

Volunteer Handbook



CDCE

VA Center for
Development & Civic
Engagement

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Fargo VA Health Care System

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INTRODUCTION

Dear Volunteer,

It is our privilege to welcome you to the Fargo VA Health Care System. Soon you will blend into your work environment and will work side by side with paid employees to provide seamless service to our very important Veteran patients.

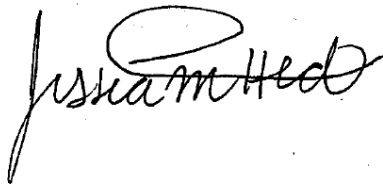
To prepare you for your new challenges, you are requested to review and become knowledgeable about the material presented in this booklet. Should you have difficulty with any of the material, please consult Center for Development & Civic Engagement staff for assistance or clarification. Your understanding of the information is very important. This handbook is designed to assist you in carrying out your assigned duties more effectively and efficiently.

You, as a volunteer, are considered a valuable member of the health care system team, and you will function as a part of that team under the direct supervision of a staff member. You do not replace paid personnel. To the contrary, you perform many useful services that are beyond the scope of the regular staff.

Through volunteer service, you not only provide very necessary and worthwhile assistance to the patients and staff, but you can also gain valuable experience. If nothing else, we hope it will give you a deeper consciousness of the responsibility for helping others and the satisfaction such service brings.

Once again, welcome! We are glad that you are a member of the Fargo VA Health Care System team!

Sincerely,

A handwritten signature in black ink that reads "Jessica Hed". The signature is written in a cursive style with a large, looped initial "J".

Jessica Hed, B.S.
Chief, Center for Development & Civic Engagement
701-239-3700 ext. 3395

BRIEF HISTORY OF THE VETERANS HEALTH ADMINISTRATION (VHA)

The idea of providing health care to soldiers dates back to colonial America. In 1776, the Continental Congress encouraged enlistment by providing pensions to those who became disabled.

During the Civil War, President Lincoln called upon congress and the American people “to care for him who shall have borne the battle, and for his widow and orphan.”

During World War I, Congress established new Veterans’ benefits including disability compensation, insurance, a family allotment program, and vocational rehabilitation. The Veterans Administration (VA) was established in 1930 when Congress authorized the President to consolidate and coordinate government activities affecting war Veterans. Initially, this new agency served over 4.7 million Veterans.

During World War II, it became necessary to expand VA facilities to accommodate the vast increase in Veteran population. The Korean and Vietnam conflicts added more Veterans. By 1982, the Veteran population was estimated at 28.5 million. The VA currently operates hospitals, clinics and nursing homes. In addition, the VA operates an outstanding medical research program that has made significant improvements in health care treatments and participates in educating nearly half of the physicians trained in the United States.

The Veterans Administration became a cabinet level department in 1989 and was renamed Department of Veterans Affairs (VA). The Department of Veterans Affairs is comprised of the Veterans Health Administration (VHA), the Veterans Benefit Administration (VBA), and the Veterans Cemetery Administration (VCA).

Currently, the VA operates the nation’s largest integrated health care system, with a budget of more than \$65 billion and a staff of 225,000 employees in 162 hospitals, approximately 175 nursing homes and domiciliaries, more than 800 outpatient clinics and 206 counseling centers. In addition to providing medical care to over four million Veterans annually, VA’s medical system conducts major research, trains medical professionals through affiliation with academic centers, and provides medical support in national disasters.

Historically, the VA patient population has been primarily male. The VA is increasing services to women Veterans. During 1996, nearly 180,000 women sought outpatient care and 16,000 sought inpatient care at VA facilities.

The VA is a major national research asset conducting basic, clinical, epidemiological and behavioral studies across the entire spectrum of scientific disciplines.

FARGO VA HEALTH CARE SYSTEM

The Fargo VA Health Care System is one of nine VA facilities in the nation that provide combined medical and benefit services through Veterans Health Administration and Veterans Benefits Administration.

The Fargo VA Health Care System provides medical care to Veterans residing in North Dakota, western Minnesota, and northern South Dakota. The Medical Center is a general medical/surgical/psychiatric facility with a Community Living Center (CLC) that provides extended care to Veterans. Veterans are referred to the VAMC Minneapolis for tertiary care.

The Fargo VA Health Care System also supports ten Community Based Outpatient Clinics (CBOCs) located in Bismarck, Grafton, Devils Lake, Williston, Dickinson, Jamestown, Minot, and Grand Forks, North Dakota as well as Bemidji and Fergus Falls, Minnesota.

The Fargo VA Regional Office (VARO) administer over \$86 million in benefits to Veterans and their dependents in the regional area. Professional, technical, and support personnel assist Veterans with compensation and pensions, insurance, education, home loans, and other benefits.

The Fargo VA Health Care System employs over 890 employees with an annual budget of approximately \$70 million for medical care. An active research program and a successful academic affiliation with the University of North Dakota School of Medical and Health Sciences are maintained. It supports residencies in Internal Medicine, Psychiatry, and Surgery, and provides training to allied health professionals.

The VHA is divided into geographic areas called Veterans Integrated Service Networks (VISNs). The Fargo VA is a member of VISN 23, which includes the states of North Dakota, South Dakota, Minnesota, Iowa, Nebraska, western Wisconsin, western Illinois, northern Kansas, northern Missouri, and eastern Wyoming. VISN 23 provides a continuum of high-quality care services to all eligible Veterans. VISN 23 is built on a foundation of primary care and is accountable for community health, joint-venture initiatives with Department of Defense (DOD), major research initiatives, and education affiliations.

OUR MISSION, VISION AND VALUES

MISSION: Honor America's Veterans by providing exceptional health care that improves their health and well-being. (The most important thing to remember is that we are here for the patients. Veterans are the focus of all our services.)

VISION: To be a patient-centered, integrated health care organization for Veterans providing excellent health care, research and education; an organization where people

choose to work; a community partner and a backup for national emergencies. VALUES: Trust, Respect, Excellence, Commitment, Compassion, Collaboration, Empowerment, and Continuous Improvement.

Center for Development & Civic Engagement Goals

- Orient, place, train and utilize volunteers sufficient in number to make the Center for Development & Civic Engagement a continuing stakeholder in the VA Health Care System's Design for Excellence.
- Recruit, motivate and supervise the volunteers that will support the VA Health Care System's staff.
- Support the continued successful operations of the Fargo VA Health Care System by providing VA staff with administrative, clerical and technical volunteers.
- Maintain and expand our current active volunteer roster through aggressive recruitment and effective structured orientation, and training.
- Secure quality service to the Veteran patients through creative programs.
- Serve the Veteran patients, medical staff and community with excellence.
- Recognize the unwavering dedication of the volunteers who give their time and talents to enhance the quality of life for our patients.
- Veterans and volunteers are our focus.

BASIC QUALIFICATIONS OF VOLUNTEERS

- Sincere interest in rendering service.
- Conscientious and reliable.
- Business-like approach to work.
- Willingness to accept Health Care System standards of orientation, conduct, and supervision.
- Sense of responsibility and dependability in accomplishment of purpose.
- Ability to work with groups as well as individuals.
- Tact, congeniality, patience, warmth, kindness and humanity.
- Physical ability to perform a volunteer assignment.
- Sense of pride in the work.
- Must be at least 14 years of age.

ORIENTATION

All regular scheduled volunteers will receive appropriate orientation before entering their volunteer assignments. This includes an electronic fingerprinting check (background check) for all volunteers.

The orientation you will receive is your introduction to the Fargo VAHCS and its care and treatment program for the patients.

The basic purposes of the orientation are to provide you with:

- Knowledge of the policies, functions, and objectives of the VA Health Care System.
- An understanding of the nature and significance of the VA Center for Development & Civic Engagement program.
- An understanding of the fundamental principles and procedures of volunteer service in the Fargo VA Health Care System.

It is the responsibility of the VA staff members supervising volunteers to orient and give the necessary on-the-job instructions in the specific program area in which the volunteer is assigned.

SUPERVISION

Each volunteer works under the direct supervision of a VA staff member.

ASSIGNMENT AND DUTY HOURS

Your volunteer assignment and hours of duty will be arranged by the supervisor of the Service line where you will be working.

Any change in your duty schedule must be approved by your supervisor. If you are unable to continue in your volunteer assignment, please let CDCE staff know.

If you should ever become unhappy about your assignment, please don't simply stop coming in. Contact the CDCE and we will discuss another area for you. We have many assignments, and we know we can find the right one for you. You must not change any assignment on your own.

REGULARLY SCHEDULED (RS) VOLUNTEERS

Regularly Scheduled (RS) Volunteers are those volunteers who normally participate in VA volunteering on a regularly scheduled assignment, under VA supervision, at least once a week or once a month. RS volunteers are considered by the VA to be "without compensation" employees.

All regularly scheduled volunteers are expected to be present at their scheduled assignment(s). Plans for anticipated absence should always be made with your VA supervisor.

OCCASIONAL VOLUNTEERS

Occasional Volunteers are individuals who assist on an infrequent basis. They do not have a regularly scheduled assignment under a VA staff member and are not eligible for the benefits and privileges to which the RS volunteer is entitled.

AWARDS

VA awards are presented through the Center for Development & Civic Engagement Program to volunteers in recognition of their volunteer hours and years of service. The following awards are presented each year to volunteers who meet the following requirements:

<u>HOURS</u>	<u>AWARDS</u>
50	Pin (youth)
100	Pin
150	Pin (youth)
300	Pin
500	Pin
750	Pin
1000	Pin
1750	Pin
2500	Pin
3750	Pin
4000	Pin
5000	Pin
6250	Pin
7500	Dedicated Service Plaque
8750	Outstanding Merit Award Plaque
10,000	Honor Award Bowl
12,500	Outstanding Service Award Pyramid
15,000	Exceptional Honor Award Medallion
17,500	Superior Service Award Plate
20,000	James H. Parke Achievement Award Tray

VA CORE VALUES AND CHARACTERISTICS

On June 20, 2011, the Secretary of Veterans Affairs announced VA's Core Values and Characteristics. As VA volunteers, you are an integral part of this organization and a defining aspect of its spirit and heart. It is important for you to be aware of these Core Values and Characteristics and to incorporate them into your volunteer work. The Core Values are the basic elements of how we go about our work – they define “who we are” – and form the underlying principles we will use every day in our service to Veterans. The Core Characteristics define “what we stand for” and what we strive to be as an organization.”

VA Core Values: "I CARE"

Integrity
Commitment
Advocacy
Respect
Excellence

VA Core Characteristics:

Trustworthy
Accessible
Quality
Innovative
Agile
Integrated

INTEGRITY Act with high moral principle. Adhere to the highest professional standards. Maintain the trust and confidence of all with whom I engage.

COMMITMENT Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA's mission. Fulfill my individual responsibilities and organizational responsibilities.

ADVOCACY Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.

RESPECT Treat all those I serve and with whom I work with dignity and respect. Show respect to earn it.

EXCELLENCE Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.

Please keep these Core Values and Core Characteristics in mind as you are performing your volunteer duties. In a message from the Secretary of Veterans Affairs, he stated, "These are more than just words. They represent our promise to do our best every day to perform our crucial mission of caring for Veterans, family members and other beneficiaries. I ask for your enthusiastic support in instilling the results of this work into VAs culture. Let us challenge each other to embrace these Values and Characteristics and look for ways to exemplify them each day."

VOLUNTEER RULES AND ETHICS

- Be punctual and dependable.
- Information concerning patients and their records is considered confidential.
- Speak softly in wards, corridors, and the library.
- Advise patient to refer pension and compensation problems to the Veterans Benefits Counselors or to Service Organization representatives.

