



# **Volunteer Handbook**

This handbook is produced by the Volunteer Services department  
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# ABOUT THE VIRGINIA HOME

## History

On March 1, 1894, Mary Tinsley Greenhow, herself disabled, secured a charter from the Virginia General Assembly to establish a home for Virginians with disabilities. The Home opened on what is now Governor Street with a single room and a single patient. From our small beginnings, to our second location on Broad Street, through today in our present location in Byrd Park, The Virginia Home has served hundreds of Virginians in need of long-term care. Today, Miss Greenhow's legacy is a modern, thriving facility and is home to 130 men and women from every corner of the Commonwealth. More than a century after its inception, The Home remains the only facility of its kind in Virginia and a unique model for residential care of adults with disabilities.

## The Home's Mission

The Virginia Home is a private, nonprofit 130-bed facility providing nursing, therapeutic and residential care to adult Virginians with irreversible physical disabilities. The Home exists to provide compassionate, professional care and to ensure that the lifelong comfort and security of these individuals will never be compromised, regardless of ability to pay. The staff develops and seeks to improve the physical, social and emotional lives of those living with a severe disabling condition, helping them to live active, meaningful lives.

## Mission of Volunteer Services

The Volunteer Services department exists to advance the continuous improvement of our residents' quality of life. Our mission is to enable, encourage and engage the residents of The Virginia Home through the innovative utilization of our community's resources.

Volunteers are the heart of The Virginia Home. They are our governing Board of Trustees, the Junior Board, and scores of individuals, businesses, and organizations who give freely of their time and their talents to better the lives of our residents. Volunteers augment our quality professional services with the caring support, interest, assistance and friendship that comes from the heart. The Virginia Home was built on a foundation of volunteer action and community concern and today thrives as a result of this continued tradition.

## Services Provided by The Home

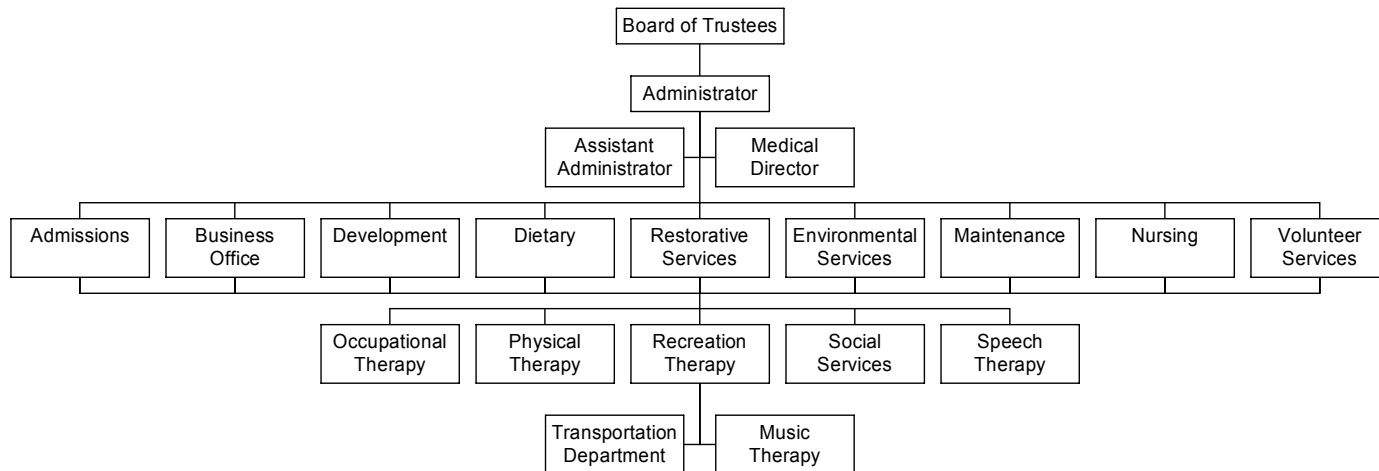
Unlike traditional nursing homes, which are typically custodial facilities for the elderly, The Virginia Home is much more. A multi-faceted human services organization, The Home provides:

