

VOLUNTEER TRAINING MANUAL

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Introduction to Good Samaritan Health Services (GSHS)

The Good Samaritan Health Services team is excited that God has led you to start reaching out to your neighbors in need through a medical ministry in the name of Jesus Christ. By providing basic healthcare services you are not only meeting the physical needs of those you serve, but also their emotional, mental, social and spiritual needs. Holistic care should be your focus with long-term results.

This training manual contains useful information on requirements, responsibilities and pertinent information to help you make this ministry experience a fruitful one. Our staff, board members and partners are available to assist you and answer any questions you may have.

Meet Our Staff

President **Executive Director** Medical Director Administrator Staff Physician **Staff Nurse Practitioner Development Director Community Liaison Clinical Administrative Coordinator Community Development Coordinator/Nurse Clinic Nurse Coordinator Clinic Nurse Coordinator** Chronic Disease Case Manager Nurse **Development Assistant** Grant Writer Driver/ Outreach Pastor Driver/Lab Technician Driver Driver Medical Technician Accounting Manager, HR Director **Office Manager** Administrative Assistant Eye Camera Technician

Dr. John Crouch Jr., M.D. Dr. Mitch Duininck, M.D. Dr. Laurel Williston, M.D. Ben Dodwell Dr. Nick Carroll Dana Higbee APRN-CNP George Valverde Lynn Hersey, RN Pam Wilson, RN Joy Alice Morrow, RN Rachel Bardgett, RN Caroline Coussens, RN, APRN-CN Carol Roberts, RN Jane Bebermeyer, RN Maria Espalin Michelle MacFarlane **Tommy Williams** Jacki Lechner Jack Schaefer Patrick Dube Alice Williams Holly Conway Vanessa Twyman Rita Cueva **Kyleigh Strickland**

Board of Directors

President Vice President Chairman of the Board Secretary, Treasurer Board Member Board Member Board Member Dr. John Crouch Jr., M.D. Dr. Laurel Williston, M.D. Mrs. Vanessa Neal Ms. Louise Whitley Dr. Mitch Duininck, M.D. Mr. Andy Murphree Rev. Thomas Boxley We extend a very warm welcome to you and are here to help you in any way we can. Always remember this is *your* ministry and you are very important to those you are ministering to in your neighborhood.

Who We Are

Good Samaritan Health Services is an organization established to bring compassionate healthcare to those in need, who lack in financial resources or access to healthcare in Tulsa. Good Samaritan Health Services was birthed out of two organizations, In His Image and Cornerstone Assistance Network. In His Image is a family practice residency program associated with Family Medical Care of Tulsa. Cornerstone Assistance Network is an organization that unites and equips churches in and around Tulsa, Oklahoma to share the love of Jesus Christ by reaching out to serve neighboring families and children in need.

What Makes Us Unique

GSHS is made up of compassionate Christian professionals who have a desire to see their community transformed in all areas of life: physically emotionally, mentally and spiritually. We recognize the challenges that families face in accessing healthcare, and are dedicated to equip the Church to relieve some of these challenges by bringing healthcare to the people in your neighborhood. Our two Mobile Medical Units will allow churches to reach those who cannot afford healthcare and who have difficulty getting to a doctor's office. The clinics equipped by GSHS will not be "another free clinic", but will teach people how to take responsibility for their lives. We understand this is a concept that will take time for others to understand, but we believe that the individuals served can and will make a difference in society. They are not to be considered "problems" or "a community project", but rather people who have assets and skills that need to be discovered or activated.

Services Provided

The Good Samaritan Health Services Mobile Medical Units can do a lot of things that full service clinics do, but there are a number of services we cannot supply. Thus we are not a "full service clinic". Our physicians and nurse practitioners cannot treat chronic pain, ADHD, or narcotics addictions. But we can, for free or for greatly reduced cost, get X-Rays, MRI's, CT Scans, a number of other procedures, and a number of specialist referrals. On the day you visit us, we can assess vital signs, check blood sugars and HgA1C's, check hematocrits, pregnancy tests, urinalysis, and dispense meds that we have available in our dispensary. We do not have controlled substances on board. We also do Women's clinics, and offer free breast exams, pap smears, bone densitometry screening, and can offer free coupons for mammograms in partnership with Tulsa Project Woman. We hope to be working toward OB Services in the future.