- Do not lean or sit on the patients' beds.
- Do not discuss religion, politics, or patient illness with patients.
- It is not a good idea to give your home address or telephone number to patients.
- Do not make suggestions to patients about treatments or suggest remedies.
- Due to the nature of illness with patients on ward 4B, youth volunteers are not allowed access to this area.
- Avoid showing pity to a patient, but do not be excessively cheerful. Patients know how they feel. Let them do the talking; be a good listener.
- Volunteer workers should not enter a room that is posted "Isolation" or "No Visitors" unless asked to do so by a nurse or doctor.
- Observe the rules. Consult your supervisor in the event you wish to learn the reason for some specific rule or regulation.
- Do not take food, beverages, or medicine to a patient without permission from proper authority such as a doctor or nurse.
- If a situation arises that makes you feel uncomfortable and you do not know how to handle it, go to your supervisor. Volunteers should not argue with patients.
- Smoking is prohibited on VA grounds.
- Possession of contraband, alcohol/illegal drugs, or being under the influence of either while at the VA will be grounds for immediate dismissal.
- Exercise good judgment in completing your assignments and show initiative where required.
- Be friendly and cooperative with members of other organizations with whom you come in contact.
- Do not work in an assignment that causes you any mental or physical strain or anguish. Report such problems to your supervisor and/or CDCE for reassignment.
- Inform the nurse when you take any patient off the ward.
- Do your work cheerfully.

BOUNDARIES

Like employees, volunteers must maintain appropriate relationship boundaries with employees, other volunteers, patients, former patients and/or patient's families. This means volunteers must not establish personal friendships or intimate relationships with employees, patients, former patients, or family members of patients.

Volunteers are to only perform the duties assigned to them through CDCE. Volunteers are not medical or benefit advocates for Veterans. Questions pertaining to benefits or medical care should be referred to the appropriate staff member.

Volunteers should never handle money for patients, transport patients without prior authorization, exchange in the sale or purchase of items with Veterans nor solicit funds under any circumstance.

Additionally, should an employee, volunteer, patient, or patient's family member initiate an inappropriate relationship, the volunteer is responsible for refusing the initiative. We understand that, in certain situations, pre-existing relationships are present. In the course of volunteering, if a pre-existing relationship should surface, please notify your supervisor.

UNIFORMS AND APPAREL

The Fargo VA has a business casual policy Monday through Thursday. Employees and volunteers are permitted to wear blue jeans on Fridays. Certain volunteer positions may require a uniform. If so, volunteers are always expected to wear the required uniform. Volunteer workers identified with an organization are permitted and encouraged to wear insignia and/or uniforms as adopted by their organization and in conformity with their organization's regulations as long as they do not interfere with any required uniforms such as the Red Vest.

All volunteers are expected to keep themselves neat, clean, and well-groomed while working. **Volunteer ID badges must be worn at all times.** All footwear should be kept clean and neat. Hosiery or socks must be worn at all times. No open-toed shoes or sandals are permitted. All clothing is to be neat and clean and in good repair. Clothes should be conservative in nature. Clothes should not present a provocative image or exposure of one's body that can be considered distasteful or create an unpleasant atmosphere for the patients, volunteers, or hospital staff. No article of clothing shall include inappropriate illustrations or inappropriate advertising. Examples of inappropriate slogans, illustrations and advertising include clothing that promotes or displays alcohol, tobacco products, illegal drugs, or might be degrading to individuals based on sex, age, race, national origin, or sexual orientation. The following items of clothing are considered to be **inappropriate**:

- Athletic warm-ups/sweat suits (to include items made of spandex).

- Tank tops/tube tops/halter tops.
- Short shirts revealing the abdomen.
- Miniskirts.
- Shorts.
- See-through clothing.
- Hats, caps, bandannas worn on the head (unless working outside or in an area where dirt, dust or foreign matter may be a problem).
- If you work with patients, it is best to leave most jewelry at home. Also perfumes or colognes may disturb the patients (some departments may prohibit the use of these products). Hair and nails should be kept clean and neat.
- Blue jeans are prohibited Monday through Thursday unless you are a Volunteer Transportation Network driver or an evening Recreation volunteer. Colored jeans are acceptable.

TIME AND ATTENDANCE

Volunteers are reminded to enter their hours in the computer (located at the information desk at the front entrance of the Fargo VA Health Care System) each time they are in to volunteer. Some volunteers may have more than one assignment or combination code. If so, the volunteer must be sure to record the hours for that day under the proper combination code. The combination code identifies the volunteer's affiliation, work schedule, and assigned department. If any of this information changes, please contact CDCE. If the computer is down or not functioning, volunteers may log in their hours on the daily sign-in sheet located next to the computer or may contact CDCE staff for assistance.

Attendance is crucial to the success of each department. If you commit yourself to a set schedule and do not adhere to it, you could jeopardize the mission of the service department. Schedules are developed so proper training and supervision can be provided, as well as developing a workflow. If you are unable to come in for any reason, please notify your supervisor as soon as possible so that they may find a temporary replacement for you.

CUSTOMER SERVICE

Customer Service is any activity that enhances the Veterans' experience and exceeds their expectations. Every day, there are many ways we can effectively respond to the needs of those we serve and those with whom we work. Never forget that it is an honor to be able to serve our nation's Veterans. Most patients appreciate what you do for them and will respond with a smile. There are exceptions. Remember that when a patient is cranky or even insulting, the patient is sick, and this could account for their

actions. As a volunteer, you must learn to empathize with their feelings, appreciate their concerns, and let them know that you are there if they need you. A good volunteer works on developing empathy, tact, courtesy, and a smile that lets the patients know that you care about them. The following gestures and statements do not take much time and the return on your investment is very gratifying:

- **Introduce** – Establish a personal identity with the person by introducing yourself. Let the person know who you are and what department you represent.
- **Identify** – Many times, people feel a loss of personal identity. Call the person by name to reinforce that you related in a personal way.
- **Respect** – Show respect by addressing him/her by their proper name (Mr. Hernandez or Mrs. Smith, for example). Individuals who prefer to be addressed by their first name will let you know.
- **Knock** – The patient’s privacy is invaded at all hours of the day and night. Be considerate. Tap lightly on the door before you enter a patient’s room.
- **Smile** – Smiles help to promote a friendly environment. Administered at an appropriate time, a smile may be the most comforting medication you can give to a patient.
- **Greet** – As you walk through the corridors and other public areas of the facility, greet everyone by saying “hello” or “good morning.” This short interaction will help people feel welcome.
- **Compliment** – Simple observations can reveal many opportunities to pay sincere compliments.
- **Initiate** – Anticipate needs and respond before you are asked. Your perceptiveness and thoughtfulness will be appreciated and admired. If someone looks confused or needs assistance, stop and lend a hand. By taking the initiative, you can exceed all expectations.

POLITICAL ACTIVITY

A volunteer must not canvass or solicit support for any political party, candidate, or faction, nor do any act on their behalf while on duty as a volunteer. Volunteers are responsible for abiding by the HATCH Act, which imposes restrictions on partisan political activity. In general, a volunteer should not participate, advertise for (including wearing hats, buttons or other insignia) nor solicit support or contributions for a political candidate while on duty. They should also refrain from wearing any official VA uniforms or badges while participating in political activities while off duty. The department of Veterans Affairs remains a non-partisan government organization. All volunteers must keep this in mind while volunteering with the Fargo VA Health Care System.

PUBLICITY

All pictures or photos of patients must be cleared with the Public Affairs Officer. Consent forms for use of a picture and voice must be signed by a competent patient before any pictures are taken. Any completed consent forms must be reviewed and approved by the Public Affairs Officer.

UNAUTHORIZED SOLICITATIONS/FINANCIAL TRANSACTIONS

No one may solicit contributions or otherwise promote any national or local welfare campaign or other type of campaign while on any VA premises unless that campaign has the appropriate VA endorsement. No one will sell stocks, tickets, articles, commodities, or services on VA premises without the proper authorization. This policy avoids bringing embarrassment or discredit to the VA, individuals, or organizations.

Volunteers are also not to engage in any financial transactions with patients of the VA Health Care System. Prohibited transactions include, but are not limited to, borrowing money from patients, purchasing items for patients and cashing checks for patients. If a Veteran is in need of a financial transaction, please let the ward/clinic clerk or nurse know.

MEALS

The Health Care System Director has authorized a \$8.00 stipend to help defray the cost of noon meals for regular scheduled volunteers whose assignments extend over the noon lunch period. Noon meals are served between the hours of 10:45 a.m. to 1:30 p.m. in the cafeteria. Volunteers must work a minimum of four hours, some of which cover the noon meal hours, to be eligible for a meal ticket. Volunteers must sign in on the computer next to the First Impression/Greeter desk in order to pick up their printed meal tickets. Please sign the meal ticket and present it to the cashier in the cafeteria.

CREDIT UNION

Regularly scheduled volunteers are welcome to join the Fargo VA Federal Credit Union which is located in the basement.

OCCUPATIONAL HEALTH

The Occupational Health Clinic is a central location where your needs are met. Services are geared specifically for all Volunteers.

What we can do for you:

- Occupational Injury Care and Follow Up

- Band-Aids
- Ice packs
- Ace Wraps
- Vehicle Operating Physical Exams
- Mandatory Vaccinations
 - Influenza
 - Covid
 - Tetanus Diphtheria/TDAP
- Wellness Programs
 - Employee Fitness Center (EFC)
 - Volunteers receive a free courtesy membership

Located in basement Room BB82. Call extension 2205 for more information

INFECTION CONTROL

The risk of infection is always present. Volunteers should take precautions to prevent or minimize the risk of spreading infections. Even if your volunteer assignment does not involve direct contact with patients, you can help prevent the spread of infection by following some basic principles.

First and foremost, **hand washing, or hand hygiene, is the single most effective way and the most important thing you can do to help prevent the spread of infection.** You must wash your hands or use a hand hygiene product supplied by the Health Care System:

- Upon arriving at a VA facility before beginning your assignment
- After personal care activities such as blowing your nose, touching your face for any reason, or applying makeup
- After using the rest room
- Before and after eating
- After having contact with any soiled or contaminated items or environmental surfaces, such as after transporting specimens or pushing wheelchairs
- Between any contact with patients or their surroundings

- Before and after preparing or serving food
- Before leaving the Medical Center

The Health Care System supplies hand hygiene foam (Purell) in dispensers in all patient care areas. The foam can be used for cleaning your hands provided your hands are not visibly soiled. It should not be used after using the bathroom, after eating, or when preparing or serving food. Hands should be washed with soap and water in those instances.

Other things to remember to prevent and/or control infections include:

- Do NOT come to volunteer if you are sick or have an illness that might be contagious.
- If you are unsure of what you should do in a situation (such as whether you should enter a room or assist a patient with a specific activity), ask a staff person to advise you
- Do not bring food in for patients. They may be on restricted diets and for some people, food can be a source of infectious illness.
- Do not “share” items between patients such as lap robes, blankets or personal care items.
- Gloves are not to be worn outside of a patient’s room.
- Infection control is everyone’s concern.

Hand Hygiene Methods:

Hand Washing Procedure

- Turn on faucet and wet hands.
- Keep hands lower than your elbows and apply soap.
- Wash vigorously for at least 15 seconds, use friction and pay attention to fingertips, between fingers, under rings and around nails.
- Rinse well, keeping hands in downward position.
- Tear off paper towels and dry hands.

- Use paper towel to turn off faucets.
- Discard paper towels in the trash.

Use of Alcohol Based Hand Sanitizer

- Make sure your hands are not visibly soiled (do not use if they are visibly soiled, after using the bathroom, or after eating – wash with soap and water).
- Place one hand under the dispenser.
- Allow the premeasured amount of foam to collect in your palm.
- Rub hands together, distributing the foam on all surfaces of hands just like washing with soap and water.
- Continue to rub vigorously until your hands are dry. The product is not effective until it's dry.

Blood/Body Fluid Precautions

Working in a health care facility has the potential to place you at risk for exposure to possible diseases contracted through exposure to another person's blood or body fluids. Do **NOT** clean up spills of blood or other body fluids, including urine or vomit. Do not pick up any sharp item, such as a needle found lying on the floor, or handle any linen or patient clothing soiled with blood or body fluids. While it may appear to be a simple way to help by cleaning or picking it up, you have not been trained on how to do so safely. Immediately notify staff in the area so they can take care of it.

