



# VOLUNTEER TRAINING MANUAL

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## WELCOME

### 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 is available to assist you and answer any questions you may have.

#### Meet Our Staff

President	Dr. John Crouch Jr., M.D.
Executive Director	Dr. Mitch Duininck, M.D.
Medical Director	Dr. Laurel Williston, M.D.
Administrator	Ben Dodwell
Staff Physician	Dr. Nick Carroll, M.D.
Staff Nurse Practitioner	Dana Higbee APRN-CNP
Clinic Nurse Coordinator	Pam Wilson, RN
Clinic Nurse Coordinator	Joy Alice Morrow, RN
Clinic Nurse Coordinator	Rachel Bardgett, RN BSN
Clinic Nurse Coordinator	Heather Carson, RN
Clinic Nurse Coordinator	Caroline Coussens, RN, APRN-CN
Chronic Disease Case Manager	Jane Bebermeyer, RN
Clinic Nurse Coordinator	Jane Bebermeyer, RN
Volunteer Coordinator	Joy Alice Morrow, RN
Development Assistant	Maria Espalin
Grant Writer	Michelle MacFarlane
Driver	Tommy Williams
Driver	Jacki Lechner
Driver	Jack Schaefer
Driver	Patrick Dube
Medicine Technician	Alice Williams
Accounting Manager, HR Director	Holly Conway
Office Manager	Meredith Cothran
Administrative Assistant	Anna Jureczki

#### Board of Directors

President	Dr. John Crouch Jr., M.D.
Vice President	Dr. Laurel Williston, M.D.
Chairman of the Board	Mrs. Vanessa Neal
Secretary, Treasurer	Ms. Louise Whitley, R.N.
Board Member	Dr. Mitch Duininck, M.D.
Board Member	Mr. Andy Murphree, C.P.A.
Board Member	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 the greater Tulsa area, and are uninsured. 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 and non-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 their neighborhoods. Our Mobile Medical Units 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 some of services we cannot supply. Our physicians and nurse practitioners cannot treat chronic pain, ADHD, or narcotics addictions. But we can, for free or for greatly reduced cost, get some procedures, and a number of specialist referrals. At the time of their visit, patients will have their vital signs taken, 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 Wellness clinics and offer free breast exams, pap smears, bone densitometry screening, and can offer free coupons for mammograms in partnership with Tulsa Project Woman.

## Where We Serve

The target population is those who do not have easy access to healthcare, are uninsured, and cannot afford to see a doctor. The locations and times of medical clinics as of March 2016 are:

Mondays: 9-12 noon and 1-4p.m.	Tulsa Dream Center
Mondays: 6 pm-8pm	Myanmar Clinic
Tuesdays: 9-11 a.m.	New Jerusalem Baptist Church
Tuesday 1 p.m. - 4 p.m.	Tulsa Dream Center
Tuesdays: 6 pm-8pm	Spirit Life Church
Wednesdays: 9-12 noon	Tulsa Dream Center
Wednesday 6 pm – 8 pm	Church 3434
Thursdays: 9- 11 am	Riverside Baptist Church
1 <sup>st</sup> & 3 <sup>rd</sup> Thursdays	Memorial Baptist Church
2 <sup>nd</sup> & 4 <sup>th</sup> Thursdays	The Ministry Center
1 <sup>st</sup> & 3 <sup>rd</sup> Fridays: 9 a.m. – 12 noon	Extreme Worship and Outreach Center
2 <sup>nd</sup> & 4 <sup>th</sup> Fridays: 9 a.m. – 12 noon	Morning Star Church of All Nations
1 <sup>st</sup> and 3 <sup>rd</sup> Saturdays 10am-12 noon	John 3:16 Mission
1st & 3rd Saturdays: 2-4 p.m.	Bixby

## 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.

*"I've heard your prayers  
and seen tears and I will  
heal you."*

*2 Kings 20:5*

## Our Goals

- 1) Improve access to health services including primary care, patient education, 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.

## Vision Statement

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

## GSHS PARTNER ROLES

In His Image (IHI)/ Family Medical Care (FMC) provides overall medical expertise and advice. IHI and FMC will provide doctors from its residency program and staff as necessary. Partner churches provide volunteer management tools, help develop the clinic process, provide long-term care and discipleship and coordinate additional whole person care outreaches.

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

## 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, 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

All volunteers will be given a general orientation to acquaint them with OSHA and HIPAA policies, the flow of their particular clinic, and their specific volunteer role. Those needing Electronic Medical Records (EMR) access will be trained prior to working on site, then assisted on location as needed.

## 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.

## Site Coordinator

The site coordinator is responsible for the overall coordination of the clinic 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. If a volunteer is not available, the site coordinator finds a replacement and notifies the Good Samaritan nurse in charge of that particular clinic. 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) Understand and implement site's vision for transformation in your community.
- 3) Recruit volunteers and doctors to staff your clinic.
- 4) Assist Good Samaritan with administrative duties pertaining to the volunteers involved at your particular site (scheduling volunteers, keeping track of volunteer hours, etc.).
- 5) It is recommended that the Site Coordinator familiarize themselves with the Registration process of the EMR.

## 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.

## Check In Worker (Non-Nursing)

The check-in volunteer is responsible for greeting the patients, checking off the ones with appointments, and having the ones who arrive as walk-ins complete the appropriate triage form for the Good Samaritan

nurse to evaluate. He/She is to give and explain chart forms to new patients to complete and place completed charts in numbered folder for the Registration worker to review.

### Registration Worker (Non-Nursing, EMR)

The Registration worker will assist in getting demographic information correctly entered into the EMR, and will be responsible for obtaining written consent for treatment, ask patient if they have received their notice of privacy, and witness it.

- 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.

### Vitals Nurse

The nurse will conduct an interview to find out the patient's chief complaint, signs and symptoms, and obtain a set of vital signs, including height and weight, and blood sugar if indicated.

- 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) Ask the patient to be seated in the waiting room when done with interview and vitals. Leave chart for runner to take to Doctor as patient's turn arrives.

### 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) Update 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) 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 function as runners (see duties list above), and when possible, may shadow doctors.

### Truck Nurses

- 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 from the dispensary and assist with patient education under the license of the physician.

- 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) Dispense medications per doctor's orders.
- 3) Notify the Good Samaritan nurse of any shortages in medicine prior to the next clinic.
- 4) Check medication dates. Follow guidelines for "gently expired" medicines.
- 5) Make any suggestions for improvement to the Site Coordinator or Good Samaritan nurse.

### 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) may also participate under the supervision of the Good Samaritan nurse.

**Doctors**, at times, will have interns that will need to be supervised and mentored. The physician is responsible for all medications dispensed. It is the responsibility of the physician/practitioner to review

all meds prior to dispensing to the patient if they have been assisted by the pharmacist or truck nurse in gathering them.

- 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 doctors 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 has. Implementing this vision of transformation, 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 is 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 clinic volunteers have chosen to pray as a group previous to clinic; or, with all the patients previous to processing patients.

#### 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.

### FLOW OF CLINIC

Greeting
Check In and Registration
Nurse Interview
Doctor/Intern's Assessment

Prayer Partners
Formulary Dispensary/ Patient Education
Check Out

### Waiting Room Activities

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

## 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 appropriate authorities.

### Gifts

GSHS staff and volunteers are not to receive personal gifts from patients. If a patient wishes to make a donation to GSHS obtain the donors name and address so a tax-deductible receipt can be sent to the donor. Give the donation to the GSHS nurse for processing.

### Confidentiality

In healthcare, confidentiality 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 personal 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 Site Coordinator or Physician.
- 6) All patients 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 GSHS 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 GSHS 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:

**R**escue the person  
**A**larm – sound the alarm  
**C**ontain the fire  
**E**vacuate

How to use a fire extinguisher:

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

**P**ull the pin  
**A**im at the base of the fire  
**S**queeze the trigger  
**S**weep 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.

## Hazard Communication

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. Most importantly, WASH YOUR HANDS BETWEEN PATIENTS.

### HANDWASHING PROCEDURE

- 1) Remove all jewelry from hands and arms.
- 2) Wet hands under warm running water.
- 3) 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.

## POST CLINIC ACTIVITIES

### Follow Up

Remember that Good Samaritan Health Services is a place for patient 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!*