Where We Serve

The target population is those who do not have easy access to healthcare or cannot afford to see a doctor. The locations and times of medical clinics are:

Mondays: 9-12 noon and 1-4p.m.	Tulsa Dream Center
Tuesdays: 9-11 a.m.	New Jerusalem Baptist Church
Tuesday 1 p.m 4 p.m.	Tulsa Dream Center
Tuesdays: 5 p.m.	Spirit Life Church
Wednesdays: 10:30-2:30 p.m.	The Harvest
Wednesday 6 p.m. – 8 p.m.	Church 3434
Thursdays: 9- 11 a.m.	Riverside Baptist Church
1 st & 3 rd Thursdays	Memorial Baptist Church
2 nd & 4th Thursdays	The Ministry Center

 1^{st} & 3^{rd} Fridays: 9 a.m. – 12 noon 2^{nd} & 4^{th} Fridays: 9 a.m. – 12 noon Friday 1 p.m. – 4 p.m. 1st & 3rd Saturdays: 10 a.m.-12 p.m. 1st & 3rd Saturdays: 2-4 p.m. Extreme Worship and Outreach Center Morning Star Church of All Nations Tulsa Dream Center John 3:16 Mission Indian Springs Apartments

"I've heard your prayers and seen tears and I will heal you." 2 Kings 20:5

Mission Statement

Good Samaritan Health Services is dedicated to improving medical services to the underserved in the greater Tulsa area by collaborating with the Church and community partners to provide excellent Christ-like holistic health care.

Vision Statement

To ensure quality healthcare that addresses the whole person is brought within reach to all underserved persons within our community.

Our Goals

- 1) Improve access to health services including primary care, patient education, childhood immunizations and prenatal care.
- 2) Demonstrate holistic healthcare and offer a church-based system for physical, emotional, mental and spiritual needs.
- 3) Mobilize Christians to serve, especially those in healthcare professions and students in such fields.

GSHS PARTNER ROLES

In His Image (IHI)/ Family Medical Care (FMC) provides overall medical expertise and advice if your church or your partnering churches have no doctors. IHI and FMC will provide doctors from its residency program and staff as necessary. Cornerstone Assistance Network provides volunteer management tools, helps develop the pre-clinic process, trains churches how to provide long-term care and discipleship and coordinates additional partners needed to ensure a holistic care system.

Oral Roberts University (ORU) Pre-Med Honor Society and ORU School of Nursing provide pre-medical and nursing students to help churches develop health education components of this ministry. Also, if your church or your partnering churches have no nurses, supervised nursing students can fill in vacant positions.

MEND Crisis Pregnancy Center provides a range of services including screening tests, parenting classes and volunteer training to help single mothers and expecting young women.

Churches provide the lead role for this ministry. Laity is equipped to serve in every role and component of this ministry including outreach, administrating medical services, praying for families and providing long term discipleship.

The host facility provides the avenue for ministry whether the host facility is a church, apartment complex or school.

VOLUNTEERS

Requirements

All volunteers and staff of GSHS must be born again believers with a personal relationship with Jesus Christ.

Licensed Personnel

Doctors, RN's, LPN's, Dentists, etc.: Must have current OK license. All personnel are encouraged to carry their own malpractice/liability insurance.

CPR Certification

Current CPR certification is preferred.

Documentation of Tuberculosis Testing

All volunteers are encouraged to have yearly Tuberculosis (TB) testing done and documented with us. The Tulsa City County Health Department offers TB skin testing for \$5.00. Call (918) 595-4100 for more information.

Training

Some training such as glucometer testing for some volunteers will be required.

Orientation

Orientation is required and will include OSHA requirements regarding back safety, TB, infection control and blood-borne pathogens. Also included are general safety, fire safety and age specific information.

Hepatitis **B**

Volunteers are encouraged to be immunized against Hepatitis B through their current employer or through the Tulsa City County Health Department. The Health Department charges \$45 per shot and this vaccine is a three shot series. Call (918) 595-4100 for more information.