If you should have an accidental exposure (contact with non-intact skin or mucous membrane or a stick or cut by a sharp object such as a needle) to a patient's blood or body fluids, wash the area with soap and water or flush mucous membranes (e.g. eyes) with plain water and report it to your supervisor immediately. We all know that despite our best efforts, accidents happen, so do not hesitate to report an exposure. It is in your best interest and gives us the opportunity to assess the situation to determine if there is anything else that needs to be done for your safety and well-being.

Other Types of Isolation

Other types of isolation are sometimes used within the facility to prevent the

transmission of some diseases, such as flu. You should not enter a room if you see a STOP sign indicating the patient is in a special type of isolation precaution posted on the door. You will be given specific directions by staff if you are to assist in any way with patients in isolation. As a general rule of thumb, you will not be given any assignment to assist with patients in isolation.

What is Tuberculosis (TB)?

TB is short for an airborne disease called tuberculosis. You cannot get TB by touching someone. TB germs can live in your body without making you sick. This is called latent TB and does not mean you have an active TB infection, that you will ever become sick with the disease, or that you can give the infection to anyone else. It is important, however, to know if you are infected with the TB germ. All volunteers are required to be screened for exposure to TB prior to beginning their volunteer assignment. The CDCE Office will arrange for a lab order to be placed through Occupational Health. When you visit the lab, you will receive a blood draw. You will not have to return to the VA to have your test read. If you are not contacted after your blood draw, you can assume your results were negative and may begin volunteering.

Gloves

Food handling gloves should always be worn when handling and serving food. Always wash your hands with soap and water before handling utensils or serving platters and before putting on gloves. If the gloves become damaged in any way, remove them, wash your hands, and then put on another pair. Do not wear the same pair of gloves for doing different types of food preparations, such as handling meat products and then placing cookies on a plate. Wash your hands and put on a new pair of gloves. Also, wash your hands and put on a new pair of gloves if you have any contact with soiled or “dirty” items such as trash cans, soiled table service, or other non-food items.

If there are any circumstances when you should wear gloves when assisting with patient care activities, you will be given direction by staff in the area. If you have any concerns or questions about an activity you are being asked to assist with, always ask staff in the area before you perform the activity.

Flu- and COVID Vaccines

The flu and COVID vaccines are required when volunteering at the Fargo VA, CBOCs or Vet Centers. All volunteers are entitled to free COVID and flu shots. Vaccines should be scheduled through Occupational Health or may be received at one of the scheduled blitzes each fall. Volunteers receiving a flu shot or COVID

vaccine outside of a VA facility will be asked to provide their immunization record to Occupational Health as proof of vaccination

Covid-19 Vaccination

Covid-19 Vaccination is required for volunteers at the VA per VHA Directive 1193.01 for VHA Health Care Personnel. Volunteers must provide proof of full vaccination (2 weeks after second dose of Moderna or Pfizer, or 2 weeks after single dose of Janssen).



Personal Protective Equipment (PPE) and Screening Procedures:

Step 1: Face Masks are required at all times while in the facility. Upon entering the facility, you will be required to wear a face mask. A procedure mask will be provided for you at the north entrance. You should get a new mask every day. If your mask becomes damaged or wet, you should replace with a new one.

Step 2: Put on your PPE

- **Before Putting on a Face Mask and ~~Face Shield:~~**
 - Make sure there are no holes or rips in the mask.
 - Clean your hands using alcohol-based hand rub or wash your hands with soap and water.

- **How to Properly Put on a Face Mask:**
 - Do not touch the front of the mask.
 - Place the edge at the top of your nose and stretch loops behind your ears.
 - Once the mask is in place, use your index fingers to firmly press the mask securely over the bridge of your nose.
 - Make sure the bottom edge of your chin mask is positioned under your chin.

- **When Wearing a Face Mask**
 - Avoid touching the mask.
 - Do not move your mask to your chin, neck, or forehead.
 - If you accidentally touch the front of your mask, perform hand hygiene.

- **How to Properly Remove a Face Mask**
 - Perform hand hygiene before removing the mask.
 - Holding the ear loops, carefully remove the mask and discard.
 - Perform hand hygiene after removing all PPE.



HEALTH

Volunteers will not report to work if they have any infection that poses a hazard to patients or other personnel. Do not come to the hospital if you have a fever, flu, do not feel well, or if you have had recent exposure to a disease (i.e. COVID-19, chicken pox, measles, tuberculosis, or Hepatitis A).

HEALTH

Volunteers will not report to work if they have any infection that poses a hazard to patients or other personnel. Do not come to the hospital if you have a fever, flu, do not feel well, or if you have had recent exposure to a disease (i.e. COVID-19, chicken pox, measles, tuberculosis, or Hepatitis A).

PRIVACY and HIPAA

Veterans' Health Administration (VHA) health care facilities should comply with all statutes simultaneously so that the result will be application of the most stringent provision for all uses and/or disclosures of data and in the exercise of the greatest rights for the individual.

Volunteer Responsibilities in the Use and Disclosure of Information

Volunteers can use health information contained in VHA records in the official performance of their duties that support health care operations purposes. However, volunteers must only access or use the minimum amount of information necessary to fulfill or complete their official duties. The ability to access Protected Health Information (PHI) **does not** constitute authority to use PHI without a need to know. Volunteer's access to PHI is limited to support health care operations. There is **NO** authority for a volunteer to access another volunteer's or a Veteran's health record unless it is in performance of their official job duties and it is for health care operations. Refer to your local facility Privacy Officer for additional guidance.

Veterans Rights - Notice of Privacy Practices (NoPP)

A Veteran or Non-Veteran receiving treatment has the right to receive a copy of the "Notice of Privacy Practices" (NoPP). All newly registered Veterans are mailed a Notice of Privacy Practices by the Health Eligibility Center (HEC). The VHA Privacy Office is responsible for updating the NoPP and ensuring Veterans are provided the NoPP every three years or when there is a significant change. This notice includes the uses and disclosures of his/her protected health information by VHA, as well as, the Veteran's rights and VHA's legal responsibilities with respect to protected health information. There is one NoPP for all of VHA. A copy of the NoPP can be obtained from the Privacy Officer.

Right of Access

A Veteran has a right to obtain a copy of his or her own health record. A Veteran must submit a **signed written request** to the VHA health care facility where the record is maintained. VHA volunteers should refer all requests from Veterans for copies of their records to the Release of Information (ROI) Office or to another appropriate office that has a mechanism in place to track those disclosures. Veterans requesting copies of their health records must provide sufficient information to verify their identity, e.g., driver's license or other picture identification, to ensure appropriate disclosure.

Right to Request an Amendment

The Veteran has the right to request an amendment to any information in their health record. The request must be in writing and adequately describe the specific information the Veteran believes to be inaccurate, incomplete, irrelevant, or untimely, and the reason for this belief. The **written request** should be mailed or delivered to the VHA health care facility that maintains the record. Requests for amendments to health records should be directed to the local Privacy Officer. Authors of the requested amendments should work with their Privacy Officers so that a timely response is given.

Right to an Accounting of Disclosures

A Veteran may request a list of all written disclosures of information from his/her records. VHA facilities and program offices are required to keep an accurate accounting for each disclosure made to a party external to VHA. Entry of a VA patient by name or other identifier into a State Prescription Drug Monitoring database is considered a disclosure that must be accounted for. Contact your VHA facility Chief of Health Information Management (HIM) and your local Privacy Officer for additional guidance.

Right to Request a Restriction

The Veteran has the right to request VHA to restrict its use or disclosure of PHI to carry out treatment, payment, or health care operations. The Veteran also has the right to request VHA to restrict the disclosure of PHI to the next of kin, family, or significant others involved in the individual's care. This request must be in writing and signed by the Veteran. A REQUEST FOR RESTRICTION SHOULD BE DELIVERED TO THE Privacy Officer or designee for processing.

Right to Opt Out of Directory

A Veteran has the right to opt-out of the facility directory. The facility directory is used to provide information on the location and general status of a Veteran. Veterans must be in an inpatient setting in order to opt-out and thus it does not apply to the emergency room or other outpatient settings.

If the Veteran opts out of the facility directory no information will be given unless required by law. The Veteran will not receive mail or flowers. If the Veteran has opted out of the directory visitors will only be directed to the Veteran's room if they already



know the room number. If the Veteran is admitted emergently and medically cannot give their opt-out preference, the provider will use their professional judgment and make the determination for the Veteran. This determination may be based on previous admissions, or by a family member who is involved in the care of the Veteran. When the Veteran becomes able to make a decision, staff is required to ask the individual their preference about opting out of the facility directory.

Right to File a Complaint

Patients have a right to file a complaint if they believe that VHA has violated their (or someone else's) health information privacy rights or committed another violation of the Privacy or Security Rule. A complaint can be filed by contacting one or more of the following:

- The VHA health care facility's Privacy Officer, where they are receiving care,
- The VHA Privacy Office, or
- The U.S. Department of Health and Human Services, Office for Civil Rights.

Using PHI without an Authorization

VHA volunteers may use PHI on a need to know basis for their official job duties for purposes of supporting health care operations. "Health care operations" are certain administrative, financial, legal, and quality improvement activities of a covered entity that are necessary to run its business and to support the core functions of treatment and payment.

Deceased Veterans

IMPORTANT: Volunteers must protect PHI about a deceased individual in the same manner and to the same extent as that of living individuals for as long as the records are maintained.

Use of PHI for Research Purposes

A VA researcher may access PHI without the subject's written authorization if the information is reviewed preparatory to research on human subjects. Only aggregate data will be recorded in the researcher's file and no PHI will be removed from VHA during the preparatory phase. Further use or disclosure of PHI requires Institutional Review Board approval of the research protocol, informed consent, or waiver of informed consent. In addition, the Principal Investigator (PI) must have an approved HIPAA (Health Insurance Portability and Accountability Act) authorization that is reviewed by the Privacy Officer or a waiver of the HIPAA authorization by the IRB or Privacy Board. If the research involves pictures or voice recordings for other than treatment purposes, an additional VA Form 10-3203 *Consent for Use of Picture and/or Voice*

is required.

Incidental Disclosures

Many customary health care communications and practices play an essential role in ensuring that Veterans receive prompt and effective health care. Due to the nature of these communications and practices, as well as the various environments in which Veterans receive health care or other services from VHA, the potential exists for a Veteran's health information to be disclosed incidentally. For example: A hospital visitor may overhear a provider's confidential conversation with another provider or a patient. A patient may see limited information on sign-in sheets. A Veteran may hear another Veteran's name being called out for an appointment. A Veteran may see limited information on bingo boards or white boards. Many health care facilities providers and professionals have long made it a practice to ensure reasonable safeguards are in place for Veterans PHI. For instance: Speaking quietly when discussing a patient's condition with family members in a waiting room or other public area; avoiding using patients' names in public hallways and elevators, and posting signs to remind volunteers to protect patient confidentiality; and reducing the use of the SSN whenever possible.

Definition of Authorization

An authorization as defined by the HIPAA Privacy Rule is an individual's written permission for a covered entity to use and disclose PHI. A written authorization is a document signed by the individual to whom the information or record pertains and may be required for use or disclosure of protected health information.

Authorization Requirements

If VHA employees receive a request for PHI that is accompanied by a valid written authorization, disclosure should be made in accordance with the authorization. When a valid written request, signed by the individual is made, every attempt to provide the disclosure should be made. When a written authorization of the individual is required for use or disclosure of PHI, the authorization must contain each of the following elements to be valid: Be in writing, identify the individual to whom the requested information pertains to, identify the permitted recipient or user, describe the information requested, describe the purpose of the requested use or disclosure, contain the signature of the individual whose records will be used or disclosed, include a statement that the patient may revoke the authorization in writing, except to the extent the facility has already acted in reliance on it, and a description of how the individual may revoke the authorization, include a statement that treatment, payment, enrollment, or eligibility for benefits cannot be conditioned on the individual completing an authorization, and Include a statement that the information may no longer be protected from re-disclosure.

