VOLUNTEER HANDBOOK

Volunteer Services - 2nd Floor
Canton-Potsdam Hospital
50 Leroy Street
Potsdam, NY 13676
Phone: (315) 261-5413
Fax: (315) 261-5417
E-mail: VolunteerServices@cphospital.org
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>WELCOME TO CANTON-POTSDAM HOSPITAL</td>
<td>2</td>
</tr>
<tr>
<td>CIVIC PRIDE BUILT OUR HOSPITAL</td>
<td>3</td>
</tr>
<tr>
<td>ABOUT CANTON-POTSDAM HOSPITAL</td>
<td>4</td>
</tr>
<tr>
<td>STANDARDS OF BEHAVIOR</td>
<td>6</td>
</tr>
<tr>
<td>3 JDI's OF CUSTOMER SERVICE</td>
<td>9</td>
</tr>
<tr>
<td>VOLUNTEER CODE OF ETHICS</td>
<td>11</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>12</td>
</tr>
<tr>
<td>CANTON-POTSDAM HOSPITAL POLICIES</td>
<td>12</td>
</tr>
<tr>
<td>CANTON-POTSDAM HOSPITAL VOLUNTEER SERVICES POLICIES</td>
<td>18</td>
</tr>
<tr>
<td>THE BASICS FOR VOLUNTEERS</td>
<td>22</td>
</tr>
<tr>
<td>INSTITUTIONAL PRINCIPLES</td>
<td>27</td>
</tr>
<tr>
<td>SAFETY INFORMATION</td>
<td>29</td>
</tr>
</tbody>
</table>
WELCOME TO CANTON-POTSDAM HOSPITAL

As a member of the team at Canton-Potsdam Hospital, you can be considered our most valuable asset. Without people, the Hospital could not function. I hope you will enjoy volunteering here and feel very much a part of the total organization.

Each assignment in the Hospital is important. The Hospital cannot function effectively unless everyone works together. You must remember that your real reason for serving Canton-Potsdam Hospital is to serve every patient who comes here. Your assignment, whatever it may be, contributes to the Hospital fulfilling its responsibility to give the best of service to all our patients.

Our standards at Canton-Potsdam Hospital are high. Our success depends on what we do as a group to provide the finest quality patient care. You are responsible to do your part to provide continuous, cooperative, and quality service that meets our standards. Volunteers will abide by our Standards of Behavior and the CPH Values.

This volunteer handbook explains what you can expect from the Hospital and what the Hospital will expect from you. I recommend you read it and keep it up to date so you will always be informed regarding current Hospital policies. If you have any questions concerning these policies, please speak with your supervisor or visit the Volunteer Services office; either will be happy to assist you. Revisions to your Volunteer Handbook will be sent to you by the Volunteer Services office.

Good luck and welcome to Canton-Potsdam Hospital.

Lyndsay Macagg
Volunteer & Community Events Coordinator
CIVIC PRIDE BUILT OUR HOSPITAL

The Hospital was started in the early 1920's out of a desire of local citizens to improve health care. Bequests of $50,000 from Henry P. Foster and $20,000 from Gilbert French established the financial base needed.

A house at 37 Waverly Street, on the corner of Cottage Street, was donated by John L. Brown. It served as the initial Potsdam Hospital, opening March 13, 1925.

In 1928, Mrs. Edwin A. Merritt, Jr. and her daughter, Mrs. Stanley H. Sisson, donated approximately four acres of land, now the current hospital site.

In 1929, faced with a need for a larger facility, the community conducted an astounding fund drive. In the eight days from March 14th to March 22nd, $250,000 in gifts and pledges was raised. More than 1,500 citizens toured the building the day it opened, October 17, 1932.

A new wing was added in 1949, and a major expansion was completed in 1967.

The Edward John Noble Hospital in Canton was incorporated in 1947 and admitted its first patient in 1952. With strong community support, this hospital served the Canton area until 1973, when it merged with the Potsdam Hospital.

During recent years, the Hospital has made major improvements and assumed a broader role in the overall community health program. Throughout the Hospital, sophisticated equipment has been added to aid the doctors and nurses in their jobs.

In 1988 we completed the new 13,500 square foot Emergency and Ambulatory Care Center. More than 2,000 community members contributed more than $1,000,000 to this project. Volunteers alone contributed more than $80,000.

As valuable as equipment can be, the key to health care remains people. Physicians, nurses, technicians, housekeepers, and each and every volunteer all contribute to the team effort.

The Hospital is a community hospital, built and maintained by local citizens for the health of all who need our services. It is not run by government and is not tax supported. A volunteer Board of Directors, composed of local community leaders, is responsible for governing the Hospital.
ABOUT CANTON-POTSDAM HOSPITAL

MISSION: To provide skilled, compassionate cost-effective care that promotes wellness and meets community needs.

VISION: We are committed to continuous improvements that: Meet the needs and expectations of our customers, provide or coordinate access to care, develop our skills and talents and provide the human resources, facilities and equipment we need to serve our customers. We work effectively with others to improve the region’s healthcare systems.

VALUES:

Integrity - Guiding Our Actions by Ethical Commitments
- Consistently acts in the best interests of our patients, their families, our hospital and our community.
- Follows through on commitments, holding self and others accountable for actions and outcomes.
- Speaks up and takes positive action when something seems wrong, inappropriate or inconsistent with our values or standards.
- Consistently acts with openness, honesty, transparency and trustworthiness in communication.
- At all times respects the dignity, privacy and confidentiality of others.

Respect - Recognizing and Responding to the Value of Others
- Demonstrates respect for the personal autonomy, intrinsic dignity and worth, and individual uniqueness of each person we serve.
- Treats others in a manner that elicits mutual trust, understanding and partnership toward success.
- Values diversity of personal experience, cultural insights and perspectives, professional identity and training in achieving collaborative goals.
- Demonstrates consideration of others with regard for the feelings and needs of others and an awareness of the effect of one’s own behavior on them.
- Seeks out opportunities to demonstrate regard and appreciation for others.

Compassion - Providing Excellent Care with Kindness
- Identifies with others, acting with thoughtfulness in anticipation of their needs.
- Consistently approaches others with respect, dignity, courtesy and warmth.
- Actively listens to the needs of others, and in understanding these needs acts promptly to address them.
- Acknowledges others by name, with eye contact and a smile.
- Maintains a focused and personal presence when engaged in service to others.
**Professional** - Acting with Mature Insight, Sound Judgment and High Standards

- In appearance, demeanor and deportment conveys a professional image in interaction with others.
- Brings the highest professional standards of ethics, knowledge, skill and competence to bear in decision-making and work performance.
- Approaches workplace challenges in a manner that reflects professional maturity, confidence and respectfulness.
- Understands and embraces the core professional identity as one whose talents are placed in the service of others for their benefit.
- Preserves the safety, security and confidentiality of private, protected information in all professional contexts.

**Excellence** - Commitment to Quality, Innovation and Continuous Improvement

- Continually challenges the status quo in pursuit of bettering our best.
- Utilizes data and measurement to benchmark processes and outcomes.
- Embraces evidence-based practices as minimal standards of practice.
- Demonstrates a personal commitment to deliver excellence in safety, quality and service.
- Understands accreditation, regulatory and stakeholder expectations and exceeds them.
- Embraces change in the continuous pursuit of innovation and superior care.
STANDARDS OF BEHAVIOR

Sense of Ownership/Accountability:
As a representative of Canton-Potsdam Hospital, we are dedicated and loyal to its Mission and Vision and all it encompasses. We realize that our work is a reflection of who we are as people and professionals and we are proud of our image within the community. We strive daily to make CPH a better place for our patients to receive care, our employees to work, and our physicians to practice. We are Canton-Potsdam Hospital.
We:
- Uphold the Standards of Behavior and policies and procedures at all times.
- Promote serenity and provide a healing environment.
- Create a culture in which we value, appreciate, and include one another.
- Pursue educational opportunities for professional growth.
- Support and participate in hospital activities (i.e. department meetings, employee forums, social events etc.).

Attitude/Courtesy:
We are committed to providing the highest quality of service and striving to exceed our customers’ expectations. Our customers will be treated with the utmost respect at all times. Our patients are the reason we are here. Positive attitudes are contagious.
We:
- Behave positively and professionally at all times.
- Greet everyone with a smile and speak with encouragement in our voices.
- Follow the JDIs: (i.e. Walk’ em, six foot rule, and thank you).
- Listen attentively and avoid unnecessary interruptions.
- Display optimism, energy, motivation, and enthusiasm.
- Validate and take immediate action on complaints, concerns, and questions.
- Use key words at key times (i.e. “Please,” “Thank you,” “Is there anything else I can do for you— I have time”).
- Treat everyone as we would like our own family members to be treated.
- Maintain our composure, even in stressful situations.
- Remain flexible and resourceful.