- ▶ complete 24-hour nursing care and medical services
- ▶ individualized dietary and nutritional services
- ▶ physical, occupational and speech therapies
- ▶ recreational therapy both on-site and out in the community
- ▶ counseling services for residents and their families
- ▶ employment assistance, educational and cultural opportunities
- ▶ wheelchair repair and maintenance and access to adaptive technology
- ▶ private rooms, daily housekeeping and weekly laundry service

## Organization Chart

A 40-member Board of Trustees is the governing body of The Virginia Home (TVH). The Board, comprised entirely of women, adopts the rules, regulations, and policies under which TVH operates. The Board has authority over the use of property, strategic planning, and financial management. The Administrator reports directly to the Board of Trustees and oversees the day-to-day management of TVH. It is the Administrator's responsibility to ensure all policies and directives of the Board are carried out and that The Home is adequately staffed to achieve its mission.

As a volunteer, you report to the Director of Volunteer Services unless otherwise noted in your job description.



## ABOUT OUR RESIDENTS

Residents of The Home are individuals who require round-the-clock care, and whose families, caretakers, or other facilities are unable to provide the range of services they need. Those admitted to The Home are diagnosed with irreversible physical disabilities and injuries such as quadriplegia, brain injuries, stroke, cerebral palsy and/or degenerative disorders like multiple sclerosis and muscular dystrophy.

The average age of our residents is 43 and most will live a normal life span. They will live at The Home for an average of 20 years—the longest stay in our history is 60 years.

Our residents come from nearly every city and county of the Commonwealth and represent diverse backgrounds. They are students, artists, adventurers, workers, advocates and volunteers. They also represent many ethnicities, religions and cultures. The one thing residents of The Virginia Home do have in common is that they face life with courage and determination.

Residents of The Home scuba dive, ride horseback, ski, speak and surf the internet with the help of adaptive equipment; they also work and volunteer in the community. They are secure, loved and protected, and lead active, meaningful, happy lives. Here everyone is given the opportunity to live his or her life with dignity, respect and the chance to realize personal dreams.

## Common Disabilities at TVH

Cerebral Palsy (CP)	45%
Multiple Sclerosis (MS)	15%
Traumatic Brain Injury (TBI)	13%
Spinal Cord Injury (SCI)	9%
Other	18%

- **Cerebral Palsy (CP)**

Cerebral palsy is a disability caused by a permanent brain injury that occurs before, during, or shortly after birth. The word *cerebral* refers to the brain, and *palsy* refers to a disorder of movement or posture. CP is characterized by lack of muscle control and body movement. While it is not a progressive disease of the brain, the effects of cerebral palsy may change gradually over the years. The causes of CP are not completely understood, but many of them are specific to the mother, such as an illness or viral disease during pregnancy, premature delivery, and a lack of good prenatal care. One of the primary causes of CP is a prolonged lack of oxygen or blood supply to the fetal or newborn brain. Viral infections, lead poisoning, or head injuries sustained in the early years of life can result in acquired CP, a less common condition.

An estimated 500,000 Americans have some degree of CP. Each year, about 10,000 babies born in the United States develop it; more than 80% of people with CP developed it either before they were born or before they were a month old. About half of the people who have CP use assistive devices such as braces, walkers, or wheel chairs for mobility, and almost 70% have other disabilities—primarily mental retardation. Depending on the severity of their disability, people with CP may need specialized medical care, educational and social services, and other help throughout their lives from both their families and their communities. There is no cure for CP, but a variety of treatments are available.

Problems associated with CP include: limited speech ability, seizures, spasms, drooling, difficulty swallowing, incontinence, hyperactivity disorder, and learning disabilities. Residents with CP may have difficulty eating and articulating words. This is usually the result of weak tongue, lip, and mouth muscles.

- **Multiple Sclerosis (MS)**

Multiple Sclerosis is a chronic disease of the central nervous system predominantly affecting young adults. There is no identified specific cause for this disease, but genetic and environmental factors are known to contribute to it. Pathologically, MS is characterized by the presence of areas of demyelination (loss of myelin, a fatty covering of brain cells) in the brain white matter. The disease process begins most commonly with neurological abnormalities of varying severity that can last for years and that are often misdiagnosed. Early symptoms may include numbness, double vision, and bladder control problems. Later symptoms include increased spasticity, depression, difficulty walking, fatigue and pain.

