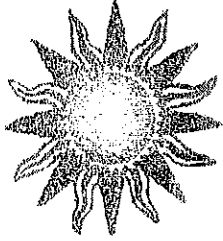


SUNSHINE TERRACE FOUNDATION
A FULLY ACCREDITED HEALTH CARE ORGANIZATION

Volunteer Handbook





SUNSHINE TERRACE FOUNDATION

A FULLY ACCREDITED HEALTH CARE ORGANIZATION

Mission

*Wellness, Independence,
Dignity, and Quality of Life
for Those We Serve.*

Vision

*To Be the Choice in
Rehabilitative, Long Term
and Respite Services.*

Values

Pride in Caring

Sunshine Terrace Foundation, Inc.

Volunteer Program Policy

Welcome to the Sunshine Terrace Volunteer Program! Volunteers contribute immeasurably to enriching the quality of life of our Residents. Volunteers assist in making many of the programs and activities provided for our Residents possible. Without a doubt, many such programs that enhance the Residents' quality of life would not be possible without your helping hands. The Volunteer gives the most valuable of all gifts-the gift of self.

The purpose of the Sunshine Terrace Volunteer Program is fourfold:

1. Human Support

The act of volunteering shows the Resident that someone cares about him/her. Volunteers are considered real friends who prove to Residents that they are not alone.

2. Maintain Continuity with the Community

Residing in a rehabilitation and skilled nursing center does not necessitate cutting ties with the community, and a Volunteer Program helps prevent isolation.

3. Clearing Misconceptions

Volunteers have an opportunity to experience the rehabilitation and skilled nursing center setting and to become familiar with the philosophy of long-term care. Their first-hand experience will be shared with other community members, and can do a lot to dispel myths and misconceptions about the "nursing home" setting.

4. Enthusiasm and Overall Spirit

The presence of Volunteers encourages an atmosphere of involvement, purpose, and happiness. Residents cannot help but be encouraged by the friendliness, patience, kindness, and optimism.

VOLUNTEER RULES AND GENERAL INFORMATION

1. Please wear your name tag at all times while performing your duties.
2. If you can no longer be a Volunteer, please notify Vivian Brindley, the Volunteer Coordinator (754-0233), and turn in your badge to the front office.
3. If you cannot come in as scheduled, please call the supervisor in charge of the area you are assigned and ask him/her to note the change on the schedule posted in that area. The telephone number for the Sunshine Terrace Rehabilitation and Skilled Nursing Center is 752-0411, Terrace Grove Assisted Living Center is 787-2855, and Adult Day Center is 752-9321. If you know in advance that you cannot work, please note it on the schedule yourself and inform the supervisor in charge. If you are unable to volunteer for more than one week, please call Vivian Brindley (754-0233).
4. **Volunteers can be dismissed for cause. For example, any patient abuse, neglect or exploitation is cause for dismissal, as would be consistently poor attendance. This decision is the prerogative of the volunteer coordinator.**
5. All registered volunteers must complete and sign the Utah DOH HFLCRA (BCI-Background check) form. You will be notified if there are any issues to be concerned with.
6. Please feel free to ask questions.
7. We ask that you do not do nursing care for residents. Please find a CNA or Nurse to help the resident dress, undress, transfer, use the bathroom, etc.
8. Please check in on the monthly sign-in sheets at the front desk. Look for messages on the Volunteer sheets. The sign-in sheet at Terrace Grove is located at the reception desk and in the Recreation Therapy department.
9. A very basic fire/disaster rule is to stay in the resident's room or in the area you are having the activity in, behind closed doors, and let the staff accomplish their assigned duties. If you are needed, you will be instructed by the staff and/or emergency personnel on what to do.
10. Please remember that all information about the resident is confidential.
11. Wash hands before, and after, doing anything for a resident.
12. All Volunteers must be free from skin lesions, upper respiratory infections, or other communicable diseases. If you have any of these conditions, please notify the supervisor in the area you are assigned to, stay home until the infection is resolved or is no longer infectious.
13. All Volunteers must stay out of isolation rooms and areas. Under no circumstances are you to go in these areas.
14. Please remember to knock on the door prior to entering a resident's room.
15. Please do not give any food items (i.e., fruit, candy, cookies, etc.) to the Residents without Nursing approval. Some of the residents have special diets and/or can choke easily.

We are grateful to you for helping our residents and staff!! You are needed here, and we want you to feel comfortable and welcome.