Waiting/Responsiveness:
We realize time is very valuable. We strive to provide everyone with prompt service. We are committed to meet or exceed their expectations.
We:
- Address all requests promptly
- Inform and apologize to patients, customers, and families for delays and provide an explanation when appropriate
- Ensure the comfort of our waiting patients, customers, and families
• Inform patients and customer, in advance, of significant delays that may alter their scheduled appointment time and offer alternatives whenever appropriate

**Appearance:**
We are proud of our personal appearance as well as the appearance of our facility. Our appearance reflects our respect for and willingness to serve our patients and customers. We are conveying an image of professionalism.
We:
• Adhere to the CPH Dress code, dressing tastefully, professionally and discreetly.
• Display our name badges prominently at all times.
• Practice good hygiene.
• Display body language that is attentive, caring, and enthusiastic.
• Limit the amount of cologne/perfume, make-up, and jewelry that we wear.
We as a facility:
• Ensure safety and cleanliness of all areas.
• Report facility maintenance issues to the appropriate departments.
• Dispose of any litter we find, especially in common areas.

**Privacy/Confidentiality:**
We work together to ensure everyone’s right to privacy and confidentiality. We maintain a secure and trusting environment at all times. We are respectful of everyone’s privacy.
We:
• Follow existing policies and procedures to ensure privacy.
• Conduct conversations in a quiet, discreet, and professional manner.
• Keep medical records confidential.
• Respect patient’s rooms as their personal space (i.e. knocking before entering and maintaining privacy).
• Obtain consent before divulging any information.
• Access and share only the information we need to perform our duties.
• Use the “hold” feature on our telephones to keep information from being overheard by callers.

**Safety Awareness:**
It is our responsibility to be knowledgeable and prepared to respond to emergency situations as they arise. We are responsible to maintain a safe and accident-free environment. We are thinking safe and working safe.
We:
• Follow all Federal, State, JCAHO, OSHA, and CPH policies and departmental procedures regarding safety.
• Remain knowledgeable, competent, and familiar with equipment we operate.
• Notify proper departments of safety hazards that exist (i.e. wet floors, icy walkways, damaged electrical cords, etc.).
• Follow Infection Prevention policies and procedures and use proper fitting and appropriate personal protective equipment.
• Initiate emergency responses when necessary.
• Ensure personal worksite safety by recognizing and diffusing violence in the workplace.
• Remove from service and label any unsafe and broken equipment.
• Respect the tobacco-free policy that is in effect on all Hospital property, including offsite clinics.
• Store equipment on one side of hallway when necessary.

Telephone Etiquette:
Good communication is a key component of positive customer service. We are committed to making a favorable first impression. We are communicating respectfully, clearly, and effectively.
We:
• Answer calls promptly and identify our department and our name.
• Know how to properly operate the telephones in our areas.
• Use a tone of voice that is alert, pleasant, distinct, and expressive.
• Use the caller’s name, if known, or ask “May I ask whose calling?”
• Obtain callers permission to place on hold if necessary.
• Provide the caller with the number we may be transferring to in case the call is lost.
• Speak clearly, without food or gum in mouth.
• Avoid slang phrases (i.e. yeah, nope etc.).
• Return calls promptly.

Building/Hallway/Elevator Etiquette:
We:
• Make a favorable first impression (i.e. smile and speak).
• Offer to escort our patients and customers to their destinations.
• Hold doors open to allow patients and customers to enter/exit first.
• Ensure proper coverage of our patients during transport throughout the facility.
• Allow anyone with disabilities primary access in hallways and elevators.
• Ask others politely to wait for the next available elevator when transporting patients.
• Enter hallways and elevators slowly and attentively.

Parking Etiquette:
We:
• Park in designated areas only, allowing our patients and customers to utilize the closest and most convenient areas
• Assist patients and visitors to and from the building
• Park in a considerate manner, not too close to others
Commitments to Our Patients:
As representatives of Canton-Potsdam Hospital, we are linked to one another with a common purpose of doing worthwhile work and making a difference. Regardless of our role within the organization, we work as a team. We say “Yes” more than “No” and “We” more than “I.” We are holding each other accountable in a respectful manner to demonstrate our commitments to one another.
We:

• Commit to treat everyone with dignity, respect, and a personal touch. (i.e. asking how he/she would like to be addressed)
• Advocate for our patients at all times.
• Educate our patients regarding their care and services to be provided.
• Introduce ourselves by name and department.
• Ask our patients “Is there anything else I can do for you– I have time.”
• Walk our patients and visitors to their destination when assistance is needed.
• Remain empathetic and patient at all times.

The Patient Experience Department facilitates communication between patients, families, and staff members and helps resolve any customer concerns or complaints. Patient Experience can be a tremendous resource both to our patients and families as well as staff. Our Director of Patient Experience can be found on the second floor near the elevator, or reached at ext. 5050.

3 JD!s OF CUSTOMER SERVICE

The Six-Foot Rule
When you come within six feet of someone, whether in the hall or outside, acknowledge their presence with eye contact, and a friendly hello. For our visitors, and for fellow workers, it makes our hospital a more pleasant place.

Walk ‘em
When you see someone in the hall or outside the building who looks a little bit lost, ask if they need directions, and then walk them to the destination. Don’t just point or explain how to get there, actually walk with them – even if it means bringing them to another building on campus! While you are walking with them, it is a chance to talk for a bit, and let them know that we are a friendly place.

Say Thank You
Look for opportunities to say thank you. We all enjoy it when our good work is noted. When another person or department helps you succeed in your work or brightens your day, take a moment to send them an e-mail, give phone call, say thanks in person, or send a note. All departments have a supply of blank Hospital note cards and envelopes that can be used for thank you notes. And it’s not just fellow employees you can say thank you to – it could be a physician, a physician’s office, another outside agency, or a vendor. Your words of thanks mean a great deal to others.
You are this Hospital

You are what people see when they arrive here.
Yours are the eyes they look into when they’re frightened and lonely.

Yours are the voices people hear when they ride the elevators
and when they try to sleep, and when they try to forget their problems
You are what they hear on their way to appointments that could affect their destinies, and
what they hear after they leave those appointments.

Yours are the comments people hear when you think they can’t.
Yours is the intelligence and caring that people hope they’ll find here.

If you’re noisy, so is the Hospital.
If you’re rude, so is the Hospital.

And if you’re wonderful – so is the Hospital.

No visitors, no patients can ever know the real you;
the you that you know is there – unless you let them see it.
All they can know is what they see and hear and experience.

And so we have a stake in your attitude
And in the collective attitudes of everyone who works at the Hospital.

We are judged by your performance.
We are the care you give, the attention you pay,
The courtesies you extend.

You are this Hospital.
VOLUNTEER CODE OF ETHICS

As a volunteer, I understand that I am subject to a code of ethics similar to that of professional employees. I accept the duties and responsibilities of my assignment and pledge to accomplish them. I further understand that my work augments the work of the paid staff members, and I agree to work without monetary compensation.

The following Code of Ethics and Standards are the foundations of our volunteer service standards:

• Dependable—I will carry out my assignments. If I am unable to do so, I will let my Supervisor and/or Volunteer Coordinator know ahead of time.
• Open to learning—I will try to learn all I can about the Hospital and its services. If I do not understand, I will ask questions.
• Quiet—I will work, walk, and talk quietly so I do not disturb the patients and their families.
• Courteous—I will listen to others, think of others, and help others.
• Neat and Clean—I will be well-groomed, clean in person and dress.
• Pleasant—I will be tactful and calm with everyone, keeping a smile and a sense of humor.

I will not:

• Discuss patients and their illnesses in or out of the Hospital. Everything I see or hear on duty will be kept confidential.
• Ask for free medical advice for myself or others from doctors on duty.
• Chat or visit with others, except in the line of duty.
• Make personal phone calls, text, or use cell phones while on duty.
• Leave my assigned post without permission, or go into restricted rooms or areas of the Hospital.
• Take an assignment for which I have not been trained.
INTRODUCTION

The following policies of Canton-Potsdam Hospital apply to all volunteers.

This manual was developed as a guide to the Hospital's policies and procedures and is informational only. It is not intended to create any contractual rights in favor of any volunteer of Canton-Potsdam Hospital. A volunteer can be terminated from their assignment at any time at the discretion of the Hospital and the Hospital reserves discretion to change policies, direct and discipline its volunteers, and take whatever action necessary to operate the facility.