DETAILED JOB DESCRIPTIONS

Site Coordinator

The site coordinator is responsible for the overall coordination of the medical ministry site. That includes opening and locking the buildings, turning lights and AC/heat off and on and coordinating the volunteer schedules for his/her site/church. If a volunteer is not available, the site coordinator finds a replacement and notifies the operations manager of the mobile van. The site coordinator also works with the church to coordinate follow-up ministry of the patients seen.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Attend quarterly meetings with GSHS staff. Communicate updates/information between site volunteers and GSHS staff.
- 3) Understand and implement site's vision for transformation in your community.
- 4) Recruit volunteers and doctors to staff your clinic.
- 5) Assist the Community Liaison with administrative duties pertaining to the volunteers involved at a particular site (scheduling volunteers, keeping track of volunteer hours, etc.).

Greeter/Runner

The greeter/runner will greet patients and bring the patient from the waiting area to the van and from the van to the prayer partner area.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Greet the patients and direct them to the intake workers.
- 3) As doctors are ready to see patients, escort the patients from the waiting area to the van.
- 4) As doctors are done visiting with the patients, escort the patients to the prayer partner area.
- 5) Expedite the flow of the clinic as much as possible.

Intake Worker (Non-Nursing)

The intake worker will assist the driver in getting information and medical background from the patients. The intake worker will also act as greeter.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Greet the patient. Ask if they have any kind of insurance including Medicare and Medicaid.
- 3) Confirm patient contact information is correct, up-to-date and complete.
- 4) Check new patient forms to ensure completeness.
- 5) Divide patient list into "Doctor Visit" and "Meds only".
- 6) Work the patient charts in the order of the patients' arrival in the waiting room. The oldest charts should be on the front or top of the stack. Charts for newly arriving patients go to the bottom or back of the stack.
- 7) After the last patient is checked in, organize materials for the next clinic. Identify shortages of forms, pens, etc. for re-supply before the next clinic.
- 8) Store all materials for the next clinic in appropriate containers and storage area.
- 9) Organize your clinic charts.

10) Help annually with archiving of charts. Please ask GSHS staff for dates of upcoming archiving projects.

Intake Nurse

The nurse will conduct a small interview to find out the patient's chief complaint, signs and symptoms, and obtain a set of vital signs.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Work the patient charts in the order of the patients' arrival in the waiting room. The oldest charts should be on the front or top of the stack. Charts for newly arriving patients go to the bottom or back of the stack.
- 3) Record temperature, pulse, respiration, blood pressure and weight.
- 4) Ask, "What brings you to the clinic?"
- 5) Ask the patient to be seated in the waiting room when done at intake. Leave chart for runner to take to Doctor as patient's turn arrives.
- 6) Expedite the flow of the patient to the examination room area at every opportunity, especially when the clinic first opens.
- 7) When the last patient has been assessed, prepare materials for the next clinic and store them in a labeled container in the storage room. Identify shortages and report them to the Site Coordinator.
- 8) Make notes on how to improve the clinic and present those ideas to the Site Coordinator.

Prayer Partner

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) We prefer male prayer partners with male patients, female prayer partners with female patients.
- 3) Introduce yourself and make the person feel comfortable.
- 4) Listen. Some people just want to talk.
- 5) Ask the person if there is anything they would like prayer for. If they seem uncomfortable and do not want prayer, do not force them to pray with you.
- 6) Be led by the Spirit.
- 7) Updates nurses on pertinent information as needed (i.e. intent to hurt oneself or others).

Nursing Students

Nursing students may act as intake workers or may prefer to do some patient education as needed. Nursing students could also act as intake nurses, obtaining vital signs and conducting a brief interview. However, they may not dispense any medication.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) See the descriptions for the Intake Worker, Intake Nurse, or Physician Nurses.
- 3) May conduct health educational programs during the clinic times.

Medical Students

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Once trained to take vitals, medical students may assist nurses with intake process. Please read intake duties above.
- 3) May assist nurses in dispensing of medicine.
- 4) May function as runners (see duties list above), and when possible, may shadow doctors.

