

Volunteer Handbook



**MAURY REGIONAL
HEALTH**

Maury Regional Health



**MAURY REGIONAL
HEALTH**

MISSION

To serve our region
with
clinical excellence
and
compassionate care.



VISION

Maury Regional Health
will be southern Middle
Tennessee's essential,
independent health care
leader.

OUR VALUES

PATIENT-CENTERED

*Provide care with empathy,
understanding and
compassion*

RESPECT

*Treat everyone as they
wish to be treated*

INTEGRITY

*Do the right thing for
the right reason*

DEDICATION

*Be committed to
excellence*

ENTHUSIASM

*Be positive
and friendly*

Maury Regional Medical Center

**Marshall Medical Center
Lewis Health Center**

**Wayne Medical Center
Maury Regional Medical Group**

AIDET

Service Excellence Tools for Success

A

ACKNOWLEDGE -- Greet people with a smile and use their names. Attitude is everything. Create a lasting impression.

- *“Good morning/afternoon Ms. Jones. We’ve been expecting you and we’re glad you are here.”*

I

INTRODUCE — Introduce yourself to others politely. Tell them who you are and how you are going to help them. Escort people where they need to go rather than pointing or giving directions. Share your experience/skill level to reduce anxiety. Manage Up co-workers in and out of your department.

- *“Mr. White, you are to have an x-ray in our radiology department. We have an excellent team of technologists, using state of the art equipment. I’m confident you will have a great experience.”*
- *“Our Ambassador Jane will be glad to escort you.”*

D

DURATION — Keep in touch to ease waiting times. “If they have to wait, we update.” Let others know if there is a delay and how long it will be. Make it better and apply service recovery methods (LEAD) when necessary. Do not blame others for long wait time. Avoid we/they phenomenon.

- *“Dr. Johnson had to attend to an emergency. He was concerned about you and wanted you to know that it may be 30 minutes before he can see you. Would you like something to read while you wait?”*

E

EXPLANATION — Advise others what you are doing, how procedures work and whom to contact if they need assistance. Communicate any steps they may need to take. Ask, “Is there anything else I can do for you?”

- *“When the patient goes into the Recovery Room, the staff will call you to update you on their condition or status.”*
- *“For your safety, please let me lock the wheelchair brakes and raise the footrests before you sit in the wheelchair.”*

T

THANK YOU — Thank somebody. Foster an attitude of gratitude. Thank people for their patronage, help or assistance. Use reward and recognition tools.

- *“Thank you for choosing Maury Regional Medical Center. It has been our privilege to care for you.”*
- *“Thank you for your call. Is there anything else I can do for you?”*

IMPORTANT! - If a complaint is voiced by a patient or visitor, you should empathize, apologize, and contact the Patient Advocate immediately (or the Nursing/House Supervisor if the Patient Advocate is not available).

TELEPHONE ETIQUETTE



Your volunteer assignment is important and valuable to the hospital. Be proud of it!! To the caller, YOU are the hospital.

- Answer all calls within 3 rings.
- SMILE! People can feel a smile through your voice.
- When you answer do the following:
 - Give the location (Same Day Surgery Waiting Room)
 - Identify yourself by name (This is Jane, Volunteer speaking. May I help you?)
- Know how to place calls on hold!
- Repeat messages back for accuracy.
- Deliver messages promptly.
- At the end of the call, ask if there is anything else you can help them with.
- Always end the conversation pleasantly with “goodbye” or “have a nice day”.
- Let the caller hang up first.
- Personal telephone calls must not interfere with a volunteer’s work and should be made, when necessary, during breaks or meal periods. Incoming calls of a personal nature outside of breaks and meal periods should be restricted to emergency purposes only.
- Volunteers should not use personal communication devices (i.e. cell phone, iPad, PDA, laptop computer, etc.) while volunteering; however, personal communication devices may be used during breaks or meal periods and should not interfere with volunteer functions. Misuse of personal communication devices can result in corrective action.