If you have any questions regarding policies or procedures, please speak directly with your supervisor.

CANTON-POTSDAM HOSPITAL POLICIES

VOLUNTEER SERVICES POLICY

The policy of Canton-Potsdam Hospital is to provide a well-coordinated program of volunteer services, serving all Hospital departments, under the direction of Volunteer Services, and the Vice President of Human Resources.

PURPOSE

To provide proper utilization and acknowledgment of volunteers, interns and job shadow students in order to enhance Hospital operations.

PROCEDURE

Volunteers

A. To become a volunteer one must:
   a. Be 14 years of age or older. If between the ages of 14-16 years, working papers provided by the school system are required along with parental authorization.
   b. Commit to at least one two-hour shift per week for a minimum of 8 weeks.
   c. Successfully complete interview with Volunteer Coordinator.
   d. Successfully complete a background and criminal investigation prior to being referred for volunteer assignments.
   e. Successfully complete a urine drug screening provided free of charge at our Laboratory Services department.
   f. Meet with Volunteer Services staff person and the Department Manager where volunteer services will be performed.
   g. Meet with Employee Health Coordinator for a health risk assessment. The Hospital will pay, according to its scheduled fees, for the initial examination, including (if needed), two-step PPD skin test, a chest x-ray, mumps, rubella and rubeola titre/immunization, varicella zoster titre/immunization, flu vaccine, and a Tdap
immunization, (if individual has not had one within the last ten years).
h. Complete the healthcare orientation and CPH Volunteer Services orientation.
i. Schedule an appointment with Volunteer Coordinator to have a photo I.D. badge, that will be worn at all times while volunteering.

B. Volunteer types and application dates are as follows:
   a. Adult volunteer applications are accepted on an on-going basis
   b. College student volunteer applications are accepted as follows:
      • March 1st – March 31st for the summer.
      • July 1st – July 31st for the fall semester;
      • November 1st – November 30th for the spring semester;
   c. Teen volunteer applications will be accepted May 1st – May 31st for the summer session. Teen volunteers may be able to continue during the school year.

C. Applicants will be interviewed by the Volunteer Services department.

D. For applicants with a previous affiliation with Canton-Potsdam Hospital, the Volunteer Services department will need to receive approval from Human Resources for the applicant to be processed.

E. For applicants wishing to be placed in the Behavioral Health department, applicants must be 18 years of age and 2 years sobriety.

F. Each department is responsible for approving applicants provided to them by Volunteer Services, providing ongoing direction and supervision to the volunteer(s), complete competency skill checklists and annual performance evaluations.

G. Each volunteer assignment has a written description of duties and responsibilities which has been created and/or approved by the department seeking to fill the assignment. Volunteers must demonstrate commitment to meeting those obligations.

H. Volunteers will log their time using the online Volunteer Information Center (VicNet). If volunteer does not have computer access, alternate arrangements will be made.

I. Volunteers must complete annual requirements which include competency skills checklists, education review, health assessment, PPD skin test, Flu vaccination, and performance evaluation.

J. Volunteers are entitled to an entrée & fountain drink in the Hospital cafeteria for lunch or dinner on the day they volunteer, must present I.D. badge. If volunteer chooses something other than the entrée and the total is more than $5.00, volunteer will pay the balance.

K. Comply with all applicable Hospital regulations, policies and procedures, including the Hospital’s dress code and Standards of Behavior.

L. Volunteer Services and assigned department reserves the right to move or terminate a volunteer.
Internship Students
A. To become an Intern one must:
   a. Provide copy of Internship Agreement to Volunteer Services department for review.
   b. Successfully complete interview with Volunteer Coordinator and/or department manager where internship will take place.
   c. Successfully complete a background and criminal investigation prior to being referred for volunteer assignments.
   d. Successfully complete a urine drug screening provided free of charge at our Laboratory Services department.
   e. Provide proof of:
      i. Health assessment within previous 12 months;
      ii. Tdap vaccination within last 10 years;
      iii. 2 MMR vaccinations or positive titers;
      iv. 2 Varicella vaccinations or positive titer;
      v. 2 step PPD skin test;
      vi. Flu vaccination
   f. Complete the healthcare orientation for Interns.
   g. Schedule an appointment with Volunteer Coordinator to have a photo I.D. badge, that will be worn at all times while interning.
B. Each department is responsible for internship applicants provided to them by Volunteer Services, providing ongoing direction to the intern(s), and complete competency skill checklists.
C. Interns will log their time using the online Volunteer Information Center (VicNet). If Intern does not have computer access, alternate arrangements will be made.
D. Comply with all applicable Hospital regulations, policies and procedures, including the Hospital’s dress code and Standards of Behavior.
E. Volunteer Services department and sponsoring department reserves the right to move or terminate an Intern.

Observation Students
A. To become an Observation Student one must:
   a. Successfully complete interview with Volunteer Coordinator and/or department manager where observation will take place.
   b. Successfully complete a background and criminal investigation prior to being referred for volunteer assignments.
   c. Successfully complete a urine drug screening provided free of charge at our Laboratory Services department.
   d. Provide proof of:
      i. Health assessment within previous 12 months;
      ii. Tdap vaccination within last 10 years;
      iii. 2 MMR vaccinations or positive titers;
iv. 2 Varicella vaccinations or positive titer;
  v. 2 step PPD skin test;
  vi. Flu vaccination
  e. Complete the healthcare orientation for Observation Students.
  f. Schedule an appointment with Volunteer Coordinator to have a photo I.D. badge, that will be worn at all times while observing.

B. Each department is responsible for approving potential observation students provided to them by Volunteer Services, providing ongoing direction to the student(s).

C. Observation Students will log their time using the online Volunteer Information Center (VicNet). If student does not have computer access, alternate arrangements will be made.

D. Comply with all applicable Hospital regulations, policies and procedures, including the Hospital’s dress code and Standards of Behavior.

E. Volunteer Services and assigned department reserves the right to move or terminate an observation student.

TOBACCO POLICY

Tobacco use is prohibited in all facilities, vehicles and grounds owned, operated or leased by Canton-Potsdam Hospital (CPH) including within personal vehicles on CPH owned or leased grounds. Inpatients, and outpatients in and for two years thereafter, CPH will offer employees alternatives to tobacco use during work hours such as nicotine replacement therapy (NRT), and coping mechanisms. The sale of tobacco products is prohibited within hospital operated facilities.

This policy applies to:
  • all tobacco products, including but not limited to, cigarettes, cigars, pipes, herbal tobacco-like products, chewing tobacco, snuff and
  • All employees, patients, medical staff, students, contracted personnel, volunteers, visitors, vendors and tenants of CPH.

Please refer to CPH Administrative Policy T-10 – Tobacco-Free Policy for full policy & procedure.
POLICY

In accordance with the Patient Bill of Rights, patients have the right to every consideration of privacy concerning their medical care programs. The patients at Canton-Potsdam Hospital have the right to expect that all communications and records pertaining to their care shall be treated as confidential. For Disclosure of Protected Health Information refer to Administrative Procedure H-9.

This policy, and the need to maintain confidentiality, applies to all forms of communication of information, including verbal communication, written communication, access to physical files, and access to electronically stored information.

It is the responsibility of all Canton-Potsdam Hospital personnel to protect such information. Personnel includes all employees, medical staff, volunteers, Board members, and individuals in training at the Hospital.

RESPONSIBILITIES FOR PROTECTION OF INFORMATION

1. Those possessing confidential information, such as patient’s medical or financial records, are responsible for protecting the confidentiality of that information.

2. Hospital Personnel will not provide information to other employees unless they have a need to know that information for performance of their job.

3. Hospital Personnel will not seek confidential information unless they have a need to know that information to perform their job.

4. Hospital Personnel will not discuss confidential information except as required to perform their duties as hospital employees.

5. Hospital Personnel will not discuss information about patients with non-hospital persons except as medically or legally required. For example, the fact that a mutual acquaintance was treated for an injury or illness should not be shared, if you gained that knowledge in your role as a hospital employee.
6. It is appropriate, when asked for information, to say that as Hospital Personnel you are obligated to protect patient privacy and, therefore, cannot provide information.

7. Confidential written information should be kept out of public view and properly disposed of (normally by shredding).

**PROCEDURE**

**New Employees:**
All new employees will be informed of the confidentiality statement as part of the orientation process, and will sign a Confidentiality policy awareness statement confirming that they have read this policy, understand its meaning, and agree to abide by it. The Human Resources Department will be responsible to assure that this occurs.