Physician Nurses

Nurses will provide and direct nursing care to the patients of the clinic, utilizing the nursing process in a manner that supports and promotes the nursing standards. Nurses may dispense medication under supervision of physician and GSHS nurse.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Set up each examination room with basic supplies such as gloves, prescription pads, etc.
- 3) Do whatever is necessary to expedite the patient to the examination room and make the doctor's time with the patient productive.
- 4) As a room is available, call the next patient from the waiting room. Make sure the Patient Agreement form is signed and dated. Place patient in room with chart. When placing patients, consider chief complaint. Do they need to be gowned? Remove coats, etc. Will they need a pelvic exam? Have room set up and expedite the examination.
- 5) When the physician has completed the examination, have a runner escort the patient to a checkout station.
- 6) Clean the room as soon as possible after the examination and call in a new patient.
- 7) After the clinic, clean examination rooms, empty trash and restock as needed. Identify shortages and notify the Site Coordinator.
- 8) Make notes on opportunities for improvement of clinic operations and present ideas to the site coordinator.

Pharmacists

Pharmacists will dispense medication, and assist with patient education and praying for the patients.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) May assist with formulary development/staff training.
- 3) Dispense medications per doctor's orders.
- 4) Notify the Operations Manager of any shortages in medicine prior to the next clinic.
- 5) Check medication dates. Follow guidelines for "gently expired" medicines.
- 6) Make any suggestions for improvement to the Site Coordinator or Operations Manager.

Interns/ Doctors

Interns need to have a Senior Resident or an Attending Doctor present at the clinic to be able to participate. Clerkship students (med students) and pre-med students may also participate under the supervision of the Operations Manager.

Doctors, at times, will have interns that will need to be supervised and mentored. If no pharmacist is available, and the nurses are not comfortable dispensing medications, the doctor will dispense any medication he/she orders (a great opportunity for patient education). If doctors dispense their own medications, the clinic may limit the number of patients seen that evening.

- 1) Always discretely observe patient confidentiality. Medical information and records are confidential and should never be discussed outside of clinic or in front of other patients.
- 2) Everyone here is a volunteer. Many are working for the first time. Be patient!
- 3) Volunteers who have worked before and know the clinic well will be available at the beginning of the clinic if you have any questions.
- 4) Document clearly as other M.D.s may be seeing the patient in follow-up appointments and referrals.

PRE-CLINIC ACTIVITIES

PRAYER

Please meet with your clinic's site coordinator to discuss the vision of transformation your clinic centers around. Implementing this vision of transformation, and seeing communities grow and hope restored is paramount.

NEIGHBORHOOD AWARENESS

Informing your community of the mobile clinic is important. A simple way to advertise the clinic are creating a flyer. A flyer can easily be made to inform your community about the clinic, its purpose, the time and place of the clinic. Multiple copies of this flyer can be made and posted throughout your community if desired.

CLINIC ACTIVITIES

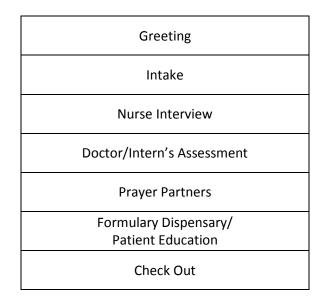
SETTING UP FOR THE CLINIC

Prayer

Many clinics have chosen to pray as a group previous to clinic, or with all the patients, previous to beginning taking patients to the doctors.

Preparation

Make sure the waiting area is ready (chairs set up, tables, etc.). A table will be needed for the intake area, as well as the nursing intake area and prayer area. The van should already be stocked with all supplies. If anything is missing, contact the Operations Manager or the Site Coordinator.



Waiting Room Activities

If a TV and DVD/VCR is available, it may be used for patient education, or for showing previous sermons or videos such as Veggie Tales.

POLICIES AND PROCEDURES

This section is a brief summary of the Policy and Procedure Manual that GSHS has implemented.

Dress Code

Dress in a professional manner. Please contact a member of staff if you have specific questions.

Substance Abuse

While volunteering, no staff/volunteer shall be under the influence of a behavioral modifying substance (including, but not limited to alcohol, depressants, stimulants, narcotics and hallucinogens), whether legal or illegal, without exception.

Weapons

Weapons are strictly prohibited on the premises. Local law enforcement agencies will be notified of persons possessing any weapons on the premises.

Suspected Abuse, Neglect and Exploitation

All staff and volunteers of GSHS are to report any suspicion of abuse, neglect or exploitation to the Operations Manager and to the physician on duty.