If any of the authorization requirements listed above have not been satisfied the authorization will be considered invalid. There are some cases when a written authorization is not required such as when PHI is used for treatment, payment, and/or health care operations (TPO) or other legal authority exists.

NOTE: If there are questions from VHA employees on legal authority to make disclosures, the Privacy Officer should be contacted prior to making the disclosure.

Privacy of Photographs/Digital Images/Video/Audio Recordings

The facility must post obvious signage at each entrance of the facility clearly stating the local policy regarding photography, digital imagery, or video/audio recording guidelines. VHA will request individuals to respect the privacy of patients and others if they want to take photographs or capture digital images and video/audio recordings on VHA premises.

NOTE: Secretly taking pictures or recording conversations is strongly discouraged.

Release of U.S.C. Section 7332 Protected Health Information

38 U.S.C. Section 7332 makes strictly confidential all VA records that contain the identity, diagnosis, prognosis or treatment of VA patients or subjects for drug abuse, alcoholism or alcohol abuse, infection with human immunodeficiency virus (HIV/AIDS), or sickle cell anemia. This statute applies to information whether or not it is recorded in a document or a department record. For example, a VHA health care provider's conversation discussing a patient's diagnosis, prognosis, and treatment would be protected by Section 7332. Finally, this statute protects records and information of the testing of individuals for HIV infection and sickle cell anemia, including negative test results. The following is a list of situations where 38 U.S.C. § 7332 protected information **CAN** be released without a signed authorization:

- To medical personnel to the extent necessary to meet a bona fide medical emergency;
- To qualified personnel for conducting scientific research, management audits, financial audits or program evaluations;
- To public health authority charged under federal or state law for protection of public health pursuant to a standing written request; or
- To a court of competent jurisdiction pursuant to a **very specific** court order.

Logbooks

A physical logbook is any written (i.e., not electronic) record of activities or events comprised of data which may uniquely identify an individual or contain sensitive personal information that is maintained over a period of time for the purpose of monitoring an activity, tracking information or creating a historical record. The following are examples of physical logbooks:

- Respiratory therapy logs
- Laboratory logs
- Autopsy logs
- Access data base printouts
- Wound care logs
- Logs of cases cleared
- Printouts of Excel spreadsheets

Physical logbooks containing sensitive personal information can only be created, used and maintained for a compelling business need as approved by the VHA facility director. A compelling business need is one that requires the capture of sensitive personal information for a policy, regulatory, accreditation or statutory requirement. Compelling business needs may support reasonable and appropriate business operations, patient safety or quality improvement efforts, or other prudent and important health care operations needs such as the board certification of clinical staff including residents and trainees. Transition of physical logbooks to secure electronic logbooks and tracking systems is highly encouraged. Physical logbooks are vulnerable to loss, theft or misuse of logbook content. Loss of control over a logbook can result in the compromise of sensitive personal information for multiple individuals, which could put individuals at risk for financial, reputational, or other harm and may result in a loss of trust in VHA's ability to secure sensitive personal information.

Compliance

All volunteers shall comply with all Federal laws, regulations, VA and VHA policies. Volunteers shall conduct themselves in accordance with the Rules of Behavior concerning the disclosure or use of information. The VA Rules of Behavior are delineated in VA Handbook 6500, "Information Security Program," Appendix D. Volunteers who have access to VHA records or VHA computer systems shall be instructed on an ongoing basis about the requirements of Federal privacy and information laws, regulations, VA and VHA policy.

Compliance (continued)

Volunteers' access or use of PHI is limited to the minimum necessary standard of information needed to perform their official job duties. See VHA Handbook 1605.02, "Minimum Necessary Standards for Protected Health Information" for additional guidance. The Omnibus final rule imposes a tiered penalty structure and the penalties imposed vary based on the severity of the violation. The penalties range from \$100 to \$50,000 per violation, with a \$1.5 million cap per calendar year for multiple violations of identical provisions, and criminal penalties of up to 10 years' imprisonment.

Offenses committed under false pretenses or with the intent to sell, transfer, or use individually identifiable health information for commercial advantage, personal gain or malicious harm have more stringent penalties. In addition to the statutory penalties for the violations described above, administrative, disciplinary, or other adverse actions (e.g., admonishment, reprimand, and/or termination) may be taken against volunteers who violate the statutory provisions.

Elements of FOIA

The basic purpose of the Freedom of Information Act (FOIA) is "to ensure an informed citizenry, vital to the functioning of a democratic society, needed to check against corruption and to hold governors accountable to the governed." The FOIA establishes a presumption that records in the possession of agencies and departments of the executive branch of the U.S. Government are accessible to the people.

Agency Records

A valid FOIA request must be in writing and may be received by mail, e-mail, by hand or fax. If VHA volunteers receive FOIA requests for any type of agency records they should be forwarded to the VHA healthcare facility's FOIA Officer.

Agency records are either created or obtained by an agency; and under agency control at the time of the FOIA request. Four factors for determining if an agency has "control" of the record.

- The intent of the record's creator to retain or relinquish control over the record;

- The ability of the agency to use and dispose of the record as it sees fit;
- The extent to which agency personnel have read or relied upon the record; and,
- The degree to which the record was integrated into the agency's records files.

Who Can Make a FOIA Request?

Virtually **ANYONE**, including:

- Private citizens
- Members of the media
- Members of Congress
- Corporations, associations, partnerships
- Foreign and domestic governments
- Unions
- Other federal employees, except when made in the official performance of their VA duties

Financial Transactions

Volunteers are **NOT** to engage in financial transactions with patients. Prohibited transactions include but are not limited to: borrowing or loaning money to patients, purchasing items for patients, and cashing checks for patients. If a Veteran is in need of a financial transaction, please inform the ward medical support assistant, nurse, or social worker.

Privacy and Confidentiality Summary

All volunteers must be responsible for safeguarding Protected Health Information. As a volunteer, you have a responsibility to keep all patient information, learned in the course of your duties, confidential and secure. Do not discuss any PHI with anyone.

Remember that you would want your personal information and health records treated in the same confidential and professional manner. Information concerning patients and their records are considered **CONFIDENTIAL** and sharing of that information is grounds for dismissal and/or dismissal as a volunteer.

What is a High Reliability Organization?

A high reliability organization (HRO) is defined as an organization that has maintained high levels of safety despite operating in a complex environment with risk of significant consequences when failure occurs. (*Adapted from Weick, Karl E., and Kathleen M. Sutcliffe. Managing the Unexpected, 2nd ed. San Francisco: Jossey-Bass 2017*)

Why Is VHA on a High Reliability Journey?

Every day, across VHA, we work to deliver safe, high-quality care to our Veterans. **VHA's Journey to High Reliability is a long-term commitment** to our Veterans and our workforce.

High reliability is not a new concept to VHA, nor should it be viewed as an additional task. In fact, many of our daily work practices are already in alignment with HRO Principles. We've made great strides in improving safety and quality of care for our Veterans, but we can always improve.

With a unified approach across our system, we can ensure our volunteers and staff members receive the necessary support, training, and resources to continuously learn and improve.

The VHA Journey to High Reliability requires an organizational transformation and an enhanced focus on our Culture of Safety. The result is an organization that consistently focuses on better serving our volunteers, staff members, Veterans, and their families. (*VHA Driving Awareness of VHA High Reliability Organization (HRO) Principles Toolkit*)

[How can you, as Fargo VA HCS volunteers and staff continue to support HRO?](#)

Preoccupation with Failure- Be aware of your surroundings and speak up if something does not look right.

- Is the floor slippery (snow) posing a slip or fall risk?
- Do you see something that does not look safe?



“Stop the Line” is one of the principles highlighted as part of VHA's Journey to becoming a High Reliability Organization (HRO). In an HRO, **ALL** volunteers and staff are empowered to speak up in the interest of patient and staff safety. If you see a patient safety event or have a patient safety concern, please call Laura Lien ext. 3108 or Corey Bennington ext. 3114.

Be aware of your own strengths and weaknesses. If you do not know the answer—ask someone that does, **Deference to Expertise**. If everyone on the Fargo VA HCS team can play to their strengths, it will be a recipe for safe and quality care for our Veterans.

Fargo VA HCS demonstrates a **Commitment to Resilience** by ensuring that volunteers and staff have appropriate training and in-depth knowledge of the system, technology, their coworkers, and the resources available to address challenges and bounce back from setbacks effectively. This requires having awareness of errors that have already occurred and addressing them before they worsen and result in more serious harm. ([HRO Corner: Delving into the "Commitment to Resilience" High Reliability Guiding Principle | Veterans Benefits Information](#))

As an organization, the Fargo VA HCS has adopted a **Reluctance to Simplify**. We do not jump to conclusions when errors happen, instead we communicate to see the whole picture and to identify the real cause of the error. We use a systematic approach to redesign processes that lead to better outcomes for our Veterans.

What is Psychological Safety?

The HRO journey starts with leaders at all levels demonstrating commitment to HRO through their actions. Volunteers and staff at all levels must feel comfortable and safe in voicing concerns regarding patient and staff safety. A psychologically safe environment is one in which volunteers and staff are encouraged to report safety concerns and errors without a fear of reprisal.

Research shows that individuals who feel psychologically safe can speak up and act without fear of reprisal, risk to reputation, or being seen as disruptive.

[\(Promoting Psychological Safety in Healthcare Organizations | Military Medicine | Oxford Academic \(oup.com\)\)](#)

PATIENT ABUSE

It is the policy of the Fargo VA Health Care System to provide quality health care to our patient population in a respectful and compassionate manner. Patient abuse, defined as any act against patients which involves physical, psychological, sexual, or verbal abuse, will not be tolerated. The penalty for patient abuse is removal.

Health Care System employees, volunteers, students in training, and without compensation appointees who witness or receive reports of abusive behavior toward a patient must report the incident immediately to their supervisor.

The following actions/behaviors constitute patient abuse and are to be immediately reported and documented:

- Acts against patients which involve physical, psychological, sexual, or verbal abuse.
- Action or behavior that conflicts with patients' rights.
- Intentional omission of patient care.
- Willful violations of the privacy of patients.
- Intimidation, harassment, or ridicule of patients.
- Willful physical injury of a patient.

SEXUAL HARASSMENT

Harassment on the basis of gender is a violation of Section 3, Title VII. Sexual harassment includes unwelcome sexual advances or sexual favors, verbal abuse, insults, whistles, suggestive comments, jokes, notes, or picture displays, touching and physical aggressiveness, pressure for dates, or threats and sexual assaults. Management, supervisors, employees, and volunteers must take an active role in preventing sexual harassment. The VA is a team and it is everyone's responsibility to be aware and correct improper behavior. To fight sexual harassment, remember four tactics:

- **Confront** – Voice your displeasure directly to the harasser, repeatedly if necessary.
- **Report** – Report the harassment to your supervisor, or if your supervisor is the harasser, to a higher authority. Also, report it to the CDCE office.
- **Document** – While the incident is fresh in your mind, write down what happened, where, when, and how you responded, if possible, word for word; include witnesses, if any.
- **Seek support** – Talk to a friend or a relative or seek support from an organized group.

You have the right to work in an environment free of sexual harassment. You have the responsibility NOT to harass others. Remember, a simple definition of harassment is unwelcome or unwanted behavior. If you have any questions or think that you are being sexually harassed, contact your supervisor or the Chief, CDCE.

For safety reasons, volunteers should avoid situations where safety or perception could be comprised such as:

- in a patient's room with the door closed
- in secluded areas
- in a closed office with fewer than 2 VA staff present (pertains to youth volunteers only)
- any situation where one could not summon help immediately

WHISTLEBLOWER RIGHTS AND PROTECTIONS

VA volunteers, employees and applicants for employment may disclose a violation of law, rule or regulation; gross mismanagement; gross waste of funds; an abuse of authority; or a substantial and specific danger to public health or safety to various entities within and outside of VA, including OAWP and OSC. Retaliation against

individuals for making disclosures, opposing discrimination or participating in the discrimination-complaint process is unlawful and will not be tolerated. This includes retaliation against complainants, witnesses and others who provide information concerning such claims.