MS is diagnosed by clinical observation and the results of Magnetic Resonance Imaging (MRI). Demyelination occurs mostly in the optic nerves, the brainstem, the cerebellum and the spinal cord. Lesions in these locations cause the symptoms. For example, if lesions develop in the optic nerve, vision problems will occur. MS is classified into several categories according to its clinical course: benign, relapsing-remitting (the most common variant), progressive-relapsing, primary progressive and secondary progressive.

Approximately 300,000 people suffer from MS in North America today. Onset usually peaks sometime between age 20 and 30. Almost 70% of patients manifest symptoms between ages 21 and 40. Females are affected more frequently than males (1.4 to 3.1 times as many women than men). There is no curative treatment available for the MS at this time; however, a number of medications can be used to treat the symptoms.

MS is most often characterized by episodes of exacerbation and remission. The symptoms can appear over a few hours or days, can be gradually worsening over a period of a few weeks, or sometimes can present themselves acutely. Some of the common symptoms are weakness, increased spasticity, incoordination, scanning speech, loss of balance, numbness, incontinence, blurred vision, depression, anxiety, fatigue, and memory loss. Most of the time, difficulties occur later in the course of the disease; however, there are exceptions.

- ***Traumatic Brain Injury (TBI)***

Traumatic brain injury occurs when a sudden physical assault on the head causes damage to the brain. The damage can be focal (confined to one area of the brain), or diffuse. TBI can result from a closed head injury (when the head suddenly and violently hits an object) or from a penetrating head injury. The severity of TBI can range from mild to coma or even death. The outcome of TBI depends on the cause, location, severity, and extent of neurological damage.

The signs of brain injury can vary drastically depending upon the location and severity of the injury. Individuals with TBI may have problems speaking, seeing, hearing, and using their other senses. They may experience headaches, fatigue, and seizures. Their balance and walking may also be affected. They may be partly or completely paralyzed on one or both sides of the body. Because the brain has been injured, it is common that the person's ability to use it is altered. Patients may have trouble with memory, may have trouble concentrating and may only be able to focus their attention for a short time. They may think slowly and have trouble talking and listening to others. They may also have difficulty with reading and writing, planning, understanding the order in which events happen, and judgment.

Social, behavioral, or emotional problems may include sudden changes in mood, anxiety, and depression. Residents with TBI may have trouble relating to others. They may be restless and may laugh or cry a lot. They may not have much motivation or much control over their emotions.

- ***Spinal Cord Injury (SCI)***

A Spinal Cord Injury is classified as damage to the spinal cord that results in a loss of function such as mobility or feeling. Frequent causes of SCI are trauma (car accident, gunshot, falls) or disease (polio, spina bifida, Frederick's Ataxia). The spinal cord does not have to be severed in order for a loss of function to occur. In general, the higher in the spinal column the injury occurs, the more dysfunction a person will experience. Cervical (neck) injuries usually result in quadriplegia. Injuries above the C-4 level may require a ventilator for the person to breathe.

Approximately 450,000 people live with SCI in the US. There are about 10,000 new SCI's every year; the majority of them (82%) involve males between the ages of 16-30. These injuries result from motor vehicle accidents (36%), violence (28.9%), or falls (21.2%).

Quadriplegia is slightly more common than paraplegia. Currently there is no cure for SCI, but there are ongoing studies, including the controversial stem cell research.

Besides a loss of sensation or motor functioning, individuals with SCI also experience other changes. For example, they may experience dysfunction of the bowel and bladder or sexual dysfunction. Other effects of SCI may include low blood pressure, inability to regulate blood pressure effectively, reduced control of body temperature, inability to sweat below the level of injury, and chronic pain.

## **Common Indications Among TVH Residents**

Swallowing Problems: When swallowing difficulties are present, food or liquids may be inhaled into the trachea (windpipe) instead of going down the esophagus and into the stomach. Many residents need help eating, and others should only be fed only by staff.

Speech Problems: Speech problems are often associated with disabilities. Residents with MS may forget words during conversations; residents with CP may have difficulty articulating words. Ask residents to repeat themselves when you have difficulty understanding them; they are happy to do so.