Gifts

Do not accept any money for you personally. Let the person know any gifts to GSHS are tax deductible and find out if they want a tax receipt. If they would like a tax receipt, get their name and address. Give the money to the Site Coordinator or Operations Manager.

Flowers, candy and cards can be accepted. Graciously accept the gift and verbalize gratitude.

Confidentiality

In healthcare, confidentially is critical. Information about patients/clients is not to be discussed with anyone except to those who manage the care of that patient. There will be no discussing of patients and their conditions outside the clinic. Neither is there to be any discussion of patient's condition at the Intake area or the Nurses area. All patients' records will be filed in an appropriate manner in a locked file case. Records, files, volunteer data or clinic activities are also confidential. Because confidentiality is of utmost important, every volunteer must sign a Confidentially Agreement Form (located in the Volunteer Application).

Staff/Volunteer Responsibility

- 1) Do not bring your problems to the clinic. Keep a good attitude.
- 2) Being punctual is professional.
- 3) Absolutely no smoking on the premises.
- 4) The use of profanity is absolutely forbidden.
- 5) If there is an injury while working, volunteer must immediately notify the on-duty Site Coordinator or Physician.
- 6) All patient should be treated with respect.
- 7) Treat all patients like they are "Our Guests."
- 8) Maintain a professional relationship with all patients during clinical contact.
- 9) All Physicians will adhere to the Physicians Code of Practice.
- 10) All Nurses will adhere to the Code for Nurses.

SAFETY

PROCEDURES

General Safety

- 1) You must report unsafe conditions or unsafe actions to full-time staff immediately.
- 2) Report any incident immediately (injury or non-injury). Seek medical help for minor injuries and fill out the Incident Report Form in the Safety Manual.
- 3) Prevent falls by immediately cleaning up spills properly and safely. Keep van and waiting rooms uncluttered and keep cords out of walkways.
- 4) Electrical safety includes inspecting plugs for any damage such as bent or missing prongs, cuts, tears, breaks or bare wire showing in cords. Electrical equipment should be switched off before being plugged in or unplugged. Never unplug equipment by jerking on the cord. Always inspect equipment before using, look for signs of excessive wear, shorts, abuse, broken knobs or wires,

burned out lights, cracks, blown fuses or circuit breakers or evidence of overheating. Remove the damaged equipment immediately and report problems to the full-time staff.

5) Never use devices you do not feel comfortable with. Get training in the basic operations and understand its cautions.

Incident Reporting

Incident reporting is an essential part of the safety process. Staff and volunteers will report all incidents involving patients, staff or visitors concerning falls, equipment malfunctions, miscommunication, medication error, doctor/nursing performance, security events or anything else that administration should know about. Other such issues include damage to property, harassment, thefts, obscene or threatening telephone calls, or anything out of the ordinary or that poses a threat to health or safety, whether it results in injury or not.

Back Safety

Four out of five Americans will have a significant back problem at some time in their lives. Surprisingly, these back problems are more often attributed to chronic injury or neglect rather than acute injury. However, there are steps to prevent back injury and to promote back strength.

Ten Commandments of Body Mechanics

- I. LET EVERYBODY CONCERNED KNOW WHEN, HOW AND TO WHERE THE MOVE WILL BE.
- II. SIZE UP THE LOAD AND HAVE ENOUGH HELP BEFORE STARTING.
- III. ESTABLISH A BROAD-BASED FOOTING WITH FEET PLACED TO AVOID TRIPPING.
- IV. GET AS CLOSE AS YOU CAN TO WHATEVER IS BEING LIFTED.
- V. KEEP YOUR BACK STRAIGHT DURING ALL MOVES IN ORDER TO USE YOU LEG MUSCLES MORE.
- VI. LIFT BY FLEXING AND STRAIGHTENING YOUR LEGS RATHER THAN USING YOUR ARMS.
- VII. LIFT AND MOVE SMOOTHLY TO AVOID PAINFUL, JERKING MOVEMENTS.
- VIII. TURN BY SHIFTING THE POSITION OF YOUR FEET RATHER THAN TWISTING YOUR BACK.
- IX. SLIDING A WEIGHT BY PUSHING OR PULLING TAKES LESS EFFORT THAN LIFTING.
- X. SPREAD THE WORD TO OTHERS AND SAVE BACKS!