The Whistleblower Protection Enhancement Act of 2012 enhances whistleblowers' rights by: (1) making a whistleblower's oral disclosures legally sufficient; no longer must a disclosure be in writing; (2) making disclosures that fall within the whistleblower's job duties an eligible basis of a whistleblower claim; (3) strengthening anti-retaliation restrictions; (4) allowing damages that could be obtained by a whistleblower to include consequential damages such as emotional distress; and (5) accessing the medical record of another employee or an applicant for employment as a part of, or otherwise in furtherance of, any PPP. VA employees and applicants for employment have several avenues to make a whistleblower disclosure or allege whistleblower retaliation, including contacting OAWP or OSC.

Every VA employee and volunteer is responsible for safeguarding the privacy of Veterans and other individuals served by VA and for complying with laws that protect patient health information and other sensitive personal information. A whistleblower's disclosure of information is protected only if the release is not otherwise prohibited by law. Any wrongful disclosure of sensitive personal information, such as medical or personnel records, may be subject to civil and criminal penalties as well as disciplinary or other adverse action.

A whistleblower may:

- Disclose VA Sensitive Personal Information (individually identifiable information) to an authorized outside entity in the course of reporting alleged violations of law, rule, regulation or gross mismanagement, a gross waste of funds, an abuse of authority or a substantial and specific danger to public health or safety. Accordingly, whistleblowers may always disclose any information to VA's Office of Inspector General (OIG), OAWP, or a Congressional Committee or Subcommittee having oversight authority over VA.

- Disclose any information, except information protected by 38 U.S.C. § 5705 (Quality Assurance) or 38 U.S.C. § 7332 (HIV, Sickle Cell, Drug and Alcohol Treatment) to OSC.

- Never disclose information containing VA Sensitive Personal Information to the media, a Veterans Service Organization or any other member of the public.

- Never disclose VA Sensitive Personal Information to an attorney, even one who is representing in the context of whistleblowing.

Offices that can receive whistleblower disclosures include the following:

- VA Office of Accountability and Whistleblower Protection, 855-429-6669 (<https://www.va.gov/accountability>);

- VA Office of Inspector General, 800-488-8244 (<https://www.va.gov/oig>); and

- U.S. Office of Special Counsel, 800-872-9855 (<https://www.osc.gov>).

Offices where you can file a complaint of whistleblower retaliation:

- VA Office of Accountability and Whistleblower Protection, 855-429-6669 (<https://www.va.gov/accountability>); and

SUICIDE PREVENTION: S.A.V.E. Training

Veteran Specific Risks

- Deployments to hostile environments
- Exposure to extreme stress
- Length of deployments
- Service-related injury
- Physical or sexual assault while in the service
- Recently discharged from Active Duty
- Suicide rates are increasing among Veterans who have never deployed or were never federally activated by the National Guard

S.A.V.E.

Signs of Suicidal Behavior:

- Feeling trapped
- Increasing drug or alcohol abuse
- Withdrawing from friends, family and society
- Anxiety, agitation
- Dramatic changes in mood
- No sense of purpose in life
- Difficulty sleeping or sleeping all the time
- Giving away possessions
- Increase or decrease in spirituality

Ask Questions

Some Veterans may not be comfortable talking about this issue directly, so let him or her know you are concerned and that you want to help. Here are a few tips:

- Ask at an appropriate time
- Ask the question in such a way that is natural and flows with the conversation

- Remain calm
- Listen more than you speak
- Maintain eye contact
- If it is too difficult to ask the question, find someone else who can ask the Veteran

Validate the Veteran's experience

- Show them you are following what they are saying
- Accept their situation for what it is
- Let them know that their situation is serious and deserving of attention
- Acknowledge the Veteran's feelings
- Let him or her know you are there to help
- Act with confidence
- Don't argue
- Use body language that is open
- Use supportive and encouraging comments
- Stay non-judgmental
- Be as honest as possible – don't make promises you don't intend to keep.

Encourage Help and Expedite Treatment

For cooperative Veterans, do everything you can to encourage getting help. Here are some tips:

- Explain that there are trained professionals available to help them
- Explain that treatment works
- Explain that getting help for this kind of problem is no different than seeing a specialist for any other medical problem
- Tell the Veteran that getting treatment is his or her right
- If the Veteran tells you that they have had treatment before and it has not worked, try asking: "What if this time it does work?"

- If the Veteran has questions or concerns about seeing someone, do your best to explain the process and what will happen next
- If you don't know the answer to a question, let them know that you will help find the answer

If the Veteran is hostile or armed, remember these simple rules for your safety and theirs:

- Never attempt to subdue a hostile or armed person
- Never try to negotiate with a hostile or armed person
- When someone appears hostile or is armed, call VA Police immediately. Community Based Outpatient Clinic and Vet Center staff should call 911
- In addition to calling the police, leave the area and attempt to isolate that person
- If the person leaves your area, attempt to observe his or her direction of movement from a safe distance and report your observations to police when they arrive on the scene.

Referral to Emergency Medical Health Services

If you know of a Veteran who is experiencing any mental health emergency there are several ways to get help. Be sure to remember these simple rules:

- A suicidal person should never be left on their own while going through the helping process
- When the patient is handed off into the care of someone else, confirm that the next person will remain with the Veteran until they are seen by a helping professional

In any mental health emergency, please do at least one of the following:

- 1. When in the medical center, escort the Veteran to the Emergency Department.**
- 2. When outside of the medical center, have the Veteran call the Veterans Crisis Line by dialing 988 Press 1.**
 - a. (A trained VA mental health provider can speak with the Veteran and connect them with the help that they need.)

- b. Veteran's Crisis Line is also available via texting short code: 838255 and via online chat at veteranscrisisline.net
3. **Have the Veteran call 911 or go to their nearest hospital Emergency Department.**

Report the Incident

As soon as it is safe to do so, please make sure that you report the incident to your supervisor so that they can notify the Suicide Prevention Coordinators. If you learn of any unreported suicide attempts, completions or undetermined suicide related behavior, please report those to your supervisor as well.

It is important to remember that most suicides are preventable when the Veteran is identified and provided treatment.

Who Should Take S.A.V.E. Training?

This training is beneficial for anyone who interacts with Veterans, including:

- First responders
- Crisis line volunteers
- Law enforcement
- Members of clergy
- Individuals working in the justice system
- Health care employees
- Faith leaders
- Community members



Available online for free: psycharmor.org/courses/s-a-v-e/

EMERGENCY CODES

FARGO VAHCS EMERGENCY CODES

For ALL CODES call 1111

CODE RED

Activate Nearest Alarm



1. See smoke or fire
2. Smell smoke or other burning material
3. Feeling unusual heat on wall, door or another surface
4. Told by someone of a fire

CODE BLUE



An Adult, child or infant's heart has stopped, and they are not breathing

UTILITY FAILURE



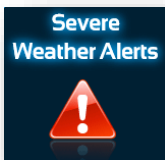
Failure of the major utility systems within the medical center include: Power, Water Telephone and Computer (IT)

BEHAVIORAL EMERGENCY

Disruptive, assaultive, or out of control behavior



SEVERE WEATHER ALERT


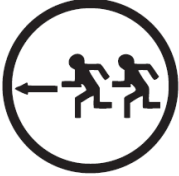




National Weather Service Warning

MISSING PERSON ALERT

Any patient or visitor reported missing by staff or concerned individuals



 <p>CRITICAL INCIDENT</p> <p>ALERT/LOCKDOWN</p> <p>Incidents that require IMMEDIATE Police response or assistance</p>	<p>RAPID RESPONSE TEAM</p> <p>A patient's medical condition is declining and is in need of early and aggressive intervention</p> <p><i>(Prior to heart or respiration stopping)</i></p> 
 <p>STROKE ALERT</p> <p>Staff observes or is informed of a patient with Acute Ischemic Stroke symptoms</p>	<p>DISASTER ALERT</p> <p>Disaster plan activated per protocol.</p> 
<p>EMERGENCY POLICE SERVICES: CALL 2222</p>	

CODE BLUE - CARDIAC ARREST TEAM

An adult, child or infant's heart has stopped, and they are not breathing. Anytime that you might need medical assistance for you or anyone, **CALL 1111** and report location.

A team of Doctors, Nurses and individuals will arrive to administer CPR or other life saving techniques as indicated by the condition of the individual.

VOLUNTEERS: Anytime that you might need medical assistance for you or anyone, **DIAL 1111 report incident and give the location**

UTILITY FAILURE

There is an established Utilities Failure Plan policy and procedure to promote a safe, controlled and comfortable environment of Care. Dial 1111 and report type of failure and location. Failure of major utility systems within the medical center include: Steam, Power, Water Telephone and computer (IT). Individuals should implement alternate action plans.

ENGINEERING SERVICE: Announce Utility Failure, location, and type of failure (water, etc.)

IRM: location, and type of failure (computer, telephone, etc.)

Volunteers: Dial 1111 and report type of failure and location.

BEHAVIORAL EMERGENCY

Disruptive, assaultive or out of control behavior.

Assaults are violent acts or threats which occur in, or are related to the workplace, and entail a substantial risk of physical or emotional harm to individuals or damage to government resources or capabilities. Key personnel within the facility are trained to manage disruptive behavior and will respond to a behavioral emergency. If you feel threatened or find yourself in a hostile environment, attempt to remove yourself from the situation and summon for help.

Behavioral techniques to minimize violence:

- Project calmness. Move and speak slowly, quietly and confidently.
- Be an empathetic listener. Encourage the person to talk and listen patiently.
- Focus your attention on the other person to let them know you are interested in what they have to say.
- Maintain a relaxed yet attentive posture and position yourself at a right angle rather than directly in front of the other person.
- Acknowledge the person's feelings. Indicate that you can see they are upset.
- Establish ground rules if unreasonable behavior persists. Calmly describe the consequences of any violent behavior.
- Use delaying tactics, which will give the person time to calm down. For example, offer a drink of water (in a disposable cup).
- Be reassuring and point out choices. Breaking problems into smaller, more manageable problems.
- Accept criticism in a positive way. When a complaint may be true, use statements like "you're probably right" or "it was my fault." If the criticism seems unwarranted, ask clarifying questions.
- Ask for recommendations. Repeat back to them what you feel they are requesting of you.
- Arrange yourself so that the person cannot block your access to an exit.

A team of Mental Health professionals and Police will arrive to assist in preventing or reducing a violent situation. **DO NOT USE THE OVERHEAD PAGING SYSTEM IF THERE IS A GUN.**

VOLUNTEERS: If you need immediate Police assistance, DIAL 2222 give the officer information about the behavioral Emergency and give the location.

RAPID RESPONSE TEAM

A patient's medical condition is declining and needs early and aggressive Intervention. (Prior to heart or respiration stopping).

VOLUNTEERS: If someone needs immediate medical assistance Dial 1111 and report the concern and location.

STROKE ALERT

Staff observes or is informed of a patient with Acute Ischemic Stroke Symptoms.

VOLUNTEERS: If someone needs immediate medical assistance Dial 1111 and report the concern and location.

CRITICAL INCIDENT ALERT/LOCKDOWN

Incidents that require **IMMEDIATE** police response or assistance. This code is activated in response to an external problem. Entrances are locked to control entrance to the facility. However, you can always exit. Communication will be given as to the incident requiring a facility total lockdown. If you must leave you can, but you will not be allowed to reenter the facility. **DO NOT OPEN** any outside doors to allow someone to enter the VA facility. Follow directions given to you by your supervisor or employee in your department. Report to your supervisor or CDCE Office, to see if any assistance is needed.

Armed assailant/active shooter outside the building:

- Turn off the lights, close and lock all windows and doors.
 - If unable to lock doors, barricade them with desks, chairs, or other furniture
- Stay low and move to the core area of the workspace or building, assisting others if able.
- Remain in the area until a **Police Officer** provides notification of an "All Clear."