Forgetfulness: About half of all people with MS will experience some form of cognitive dysfunction or impaired thinking. For most, this means slowed thinking, decreased concentration, or decreased memory. Signs of impaired thinking may include difficulty finding the right words to say and trouble remembering names.

Muscle Spasms: Many residents with disabilities experience *spasticity*, or muscle stiffness and spasms. It usually affects the muscles of the legs and arms and may interfere with the ability to move those muscles freely. Spasticity can also produce feelings of pain or tightness in and around joints and can cause low back pain. It may be aggravated by extremes of temperature, humidity, or infections. Tight clothing can even trigger it.

# VOLUNTEERING AT THE VIRGINIA HOME

## Policies and Procedures

### Eligibility & Requirements

- **Minimum Age**

The minimum age for volunteering at The Virginia Home is 14, unless accompanied at all times by an adult.

- **Orientation & Training**

Individuals and groups volunteering at TVH must complete orientation and sign the Volunteer Conduct and Confidentiality Agreement. Participation in some programs requires additional training conducted by TVH staff. If you desire to volunteer on Saturday, Sunday, or after 5:00pm, you will be required to first complete 6 hours of supervised training during regular business hours.

- **Criminal Record**

Individuals convicted of a “Barrier Crime,” as specified by § 63.2-1719 of the Code of Virginia are ineligible to volunteer at TVH. Examples of such crimes include crimes against children, abduction, robbery, arson, obscenity offenses, etc.

- **Background Check**

TVH reserves the right to conduct background checks at any time during the volunteer’s tenure. By signing the TVH Volunteer Application, you authorize The Home run a background check of your criminal record and to contact the references listed on your application. Volunteers assigned to certain jobs will automatically undergo a background check.

### Hours of Operation

Although the nursing staff is on duty 24 hours per day, 365 days a year, the administrative offices and therapy departments operate on a typical 40-hour workweek. Standard hours for volunteering at The Home are Monday through Friday, 9:00a – 5:00p. Weekend and evening assignments are limited to experienced volunteers only.

### Holidays

Holidays observed by TVH are New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day. The administrative offices are closed on these holidays.

### Drugs and Alcohol

TVH has a zero-tolerance policy for illegal drugs. Do not come to TVH under the influence of drugs or alcohol. Also, do not bring alcohol or drugs onto the premises or provide them to any resident. ***This includes over-the-counter medications.*** Residents may consume alcohol on the premises only at Recreation Therapy-sponsored socials or under physician’s orders. Staff, visitors, and volunteers are not permitted to consume alcohol on the premises at any time.

Violation of this policy is cause for immediate dismissal from the volunteer program. Violators will be banished permanently from The Home and referred to the Criminal Justice System at the discretion of the Administrator.

## Respect for Privacy and Confidentiality

- **Confidentiality**

The Health Insurance Portability and Accountability Act (HIPAA) is a federal regulation followed by all health care providers, including hospitals and nursing homes. HIPAA took effect on April 14, 2003 and serves to protect all patient information recorded (in any form or medium, including verbally) or received by a health care provider. This information can relate to a past, present or future physical or mental health condition, the provision of health care to the individual or the past, present, or future payment for the health care. Thus, information ranging from chart notes to claims submission is protected.

As a nursing facility, it is our responsibility to maintain the privacy of our residents' health information. The events in the lives of our residents—including diagnosis, medical and social condition—are confidential and fall under HIPAA regulations. HIPAA imposes both civil and criminal penalties for violation of these rules. For example, individuals who divulge information maliciously or for a profit can be fined up to \$200,000 or imprisoned for up to 10 years.

During the course of your service to TVH, you may learn certain facts about residents, staff, and clients, which are of a highly personal and confidential nature. Examples of such information are medical diagnoses and treatment, phone numbers, finances, personal relationships, etc. All such information, including the identity of the individual, must be treated with total confidentiality and must remain confidential even after your service at TVH terminates. Personal and confidential information is to be discussed only with appropriate persons on a need-to-know basis.

