston Methodist Hospital, and that access to information and dissemination of information are both subject to confidentiality standards. Violation of this standard or inappropriate dissemination of information shall be considered a breach of the Houston Methodist Hospital Patient Care/ Patient Safety Policies and Procedures and shall be subject to immediate review and serious consequences up to and including termination of service.

____________________________________________________________________________________
Volunteer Signature, Date

New Volunteer Orientation

RECEIPT OF VOLUNTEER HANDBOOK

I hereby acknowledge receipt of the Volunteer Handbook. I will familiarize myself with the information in this book, which describes my privileges and obligations as a volunteer at the Houston Methodist Hospital. I fully understand that it contains official portions of volunteer policies of the Houston Methodist Hospital by which I am governed as a volunteer.

____________________________________________________________________________________
Volunteer Signature, Date
It Is Your RIGHT:
To be assigned a job that is worthwhile and challenging, with freedom to use existing skills or develop new ones.
To be trusted with confidential information that will help you carry out your assignment.
To be kept informed through newsletters, e-mail, telephone contacts, and special events about what is going on in your organization.
To receive orientation, training, and supervision for the job you accept and to know why you are asked to do a particular job.
To expect that your time will not be wasted by lack of planning, coordination and cooperation within your organization.
To know whether your work is effective and how it can be improved; to have a chance to increase your understanding of yourself, others and your community.
To indicate when you do not want to receive telephone calls or when out-of-pocket costs are too great for you.
To ask for a new assignment within your organization.
To accept an assignment of your choice with only as much responsibility as you can handle.
To respect confidences of your sponsoring organization and those of the recipients of your services.
To decline work not acceptable to you; not let biases interfere with job performance; not proselytize or pressure recipient to accept your standards.
To continue only as long as you can be useful to the recipient.
To refuse gifts or tips, except when recipient makes or offers something of nominal value as a way of saying “thank you”.
To stipulate limitations: what out-of-pocket costs you can afford, when it is convenient to receive calls from an organization or recipient.
To use reasonable judgment in making decisions when there appears to be no policy or the policy has not been communicated to you. Then, as soon as possible, consult with supervisor for future guidance.

It Is Your RESPONSIBILITY:
To provide feedback, suggestions and recommendations to supervisor and staff if these might increase the effectiveness of the program. To be considerate, respect competencies and work as a member of a team with all staff and other volunteers.

Volunteer Signature

Date