Armed assailant/active shooter inside the building:

- If safe to evacuate building; use the nearest exit or **safe** window, move quickly and quietly, be aware that more than one shooter may be present and waiting for people to exit the building or office area.
- If unsafe to evacuate building; move to an office, storage closet, or other room; lock and/or barricade door.
- Remain in place until an "All Clear" is issued by a **Police Officer**.

Armed assailant/active shooter in immediate work area or office:

- If possible, notify the VA Police at extension 2222 or call 9-911 for the Fargo Police Dispatcher.

- Leave line open if unable to talk, be aware that this will not give the VA Police or Fargo PD an exact location of the Assailant
- Only attempt to overcome the armed assailant with force as a ***last resort***.
- If the armed assailant exits the work area, **if safe** immediately evacuate to another location.
 - Do not touch anything in the evacuated area
 - Be alert to responding Police Officers who may mistake you as the armed assailant
 - More than one armed assailant may be present, the best course of action is to wait to be escorted by Police or respond to Police commands
- Follow the directions of responding Police Officers:
 - Put down any items you are holding
 - Keeps hands visible at all times
 - Do not make quick movements towards Officers
 - Do not hold onto officers for safety or point or scream

VOLUNTEERS: If someone needs immediate police response or assistance Dial 2222 and report the concern and location.

CODE RED - FIRE OR SMOKE

Fire Emergency Response



R Rescue



A Alarm



C Contain



E Extinguish



It is the responsibility of every employee and volunteers to be alert to potential fire hazards and to report a fire or signs of a fire, regardless of scope or origin. Be sure to know the location of the fire alarm in your volunteer work area.

Activate Nearest Alarm

1. See smoke or fire
2. Smell smoke or other burning material
3. Feeling unusual heat on wall, door or another surface
4. Told by someone of a fire

If you discover a fire, remember the word **RACE**:

Rescue → remove any person from immediate danger.

Alarm → use nearest fire alarm and dial 1111 to give the location.

Contain → close all doors.

Extinguish → but only if you do not place yourself in danger.

When reporting a fire by phone, state your name and the exact location of the fire. An alarm system will be heard if there is a fire within your area. DO NOT use the elevator in that area – use the stairs.

You should not attempt to extinguish a fire by yourself unless you are in immediate danger (use of the portable fire extinguisher requires special training per OSHA standards).

If you must use a fire extinguisher, remember the word **PASS**:

- P** -- Pull the pin or ring on the fire extinguisher.
- A** -- Aim the fire extinguisher at the base of the fire.
- S** -- Squeeze lever or handle.
- S** -- Sweep fire extinguisher from side to side slowly. (Do not discharge the entire extinguisher in case the fire is not totally out.)

VOLUNTEERS: If the fire or smoke is in your area, pull the fire alarm and exit through the next set of double metal doors. If you enter an area where the fire alarm is sounding, STOP and wait for instructions at the double metal doors. DO NOT ENTER the area.

DISASTER (INTERNAL OR EXTERNAL)

Disaster plan is activated per protocol. Calling trees activated.

Internal - follow emergency procedures for exact type of problem (fire, tornado, etc.)

External - follow directions from the CDCE Office or Nursing Supervisor

Your supervisor is responsible for informing you of your responsibilities should a disaster occur. All volunteers should report to their supervisor or the staff in their assigned area for instructions. Volunteers may become part of the medical center's manpower pool. Volunteers assigned to Transport Service, who are not in the vicinity of the disaster, should ensure that all patients being transported are returned to their assigned ward or clinical area. The volunteer should then proceed to their supervisor for further instructions.

VOLUNTEERS: Report to your supervisor or CDCE Office, Room 3E-07, to see if any assistance is needed. If someone needs immediate police response or assistance Dial 2222 and report the concern and location.

BOMB THREAT

VOLUNTEERS who receive a threat - Write down all information, the exact threat, and keep the caller talking as much as possible. **Call the Police Officer at ext. 2222 to report immediately to your area. DO NOT SHARE INFORMATION WITH ANYONE ELSE!**

VOLUNTEERS: When a bomb threat is announced overhead, search your immediate area for anything unusual. Report the findings to your supervisor. If anything unusual or suspicious is found, report it to the Police Officer at ext. **2222** and DO NOT TOUCH IT.

BOMB THREAT REPORT

Report call immediately to Ext. 2222

Person receiving the call: _____ **Telephone number:** _____

Date and time of threat: _____

Exact wording of threat:

QUESTIONS TO ASK CALLER:

1. **When is the bomb going to explode?**
2. **Where is it right now?**
3. **What does it look like?**
4. **What kind of bomb is it?**
5. **What will cause it to explode?**
6. **Did you place the bomb?**
7. **Why?**
8. **Can we help you?**
9. **What is your address?**
10. **What is your name?**

CALLER'S VOICE

<input type="checkbox"/> Calm	<input type="checkbox"/> Angry	<input type="checkbox"/> Excited	<input type="checkbox"/> Slow	<input type="checkbox"/> Rapid
<input type="checkbox"/> Soft	<input type="checkbox"/> Loud	<input type="checkbox"/> Laughing	<input type="checkbox"/> Crying	<input type="checkbox"/> Profane
<input type="checkbox"/> Slurred	<input type="checkbox"/> Nasal	<input type="checkbox"/> Deep	<input type="checkbox"/> Ragged	<input type="checkbox"/> Raspy
<input type="checkbox"/> Lisp	<input type="checkbox"/> Stutter	<input type="checkbox"/> Disguised	<input type="checkbox"/> Deep breathing	<input type="checkbox"/> Cracking voice
<input type="checkbox"/> Incoherent	<input type="checkbox"/> Accent	<input type="checkbox"/> Normal	<input type="checkbox"/> Familiar	<input type="checkbox"/> Male <input type="checkbox"/> Female

BACKGROUND SOUNDS

<input type="checkbox"/> Airplane	<input type="checkbox"/> Music	<input type="checkbox"/> Traffic	<input type="checkbox"/> Trains
<input type="checkbox"/> Voices	<input type="checkbox"/> PA system	<input type="checkbox"/> Animal noises	<input type="checkbox"/> Factory noises
<input type="checkbox"/> Farm noises	<input type="checkbox"/> House noises	<input type="checkbox"/> Office noises	<input type="checkbox"/> Street noises

If the voice is familiar, who did it sound like? _____

SEVERE WEATHER ALERT - TORNADO (TAKE COVER)



Severe weather and disaster shelter signs identify shelter locations that can be used in the case of an emergency, tornado or severe weather. There are clearly marked and designated **Green Shelter Signs** which identify these locations. Always be aware of the closest shelter near you.

Warnings are initiated by the National Weather Service and announce via overhead speakers. Move to an area with no windows and at least two walls away from the exterior of the building.

Stay out of large areas such as auditoriums and atriums

All doors to rooms and fire doors should be closed.



TORNADO ALERTS:

- Tornado Watch: Weather conditions are favorable for a tornado; however, one has not been sighted.
- Tornado Warning: There has been an actual tornado sighting or touchdown somewhere in Cass County. Civil Defense sirens sound (steady “Alert” alarm).
- Medical Center Tornado Alert – Audio Page: “Severe Weather Alert”- will be used to announce tornado warnings.

The all-clear will be sounded on the audible page as “Severe Weather Alert – All Clear.”

MISSING PATIENT

Activated in the event of a missing patient or the failure to locate a patient, and in the event of a missing child.

A patient who is identified as a high-risk patient to wander and elope may have a 'true' red pajama/scrub top on. In the event that a Code Missing Patient is called conduct a thorough search of our immediate area and if possible, stand at the nearest exit to observe and report any suspicious persons. DO NOT place yourself in harm's way if you encounter resistance; provide VA police with a description, direction and mode of travel if possible.

ELOPEMENT RISK PATIENTS

Patients are screened on admission for possible elopement risk. Based on the risk assessment, nursing can add interventions:

When a patient is determined to be at risk for elopement, he or she will be asked to wear a **red scrub top**. If staff see a patient in a red scrub top exiting the building, we ask that you please try to re-direct the patient back to his or her room and let nursing or police know right away to help keep our patients safe.



Wander Guard: CLC and 3M have a wander guard system in place. If you are exiting the area and hear the alarm go off, please ensure there is not a patient in the elevator with you or exiting in the stairwell.

If a Code Missing Person: Patient is called overhead, all available staff are asked to come to the area, so police can coordinate search teams.

Detailed steps to follow in the case of a missing patient can be found in the Missing Patient Policy (PI-08) under the Services drive. For questions please contact the Patient Safety Coordinator, at ext. 3114.

VOLUNTEERS: Call the Police Officer at ext. 1111 if you find the missing patient or child.

HAZARDOUS MATERIALS MANAGEMENT



Most volunteers will not be working with hazardous materials. If it should happen, however, detailed information regarding the safe handling, storage, and disposal of chemicals and hazardous materials can be found on Safety Data Sheets (SDS). The SDS are stored in a computer system and can be accessed by the supervisor of the area you are working in. It is your right to know what you may come in contact with, what, if any, treatment should be followed, and possible effects of the contact. Possible exposures to hazardous materials should be reported to your supervisor immediately.

There are safety guidelines available to protect you against the dangers of chemicals,

medical gases, medical wastes, sharps (i.e., needles), and other hazardous materials; nonetheless, good sense must be used around any material that might be hazardous. If you have a concern about a material or your contact with it, ask your supervisor or CDCE staff.

In case of a spill, please contact the nearest staff member IMMEDIATELY for assistance. Do NOT attempt to clean up a spill. Your supervisor may need you to provide a detailed description of the material and how the incident happened.

If you are involved in a chemical spill:

- Evacuate everyone from the area
- Call your supervisor, Safety Officer (x3364, x3361), and Environmental Management Service (x3367, x2781)
- Wait by the spill, well out of danger
- If a fire occurs, activate the fire alarm
- Complete an Accident Report, if requested

Transport Service Volunteers Transporting Hazardous Medication

- Volunteer is to pick up cart (as pictured below) at inpatient pharmacy (BB-80) and transport to the Oncology Infusion room (1C-70).
- All medication needs to be transported in the cart and green container pictured below (no exceptions).
- Volunteers are not to open container and handle medications. Nursing and pharmacy are responsible for removing medications from the green container.
- In the event of a spill, volunteer is to place yellow hazardous signs (pictured below) over spill and then call extension 3944 to clean up spill. Volunteer is NOT to touch or clean up spill.



Transport Service: Transporting Lab Specimens

- All specimens should be placed in a plastic bag (sealed) by the nursing staff before you take the specimen to the laboratory. The wearing of gloves is not necessary.
- Always transport specimens in the canvas biohazard bag.
- Be sure to perform hand hygiene upon completion of transporting the lab specimens.
- Do not handle used needles, sharps, or bandages. Ask a nurse to dispose of it if you see one that has been misplaced.
- Please utilize the time stamper located at the Laboratory's specimen drop off location to time stamp the requisition sheet (located in the outside pocket of the specimen bag). If there is no requisition, please stamp a blank piece of paper (available at the drop off location).
- Ring the doorbell after placing the specimen in the Laboratory's drop off location.

PATIENT SAFETY PROGRAM/RISK MANAGEMENT



Is in OUR Hands

The goal of Patient Safety is to prevent harm to our patients. Fargo VAHCS endorses a culture of safety by supporting employees and volunteers to feel safe and protected when voicing concerns about patient safety. Patient safety is everyone's responsibility. The only way that we can learn and improve is by openly identifying and examining our weaknesses. Patient Safety focuses on improving our processes and preventing events with potential harm to our patients, visitors and employees.

The Joint Commission has patient safety goals that are required as a condition of accreditation to ensure the safety of patients. The purpose of the Joint Commission's National Patient Safety goals is to promote specific improvements in Patient Safety. You will find the National Patient Safety Goals posted throughout the Fargo VAHCS.