Diversity/Patient Centered Care/Culture

Cultural Diversity – affects so many aspects of life including the below:

- ✓ Families – how they interact
- ✓ Male vs. Female roles
- ✓ Nutrition – What/How we eat, temperature of food
- ✓ Cultural or Religious Rituals
- ✓ Communication – how or when to speak to elders or the decision-making of elders
- ✓ How we handle or feel about personal space
- ✓ Religious beliefs/practices
- ✓ Health/Illness beliefs/practices

Culture of the Healthcare Facility

- ✓ How staff relate to each other
- ✓ How achievements are celebrated
- ✓ The amount and way information is communicated to employees
- ✓ The overall “friendliness” of the facility

Patient Centered Care

- ✓ Beliefs in the cause of illness vary from culture to culture
- ✓ Not all cultures define “caring” the same way
- ✓ Patients’ concepts about health and healing are directly related to the beliefs of their culture
- ✓ In some cultures –
 - The entire family participates in the decision making
 - The MD’s tell the family the medical status before telling the patient
 - It’s difficult for patients to “rate pain on a 1-10 scale”
 - More faith is placed in religious/folk healers than in modern medicine
- ✓ When caring for Diverse Populations: COMMUNICATION IS KEY
 - Communicating requires listening without questioning and learning to be patient and often accept long silences
 - Some people are offended by direct questions and eye contact

In Summary

- ✓ Seek to understand the role of culture in the work place
- ✓ Respect the healthcare preferences of others
- ✓ Providing quality healthcare requires cultural competence

Rules to Remember

- ✓ “Golden Rule” - Do unto others as you would have them do unto you.
- ✓ “Platinum Rule” – Do unto others as they want done unto themselves.

We could learn a lot from crayons:

- some are pretty
- some are sharp
- some are dull
- some are different colors
- some have funny names –
- but they all have learned to live in the same box.



HIPAA

Health Insurance Portability and Accountability Act (Patient Privacy and Security)

- Applies to all written, oral and electronic records (Protected Health Information – PHI).
- Consequences – Hefty fines and/or jail time!
- Shred, Shred, Shred – NEVER throw patient information into a trash can!
- Patient Rights-opting out of public patient directory.

What is Protected Health Information (PHI)?

According to HIPAA **all** of the following information can be used to identify a patient:

- Names, street address, city, county, zip code
- Phone numbers, fax numbers
- Social security numbers, birthdate
- Medical records numbers, admission dates, discharge dates, date of death
- Vehicle identifiers, serial numbers, including license plate numbers
- Full face photographs, biometric identifiers including finger and voice prints
- E-mail (electronic) mail addresses, IP address numbers

MRMC Privacy and Confidentiality

- Always knock on a patient's door before entering.
- Never discuss information about a patient to anyone in the community.
- Hospital affairs are strictly CONFIDENTIAL!
- Do not ask staff for professional advice for yourself or your family.
- You are expected to read and follow the MRMC Code of Conduct booklet.
- MRMC maintains a toll-free & anonymous Compliance Reporting Hotline.

Volunteer Scenarios:

You work where you have access to the patient census. While performing your regular duties you come across the name of a fellow volunteer or acquaintance.

OK to: Continue with your regular duties disregarding the information you happened upon.

NOT OK to: Assume that because he/she is a volunteer, or a personal friend, to notify the volunteer office or others you know!

NOT OK to: Scan the census looking for people you know!

OK to: Only use patient census for minimum information necessary to do your job, which is responding to a request for a patient room number or rounding on patients in your service area.

Hand Hygiene & Infection Prevention

Who Is Responsible for Infection Prevention?

- ✓ Infection Prevention is EVERYONE'S business!

Wash Your Hands!!

- ✓ Hand hygiene is the simplest and most effective thing you can do to prevent infection.
- ✓ Use soap and water OR alcohol based hand gel.
- ✓ Perform hand hygiene before having direct contact with a patient, before eating, after using the restroom and after coughing or sneezing.

We Expect You To!

- ✓ Keep it simple!
- ✓ Alcohol hand gel is outside of every patient room.
- ✓ ***Gel In & Gel Out*** of EVERY patient room.....**EVERY TIME!**
- ✓ Perform hand hygiene even when no one is looking!