RESIDENT RIGHTS

The Resident has the right to:

1. Exercise his/her rights as a patient and as a citizen, and to voice grievances;
2. Be informed of all rights, rules, and regulations governing patient conduct and responsibility;
3. Be informed of all services available in the facility, and of related charges not covered by the facility's rate;
4. Be informed of his/her medical condition, and has the opportunity to participate in, and refuse treatment;
5. Be notified of transfers and discharges;
6. Be free from restraint, interference, coercion, discrimination, or reprisal.
7. Manage his/her personal financial affairs;
8. Be free from mental and physical abuse, and free from chemical and physical restraints;
9. Confidential treatment and access to his/her personal and medical records;
10. Be treated with consideration, respect, and full recognition of his/her dignity and individuality including privacy in treatment;
11. Not be required to perform services for the facility that are not included in plan of care;
12. Associate and communicate privately with persons of his/her choice through visits, mail, and telephone conversations;
13. Participate in social, religious, and community activities;
14. Retain and use his/her personal clothing and possessions;
15. Be assured privacy for visits by his/her spouse;
16. Choose a personal attending physician;
17. Review facility survey results (posted by front office on wall).

SUNSHINE TERRACE FOUNDATION

CLIENT CONFIDENTIALITY

Purpose: The purpose of this policy is to ensure that our clients' trust is not violated by confidentiality breaches. Our clients trust that information they share with us is confidential. This pertains to both medical and personal information exchanged during the course of their stay with us.

What group of employees is involved? Every employee of the Sunshine Terrace Foundation is expected to comply with this policy. Outside providers such as physicians, each of our consultants, our vendors of all types, and our volunteers are expected to comply as well.

This policy covers oral communication, paper records, and electronic records.

Our clients sign authorizations for treatment, payment, and health care operations prior to receiving care and non-routine uses of this information require separate authorizations.

Our clients must be informed of how their information is being used and by whom.

Strategies for Compliance which the Sunshine Terrace Foundation uses:

Conversations

- When gathering confidential information from the client or providing instructions for treatment and/or follow-up, do so in a private area where others cannot overhear the conversation.
- Do not discuss client information in open areas, such as nurses' stations, reception areas, and client's room when other clients, personnel, or visitors are present. Conversations can be heard quite clearly through privacy curtains.
- Do not discuss confidential information in public places such as cafeterias, elevators, hallways, shopping malls, reception areas. Even if the client's name is not mentioned, specific details may allow a person overhearing the conversation to know about whom you are speaking.
- Do not disclose any client information to anyone who is not actively involved in the client's care and/or treatment and without the client's permission.
- Never discuss test results, care, or treatment with the client's family members without express permission from the client.
- Follow state laws governing minors and specific diagnosis/treatment issues.

Telephones

- When speaking with a client or caregiver on the phone, do so in a private area where others cannot overhear you.
- Do not release client information over the phone without identifying to whom you

are speaking.

- When responding by phone with test results or other confidential information, confirm that you are speaking with the client or his/her responsible party by using a method to identify the person, such as date of birth, social security number, or medical record number. Do not leave information on an answering machine without the express permission of the client. Leave a message for the client or caregiver to contact you.

Paper records

- Do not leave reports or other pieces of medical records in areas such as nurses' stations or reception desks where the casual passerby can read them.
- Avoid placing clients' charts where people passing by could gain access to them.
- Restrict the availability of the medical record to only those caregivers involved in the client's case.
- Any work sheets or other paper materials containing confidential client information that are for temporary use by the caregiver should be properly discarded in trash bins or other receptacles that maintain the confidentiality of the information, or with trash that will be shredded.
- Avoid special identifiers on the outside of records. Do Not Resuscitate flags or stickers should not be visible on the outside of a client's chart. Do not put care related information on the walls or doors of a client's room.
- If utilizing client sign-in sheets, maintain them in a way that avoids allowing the next client to see the previous client's name.
- *Do not respond to any request for copies of medical information from the medical record without first obtaining the written consent of the client. Even family members do not have the right to look at the medical record without the permission of the client.*
- Follow the policy for how to respond to subpoenas and attorney requests for records. The client must also agree to the release of his/his medical information.
- Scrutinize the type of information sent to clients or personnel on postcards to be certain confidential information is not revealed.

Computers

- Restrict access to computerized client information with passwords or other security devices and conduct appropriate audits for compliance.
- Position monitor screens so that visitors and others cannot see confidential information. Use confidentiality screens.
- Make sure that you log off properly after completing your task so that others who come after you cannot access confidential information using your password.
- Only access information relevant to accomplishing your assigned tasks.
- When communicating with a client via e-mail, do not forward the communication to anyone without the express consent of the client. All e-mails of this type are considered part of the medical record which is confidential.

Faxes

- When faxing information to, or about, a client, verify and document the client's permission to use this mode of communication.
- Verify the correct fax number and make sure that the cover sheet includes a confidentiality statement.
- Ascertain if the machine to which you are faxing is accessible to people other than the receiver. If so, call the receiver just before faxing so that the confidential information can be retrieved as soon as it comes from the machine.
- Obtain confirmation of the receipt of all faxes that contain confidential client information.