- **Resident Privacy**

As a safety precaution, residents are not able to lock their doors from the inside. Therefore, certain procedures are in place to ensure each resident's need for privacy is observed and respected. Please follow these procedures before entering a resident's room:

- ▶ If the door is open and the resident is in the room, introduce yourself and tell them why you are there.
- ▶ If the door is closed, never enter the room without first knocking on the door.
- ▶ Knock once and wait for a response; keep in mind that some residents are unable to verbally respond.
- ▶ If there is no response, knock again, crack the door, and announce yourself.
- ▶ If there is still no response, open the door to see if the resident is there and whether or not you are invited inside.

**If the *Privacy Please* or *Do Not Disturb* sign is on the door, do not knock or enter the room.**

## Open Door Policy

The door to the resident's room ***shall remain open*** while the volunteer is working or visiting in the resident's room. Residents should be advised of this policy if they request that the door be shut.

## Solicitation and Sales

Solicitation or sales of any nature are not allowed on the premises. No volunteer will enter into a one-on-one business transaction with a resident. Also, please do not distribute literature, food or gifts without prior permission from administration.

## **Resident Abuse and Neglect**

Resident abuse or neglect is not tolerated at TVH. Resident abuse is divided into three categories: physical, mental, or financial harm committed against a resident by an employee, volunteer or visitor.

- ▶ Physical abuse includes, but is not limited to, hitting, smacking, rough handling, pinching, spitting, biting, or any sexual contact.
- ▶ Mental abuse includes, but is not limited to, yelling at, lying to, ignoring, or belittling a resident.
- ▶ Financial abuse includes, but is not limited to, stealing a resident's money, stealing personal items, and accepting money or gifts from a resident.

The exchange of money between any resident and volunteer is strictly prohibited. Volunteers are also asked not to accept gifts from residents, unless first cleared with the Volunteer Services office.

## **Harassment**

TVH is committed to providing a professional work environment free of physical, psychological or verbal harassment. Consequently, harassment in any form is not tolerated by TVH. Volunteers found to be in noncompliance with this policy will be removed from the volunteer roster. This policy applies to sexual harassment as well as harassment based on race, gender, ethnicity, and disability.

If you feel that you have been subjected to harassment in violation of this policy, report the matter immediately to the Director of Volunteer Services. Such complaints will be divulged in confidence, and all information will be disclosed only on a need-to-know basis for the purpose of investigating and resolving the matter. TVH will investigate the complaint promptly and thoroughly and will take any appropriate corrective action.

## **Meals**

Volunteers are welcome to dine in the Employee Dining Room during the following hours:

Lunch 11:30a – 1:00p

Dinner 4:15p – 6:15p

A meal ticket must be used to purchase meals in the Employee Dining Room. Meal tickets may be purchased at a price of \$3.00 per meal from the Receptionist between the hours of 9a – 5p.

If you volunteer four hours or more in a day, you may receive a free meal ticket for that day from the Director of Volunteer Services.

Volunteers and staff are not permitted to eat in common areas such as the solarium, Rec Room, or lobby. If you do not wish to eat in the Employee Dining Room, you may eat outside in the garden or in the Recreation Therapy department with special permission.

## **Reimbursement for Expenses**

TVH will pay admission fees/ticket costs, when applicable, for volunteers assisting on outings. Additionally, TVH will pick up the tab for volunteers who assist with outings to restaurants. Incidental expenses incurred during the course of service, such as mileage, tolls, or parking, are not reimbursable by TVH, but these expenses may be claimed as a deduction when you file your personal income tax. Volunteer Services can provide an annual report of hours served upon request.

## **Smoking**

Staff, volunteers, and guests are not permitted to smoke inside the building. You are, however, permitted to smoke outside in the garden, on the front porch in the designated area, or in the employee parking lot.

Residents are allowed to smoke in their rooms, but not in bed. They are also permitted to smoke in the solarium and outdoors, but only under the supervision of TVH staff. Volunteers should never give matches, lighters or cigarettes to residents. Please do not light cigarettes for residents, especially if they are in bed.

## **Termination of Service**

Volunteers may discontinue their service to The Home at any time. A verbal or written notification of your intention to terminate or suspend your service would be greatly appreciated.

If for some reason you, as a volunteer, become unable or unwilling to fulfill your obligations to the Volunteer Services program, or if you fail to abide by the policies, rules, and regulations set forth in this handbook, then the Director of Volunteer Services has the right and responsibility to reassign you or terminate your participation in the Volunteer Services program.