Fire Safety

The procedure for responding to a fire is to follow the acronym **RACE**, which stands for:

Rescue the person Alarm – sound the alarm Contain the fire Evacuate

How to use a fire extinguisher: The procedure for using a fire extinguisher effectively is to follow the acronym **PASS**, which stands for:

Pull the pinAim at the base of the fireSqueeze the triggerSweep from side to side, front to rear

Disaster Preparedness

Weather Alert

Response to severe weather is phased, with the response proportioned to the threat. Secure the van or evacuate the van as needed. Follow evacuation policy for your facility.

Documentation of Tuberculosis Testing

All volunteers are encouraged to have yearly Tuberculosis (TB) testing done and documented with us. The Tulsa City County Health Department offers TB skin testing for \$5.00. Call (918) 595-4100 for more information.

Hazard Communication

GSHS is mandated to maintain a workplace that is safe, healthful and free of hazards. If hazards exist, the employer/clinic must make a reasonable effort to protect employees by removing the hazard, finding engineering controls that eliminate it, control it within standards, or provide protective equipment. The goals of Hazard Materials and Waste Management Program is to "protect you and to protect the environment."

The Occupational and Safety and Health Administration (OSHA), Hazard Communication Standard, 29 CFR 1910, 1200, requires a Material Safety Data Sheet, (MSDS) for any chemical determined to be hazardous. The standard is also known as HAZCOM, "WORKER RIGHT TO KNOW" and the MSDS Program. Manufacturers are responsible for revealing the hazards presented by their products. GSHS is responsible for maintaining information on hazards that is readily accessible to staff and volunteers. MSD Sheets are found in a three-ring folder in the van.

Labels

All containers must be labeled. Labels must show the following:

- 1) Identity of the chemical (the common or chemical name cross-referenced to the MSDS).
- 2) Proper Health Warnings (as extracted from MSDS).
- 3) Manufacturer Name and Emergency Telephone Number.
- 4) Label must be accurate, in English and legible.

Blood Borne Pathogens/Infection Control

UNIVERSAL PRECAUTIONS

Universal precautions pertain to *all* patients. Any blood or body fluids such as saliva, urine, etc. are considered potentially infectious. Therefore, you must protect yourself by utilizing the appropriate personal protective equipment when you suspect possible exposure to any body fluids. After wearing gloves, dispose of them. DO NOT REUSE GLOVES. Change gloves between patients. Do not use a pair of gloves the whole two hours. Most importantly, WASH YOUR HANDS BETWEEN CLIENTS.

HANDWASHING PROCEDURE

- 1) Remove all jewelry from hands and arms.
- 2) Wet hands under warm running water.
- Apply soap and vigorously work up lather. Rub the soap between the palms of your hands, between your fingers, back of hands, and over wrists. Also clean under your nails. Scrub for one minute.
- 4) Rinse your hands under warm running water pointing your fingertips upward.
- 5) Dry your hands with a paper towel.
- 6) Turn the faucet off with a paper towel.

REGULATED WASTE

Regulated waste (any bodily secretions, fluids or excretions) must be separated from the general/routine trash. These regulated waste items can be disposed of using one of the following methods:

- 1) Using red bio-hazard bags.
- 2) Using the red sharps containers.
- 3) The bathrooms on the vehicles are for laboratory purposes only. Please use facilities inside host building.

If you are uncertain of how to appropriately dispose of waste, please ask the site coordinator or a clinic staff person for assistance.

Confidentiality

In healthcare, confidentially is critical. Information about patients/clients is not to be discussed with anyone except to those who manage the care of that patient. There will be no discussing of patients and their conditions outside the clinic. Neither is there to be any discussion of patient's condition at the Intake area or the Nurses area. All patients' records will be filed in an appropriate manner in a locked file case. Records, files, volunteer data or clinic activities are also confidential. Because confidentiality is of utmost important, every volunteer must sign a Confidentially Agreement Form (located in the Volunteer Application).

POST CLINIC ACTIVITIES

Follow Up

Remember that Good Samaritan Health Services is a place for transformation to happen. Communicate your observations for patient follow up needs to your site coordinator.

Thank you for your desire to serve your community alongside Good Samaritan Health Services!