**Staff Education:**
Staff Development will include Confidentiality as one of the topics to be covered in the annual review for all employees.

**Volunteers:**
Volunteer Services will assure that volunteers who may have access to confidential information sign a confidentiality awareness statement.

**Physicians/Board Members:**
Administration will assure that the Board of Directors and members of the Medical staff are aware of the requirement for confidentiality of information, and may, as appropriate, require the signing of the confidentiality statement.

**Students:**
Students and others taking training at the Hospital who may have access to confidential information will be informed of the policy and, as appropriate, may be required to sign the statement. This shall be the responsibility of the department supervisor responsible for those taking the training.

**Enforcement:**
Failure to follow the Confidentiality Policy is a serious matter, subject to disciplinary action for hospital Personnel, and appropriate corrective measures for any others.
CANTON-POTSDAM HOSPITAL VOLUNTEER SERVICES POLICIES

ALCOHOL & DRUG POLICY

It is the policy of Canton-Potsdam Hospital that specific procedures be followed regarding alcohol and/or drug use.

PURPOSE

To provide a safe workplace, it is recognized that alcohol and/or drug use or dependency is a major problem and can have tragic consequences for all involved. A workplace safe from the adverse effects of alcohol and drugs must be maintained.

PROCEDURE

Use, possession, transfer, solicitation, attempted or actual sale, purchase and/or distribution of illegal drugs on hospital grounds are prohibited. Being under the influence of alcohol or drugs while on duty is prohibited.

Any volunteer found to have violated this policy is subject to disciplinary action, including discharge.

BENEFITS POLICY

It is the policy of Canton-Potsdam Hospital that they will provide certain benefits to all hospital volunteers.

The following benefits are available to all registered volunteers through Volunteer Services:

- Initial physical as part of the application process.
- Initial and annual Mantoux (Tuberculosis) screening and interpretation.
- Blood work as required as part of the application process.
- Annual flu shot.
- Photo identification badge to be worn while on duty.
- Complimentary beverage while on duty.
- Complimentary meals in the hospital cafeteria at meal times, when volunteer is scheduled to be on duty.
- Opportunities for participation in various educational opportunities and social events offered by the Hospital.
- Letters of recommendation upon request.
- Recognition for hours served at an annual recognition event.
- Annual meeting with CEO.

Volunteering gives individuals an opportunity to learn new skills, work in a friendly, team environment and have the satisfaction of helping someone. Another benefit of volunteering is the positive impact it has on the volunteer’s health. Volunteering helps to keep people’s minds and bodies healthy, and it encourages participants to remain physically and mentally active. It keeps individuals from becoming isolated and it has been statistically proven to help combat depression.
**EDUCATION/COMPETENCIES POLICY**

**PURPOSE**
Volunteers will be trained and oriented to the hospital setting. Volunteers will be educated to hospital procedures to assure safety of the volunteer and others.

**PROCEDURE**
1. Volunteers will attend initial orientation or complete a take home packet prior to beginning service.
2. Volunteers may be required to attend site specific orientation and training as needed.
3. Volunteers will complete annual mandatory education.
4. Annual competencies will be completed as needed on designated services.
5. At the completion of the first 3 month period, Volunteer Services or designated department, will observe and complete a competency on a new volunteer.
6. Volunteers will be trained in Service Excellence.

**GRIEVANCE POLICY**
It is the policy of the Volunteer Services department that volunteers receive fair and equitable treatment and be provided with a means of appeal and review of volunteer assignment problems. If a volunteer is unable to resolve, on an informal basis, a problem related to discrimination, counseling and discipline, termination or department policy/procedure, procedures are available.

**PURPOSE**
To ensure appropriate resolution of differences.

**PROCEDURE**
The volunteer having a grievance or complaint will present it to the Volunteer Coordinator within 5 working days of occurrence. If there is no resolution, the volunteer may take the next step.

The volunteer, within 3 working days of the first step, may request a meeting with the Volunteer Coordinator and another staff member as appropriate. The issue will be discussed. Appropriate actions will be reviewed and a final resolution will be reached with the Coordinator and volunteer. Documentation will be housed in the volunteer’s file.
HARASSMENT POLICY
Acts of discrimination and harassment of any kind are illegal and will not be tolerated. Claims of discrimination and harassment will be investigated.

PURPOSE
To insure that sexual harassment defined as unwanted sexual advances, visual, verbal or physical.

This definition includes but not limited to:
- Unwanted sexual advances.
- Making of threatening reprisals after a negative response to sexual advances.
- Visual conduct: leering, making sexual gestures, displaying of sexually suggestive objects or pictures, cartoons or posters.
- Verbal sexual advances or propositions.
- Verbal abuse of a sexual nature, graphic verbal commentaries about an individual’s body, sexually.
- Degrading words used to describe an individual, suggestive or obscene letters, notes or invitations.
- Physical conduct: touching, assault, impending or blocking movement.

PROCEDURE
Incidents must be reported in order to be dealt with. Any volunteer who feels mistreated in this way should contact the director immediately for assistance. Any volunteer or employee who mistreats others by sexual or racial harassment may be dismissed by the Volunteer Coordinator and/or Human Resources.

When possible, confront the harasser and him/her to stop. If this is not effective, report the incident to the Coordinator and appropriate action will be taken.

INJURED WHILE ON DUTY POLICY
All injuries incurred while on duty should be reported immediately by the volunteer to the Volunteer Coordinator.

PURPOSE
To insure that all injuries are reported and appropriate action taken as necessary.

PROCEDURE
A volunteer injured while on duty must report the injury no matter how slight, to the Volunteer Coordinator as soon as it occurs. If the injury warrants, the volunteer should be directed to the Emergency Department.
PARKING INFORMATION
Only patients and visitors may use the patient parking and visitor parking area. If this area is full, patients and visitors may use the general parking areas. Volunteers are included with patients and visitors.

Students are to follow the same rules as those for employees. This includes students from the colleges taking internships or clinical experiences, and those coming to the Hospital as part of their class work. Students will receive their permits from the clinical instructor/coordinator during their orientation. The student permit will have an expiration date.

TERMINATION POLICY
It is the policy of Canton-Potsdam Hospital that specific procedures be followed in the termination or resignation of any volunteer.

PURPOSE
To ensure proper notification to the Employer and/or volunteer, to give ample time to afford the volunteer the opportunity to discuss concerns with the Volunteer Services Coordinator.

PROCEDURE
1. Resignations must be in person, over the phone, or in writing, to the proper Supervisor(s) or Volunteer Services Department.
2. Original letters of resignation shall be forwarded by the Supervisor to the Volunteer Services Office upon receipt. This shall be kept in the Volunteer’s personnel file. If the volunteer resigns in person or over the phone, Supervisor should notify Volunteer Services within a timely manner.
3. An exit interview letter will be mailed to the terminating volunteer by the Volunteer Services Office.
4. When a volunteer is unable to return to their position within twelve (12) months due to disability, (whether or not covered by Worker’s Compensation) the volunteer will be terminated and the position will become available and filled.
5. Causes for termination might include the breach of any of the volunteer rules of conduct, as listed in the volunteer handbook including: theft or destruction of hospital property; breach of confidentiality; sexual abuse/harassment; chronic attendance problems; use of alcohol or controlled substances while volunteering; posing a risk to self or others; inability to adhere to the hospital’s policies.
6. Discipline of volunteers is the responsibility of their departmental Supervisor. If a Supervisor believes termination is called for they shall contact Volunteer Services Department to review the situation, and follow up with a brief written report, to be kept in the Volunteer’s personnel file.
THE BASICS FOR VOLUNTEERS

ORIENTATION
Each new volunteer shall be acquainted with the Hospital as well as the volunteer's department and assignment requirements.

The Supervisor of the new volunteer shall provide an orientation to acquaint the new volunteer with departmental procedures and requirements with specific emphasis on departmental safety and Infection Prevention practices.

All volunteers are required to attend an annual mandatory in-service program to be completed by March 31st of each year.

Should it be necessary for a volunteer to be scheduled to attend an orientation program at a time that they are not scheduled for their assignment the Volunteer shall enter this time spent at orientation on the volunteer's time sheet and this time shall be considered time served.

MEALS
• Volunteers are entitled to a free beverage during the morning hours of 8:00 – 11:00 a.m.
• Volunteers are entitled to an entrée & fountain drink at no charge in the Hospital cafeteria if they serve through lunch (11am-1pm) or dinner (4:30-5:45pm) time, must present I.D. badge. If volunteer chooses something other than the entrée and the total is more than $5.00, volunteer will pay the balance.
• Volunteers must go to the cashier for items to be rung in the cash register and to sign the clipboard for that day.
• Volunteer meal charges will be tracked on a weekly basis and verified with the volunteer’s schedule.
• Volunteers may be subject to termination for abusing the volunteer meal policy.