Joint Commission National Patient Safety Goals

- Improve the accuracy of patient identification.
- Improve the effectiveness of communication among caregivers.
- Improve the safety of using medications.
- Improve the safety of clinical alarm systems.
- Reduce the risk of health care-associated infections.
- Reduce risk of patient harm resulting from falls.
- Prevent healthcare associated pressure ulcers.
- Identify safety risks inherent to its patient population.
- Universal protocol for preventing wrong site, wrong procedure, wrong person surgery.

Please report any safety related events to the Patient Safety Coordinator, extension 3114, or to the CDCE Chief who will assist you in completing an incident report.

***Remember:** We do not make healthcare safe by these goals alone. We need to continue to recognize what we do to put the patient at risk. Even if you are not involved in direct patient care, you are providing a support service that can indirectly impact patient care.

Why report incidents or events?

Reporting of injuries, adverse events, sentinel events, and close calls is essential to identify underlying causes and system changes needed to reduce the likelihood of recurrence.

What are Employees' and Volunteers' Responsibilities in Patient Safety?

- Report and document incidents to your supervisor.
- When adverse events occur that result in patient injury, document the patient's condition.
- Respond to patient/family concerns.
- Identify high risk, error prone processes that affect patient safety.
- Ensure equipment is safe to use.
- Maintain a safe environment and inform patients and families how to help keep the patient safe.
- Share your ideas of reducing risk and harm to our patients.

Volunteers, as well as staff, have a responsibility to report untoward events. Please report any incidents to your supervisor immediately.

PATIENT FOOD POLICY

Food may not be provided to inpatient Veterans due to safety and diet concerns. In rare cases, the service of food to inpatient Veterans may be arranged in advance. Please contact CDCE to make arrangements.

Food may be provided to outpatient Veterans, but it must be commercially prepared. **Food prepared in a private home may not be offered for consumption.** Perishable foods which are not eaten within an hour should be properly disposed of. Always wear gloves when preparing and serving food. Always wash hands thoroughly when working around food. Due to infection control and patient safety issues, any food leftover after an event should be taken home

ACTIVELY DYING VETERAN DOOR SIGN



Nursing staff will decide if a Door Sign is appropriate for the dying Veteran
The above sign is placed on the door to inform all VA staff and volunteers to:

- Create an awareness of the environment they are entering
- This environment can only be created once in the life of the Veteran
- This sign will communicate honor and respect for the dying Veteran

Family and friends, or volunteers may or may not be present with the Veteran
All cares and work are to continue as required; however, it is ok to coordinate with one another and communicate to make sure the timing of cares and work are appropriate to allow family and friends time with the dying Veteran.



HONOR'S ESCORT

What is Honors Escort: When a Veteran dies and it is time to transport them to the morgue, the Veteran will be covered with their designated Service Flag. One member of the Honors Escort will lead the procession and a second member will follow. The family and loved ones of the Veteran may choose to participate in the procession.

Between the hours of 8:00 a.m. and 8:00 p.m. The operator will announce Honors Escort processions. You will hear:

“Your attention please, an Honors Escort will be taking place from (ward) in 10 minutes, an Honors Escort will be taking place from (ward) in 10 minutes.”

Those wishing to participate should head to the announced ward immediately after the announcement is made. It is best to not wait until the last moment to arrive.

Participants should stand along the hallway and render honors by placing your hand over your heart or if current or former military, salute as appropriate, and wait for the procession to pass.

If you happen to be in the area of a procession, please follow the same procedures listed above out of respect for the Veteran and their family.

TRANSPORT SERVICE VOLUNTEERS

If you are volunteering in the Transport Service Office, please adhere to the following guidelines:

- When picking up a Veteran from an inpatient unit, verify with nursing staff that you have the correct person. Do not transport the Veteran unless nursing staff provides you with a “trip ticket.”
- Transport Service volunteers should not lift or transfer patients from their beds to wheelchairs or to put patients back to bed.
- Patients should be at the nurses’ station and ready to transport when you arrive. If not, contact nursing staff to assist the patient.
- Do not use a wheelchair that doesn’t have footrests.
- Please ensure the VA wheelchair does not leave the facility.
- When transporting discharge patients to the front door, volunteers are not permitted to retrieve the patient’s car from the parking lot or lift patients into the car.
- Transport Service volunteers should request assistance for patients or belongings that they feel are too heavy or too large to transport by themselves.
- Transport Service volunteers are not required to transport patients who are on IVs, pumps, and the like.
- Please inform staff when you bring a patient back to the nurses’ station or to X-ray, physical therapy, etc.
- Please do not give patients food, water, or medications.
- Keep a safe distance if a patient strikes out at you, and report incident to the nursing staff immediately.
- All specimens should be placed in a plastic bag by the nursing staff before being taken to the laboratory.
- Report faulty equipment to the nursing staff.
- Keep brakes on wheelchair set whenever patient is entering or leaving the wheelchair to prevent an accident.
- Make sure that footrests are folded up and swung to the side and that the patient's feet are resting on the floor before he/she stands up. Stepping on footrests can tip the chair.

- Grasp both handgrips when pushing the wheelchair for better direction and stability.
- Wheelchairs are folded by grasping the center of the seat in the front and back and lifting.
- Always back a wheelchair down a ramp. This provides better control and allows your body weight to provide braking action.
- When transporting a wheelchair on or off an elevator, back the chair into the elevator, turn it around, and then back it out from the elevator. Also, use caution to prevent the door closing and striking the chair.
- Always wash and/or sanitize hands after transporting a patient.

Inpatients: Use of Wheelchair – Fall Risk

- Safe practice is to notify nursing staff if a Veteran needs to enter or exit their wheelchair for any reason. Volunteers should not assist a Veteran in anyway.
- Look on the back of all wheelchairs for a **“BLUE box.”** This box is a fall alarm. The box indicates that the Veteran is at great risk of falling if they leave their chair.
 - If you notice this box, please tell the Veteran they must stay in their chair until you are able to notify a nurse.
- Transporting Veterans to the Bathroom: Please bring the Veteran to the nurse’s station if a Veteran needs to use the bathroom. Nursing staff will assist the Veteran.
- In general, it is safest to ensure all Veterans remain in their wheelchairs unless nursing staff is present to assist with any transition. For the safety of the Veteran and the volunteer, we ask that volunteers do not transfer Veterans in and out of wheelchairs. Please always err on the side of caution and notify a nurse if a Veteran needs to leave their wheelchair. They are there to help.

Procedure for Transporting A Wheelchair Patient

- Identify where the patient is going prior to transporting them. If picking up on the unit, make sure you verify with nursing staff that you have the correct patient and are provided a “trip ticket.”

- The wheel chair must be in proper working order. Do not transport patients in defective wheelchairs. Report defective wheelchairs by calling extension 2781 to be serviced.
- Never transfer a patient from a bed or their car to a wheelchair or from a wheelchair to a bed or car. This is a lift team or nursing responsibility.
- Wheelchairs are to be LOCKED when not in motion - occupied or unoccupied.
- Back the wheelchair into elevators so that patients are facing the elevator door. If the elevator is crowded, wait for the next elevator.
- Never leave a patient unattended. Stay with the patient until they have checked in for their appointment. Always remind the patient or medical support staff to contact Transport Service when the patient is finished with their appointment.
- Patients should be comfortable and safe in wheelchairs. Ensure the patient is not leaning or sliding. Check for feet that are not properly positioned on the foot pedals.
- Always move slowly and with caution. Talk to the patient and explain when you are about to go over small bump or around a corner, so they are not caught off guard.
 - Always wash and/or sanitize hands after transporting a patient. Clean wheelchairs between patients with (Red Top) Germicidal Steris disinfectant wipes to help prevent the spread of infectious agents.

TRANSPORTING GUESTS BY WHEELCHAIR

Volunteers may provide simple wheelchair transport for guests after receiving training.

Volunteers should consider individual guests when deciding to offer transport. Any volunteer may choose not to provide wheelchair transportation for any guest that is too difficult for them to assist (such as obese patients or elderly patients using walkers).

Volunteers should ask VA Police Service or nursing staff to assist Veteran if they are unable to transport.

Steps for Providing Wheelchair Transport:

1. Bring Wheelchair to the guest and secure in locked position.



2. Raise footrests and pads so the guest may easily get into the wheelchair.



3. Guests must be able to get into the locked wheelchair unassisted.

4. Arrange the footrests to the position of comfort for the guests.

5. Release wheelchair breaks

6. Proceed to destination

7. Keep to the right of corridors and proceed with caution at intersections and doorways. Use overhead mirrors to watch for others when turning corners.



8. Back the guest into the elevator so that they are facing the doors of the elevator.



9. After the guest has reached their destination:

- Lock the wheels of the wheelchair.
- Raise the footrests.
- Let the guest exit the wheelchair unassisted. If the guest needs assistance, ask a staff member to provide it.
- Return the wheelchair to its designated area.

10. Sanitize wheelchair

- Wheelchairs should be sanitized after each use.
- Please use Cavi Wipes to sanitize the chair.
- Wipe down handles, seat, arm rests and leg rests.
- If a wheelchair has been soiled beyond what could be cleaned with a sanitization wipe, please report the issue to Environmental Management Services (pager # 779) and remove the chair from use by guests.



GERIATRIC PATIENTS

The majority of the patients cared for by the Fargo VA Health Care System are from the Korean and World War II era, meaning that they are 65 years of age or older. There are many age-specific competencies that employees and volunteers should possess when caring for patients.

The normal aging process places the geriatric population (age 65 years and older) at a higher risk of illness and injury. For example, there is an increased risk of injury and falls associated with changes in the spine, brittle bones, and osteoporosis. Also, there is an increased risk of infection associated to the weakening of the immune system.

Some measures to promote the optimization of a geriatric patient's abilities, particularly patients in our CLC, are as follows:

- Re-orient the geriatric patient to the environment, time, day, etc., as necessary.
- If a deficiency exists on one side of the body, approach and address the patient from the unaffected side.
- Use assistive devices such as walkers, canes, wheelchairs, and magnifying glasses as needed.
- Allow ample time for decision-making, verbal expression, and activities requiring movement.
- Aging individuals often take longer to learn but have not lost the ability to learn. When educating a geriatric patient, keep instructions simple and direct, while using continued reinforcement of instructions.

Myths and Misconceptions About Aging

Although there are significant changes relating to the aging process, there are many

myths as well. Remembering that the following are myths will help when working with older adults:

- **Most older people are senile.** Actually, fewer than 20 percent have a measurable memory impairment.
- **Most older people feel miserable most of the time.** Studies have shown that most older people are just as happy as they were when they were younger.
- **Most older people cannot work as effectively as younger people.** Studies show that older workers are more consistent in their work, have fewer accidents, less absenteeism, and less job turnover than younger workers.
- **Most older adults are unhealthy and need help with activities of daily living.** Actually, 80 percent of older adults are healthy enough to maintain a normal lifestyle.
- **Older people are set in their ways.** People do tend to become more stable as they grow older, but they remain able to adapt to changes. Actually, most older adults have adjusted to more lifestyle changes than a younger person.

WOMEN VETERANS

The definition of Veteran hasn't changed but the population has. The newest women Veterans from the wars in Afghanistan and Iraq are younger, and with different health care needs. The U.S. Department of Veterans Affairs (VA) is working tirelessly to enhance women's care, improve services, and change its culture to embrace this growing population. If you know a woman who has served, ask her if she's checked out VA lately.

Women Veteran Demographics

- Women represent nearly 15% of today's active duty military and 18% of guard and reserve forces.
- Women serve in every branch of the military.
- There are 2.2 million living women Veterans.
- The average age of women Veterans using VA care is 49 years, compared to 64 years for male Veterans.
- The number of women Veterans using VA care is expected to increase dramatically.
- Women Veterans using VA health care can expect:

- Women Veterans Program Managers to assist them at every facility
- Comprehensive primary care, mental health services, emergency and specialty care in a timely manner
- Privacy, safety, dignity, and sensitivity to gender-specific needs
- State-of-the-art health care equipment and technology
- Pharmacy services by mail-order and online

A campaign is under way across the VA system to enhance the language, practice and culture of VA to be more inclusive of women. The Fargo VA offers a Women's Health Clinic with their own waiting room. Breast feeding mothers may also utilize the Mamava lactation pod in the main lobby.