Hand Hygiene Technique

- ✓ Alcohol Hand Gel
 - Apply to palm of hand; rub hands together covering all surfaces until dry.
 - Use enough volume to completely cover hands.
- ✓ Washing With Soap & Water
 - Wet hands with water, apply soap and rub hands together 15-30 seconds (sing Happy Birthday twice).
 - Use towel to turn off water and open the door before disposing the towel in the trash can by the door.

Fingernails & Artificial Nails

- ✓ Natural nail tips should be kept to ¼ inch in length.
- ✓ Artificial nails should not be worn when you have direct patient contact.

Transportation/Contact with Specimens or Body Fluids

- ✓ Volunteers will handle no specimens or body fluids, except for those who have received special training (safe specimen handling and Bloodborne Pathogen training).
- ✓ Volunteers should not attempt in any way to wipe or clean body fluid from any environmental surface. If found, it should be reported to Environmental Services or appropriate staff who will clean according to policy.

Illness Reporting

- ✓ Any illness of an infectious nature should be reported to the Director/Asst. Director of Volunteer Services. It is expected that a volunteer with a fever, diarrhea, flu symptoms, draining wound, etc. should NOT report to volunteer.

Wheelchair Safety

All volunteers should be aware of the proper techniques for using wheelchairs. Safety should be the first priority. Care should be taken in helping the patient safely get into and out of the wheelchair. Please adhere to the following guidelines:

- When transporting a patient, remember to have good eye contact, smile and use a pleasing voice quality.
- Be compassionate and respectful at all times.
- Address the patient by their proper title and last name (ex: Ms. or Mr.).
- Protect the patient's modesty and comfort.
- **ALWAYS** immobilize the wheelchair by using **BOTH** wheelchair brakes.
- Be sure footrests are in the upright position before helping patient into chair.
- Once patient is in chair, adjust footrests/leg rests so patient's feet/legs rest comfortably on them. Patient's arms/hands should be on the armrests or in their lap.
- Unlock brakes and proceed.
- If patient is heavy or difficult to handle, **BACK DOWN RAMPS.**
- **BACK** into elevators so patient can sit facing the door that opens. When transporting patients by wheelchair, use service elevators whenever possible.
- When transporting, walk on the right side of the hallway.
- When turning corners, use mirrors on the ceiling at intersections for added safety.
- Wheelchairs should always be returned to their proper location. They should never be left in corridors or inappropriate areas.
- **NEVER** ask a patient to get out of a wheelchair and get into a chair or another wheelchair in order to return the wheelchair to its appropriate department. Wheelchairs should never become a PR issue!
- **NEVER** lift a patient in or out of a wheelchair or vehicle! Ask staff for assistance if needed.
- Hands should always be washed after the transport of each patient.
- Wearing gloves, use disinfectant wipes to thoroughly clean wheelchairs after each use.
- Volunteers **MAY NOT ENTER** isolation rooms (exceptions are for those volunteers specially trained in their service area). Any items needing to be delivered to a patient in isolation should be left at the nurse's station.
- Wheelchairs or equipment needing repair should be taken to Plant Operations.



STAXI wheelchairs are designed to be entered from the side – **not the front!**

Healthcare Fire Safety

Essential steps to take
if you discover a fire.



There are **four** essential steps to take if you discover a fire:

R



Rescue
anyone in
immediate danger
of the fire.

A



Alarm
Pull the nearest
fire alarm and call
fire response.

C



Contain
fire by closing
all doors in the
fire area.

E



Extinguish
small fires. If not,
leave the area and
close the door.