DRESS CODE
Volunteers of Canton-Potsdam Hospital (CPH) are expected to be clean and well-groomed at all times. They are also expected to wear clothing that is appropriately maintained and appropriate professional attire to their job duties and setting.

General Guidelines for Appearance:
• Hair must be clean and neat with styles that are appropriate to business attire and of a color that occurs naturally (i.e., no greens or blue tints). Hair must be pulled back while working in patient care areas. Moustaches and beards must be neat and trimmed and not interfere with the fit testing personal protective equipment (PPE).
• Fingernails must be clean, conservative in length, and neatly manicured. If nail polish is worn, polish must be clear or a light color. Because of Infection Prevention risks, only short natural
nails (no artificial nails or nail extensions) are allowed when providing patient care or when working with patient care products.

- Jewelry is to be simple and appropriate to business attire. **Visible body piercing is not permitted except for in the ears.** Rings are limited to one per hand.
- Colognes and perfumes must not be used in any area due to patient, visitor or employee allergies and reactions. Colognes and perfumes are to be used sparingly in other areas of the hospital and are to be discontinued if another co-worker or volunteer finds them to be offensive.
- **Tattoos must be covered or otherwise not visible.**

**Clothing Guidelines**

- Clothing is to be appropriate for assigned work and must be worn in a manner that does not expose the abdomen, chest cleavage, or the buttocks area.
- Acceptable types of clothing include: slacks, khakis, Capri-style pants that are not tight fitting, polo and cotton shirts, golf shirts, suit jackets and blazers, ties, skirts, dresses, blouses, sweaters, hosiery and socks. Volunteers working in patient care areas are to wear socks or hose.
- Unacceptable types of clothing include: jeans of any color (any pants that are double stitched or patch pocketed), leggings, yoga pants, shorts, bib overalls, sweat shirts/pants, running suits, casual or spaghetti-type halters or tank tops, beachwear, casual tee-shirts, spandex, or other form fitting pants, distracting, offensive, or revealing clothes (including commercial slogans or pictures), skirts or dresses more than 3” above the knee.

- Individual departments may find it necessary to establish additional written dress code requirements.
- Volunteer Services provides shirts and vest for volunteers.

Volunteers who arrive at work dressed inappropriately will be sent home to change. Appropriate corrective action will occur. A repeat disregard for this policy may result in disciplinary action up to and including termination from their volunteer assignment.

**NAME TAGS**

All volunteers are provided with a photo identification tag. This tag gives name and department. These identification tags are to be worn at all times in a conspicuous place above the waist when on duty. The Photo and title must be easily seen by patients, visitors, and other staff members. No pins or stickers of any sort should be affixed to this ID tag. If the volunteer loses this ID tag or it becomes damaged to the degree that it is not easily read by others, the volunteer should contact the Volunteer Services Office to arrange for replacement.

To obtain a security ID badge, department manager must send request to Volunteer Coordinator.
PARKING
Parking for volunteers is available in the Hospital parking lot. If spaces are not available in the Hospital lot, volunteers may utilize on-street parking. Our first concern must be for our patients and visitors. Volunteers are not permitted to use any space provided for physicians or emergency and Hospital vehicles. Parking is not permitted on unpaved or lawn areas.

All volunteers have a responsibility to become familiar with restricted areas around the Hospital building. Parking in unauthorized areas shall be considered a violation of the Standards of Behavior and may result in disciplinary action.

PERSONAL PROPERTY
If it is not clear where personal belongings can be stored in your work area, please ask. Leave any valuables at home or well hidden in your locked car.

VOLUNTEER STATUS
Each volunteer will be assigned a status of Active when they begin their volunteer assignment. When a volunteer’s assignment is finished they will have a status of Inactive.

If a volunteer will be away for more than 1 month their status will be changed to Leave of Absence. Volunteers must notify the Volunteer Coordinator of dates they will be away.

VOLUNTEER ASSIGNMENTS
Volunteer Assignments are made based on the candidate’s skills, interests and abilities, as well as the needs and priorities of the hospital. During the interview, various placement options will be discussed.

We appreciate the gift of your time and energy. When scheduling your volunteer times, we are flexible and work with your availability. The typical volunteer shift is 3-4 hours, once per week, on a regular schedule.

It is important to know that we are counting on you. If you cannot make your assigned shift please call the volunteer office. Your reliability means a great deal to us, and your experience will be much more valuable and rewarding if you come regularly. If for any reason you feel that your position does not fit your personality, abilities, etc., please call the volunteer office to discuss another placement.

There are a number of volunteer assignments available:
- Department Support
- Special Projects
- Spiritual Care
- Gift Cart
- Variety of other Department Specific Assignments Available
- Nursing Units
- Materials Management
- Gift Shop Cashier
- Information Desk/Greeter
This list is certainly not all-inclusive, as many volunteers have unique talents that can be used in many ways at Canton-Potsdam Hospital.

**TIME SHEETS**

It is required that volunteers accurately and honestly complete and log each day’s hours and minutes on VicNet. In the case that internet is not accessible volunteers have the option of completing and signing time sheets on a monthly basis. Totals of each day’s hours and minutes must be recorded with totals for the month. Time sheets must be turned into Volunteer Services by the 3rd of the following month.

We need to know that you are in the building, and this is how we track your volunteer service hours.

Volunteers are awarded for the completion and documentation of their service hours at particular milestones.

**REPORTING SICK LEAVE AND LATE ARRIVAL**

All volunteers must provide reasonable notice if unable, for any reason, to report to work as scheduled. Reasonable notice is defined as a minimum of one (1) hour before the beginning of your shift. Notice must be given in person or by phone directly to the volunteer’s Supervisor or Volunteer Coordinator.

**ANNUAL PERFORMANCE EVALUATIONS**

Each volunteer will have his volunteer performance evaluated at least once a year. Annual evaluations will normally occur on the anniversary of the start date in the current assignment. Performance evaluations provide an opportunity for discussion between the Supervisor and the volunteer and promote a two-way exchange of information and feelings resulting in specific and constructive agreement, strengthen or reinforce volunteer performance, and improve working relationships as well as a plan for self-development.

The performance evaluation form shall be completed by the supervisor and contain the signatures of both the Supervisor and volunteer. The volunteer’s signature does not imply concurrence with the review but only documents that the conference has taken place. Space is provided for volunteer comments. The evaluation form will be sent to the Volunteer Coordinator and is then placed in the volunteer’s personnel file.

**PERSONAL CHANGES**

Changes of name, address, or telephone number should be reported as soon as possible to the Volunteer Services Office. The Volunteer Services Office will assist volunteers in completing whatever forms are required for the change. Volunteers should also advise their immediate supervisor of changes of telephone numbers.
PERSONNEL FILES
Volunteers shall have reasonable access to their personnel files. Prior notice to the Volunteer Services Department may be necessary to assure availability of a member of the Volunteer Services staff to assist the volunteer, to be available to answer any questions the volunteer may have, and to ensure security of the file. The Volunteer Services office is open from 8:00 am to 4:00 pm, Monday thru Friday.

No personnel file or portion of a file shall be removed from the Volunteer Services Office.

RESIGNATION/TERRMINATION OF SERVICE
If you decide to leave the Hospital, we would like you to give your Department Head/Supervisor and Volunteer Coordinator a minimum of two (2) weeks advance notice and you must return your ID badge to the Volunteer Coordinator.

Whenever possible, terminating volunteers should have an interview with the Volunteer Coordinator. We ask that you be frank in discussing your reasons for leaving and to make any suggestions that you feel would be helpful to us.

DISCIPLINE
The discipline procedure is designed to protect the safety and to ensure fair treatment of all volunteers. Discipline may be required for safety violations, absenteeism or violation of the Standards of Behavior, or violation of any Hospital policies.

The form of discipline is determined by the immediate Supervisor or Department Head and/or Volunteer Coordinator.

A written record of discipline will be kept in the volunteer's personnel file.

DISTRIBUTION OF MATERIALS OR SOLICITATION
No person, volunteer or otherwise, is permitted to solicit for any purpose, distribute written or other material, on the grounds or within the buildings owned by the Hospital without prior approval of the President or his designee.