## **Pets and Pet Therapy**

The Virginia Home recognizes that both structured and unstructured interaction with pets provides important therapeutic and social benefits. It is the policy of TVH that pets and therapy animals be permitted on the premises under the following guidelines:

- ▶ Arrangements for pet visits are coordinated through the Director of Volunteer Services.
- ▶ All animals brought onto the premises must be registered and vaccinated in accordance with the laws set forth by the county/city in which the owner resides.
- ▶ Evidence of current registration and vaccination must be provided prior to the visit and will be kept on file in the Volunteer Services office.
- ▶ In accordance with Virginia State Law, under no circumstances are animals permitted in the Dietary Department or the kitchen area of the Recreation Therapy Department.
- ▶ Animals are not permitted in the Resident Dining Room or in the common areas of residential floors during mealtimes.

## **Required and Court-Ordered Community Service**

If your volunteer service is required to fulfill a community service obligation (either for school, government services, or alternative sentencing) you are required to record your hours on a supplemental form and have the hours you worked verified each day. This form will be provided either by your agency or by the Volunteer Services Department.

Our Alternative Sentencing Fulfillment Program provides eligible persons who have been court-ordered to community service the opportunity to complete their hours at TVH. Applicants for this program are subject to the eligibility requirements outlined in the *Eligibility* section of this handbook.

## While on Duty

### Parking

Parking is permitted on the streets around TVH and in the staff lot on Powhatan Street. **Please note that that Powhatan Street entrance is *exit only*; you must enter the building through the front door.**

### Signing In & Out

Volunteers must sign in at the reception desk before reporting for duty and then sign out as you leave. Volunteer activities and hours are maintained in a database from which all accountability and statistical reports are derived. The sign-in procedure is currently the only means of tracking this information, so it is very important that you help us maintain accurate records by signing in and out and by properly indicating how your time was allotted.

People volunteering as a group, such as a school group or civic organization, need only sign in on one line under the name of the group. Please be sure to include the number in your party in the space provided.

### Personal Appearance and Name Badges

While on duty, volunteers must wear a Volunteer badge at all times. This allows staff and residents to identify you as a volunteer. Badges are located beside the sign-in book at the reception desk. Clothing should be comfortable, in good repair, and appropriate for the volunteer assignment. The following clothing is considered inappropriate for our environment and should not be worn while on duty:

- ▶ mini skirts; short shorts
- ▶ halter tops, tube tops & camisoles
- ▶ shirts and blouses that are sheer or that do not cover the midriff
- ▶ flip-flops

### Professional Behavior

You are expected to conduct yourself in a professional manner—both on and off duty—while visiting TVH. You are also expected to work and act only within the scope of your volunteer assignment, as agreed upon between you and your supervisor and as outlined in your job description. To ensure harmony within The Home, it is also imperative that you maintain a pleasant working relationship with the staff and other volunteers.

You are an important part of our TVH community, and you are subsequently obliged to maintain the dignity and integrity of The Virginia Home with the public. Please do not act as a spokesperson for TVH or speak to the media on behalf of the organization unless so authorized by administration.

Please bring any problems or conflicts—either with residents or staff—that are beyond the scope of your volunteer service or ability, to the immediate attention of the Director of Volunteer Services or the Nursing Supervisor.

Volunteers are an integral part of our organization and provide essential services and loving care to our 130 residents. Both residents and staff depend on you to fulfill your commitment to your volunteer assignment. In the event you are unable to keep an appointment or fulfill an assignment, please notify the Director of Volunteer Services as soon as possible. You may also leave a message with the Receptionist.

## Telephone Usage

A telephone is located in the Volunteer Workroom that you may use while on duty. Please do not use the resident phone on the first floor or the phones in resident rooms.

Also, to avoid distractions, please do not use your cell phone while walking outdoors with a resident or while on outings.

## Feeding Residents

Every one of our residents has special dietary requirements along with varying levels of ability to chew and swallow food. Many of the residents are unable to chew and/or swallow normally due to lack of muscle control and pose a significant choking risk when not fed properly. For example, some residents require thickener in all of their beverages; some must have their food puréed; others should not ingest food by mouth at all. Additionally, we have many residents with gum disease and missing teeth, which makes chewing very difficult and sometimes painful.