To operate an extinguisher:

Pull
Aim
Squeeze
Sweep



Know your extinguisher
Use the correct extinguisher

*(Check your own extinguisher's label
for detailed instructions.)*



FIRE SAFETY:

1. Report any unusual smells (i.e. – electrical burning, strong chemicals, foul odors).
2. Activate pull station alarm if you see smoke or flames.
3. Assist with patient evacuation and rescue of patients if necessary.
4. The person who pulls the alarm should stay there to direct help to the location.
5. On pull stations with tamper covers, you must pull the cover up and pull the T-handle lever.
6. If you activate a PULL STATION alarm and an audible alarm does not sound, call the operator immediately.
7. When the fire alarm sounds, listen for the announcement of the location on the overhead public address paging system.
8. Volunteers working in a patient care area should report to the nurse's station to receive further instructions.
9. Volunteers may assist in clearing hallways of beds, wheelchairs, carts, etc.
10. All corridor fire doors and patient room doors must be closed.
11. Elevators should only be used for emergencies during a fire response activation. Employees and visitors should be encouraged to use the stairs whenever possible.
12. Review and become familiar with evacuation plans in your assigned work area.
13. Most importantly, remain calm during a Code Red fire response activation. Your life, as well as others, may depend on your actions.

Please know the location of the nearest fire extinguisher, pull station alarm, and exits where you volunteer!



We want to maintain a safe working environment, so it is everyone's responsibility to report all safety issues!



EMPLOYEE SAFETY

MAURY REGIONAL EMERGENCY CONDITION CODES

- Fire (**RED**)
- Cardiac Arrest (**BLUE**)
- Abduction - 17 AND Under (**PINK**)
- Missing Person/Elopement (**PURPLE**)
- Severe/Inclement Weather (**GRAY**)
- Significant Utility Failure (**GREEN**)
- Hazardous Chemical Emergency (**ORANGE**)
- **DISASTER (YELLOW)**
- MEDICAL ASSISTANCE (WHITE)
- Facility Lockdown (**BLACK**)
- Active Shooter On Campus (**SILVER**)

“RAPID RESPONSE TEAM CALL” – Critical Assessment Team

“CODE 100” – Preparation for a potentially dangerous/violent situation

“DR. RUSH” – Direct intervention required – violent behavior



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Overhead Announcements & Who Responds

- **Fire (RED)** - “Attention All Personnel – Code Red – Method of Alarm – Location”
Response – Fire Response Team – Plant Operations and other designated personnel
(During a Code Red, volunteers should stay at their stations. Volunteers in Nursing Units should report to the nurse’s station for further instructions. Fire doors close automatically in public hallways and Volunteers should not enter or exit through closed fire doors until “Code Red All Clear” has been announced overhead.)
 - **Cardiac Arrest (BLUE)** - “Attention All Personnel - Code Blue – Location”
Response – Appropriate Medical personnel (Nursing, Respiratory, Medical Staff, ED)
 - **Abduction (age 17 and under) (PINK)** – “Attention All Personnel - Code Pink – Level (age) – Location – Gender” - Response – Security and departmental action/response plans
 - **Missing Person/Elopement/Abduction (age 18 and over) (PURPLE)** - “Attention All Personnel – CodePurple – Level (age) – Location – Gender”
Response – Security and departmental action/response plans
 - **Severe/Inclement Weather (GRAY)** - “Attention All Personnel – Maury Regional Medical Center is currently under a Code Gray”
Response – General notification to all personnel – initiate appropriate severe weather actions
 - **Significant Utility Failure (GREEN)** - “Attention All Personnel – Code Green – specified utility”
Response - General notification to all personnel – initiate appropriate utility interruption actions
 - **Hazard Chemical/Product/Waste Emergency (ORANGE)** - “Attention All Personnel – Code Orange – Location” Response – Hazardous materials response/containment team
 - **Disaster (YELLOW)** – “Attention All Personnel – Code Yellow – Level (1,2,3)”
Response – All personnel – initiate disaster response plan according to facility and department guidelines
 - **Medical Assistance Needed (WHITE)** – “Attention All Personnel - Code White – Location”
Response – Medical Assistance /Non-Emergency – All nearby Nursing personnel, ED personnel, Security
 - **Building Lockdown (BLACK)** – “Attention All Personnel – Code Black – Level (1 or 2)
Level 1 Response – Partial Building Lockdown in specified area – area will be announced
Level 2 Response– Full Facility Lockdown – Report to assigned areas and activate full access control measures
 - **Code Silver – Active Shooter on Campus** – “Attention All Personnel – Code Silver – Location”
Response – Evacuate the Immediate area – Hide out – Take Action
- “CODE 100” – Potentially dangerous presence or escalation of a threatening behavior situation requiring security/staff consultation**
Response – House/Nurse Supervisor/Security Director/Senior Security Officer/Nurse Manager/Behavioral Health/Social Services
- “DR. RUSH” – Security/Combative Patient/Visitor “Attention All Personal – Dr. Rush– Location” -**
Response – Security and other designated personnel



Employee Safety

Weather Awareness

Be Aware.