ADMINISTRATIVE MANUAL
Throughout this handbook, references are made to policies and procedures contained in the Administrative Manual. There is a copy of this manual in each department or unit throughout the Hospital and on SharePoint.
INSTITUTIONAL PRINCIPLES

NONDISCRIMINATION
The Hospital will comply with New York State and Federal laws prohibiting discrimination on the basis of race, color, creed, national origin, sex, sexual orientation, marital status, disability or age.

The masculine pronoun, he, used in this manual refers to both male and female volunteers.

Volunteers are selected on the basis of their qualifications to fit previously established criteria and specifications for the job. Such criteria include education, experience, mental capacity, physical ability and willingness to work in the specific environment of the job. The objective is to assign the most qualified individual.

HIPAA & CONFIDENTIALITY
All patient information is confidential. This includes name, address, age and any information about a medical condition. If you reveal any of this information to somebody who does not need to know, you have broken the law. Volunteers may not ever view a patient’s medical records; a violation of confidential information may result in termination of volunteer service.

What is HIPAA? Health Information Portability and Accountability Act of 1996. This is a law intended to preserve privacy of patients’ health information. It is meant to make your medical information available to those who must see it, while keeping it from those who do not.

- Follow the simple “need to know rule.” If you require patient information to do your job, than you are allowed to know.
- You may overhear private health information. Keep it to yourself.
- All paper records should be shredded, if you see something improperly discarded, notify a supervisor.

All matters pertaining to patients, medical records, patient accounts and all other Hospital business is confidential. Revealing this information to ANYONE who does not require this information for the performance of their jobs is prohibited.

Breaches of confidentiality on the part of others must be reported to your immediate supervisor.

Breaches of confidentiality on any matter shall be considered a serious offense and will be subject to discipline which may include termination of employment.
* Anything you see,
* Anything you hear,
* Anything you read,
* Anything you observe with your five senses,
* Anything you already know about a patient....

MUST BE KEPT CONFIDENTIAL

You should not ask people in the hospital things like “What are you doing here?”, “Who are you here visiting?”, or make statements like “I saw your mother in here yesterday.”, “I saw your Mom’s name on the pre-op list.”

If you are in an area where you need to call out patient names or information you must do so in a quiet manner.

**PATIENT BILL OF RIGHTS**

Patients at Canton-Potsdam Hospital have the right to:

- Understand and use these rights. If for any reason patients do not understand or you need help, the hospital must provide assistance, including an interpreter.
- Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, source of payment, or age.
- Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
- Receive emergency care, as the patient needs it.
- Be informed of the name and position of the doctor who will be in charge of their care in the hospital.
- Know the names, positions, and functions of any hospital staff involved in your care and refuse their treatment, examination or observation.
- Receive complete information about the diagnosis, treatment and prognosis.
- Receive all the information that is needed to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
- Receive all the information that is needed to give informed consent for an order not to resuscitate. Patients have the right to designate an individual to give this consent if they are too ill to do so.
- Refuse treatment and be told what effect this may have on their health.
- Refuse to take part in research. In deciding whether or not to participate, patients have the right to a full explanation.
- Privacy while in the hospital and confidentiality of all information and records regarding their care.
- Participate in all decisions about their treatment and discharge from the hospital. The hospital must provide the patient with a written discharge plan and written description of how the patient can appeal their discharge.
- Review medical records without charge. Obtain a copy of medical records for which the hospital can charge a reasonable fee. The patient cannot be denied a copy solely because the patient cannot afford to pay.
- Receive an itemized bill and explanation of all charges.
- Complain without fears of reprisals about the care and services they are receiving and to have the hospital respond to them; and if the patient requests it, a written response. If the patient is not satisfied with the hospital’s response they can complain to the New York State Health Department. The hospital must provide the patient with the Health Department telephone number.
- Authorize those family members and other adults who will be given priority to visit consistent with their ability to receive visitors.
- Make known their wishes in regard to anatomical gifts. Patients may document their wishes in the health acre proxy or on a donor card, available from the hospital.

**SAFETY INFORMATION**

**INFECTION PREVENTION**
Please remember that you are not allowed to enter a room of a patient with the following isolation precautions, unless you have received special training:
- Contact
- Contact Plus
- Droplet
- Neutropenic
- Airborne (you are not allowed to enter these rooms at any time)

**PATIENT SAFETY**
Keeping our patients safe while they are under our care is vital. Please do not ever try to lift or move a patient from one area to another; this is the responsibility of trained staff. This includes from bed to chair, chair to bed, from sitting to standing, to and from a stretcher, or off of the floor. Please ask assistance from staff before attempting to move a patient. Remember that volunteers can transport (wheelchairs etc.) but not transfer. Also never give a patient anything to eat or drink without checking with the staff.

**CONTACT WITH BLOOD OR BODY FLUIDS**
Practice standard precautions. Avoid contact with any fluid or substance that is not yours. If you do have accidental contact, wash with soap and water, and immediately contact a department manager for further instruction. A comprehensive OSHA exposure control plan is available in the Infection Prevention Manual found on SharePoint.
HAND HYGIENE

Hand washing is considered the single most important procedure for preventing healthcare-associated infections.

Volunteers should wash their hands to prevent the spread of infection:
- When coming on duty.
- Before and after patient contact.
- Before donning and after removing gloves.
- When hands are visibly soiled.
- Between patient interactions.
- After sneezing, coughing, blowing, or wiping the nose or mouth.
- Upon leaving a patient’s room.
- Before and after eating, drinking, or smoking.
- After handling animals.
- After using the restroom.
- Upon completion of duty.

Hand Washing Guidelines:
- Wash all surfaces, hands, and fingers with soap and water for at least 15-20 seconds.
- Rinse under warm water.
- Dry hands with a clean paper towel and discard.
- Turn off faucet with a dry paper towel and discard.

When hands are not visibly soiled, use alcohol based rubs (Purell), cover all surfaces of hands and fingers and rub hands together for at least 15-20 seconds.
FAQs about "Clostridium Difficile"

What is Clostridium difficile Infection?

Clostridium difficile (pronounced klos-STRID-ee-um dif-UH-seel), also known as "C. diff" [See-diff], is a germ that can cause diarrhea. Most cases of C. diff infection occur in patients taking antibiotics. The most common symptoms of a C. diff infection include:

- Watery diarrhea
- Fever
- Loss of appetite
- Nausea
- Belly pain and tenderness

Who is most likely to get C. diff infection?

The elderly and people with certain medical problems have the greatest chance of getting C. diff. C. diff spores can live outside the human body for a very long time and may be found on things in the environment such as bed linens, bed rails, bathroom fixtures, and medical equipment. C. diff infection can spread from person-to-person on contaminated equipment and on the hands of doctors, nurses, other healthcare providers and visitors.

Can C. diff infection be treated?

Yes, there are antibiotics that can be used to treat C. diff. In some severe cases, a person might have to have surgery to remove the infected part of the intestines. This surgery is needed in only 1 or 2 out of every 100 persons with C. diff.

What are some of the things that hospitals are doing to prevent C. diff infections?

To prevent C. diff infections, doctors, nurses, and other healthcare providers:

- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient. This can prevent C. diff and other germs from being passed from one patient to another on their hands.
- Carefully clean hospital rooms and medical equipment that have been used for patients with C. diff.
- Use Contact Precautions to prevent C. diff from spreading to other patients. Contact Precautions mean:
  - Whenever possible, patients with C. diff will have a single room or share a room only with someone else who also has C. diff.
  - Healthcare providers will put on gloves and wear a gown over their clothing while taking care of patients with C. diff.
  - Visitors may also be asked to wear a gown and gloves.
  - When leaving the room, hospital providers and visitors remove their gown and gloves and clean their hands.

- Patients on Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They can go to other areas of the hospital for treatments and tests.
- Only give patients antibiotics when it is necessary.

What can I do to help prevent C. diff infections?

- Make sure that all doctors, nurses, and other healthcare providers clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

- Only take antibiotics as prescribed by your doctor.
- Be sure to clean your own hands often, especially after using the bathroom and before eating.

Can my friends and family get C. diff when they visit me?

C. diff infection usually does not occur in persons who are not taking antibiotics. Visitors are not likely to get C. diff. Still, to make it safer for visitors, they should:

- Clean their hands before they enter your room and as they leave your room
- Ask the nurse if they need to wear protective gowns and gloves when they visit you.

What do I need to do when I go home from the hospital?

Once you are back at home, you can return to your normal routine. Often, the diarrhea will be better or completely gone before you go home. This makes giving C. diff to other people much less likely. There are a few things you should do, however, to lower the chances of developing C. diff infection again or of spreading it to others.