Since it is impossible for you to know the dietary requirements and limitations of each resident, **you should avoid giving residents anything that goes into their mouth**, unless you have been instructed to do so by a staff member. This includes chewing gum, candy, and beverages. Also, if a resident asks you to assist them in getting something out of the vending machine, you should first okay it with a staff member.

Volunteers assigned to assist with feeding in any capacity should follow these guidelines:

- ▶ Do not feed or take any food to the resident unless you have been instructed by a staff member to do so.
- ▶ Wear gloves (provided by TVH) at all times.
- ▶ Cut food into small, bite-sized pieces.
- ▶ Feel slowly enough to allow the resident to enjoy their food.
- ▶ In most cases, put straws in drinks.
- ▶ Some residents require adaptive feeding devices such as a scoop bowl or bite-proof spoon. TVH staff will introduce you to these items when applicable.
- ▶ Never take food from a resident's tray or room for your own consumption.

Those who are assigned to volunteer at mealtimes will receive additional training and supervision by the Occupational Therapy department.

## Outings

Volunteers assisting on outings will be under the supervision of the TVH staff member in charge of the outing. During outings, volunteers may need to help load and unload residents, push residents in their chairs, and assist with feeding or shopping. You must give the resident your undivided attention while accompanying him or her on the outing. **Under no circumstances should you leave a resident alone** during an outing or become distracted by your personal business. Doing so is cause for immediate termination of your volunteer privileges.

TVH covers the admission and/or dining expenses of volunteers on outings when applicable. Other incidental expenses incurred by the volunteer, such as mileage, tolls, or parking, are not reimbursable.

## Walks Outdoors

Residents enjoy the great outdoors, and many of them are unable to venture out into the beautiful surrounding parks on their own. Residents in both non-motorized and motorized wheelchairs enjoy the companionship and assistance of a volunteer. Please observe the following guidelines when accompanying residents for walks outdoors:

- ▶ Volunteers under the age of 16 are not permitted to take residents outdoors for walks unless accompanied by an adult (other than the resident).
- ▶ Before leaving the building, please sign the resident(s) out at the *Resident Sign In/Out* book at the reception desk.
- ▶ Use good judgment when taking residents out for a stroll. Please take notice of the resident's size and weight, whether or not they have to be pushed, and your destination. There is a notable incline when returning from Swan Lake. If the weather is warm, take along a bottle of water for yourself. If the sky looks like rain, consider postponing the trip.
- ▶ Some of our residents need a push; others simply need a watchful eye. Residents in motorized chairs may not remember to check for cars before crossing the street, or they may not be able to see large cracks and other hazards in the sidewalk. Please keep a close eye out for them, **especially when walking around the lake.**
- ▶ You should always engage the breaks on the wheelchair when stopped or parked. This will prevent the chair from rolling unexpectedly and causing injury to you and/or the resident. Please keep this in mind when stopping to rest.
- ▶ Sometimes accidents do happen, so it is a good idea to have a cell phone or another person with you when you take a resident out for a stroll. **Never leave a resident unattended.**
- ▶ If the wheelchair breaks down, or if there is an accident, notify the Director of Volunteer Services (during normal business hours), the Nursing Supervisor, or the Security Guard as soon as possible.

# SAFETY

## Fire Procedure

Please become familiar with the Fire Procedure and review it periodically. For your convenience, this procedure is also printed on the back of your Volunteer badge (another good reason to always wear one).

### If You Discover a Fire

1. Remove the person(s) from the immediate danger area.
2. Pull the alarm nearest the scene of the fire.
3. Find a phone. Press the <Intercom> button and dial #35.
4. Announce "Code Red," and give the location of the fire. Repeat this announcement 3 times. **Do not announce "FIRE!"**
5. Next, press the <Intercom> button again and dial 200 to report the fire to the control center.
6. Remove any other persons (residents) from the danger area and place them behind a set of double fire doors.
7. Close off all doors and windows in the area and turn off electrical equipment.
8. Try to control the fire with a fire extinguisher.