Be Prepared.

Take Action.



Code Gray- Weather Emergency Levels

Level 1



- SEVERE THUNDERSTORMS
- HIGH WINDS/HAIL
- LIGHTNING
- CONDITIONS RIGHT FOR TORNADO FORMATION

Level 2



- TORNADO WARNING
- SEVERE WIND ADVISORY
- TORNADO FORMATION LIKELY
- MRMC MAY BE IN THE PATH OF A TORNADO

Level 3



- MRMC IN THE PATH OF A TORNADO
- IMPACT TO STRUCTRE IS IMMINENT
- INITIATE INTERNAL LOCK DOWN

Level 4



- MRMC IS UNDER A SNOW/ICE ADVISORY
- VEHICLE TRAVEL IS LIMITED AND DANGEROUS
- ONLY DESIGNATED ESSENTIAL PERSONNEL ARE TO REPORT TO WORK



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HOW TO RESPOND WHEN AN ACTIVE SHOOTER IS IN YOUR VICINITY

QUICKLY DETERMINE THE MOST REASONABLE WAY TO PROTECT YOUR OWN LIFE. PATIENTS AND VISITORS ARE LIKELY TO FOLLOW THE LEAD OF EMPLOYEE AND MANAGERS DURING AN ACTIVE SHOOTER SITUATION.

1. EVACUATE

- Have an escape route and plan in mind
- Leave your belongings behind
- Keep your hands visible

2. HIDE OUT

- Hide in an area out of the active shooter's view
- Block entry to your hiding place and lock the doors
- Silence pager or cell phone

3. TAKE ACTION

- As a last resort and only when your life is in imminent danger
- Attempt to incapacitate the active shooter
- Act with physical aggression and throw items at the active shooter

CALL 911 WHEN IT IS SAFE TO DO SO

HOW TO RESPOND WHEN LAW ENFORCEMENT ARRIVES ON THE SCENE

1. HOW YOU SHOULD REACT WHEN LAW ENFORCEMENT ARRIVES:

- Remain calm, and follow officers' instructions
- Immediately raise hands and spread fingers
- Keep hands visible at all times
- Avoid making quick movements toward officers such as attempting to hold on to them for safety
- Avoid pointing, screaming and/or yelling
- Do not stop to ask officers for help or direction when evacuating, just proceed in the direction from which officers are entering the premises

2. INFORMATION YOU SHOULD PROVIDE TO LAW ENFORCEMENT OR 911 OPERATOR:

- Location of the active shooter
- Number of shooters, if more than one
- Physical description of shooter/s
- Number and type of weapons held by the shooter/s
- Number of potential victims at the location

RECOGNIZING SIGNS OF POTENTIAL WORKPLACE VIOLENCE

AN ACTIVE SHOOTER MAY BE A CURRENT OR FORMER EMPLOYEE. ALERT YOUR SUPERVISOR, PUBLIC SAFETY AND HUMAN RESOURCES DEPARTMENT IF YOU BELIEVE AN EMPLOYEE EXHIBITS POTENTIALLY VIOLENT BEHAVIOR. INDICATORS OF POTENTIALLY VIOLENT BEHAVIOR MAY INCLUDE ONE OR MORE OF THE FOLLOWING:

- Increased use of alcohol and/or illegal drugs
- Unexplained increase in absenteeism, and/or vague physical complaints
- Depression/Withdrawal
- Increased severe mood swings, and noticeably unstable or emotional responses
- Increasingly talks of problems at home
- Increase in unsolicited comments about violence, firearms, and other dangerous weapons and violent crimes

Maury Regional Health Additional Policies

Alcohol and Drugs in the Workplace

- ✓ Volunteers are prohibited, while on duty, from being under the influence of alcohol and/or illegal drugs or from being impaired by the use of prescription or over the counter drugs. The violation of this policy is grounds for immediate termination.