- If you are given a prescription to treat C. diff, take the medicine exactly as prescribed by your doctor and pharmacist. Do not take half-doses or stop before you run out.
- Wash your hands often, especially after going to the bathroom and before preparing food.
- People who live with you should wash their hands often as well.
- If you develop more diarrhea after you get home, tell your doctor immediately.
- Your doctor may give you additional instructions.

If you have questions, please ask your doctor or nurse.
**Introduction**

All health-care settings need an infection-control program designed to ensure prompt
- detection,
- airborne precautions, and
- treatment

of persons who have suspected or confirmed tuberculosis (TB) disease (or prompt referral of persons who have suspected TB disease for settings where persons with TB disease are not expected to be encountered). In order to be effective, the primary emphasis of the TB infection-control program should be on achieving three goals.

In all health-care settings, particularly those in which persons who are at high risk for exposure to *Mycobacterium tuberculosis* work or receive care, policies and procedures for TB control should be developed, reviewed periodically, and evaluated for effectiveness to determine the actions necessary to minimize the risk for transmission of *M. tuberculosis*.

**Overview of TB Infection-Control Measures**

The TB infection-control program should be based on a three-level hierarchy of control measures. The first and most important level of the hierarchy, administrative measures, affects the largest number of persons and is intended primarily to reduce the risk of uninfected persons exposed to persons who have TB disease. These measures include the following activities:
- Assigning responsibility for TB infection control in the setting;
- Conducting a TB risk assessment of the setting;
- Developing and instituting a written TB infection-control plan to ensure prompt detection, airborne precautions, and treatment of persons who have suspected or confirmed TB disease;
- Ensuring the timely availability of recommended laboratory processing, testing, and reporting of results to the ordering physician;
- Implementing effective work practices for the management of patients with suspected or confirmed TB disease;
- Ensuring proper cleaning and sterilization or disinfection of potentially contaminated equipment (e.g., bronchoscopes, endoscopes);
- Training and educating health-care workers (HCWs) regarding TB, with specific focus on prevention, transmission, and symptoms;
- Screening and evaluating HCWs who are at risk for TB disease or who might be exposed to *M. tuberculosis*;
- Applying epidemiologic-based prevention principles, including the use of setting-related infection-control data;
- Using appropriate signage advising respiratory hygiene and cough etiquette; and
- Coordinating efforts with the local or state health department.

The second level of the hierarchy is the use of environmental controls to prevent the spread and reduce the concentration of infectious droplet nuclei in ambient air. Primary environmental controls control the source of infection by using local exhaust ventilation (hoods, tents, or booths) and dilute and remove contaminated air by using general ventilation. Secondary environmental controls control the airflow to prevent contamination of air in areas adjacent to the source (airborne infection isolation [AI] rooms) and clean the air by using high efficiency particulate air (HEPA) filtration, or ultraviolet germicidal irradiation.

The first two control levels of the hierarchy minimize the number of areas in the health-care setting where exposure to *M. tuberculosis* may occur. They reduce, but do not eliminate, the risk in those few areas where exposure to *M. tuberculosis* can still occur (e.g., AI rooms housing TB patients and treatment rooms in which cough-inducing or aerosol-generating procedures are performed on TB patients). Therefore, the third level of the hierarchy is the use of respiratory protective equipment in situations that pose a high risk of exposure to *M. tuberculosis*.
Use of respiratory protection equipment can further reduce risk for exposure of HCWs to infectious droplet nuclei that have been expelled into the air from a patient with infectious TB disease. The following measures can be taken to reduce the risk for exposure:

- Implementing a respiratory protection program
- Training HCWs on respiratory protection
- Training patients on respiratory hygiene and cough etiquette procedures

### Determining the Infectiousness of TB Patients

In general, patients who have suspected or confirmed TB disease should be considered infectious if (a) they are coughing, undergoing cough-inducing procedures, or have positive sputum smear results for acid-fast bacilli (AFB); and (b) they are not receiving adequate antituberculosis therapy, have just started therapy, or have a poor clinical or bacteriologic response to therapy.

For patients placed under airborne precautions because of suspected infectious TB disease of the lungs, airway, or larynx, airborne precautions can be discontinued when infectious TB disease is considered unlikely and either

- Another diagnosis is made that explains the clinical syndrome, or
- The patient produces three consecutive negative sputum smears collected in 8- to 24-hour intervals (one should be an early morning specimen).

Patients for whom the suspicion of infectious TB disease remains after the collection of three negative sputum smear results should not be released from airborne precautions until they

- Receive standard multidrug antituberculosis treatment (minimum of 2 weeks) and
- Demonstrate clinical improvement.

For these patients, additional diagnostic approaches (e.g., sputum induction) and, after sufficient time on treatment, bronchoscopy may need to be considered.

Patients who have drug-susceptible TB of the lung, airway, or larynx, should remain under airborne precautions until they

- Produce three consecutive negative sputum smears collected in 8- to 24-hour intervals (one should be an early morning specimen), and
- Receive standard multidrug antituberculosis treatment (minimum of 2 weeks), and
- Demonstrate clinical improvement.

### Note

The Centers for Disease Control and Prevention (CDC) is not a regulatory agency; CDC recommendations on infection control provide evidence-based guidance. For regulations in your area, refer to state and local regulations and contact your local Occupational Safety and Health Administration (OSHA) office. A directory of OSHA offices may be found at www.osha-slc.gov/html/RAmap.html.

### References


### Additional Information

**Websites:**

CDC Division of Tuberculosis Elimination: [www.cdc.gov/tb](http://www.cdc.gov/tb)


National Institute for Occupational Safety and Health: [www.cdc.gov/niosh/topics/tb](http://www.cdc.gov/niosh/topics/tb)

Occupational Safety and Health Administration: [www.osha.gov/SLTC/tuberculosis/](http://www.osha.gov/SLTC/tuberculosis/)

**Fact Sheet:**

Respiratory Hygiene/Cough Etiquette in Healthcare Settings

To prevent the transmission of all respiratory infections in healthcare settings, including influenza, the following infection control measures should be implemented at the first point of contact with a potentially infected person. They should be incorporated into infection control practices as one component of Standard Precautions.

1. Visual Alerts
Post visual alerts (in appropriate languages) at the entrance to outpatient facilities (e.g., emergency departments, physician offices, outpatient clinics) instructing patients and persons who accompany them (e.g., family, friends) to inform healthcare personnel of symptoms of a respiratory infection when they first register for care and to practice Respiratory Hygiene/Cough Etiquette.

2. Respiratory Hygiene/Cough Etiquette
The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection:

- Cover your mouth and nose with a tissue when coughing or sneezing;
- Use the nearest waste receptacle to dispose of the tissue after use;
- Perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub, or antiseptic handwash) after having contact with respiratory secretions and contaminated objects/materials.

Healthcare facilities should ensure the availability of materials for adhering to Respiratory Hygiene/Cough Etiquette in waiting areas for patients and visitors.

- Provide tissues and no-touch receptacles for used tissue disposal.
- Provide conveniently located dispensers of alcohol-based hand rub; where sinks are available, ensure that supplies for hand washing (i.e., soap, disposable towels) are consistently available.

3. Masking and Separation of Persons with Respiratory Symptoms
During periods of increased respiratory infection activity in the community (e.g., when there is increased absenteeism in schools and work settings and increased medical office visits by persons complaining of respiratory illness), offer masks to persons who are coughing. Either procedure masks (i.e., with ear loops) or surgical masks (i.e., with ties) may be used to contain respiratory secretions (respirators such as N95 or above are not necessary for this purpose).

When space and chair availability permit, encourage coughing persons to sit at least three feet away from others in common waiting areas. Some facilities may find it logistically easier to institute this recommendation year-round.

4. Droplet Precautions
Adhere healthcare personnel to observe Droplet Precautions (i.e., wearing a surgical or procedure mask for close contact), in addition to Standard Precautions, when examining a patient with symptoms of a respiratory infection, particularly if fever is present. These precautions should be maintained until it is determined that the cause of symptoms is not an infectious agent that requires Droplet Precautions.
OSHA’s Bloodborne Pathogens Standard

Bloodborne pathogens are infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS. Workers exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses.

**Protections Provided by OSHA’s Bloodborne Pathogens Standard**

All of the requirements of OSHA’s Bloodborne Pathogens standard can be found in Title 29 of the Code of Federal Regulations at 29 CFR 1910.1030. The standard’s requirements state what employers must do to protect workers who are occupationally exposed to blood or other potentially infectious materials (OPIM), as defined in the standard. That is, the standard protects workers who can reasonably be anticipated to come into contact with blood or OPIM as a result of doing their job duties.