VA has taken this culture change message to all employees and volunteers encouraging everyone to rethink the term Veteran, recognize the vital role of women in the military, and appreciate what it means to be a woman Veteran.

She served; she deserves the best care anywhere!

LIST OF REMINDERS

Name Badges

All Regular Scheduled Volunteers will be issued a Photo ID Badge. The Photo ID Badge must be worn above the waist at all times while performing your assigned volunteer duties. In the event you decide to terminate your volunteer duties, you must turn in your ID badge to the CDCE Office.

Accident Reporting

Volunteers need to report any accident or injury they receive while on volunteer duty to their supervisor or CDCE. All volunteers are afforded emergency treatment for injuries occurring in the course of their assigned duties, the same as employees. CDCE encourages all volunteers to be especially aware of safety. Volunteers are covered under the Worker's Compensation Program. If you should observe any condition or situation you feel is unsafe, report it to your supervisor or CDCE. Volunteers are not required to do any lifting.

Veterans Canteen Service

The Veterans Canteen store and cafeteria located in the basement is available to everyone. All items in the VA store are tax-free.

Parking

Volunteers who work on a regular basis with shifts falling between the hours of 0700 – 1600 may be provided a volunteer parking sticker for their vehicle. Volunteer parking spaces, marked with yellow signs, are located on the east side of the building by the loading dock. Parking stickers can be obtained from the VA Police through arrangements by CDCE staff. Additional parking can be found in the south lot.

Volunteers working in the evening or on weekends do not need a parking sticker for their vehicle, as there is ample parking space available on the north side (main entrance) of the hospital. The volunteer parking lot is located northeast of the main entrance of the hospital.

Cell Phones

The use of cell phones is allowed in this medical center with the exception of restricted areas such as Radiology, Cardiology, etc. Please do not use cell phones in these areas as they will interfere with medical and diagnostic equipment. Also use common courtesy among staff and the public when utilizing cell phones. Do not hold conversations on the cell phone while performing your duties.

Police

The VA Police act as the enforcement agency in maintaining law and order at this hospital and have full powers of arrest and authority for all violations of federal and related state laws that occur at this facility. It is the responsibility of each volunteer to help ensure security at the facility, including the protection of patients, visitors, staff, and volunteers, as well as guarding against theft or vandalism of government buildings, property records, and personal belongings. Report any suspicious incidents to the VA Police. Upon request and availability, VA Police may be able to escort volunteers to and from their vehicles during hours of darkness. The only entry access after 4:30 p.m. on weekdays and all weekend is the North (main) entrance. To contact the VA Police, dial extension 3299 (or x. 2222 in an emergency) from any phone in the medical center or page them at 691.

Problems

Bring any problems regarding your assignment, attitudes of staff, other volunteers, or patient-related incidents to the immediate attention of your VA supervisor or to the Chief, CDCEs.

Blood Donor Program

Blood is vital to the treatment of many patients. Having an adequate supply is mandatory. The VA encourages blood donation. Friends, relatives, Veterans, and volunteers are encouraged to participate in blood donation programs. Volunteers, and their sponsor organizations, are credited with four hours of service for every pint of blood donated. The Fargo VA Health Care System, in coordination with Vitalant (formerly United Blood Services), sponsors five blood drives each year at our facility. Contact CDCE for the scheduled blood drive dates or if you would like further information.

Donations and Gifts

Volunteer assistance in the form of gifts and monetary donations is appreciated. CDCE coordinates the receipt of gifts and donations. Gifts and donations can only be accepted in accordance with VA policy. All items donated become the property of the United States Government. All checks and money orders presented should be made payable to the Fargo VA Health Care System. Please contact CDCE if you would like to make a monetary or non-monetary donation.

VTN AND PARKING LOT SHUTTLE DRIVER REMINDERS

Responsibilities of Fleet Card Users Training Manual

Fleet Card Manager: 701-239-3700 ext. 3361

Goal: to ensure appropriate use of the Fleet Card

Course Overview

- Cardholder Responsibilities
- Do's and Don'ts
- Fleet Card User Responsibilities

This topic covers the following points:

- Do's
- Don'ts

Learning Objective:

After completing this topic, you should be able to

- Identify appropriate and inappropriate uses of the fleet card.

If you use the fleet card....

You are the government's agent for each purchase made with the fleet charge card. You are responsible for each transaction. In addition to the responsibilities described in this lesson, you must comply with all applicable regulations and procedures of your agency/organization and the agency/organization providing the equipment. It is your responsibility to keep the card in a safe and secure place

You must use the card ethically and ensure that you observe all dollar limits on purchases.

Other "Do's" with regard to use of the fleet card include:

- Do purchase regular unleaded self-service gasoline from service stations that offer the lowest price, except when the vehicles require diesel or alternative fuel or under other authorized conditions.
- Do use the card to purchase oil, fluids, and other necessary maintenance and repairs only as authorized.
- Do seek state tax exemption on all non-fuel purchases.
- Do immediately report a lost or stolen card to your Fleet Manager or Fleet Service Representative and the card-issuing bank.
- Do return your card to the Fleet Manager or Fleet Service Representative if you leave your agency/organization or retire.
- Lost or stolen cards that are recovered must be returned to the Fleet Manager (701)-239-3760.
- Do get a receipt.

The fleet charge card should **not** be used to purchase food, beverages, or other items for personal use.

Other important "don'ts" include:

- Don't use an old fleet charge card that was replaced for any reason.
- Don't use a fleet charge card assigned to another vehicle.
- Your fleet charge card may **ONLY** be used for your agency vehicles. For vehicles leased through GSA Interagency Fleet Management Systems (IFMS), the GSA fleet charge card is used.

This topic covers the following points:

- Fleet Card User Responsibilities
- Fleet Card User Conditions
- Avoiding inappropriate use of the Fleet Card
- Card Security
- Regular Fleet Card Termination

Learning Objective:

After completing this topic, you should be able to

- Identify what conditions must be met when using the fleet card.

Remember

As a fleet card user, remember that the total of a single procurement may be comprised of multiple items, but it cannot exceed the authorized single purchase limit in the Delegation of Authority.

Procurement requirements may not be split to make dollar amounts stay within the authorized single purchase limit.

Use your card ethically, and don't forget that it is your responsibility to keep the card in a secure place.

Card users should retain receipts for all purchases. Receipts should be given to the Fleet Manager monthly. (The trip logs need to be sent here as well.)

Repetitive Procurements shall be routinely rotated among various businesses and fair prices shall be obtained.

Any services procured over the counter must be immediately secured.

Whether by telephone, via the Internet or over the counter, the card user must inform the vendor that a tax-exempt number identifier is the first six digits of the account number. If state or local taxes are charged, the Fleet Manager must attempt to resolve the problem immediately.

Immediately report a lost or stolen card to your Fleet Manager or Fleet Service Representative and the card-issuing bank.

Restrictions

This card may only be used for fuel and maintenance of the VA-Owned or leased vehicle to which it is assigned. It is not to be used for GSA leased vehicles, or any other procurement.

The fleet card is for official use only. No personal procurements are allowed. If any personal purchases are made, disciplinary action may be taken. As set forth in the VA Standards of Conduct, disciplinary actions that may be considered are: Admonishment, Counseling, Reprimand, Demotion, Reassignment, Suspension, or Removal.

In all but the first two instances, the action would be an adverse action and would be subject to applicable laws, regulations, and policies.

Personal Procurements

If personal procurements are made, the Billing Office will bill the employee the full cost of the procurements plus any administrative fees and debt collection fees and take all actions necessary to collect the debt including salary offset.

Both the Billing Office and any other designated office reserve the right to unilaterally cancel a fleet card. If anyone suspects intentional misuse of a fleet card, they must immediately notify the Office of the Inspector General, the Approving Official, the Billing Office, the Facility Program Coordinator, and the Head of the Contracting Activity. Bottom line fleet cards should never be used for anything personal and should never be carried around by a single individual making it likely that a mistake will be made.

Note

NEVER use the fleet card for personal procurements!

In the event of unauthorized or inappropriate procurements, the Billing Office will collect the amounts from the card user if the goods cannot be returned for full credit. The Billing Office will use all available collection methods including salary offset.

Consequences of Misuse

Intentional misuse of fleet card for unauthorized purposes will be considered an attempt to commit fraud against the U.S. Government and will result in immediate cancellation of the Delegation of Authority.

Disciplinary action may also be initiated under applicable VA or Government-wide administration procedures. The penalties for fraudulent use of the fleet card include a fine of not more than \$10,000 or imprisonment for not more than five years or both, under 18 U.S.C. 287.

The employee who initiates unauthorized transactions remains personally liable for procurements made with the card. In cases of unintentional misuse, the employee who receives the goods or services will be required to return the unauthorized procurements or reimburse the Government.

The Fleet Card product has the account number embossed on it and is designed so that it will not be confused with personal cards. It should not be carried by a single individual. It should be checked out with the keys then returned and locked somewhere other than the vehicle.

This card cannot be used for personal procurements! Any questions about proper procedures and use of the card should be directed to the Fleet Manager, Procurement Office, or the Billing Office.

Since the fleet cards are not issued to individual employees:

- cards will be returned to the AOPC
- The AOPC shall take primary responsibility for closing accounts when vehicles are removed from service.

SAFE DRIVER TRAINING

Rules for Using Government Vehicles

- Vehicles are for official use only
- Reckless operations are prohibited
- Obey the speed limit
- Avoid Improper lane usage
- Obey all traffic signs and signals
- Do not Drive under the influence of drugs or alcohol
- Adhere to all state/local vehicle laws
- NO TEXTING WHILE DRIVING
- Seatbelts will be used at all times
- Smoking is prohibited
- Driver will refrain from using wireless devices while driving

Accident Reporting

- Ensure the safety of all occupants and notify 911 for immediate medical assistance
- Report all accidents or incidents to local law enforcement
- Report any injuries to Occupational Health
- Request a copy of the report
- Complete the SF-94, Motor Vehicle Accident Report
- Contact Engineering at 701-237-3760 or VA Police Service at 701-239-3700 as soon as possible to report accident
- The SF-94 will be investigated with a copy sent to GSA and Regional Counsel
- Transportation accidents will also be reviewed by EOC

Transporting Veterans

- The driver is not to lift or attend medically to any patient.
- The driver is only permitted to stop the van for rest stops and/or emergencies and to pick up and discharge passengers. Passengers should not request the driver to make side trips to take care of their personal business.
- Passengers are not permitted to smoke, chew tobacco, drink alcohol, use foul language or bring weapons, drugs, or any illegal substance on the van. Further,

the van driver may not provide transportation to any Veteran who is intoxicated, abusive or poses a threat to the driver or other passengers on the van.

- Passengers should not engage in any activity that will distract the driver's attention.
- Passengers should wear seat belts at all times. Any passenger refusing to buckle-up will be denied transportation on the van.
- All trash must be placed in the proper trash receptacle.

Safe Driving Tips

- **Spring and Summer – Wet Roads**
 - Do not use the cruise control
 - Do not brake or turn suddenly
 - Ease foot off gas until vehicle slows and you feel traction again
 - If no anti-lock braking system (ABS) you may apply brakes by lightly pumping
- **Winter Conditions – Icy Roads**
 - Monitor all weather conditions and do not travel when conditions are too bad
 - Ensure winter survival kit is readily available
 - Contact 511 for updated road information
 - Follow accident procedures if vehicles become disabled
- **Road Rage:**
 - Stay Cool!
 - Do not take eyes off road
 - Avoid eye contact with the other driver
 - Do not make obscene gestures
 - Use horn sparingly
 - Remain in your lane
 - Do not tailgate
 - Avoid any unnecessary use of the high beams
 - Attempt to stay away from drivers behaving erratically
 - Pull over and allow traffic to pass