Tobacco Free Campus

- ✓ Maury Regional is a tobacco-free campus inside and outside (this includes the use of all forms of tobacco and related products, including but not limited to cigarettes, cigars, pipes, chewing tobacco, oral and nasal snuff, and any related tobacco or tobacco-substitute smoke or smokeless tobacco products). Any violation of the hospital-wide policy will result in corrective action.

Hands On Care

- ✓ Volunteers are NEVER permitted to assist patients with hands-on care unless specified in the service description. This includes lifting patients, bathing patients or giving any type of medication or food.

Harassment and Discrimination

- ✓ The medical center and the Volunteer Services Department are committed to providing a work environment that is free of harassment and/or discrimination. This includes any actions, words, jokes, or comments engaged in by an employee, volunteer, patient, physician, visitor or vendor. Continuation of any harassment and/or discrimination may result in termination.

Suspected Abuse, Neglect or Exploitation

- ✓ It is Tennessee State Law that any case of suspected abuse, neglect or exploitation, or the threat of such must be reported to the Department of Human Services. Staff/volunteers must report suspected abuse/neglect to a Social Worker (extension 1901 or 2274), department manager, or the Director/Assistant Director of Volunteer Services. The Tennessee Department of Human Services investigates all reports.

Injury/Accident Reporting

- ✓ If you experience an injury (or witness an injury, fall or accident) while volunteering, report this to the manager in your area or to the Director/Asst. Director of Volunteer Services immediately!
- ✓ To help prevent accidents, notify Environmental Services of any spills on floors in public areas and notify Plant Operations of any safety issues that could cause an accident or injury.

Volunteer Uniform and Appearance Guidelines

- You are expected to present yourself to your volunteer assignment with a clean, neat and professional appearance. Clothing should be pressed, clean and free of stains.
- Your ID badge must be worn at all times while on duty. Wear your badge on the right side of your uniform.
- For ladies, white shirts or blouses are required when worn under a uniform (no prints, stripes or other colored shirts are acceptable).
- Men wearing a vest or jacket must also wear a white shirt and appropriate tie with the vest (no prints, stripes or other colored shirts are acceptable).
- All uniforms should be worn buttoned and should be neat and clean.
- The three color options available for pants/slacks/skirts are khaki, black and white. Suit pants, mid-calf, and other professional style dress pants are acceptable.
- Clothing items that are not acceptable in our healthcare setting include: faded, torn, ripped or frayed clothing; t-shirts or other tops with logos; jean pants of any type or color; leggings, “mini” skirts or dresses, shorts or skorts; flip flops, recreational or beach sandals; hats/caps/bandanas unless approved through the department.
- Volunteers should wear shoes or other suitable foot covering which are in compliance with departmental requirements and safety regulations. Volunteers involved with direct patient care should wear footwear having enclosed toes.
- Service Plus Ambassador uniform requirements are khaki pants as the only slack/skirt color option. This service area requires a special navy blazer. Men must wear a white shirt and appropriate tie and ladies are required to wear a white blouse and a special volunteer scarf. If a volunteer leaves this service area, the blazer and scarf must be professionally cleaned by the volunteer and returned to Volunteer Services.
- Colognes, perfumes, and aftershaves are discouraged and jewelry should be kept to a minimum.
- Volunteers should keep hair, mustaches and beards clean and neatly trimmed.
- Fingernails should be clean and neatly trimmed for patient safety. Volunteers having contact with patients, patient care equipment or food, the following applies: no nail jewelry; nails which are acrylic, gel, shellacked, artificial, press-on/extenders are prohibited; nails may be polished only if the polish is not chipped and changed every 4 days. Clear polish is preferred.
- To prevent bleeding, wash your top in cold water (see washing instructions on label).