In general, the standard requires employers to:

- **Establish an exposure control plan.** This is a written plan to eliminate or minimize occupational exposures. The employer must prepare an exposure determination that contains a list of job classifications in which all workers have occupational exposure and a list of job classifications in which some workers have occupational exposure, along with a list of the tasks and procedures performed by those workers that result in their exposure.

- **Employers must update the plan annually** to reflect changes in tasks, procedures, and positions that affect occupational exposure, and also technological changes that eliminate or reduce occupational exposure. In addition, employers must annually document in the plan that they have considered and begun using appropriate, commercially-available effective safer medical devices designed to eliminate or minimize occupational exposure. Employers must also document that they have solicited input from frontline workers in identifying, evaluating, and selecting effective engineering and work practice controls.

- **Implement the use of universal precautions** (treating all human blood and OPIM as if known to be infectious for bloodborne pathogens).

- **Identify and use engineering controls.** These are devices that isolate or remove the bloodborne pathogens hazard from the workplace. They include sharps disposal containers, self-sheathing needles, and safer medical devices, such as sharps with engineered sharps-injury protection and needleless systems.

- **Identify and ensure the use of work practice controls.** These are practices that reduce the possibility of exposure by changing the way a task is performed, such as appropriate practices for handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items.

- **Provide personal protective equipment (PPE), such as gloves, gowns, eye protection, and masks.** Employers must clean, repair, and replace this equipment as needed. Provision, maintenance, repair and replacement are at no cost to the worker.

- **Make available hepatitis B vaccinations to all workers with occupational exposure.** This vaccination must be offered after the worker has received the required bloodborne pathogens training and within 10 days of initial assignment to a job with occupational exposure.

- **Make available post-exposure evaluation and follow-up to any occupationally exposed worker who experiences an exposure incident.** An exposure incident is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM. This evaluation and follow-up must be at no cost to the worker and includes documenting the route(s) of exposure and the circumstances
under which the exposure incident occurred; identifying and testing the source individual for HBV and HIV infectivity, if the source individual consents or the law does not require consent; collecting and testing the exposed worker’s blood, if the worker consents; offering post-exposure prophylaxis; offering counseling; and evaluating reported illnesses. The healthcare professional will provide a limited written opinion to the employer and all diagnoses must remain confidential.

- **Use labels and signs to communicate hazards.** Warning labels must be affixed to containers of regulated waste; containers of contaminated reusable sharps; refrigerators and freezers containing blood or OPIM; other containers used to store, transport, or ship blood or OPIM; contaminated equipment that is being shipped or serviced; and bags or containers of contaminated laundry, except as provided in the standard. Facilities may use red bags or red containers instead of labels. In HIV and HBV research laboratories and production facilities, signs must be posted at all access doors when OPIM or infected animals are present in the work area or containment module.

- **Provide information and training to workers.** Employers must ensure that their workers receive regular training that covers all elements of the standard including, but not limited to: information on bloodborne pathogens and diseases, methods used to control occupational exposure, hepatitis B vaccine, and medical evaluation and post-exposure follow-up procedures. Employers must offer this training on initial assignment, at least annually thereafter, and when new or modified tasks or procedures affect a worker’s occupational exposure. Also, HIV and HBV laboratory and production facility workers must receive specialized initial training, in addition to the training provided to all workers with occupational exposure. Workers must have the opportunity to ask the trainer questions. Also, training must be presented at an educational level and in a language that workers understand.

- **Maintain worker medical and training records.** The employer also must maintain a sharps injury log, unless it is exempt under Part 1904 -- Recording and Reporting Occupational Injuries and Illnesses, in Title 29 of the Code of Federal Regulations.

**Additional Information**

For more information, go to OSHA’s Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics web page at: https://www.osha.gov/SLTC/bloodbornepathogens/index.html.

To file a complaint by phone, report an emergency, or get OSHA advice, assistance, or products, contact your nearest OSHA office under the “U.S. Department of Labor” listing in your phone book, or call us toll-free at (800) 321-OSHA (6742).

This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; the teletypewriter (TTY) number is (877) 889-5627.

For assistance, contact us. We can help. It’s confidential.
**TOXIC SUBSTANCES**

All volunteers who handle, use, or may be exposed to hazardous chemicals or toxic substances within the scope of their duties should be aware of the existence of these substances and their potential hazards.

Department Directors and supervisors provide training regarding the proper handling of toxic substances to all newly hired volunteers before initial assignment begins and to all department volunteers annually.

Material Safety Data Sheets (OSHA Form 20) are kept on file in each "user department." Safety Data Sheets can be found in the office of Facilities and General Services and the Emergency Services Department.

An volunteer who wants a copy of a Material Safety Data Sheet on a substance he or she uses or is exposed to during the course of their work may obtain a copy form their supervisor, the office of Facilities and General Services or make a copy from the catalog in the Emergency Services department using the copier in the Admissions Office. If you have any questions or concerns regarding toxic substances please speak immediately with your supervisor, or the Facilities and Maintenance Department.

A more detailed description of hazardous waste policy is included in the Administrative Manual policy available in your department.

**FIRE SAFETY**

In the event of a Fire: RACE

- Rescue
- Activate
- Contain
- Extinguish

Fires & Extinguishers:

- Class A: wood, paper, cloth
- Class B: oil, gas, grease
- Class C: electrical

How to use a Fire Extinguisher: PASS

- Pull, Aim, Squeeze, and Sweep

Fire Safety:

- Close all doors and windows
- Never use the elevator
- Do not block fire doors
- Feel doors before entering
Each volunteer in the Hospital has a responsibility for safety. Volunteers shall keep themselves informed of the policies contained in the Administrative Manual; S-2 General Safety, S-4 Safety, Patient Care and Equipment, and S-5 Safety, Electrical Powered Equipment as well as all other policies pertaining to safety.

Volunteers should be alert for possible safety hazards encountered in the course of their work in the Hospital and should behave in a manner to avoid or minimize hazards to themselves, others, and Hospital property.

Supervisors will assure that their volunteers are familiar with safety practices and procedures in the Hospital and will instruct their staff in safety hazards peculiar to their work.

Hazards should be reported immediately to the Safety Officer.

An incident is any occurrence or accident, including continuous or repeated exposure to conditions which result in bodily injury or property damage, neither expected nor intended from the standpoint of the Hospital.

All incidents involving patients, visitors, or volunteers shall be reported immediately, as per Administrative Manual Policy I-1, "Incident Reporting". Action shall be taken to minimize a recurrence and to provide assistance for following up with the parties involved.

EMERGENCY CODES

To Report Any Emergency: Pick Up Any Hospital Phone and Dial 61. You will be on the Overhead Speaker. Announce Code, Location and Repeat.

<table>
<thead>
<tr>
<th>CODE BLUE</th>
<th>Cardiac Arrest</th>
</tr>
</thead>
<tbody>
<tr>
<td>CODE BLUE BRASLOW</td>
<td>Pediatric Cardiac Arrest</td>
</tr>
<tr>
<td>CODE RED</td>
<td>Fire situation</td>
</tr>
<tr>
<td>CODE AMBER</td>
<td>Infant/Child Abduction</td>
</tr>
<tr>
<td>CODE YELLOW</td>
<td>Bomb Threat. Notify most senior administrator on staff</td>
</tr>
<tr>
<td>CODE GREEN</td>
<td>Disaster—Internal or External. You may be asked to assist as appropriate</td>
</tr>
<tr>
<td>CODE ORANGE</td>
<td>Announced when computers are not functioning</td>
</tr>
<tr>
<td>CODE GREY</td>
<td>Acting Out Person (AOP)</td>
</tr>
<tr>
<td>CODE SILVER</td>
<td>Weapons Situation</td>
</tr>
<tr>
<td>CODE HELP</td>
<td>To summon immediate assistance for situations not covered above.</td>
</tr>
</tbody>
</table>
VOLUNTEER HANDBOOK RECEIPT FORM

I, ________________________________, received a copy of the Canton-Potsdam Hospital Volunteer Handbook on ______________________, 20__.  

I understand it is my responsibility to read and understand the Handbook and abide by the conditions and policies contained therein. Should I not understand any portion incorporated in the Handbook or revisions issued hereafter, I will seek an explanation from my immediate supervisor or the Volunteer Coordinator.

I will uphold the Standards of Behavior and the CPH Values.

I will provide excellent customer service to everyone, all the time.

I understand that visible body piercing is not permitted except for in the ears; tattoos must be covered or otherwise not visible.

______________________________    ______________ __
Signature of Volunteer        Date