### When You Hear the Fire Alarm

An activated alarm is indicated by a loud buzzer and flashing lights strategically placed throughout the hallways.

- ▶ Listen to the intercom to find out where the fire is located.
- ▶ If you are on floors 2-5, make sure all residents around you are out of danger.
- ▶ Residents should go into their rooms and shut the door.
- ▶ Volunteers should take the stairs (not the elevator) to the first floor and exit the building.
- ▶ Everyone, including residents, who happens to be on the first floor evacuates the building. You may assist in this process, following the cues from staff members.
- ▶ First floor evacuees exit either through the front door and walk down Hampton Street towards Appomattox Street, or out the Powhatan Street exit and across the street into the parking lot. Stay with staff and residents until the all-clear has been given.

# Infectious Disease Control

## TB Testing

Anyone committing to volunteer one or more hours per week will be required to have an annual TB test. This test is administered by TVH nursing staff at no charge to the volunteer. If you have had a TB test in the last twelve months, or if you prefer to be tested by your own physician, you may provide a copy of the results to TVH in lieu of being tested by our staff.

## Hand Sanitation

Most infections and diseases are transmitted by the hands. As a protective measure, hand washing is imperative. Everyone should wash their hands before *and* after working with a resident to reduce the spread of germs. Hand sanitizer dispensers are located in each resident room and in the Volunteer Workroom; please use them frequently.

## Reporting Incidents

TVH makes every effort to ensure the safety of residents, staff, volunteers, and guests. Nevertheless, you are urged to be on the alert for and report any and all unsafe working conditions and practices. Should you be involved in an accident or receive an injury while on duty, you must file an **incident report** with the Director of Volunteer Services. Additionally, when injury occurs to a resident—no matter how seemingly insignificant—or other events take place that are unusual, an incident report should also be filed.

If the Director of Volunteer Services is unavailable, please see the Nursing Supervisor on the 3<sup>rd</sup> floor to report an incident.

# VOLUNTEER CONDUCT AND CONFIDENTIALITY AGREEMENT

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I, \_\_\_\_\_, as a volunteer of The Virginia Home (TVH), agree to the following conditions:

## **A. I. VOLUNTEER CONDUCT**

1. While working as a volunteer, I will not be under the influence of alcohol or drugs, nor will I bring any of these items onto the premises. Violation of this condition is cause for immediate dismissal.
2. I will respect the privacy and dignity of residents and staff at all times. I understand that abuse or harassment of any kind towards anyone at TVH is grounds for immediate dismissal.
3. I understand that I should avoid giving residents any food or drink, including chewing gum and candy, unless I have been instructed to do so by a staff member.
4. I agree to conduct myself in a professional manner, both on and off duty while visiting TVH. I further agree to work and act only within the scope of my volunteer assignment as agreed upon between my supervisor and me.
5. I realize that it is unethical not to honor promises or commitments made to residents. Therefore, I will take care to keep my word and to set realistic expectations for what I am able and willing to do.
6. I agree to bring any problems or conflicts, with either residents or staff, that are beyond the scope of my volunteer service or ability, to the immediate attention of the Director of Volunteer Services or the Nursing Supervisor.
7. I understand that the exchange of money between any resident and myself is strictly prohibited. I also agree not to accept gifts from residents, unless first cleared with the Volunteer Services office.
8. I agree to comply with all policies, procedures and regulations established by TVH and communicated to me via the Volunteer Handbook and general orientation.

## **B. II. CONFIDENTIALITY**

1. I understand that in the course of my service for TVH, I may learn certain facts about residents, staff, and clients of TVH, which are of a highly personal and confidential nature. Examples of such information are medical diagnoses and treatment, phone numbers, finances, personal relationships, etc. I understand that all such information, including the identity of the individual, must be treated with total confidentiality and must remain confidential even after my service at TVH terminates.
2. I understand that personal and confidential information is to be discussed only with appropriate persons on a need-to-know basis.

I hereby acknowledge that I have received and read The Virginia Home *Volunteer Handbook* and the job description(s) relevant to my specific volunteer assignment(s). I also acknowledge that I have received a proper orientation to the agency's purpose and function, as well as the Volunteer Program's expectations of me. I understand that failure to do so may result in termination of my service to TVH.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date