Policy on Tattoos & Body Piercing

- Tattoos and body art must be covered whenever possible. Tattoos/body art are prohibited on the head, face, neck or scalp. Tattoos and body art must not be visible through clothing.
- Any tattoo/body art that is excessive, obscene or advocates or symbolizes discrimination or harassment based on sex, race, religion, ethnic and/or national origin, age, disability or other protected criteria is prohibited. In addition, tattoos and body art that advocate or symbolize gang affiliation, supremacist or extremist groups, or drug use are prohibited. Tattoos and body art must not be visible through clothing. Reasonable accommodation will be made for bona fide religious beliefs.
- Tongue piercing, visible body piercing (other than earrings), ear lobe “spacers/gauges” or any other extreme form of adornment is not permissible. Single nose studs are acceptable if their size is not considered extreme.
- Three (3) earrings per ear which are appropriate in size and nature are allowed.



Purpose of Volunteers

The purpose of the Volunteer Services Department is to provide groups of trained volunteers to assist Maury Regional Health and its patients. Volunteers will be used to provide services, which augment services and patient care. Volunteers are not to be used to take the place of employees of Maury Regional Health.

Volunteer Requirements and Responsibilities

- Active volunteers must give at least 100 hours a year which is equal to about two four hour shifts per month. (Exceptions apply to Music, Total Joint and Pet Therapy volunteers, etc.).
- Volunteers must agree to at least a one year commitment to our program.
- Please read all communications thoroughly that come from the medical center. This includes emails, memos, *The Volunteer* newsletter, *The VitaLink*, the volunteer bulletin board in the wheelchair room, and Vic Net Messages on the kiosk when you sign in/out.

Benefits of Volunteering

- Free meal (up to \$6) with a 3-hour shift
- Annual Awards recognition
- Participation in all Auxiliary events & employee functions
- 20% discount on regular priced items in the Gift Shop (25% discount for Gift Shop volunteers!)
- A free beverage (reg./decaf coffee or soft drink) in Java Junction during your shift (up to \$1.75 value)
- Discount on meals in the Cafeteria & Java Junction
- Free flu shot. A flu shot is **required** of all MRMC employees, physicians and volunteers annually
- Use of Hospital Pharmacy (volunteers only, not for family members)
- Use of Hospital Wellness Warehouse
- Reserved parking
- Volunteer and hospital newsletters
- Volunteer trips
- **Self- Fulfillment**

Recording Hours

- Volunteer sign in kiosks are located in the Main Lobby and on the Ground Floor.
- If the kiosk is not working, please call Volunteer Services (931) 380.4047. You may leave a message if we are out of the office.
- If you forget to clock in or out, please call Volunteer Services to correct it.



Volunteer Schedules & Substitutes

- Volunteers will be assigned and trained to a specific service area.
- Following training, you will be assigned permanent days to work each month.
- Schedules are *emailed* the 28th of each month (or mailed if you do not have email).
- If your service area has a chairman, report any schedule changes to them. If your service area does not have a chairman, contact Volunteer Services.
- If you need to be absent for an emergency, sickness, vacation, etc., it is your responsibility to follow these steps:
 - Try to find a substitute using another volunteer from this same area.
 - If you cannot find your own substitute, then contact your chairman. If your service area does not have a chairman, contact Volunteer Services.

Bonus Volunteer Hours

- Volunteers receive double hours on Saturdays, Sundays and evenings.
- Volunteers receive double hours on one of the following medical center's recognized holidays: New Year's Day, Christmas Day, Thanksgiving Day, Memorial Day, Fourth of July and Labor Day. Exceptions include when these holidays fall on a Saturday or Sunday when hours are already doubled.
- Volunteer hours logged before 8 a.m. or after 5 p.m. Monday – Friday will automatically be doubled.
- Volunteers recruiting a new volunteer, who is accepted into the volunteer program and completes at least six months of service, will receive 30 bonus volunteer hours for each new member.
- Volunteers receive hours for attending service area meetings/luncheons/dinners and educational programs coordinated through Volunteer Services.

Notes: