



VOLUNTEER TRAINING MANUAL

P.O. Box 1191 Tulsa, OK 74101
Phone: 918.710.4222 Fax: 918-949-6681
Email: info@goodsamaritanhealth.org
www.goodsamaritanhealth.org

WELCOME

- Introduction to GSHS
- Meet Our Staff
- Board of Directors
- Who We Are
- What Makes Us Unique
- Services Provided
- Where We Serve
- Mission & Vision Statements
- Our Goals

GSHS PARTNER ROLES VOLUNTEERS

Requirements

- Licensed Medical Professionals
- Non-Licensed Volunteers
- Orientation
- CPR Certification
- Documentation of TB Testing
- Hepatitis B

Job Descriptions

- Site Coordinator
- #1 Check In
- #2 Registration Worker (Non-Nursing)
- #3 Vitals-> Nurse (RN, LPN, EMT, CMA)
- #4 Greeter/Runner
- #5 Prayer Partner
- #6 Interpreter
- Nurse Students
- Medical Students

CLINIC ACTIVITIES

Setting Up for the Clinic

- Prayer
- Preparation
- Flow of Clinic
- Policies and Procedures
- Dress Code
- Weapons
- Suspected Abuse, Neglect and Exploitation
- Gifts
- Confidentiality
- Staff/Volunteer Responsibility

SAFETY

Procedures

- General Safety
- Incident Reporting
- Back Safety
- Fire Safety
- Disaster Preparedness
- Hazard Communication & Labels
- Blood Borne Pathogens

WELCOME

Introduction to Good Samaritan Health Services (GSHS)

The Good Samaritan Health Services team is excited that God has led you to reach 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, 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	Heath Placek
Staff Physician	Dr. Nick Carroll, M.D.
Staff Nurse Practitioner	Dana Higbee APRN-CNP
Nurse Manager	Rachel Bardgett, RN BSN
Clinic Nurse Coordinator	Heather Carson, RN BSN
Clinic Nurse Coordinator	Caroline Coussens, RN, APRN-CN
Clinic Nurse Coordinator	Joy Alice Morrow, RN BSN
Clinic Nurse Coordinator	Pam Wilson, RN BSN
Chronic Disease Case Manager	Sarah Ed, RN
Breast Health Nurse	Corine Weger, RN BSN
Grant Administrator	Gail Herrington
Volunteer Coordinator	Michelle Washington
Clinic Nurse	Jane Bebermeyer, RN BSN
Diabetic Retinopathy Tech	Marcia Lynch
Driver	Jacki Lechner
Driver	Jack Schaefer
Driver	Ken Hunter
Driver	Jim Keithline
Accounting Manager, HR Director	Holly Conway
Office Manager	Meredith Misener
Administrative Assistant	Jean Johnson
Administrative Assistant	Brittany Pendergast
Administrative Assistant	Annie McVay

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
Board Member	Mr. Michael Borden
Board Member	Mr. John McVay

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

*“I’ve heard your prayers
and seen tears and I will
heal you.”*

2 Kings 20:5

uninsured. Good Samaritan Health Services was birthed out of two organizations: In His Image and Cornerstone Assistance Network.

In His Image is a family medical residency program fully accredited in the State of Oklahoma and is 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, 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 uninsured and underserved individuals 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 are not just “another free clinic”. We 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 we serve can and will make a difference in society. We do not consider our patients to be “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 many of the services that full service clinics do, but there are services we do not provide. Our physicians and nurse practitioners do not treat chronic pain, ADHD, or narcotics addictions. However, we can arrange some procedures, and a number of specialist referrals for our patients who need medical care beyond our scope of practice. We do offer the following services to our patients as appropriate: take 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 our medical trucks. We also offer monthly Women’s Health Clinics where we provide gender-specific care.

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. For Current locations and times of medical clinics please, visit our website:

www.goodsamaritanhealth.org

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

Good Samaritan Health Services strives to be an effective, operating model of medical expertise empowering churches and volunteers we partner with to minister physical healing, spiritual renewal, and other practical helps to the underserved with the goal of moving them “from poverty to purpose”.

Our Goals

- 1) Improve access to health services including primary care and patient education.
- 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. IHI and FMC provides doctors from its family medical residency program for our evening clinics. Partner churches provide volunteer management, 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, administrating 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.

Good Samaritan must approve all volunteers before they are able to serve in any volunteer position.

Licensed Personnel

Doctors, Pharmacists, RN's, LPN's, must have current Oklahoma license in good standing. All providers and pharmacists personnel are required to have malpractice/liability insurance coverage.

Training

All volunteers receive 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 are trained prior to working on site, then assisted on location as needed.

CPR Certification

Current CPR certification is preferred. If you have been CPR Certified, please provide us with a copy of your card.

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.

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 Clinic Nurse Coordinator of that particular clinic. The Site Coordinator also works with the church to coordinate follow-up ministry for the clinic 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) Understand and implement site's vision for transformation in your community.
- 3) Recruit volunteers and doctors to staff your clinic.
- 4) Assure all volunteers are approved and trained by Good Samaritan staff before serving at clinic.
- 5) Schedule Volunteers for duties and communicate schedule with volunteers.
- 6) Ensure that Volunteers follow Good Samaritan's established Policies and Procedures.
- 7) It is recommended that the Site Coordinator familiarize themselves with the Registration process of the EMR.

#1 Check-In Worker (Non-Nursing)

- 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) Number on Appointment list those with appointments as they enter.
- 4) Give walk-in patients the Triage Form for the Good Samaritan Nurse Coordinator to evaluate.
- 5) Give and explain chart forms to new patients to complete
- 6) Place completed charts in numbered folder for the Registration worker to process.

#2 Registration Worker / #8 Check Out (Non-Nursing, EMR)

- 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 patient for their ID and verify their legal name is entered into their EMR.
- 3) Enter and confirm patients' demographic information is correct, up-to-date and complete in the EMR. Including patients' disclosures.
- 4) Check patients' HIPAA form date to make sure it is current within the last 12 months.
- 5) Perform mid-clinic audit
- 6) After the last patient is registered, organize materials for the next clinic.
- 7) Notify site coordinator of clinic item 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.

#3 Vitals Nurse (CMA or EMT)

- 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) Conduct a medical history review 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.
- 3) Enter all medical history information in patients' EMR.
- 4) Ask the patient to be seated in the waiting room when done with interview and vitals.

#4 Greeter/Runner

- 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 check-in 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.

#5 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. Patients are allowed to refuse prayer.
- 6) Be led by the Spirit.
- 7) Update nurses on pertinent information as needed (i.e. intent to hurt oneself or others).

#6 Interpreters

- 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) Interpret information for patients as they are processed through the clinic, including interpreting medical information between the patient and health care providers.
- 3) When interpreting for medical issues, avoid assuming a diagnosis based on patient's symptoms. The interpreter is not there as a medical professional. Relay only the details that are told to you, do not speculate on what the patient may be trying to communicate.
- 4) Avoid unnecessary additional conversations with the English-speaking person for whom you are interpreting. It can make the non-English speaking person feel uncomfortable.

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

CLINIC ACTIVITIES

Many Site Coordinators have a group prayer time and/or short devotional before clinic.

FLOW OF CLINIC

#1 Check In
#2 Registration
#3 Vitals-->Nurse
#4 Runner
#5 Care / Prayer
#6 Medical Access (Insurance & Patient Education)
#7 Exam Room (Doctor/Resident's Assessment)
#8 Check Out (Next Appointment & Lab Referrals)
#9 Hospitality (church ministries)

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.

Weapons

Weapons are strictly prohibited on the premises. Please alert your Site Coordinator if you become aware of any weapons at clinic. 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 GSHS Nurse Coordinator, who will report it 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 donor's 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. Records, files, volunteer data and clinic activities are confidential. Because confidentiality is of the utmost importance, every volunteer must agree to and sign a Confidentially Agreement Form prior to serving at clinic.

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) Volunteer injuries must be immediately reported to the Site Coordinator & Nurse Coordinator.
- 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 turned 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 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 Safety Plan and Site Coordinator instructions 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 binder in the nurses’ area on the medical truck.

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!