



VOLUNTEER HANDBOOK

VOLUNTEER SERVICES DEPARTMENT

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WELCOME TO UNC MEDICAL CENTER

Thank you for your decision to donate your time, skills, and talents to UNC Medical Center through the Volunteer Services Department. You are very important to UNC Medical Center for the service you provide, your caring attitude, and the valuable link you provide to our community. We sincerely hope that you will enjoy your time with us and that you will experience personal fulfillment and growth through volunteering.

The Volunteer Services office is open to serve you Monday through Friday from 8:00am to 4:30pm. Our Hillsborough Hospital office is open from 9:00am to 5:30pm. Please visit us anytime. Have a question? Give us a call at 984-974-4793 or check out our website at www.uncmedicalcenter.org.

Cheat Sheet Reminders:

1. Always sign in and out at one of the computer kiosks. At the Chapel Hill medical center, the kiosks are located at the Information Desks of Memorial, Women's, and Cancer Hospitals. At Hillsborough Hospital, you may sign in and out in the Volunteer Services workroom.

* If you are in an off-site volunteer area, please log in your hours by going to the following link and then finding the link:

<http://www.uncmedicalcenter.org/uncmc/support/volunteer-services/>

2. Always call and/or email your volunteer liaison if you are unable to volunteer for any reason. You do not need to call the volunteer services office.
3. If you will be on vacation, out of town, on school break, etc., please let your liaison know ahead of time.

UNC Health Care Vision and Values

Who We Are and What We Stand For

Our Vision: To be the Nation's leading public academic health care system.
Leading. Teaching. Caring.

Our Values

These are the principles that guide our day to day behaviors, our decisions, our actions and our relationships with each other and with the people we serve.

We Care About

- **Our Patients and Their Families**
Delivering quality health care & outstanding service is fundamental to everything we do.
- **Our Team**
Attracting and retaining the best team members is of paramount importance to our Health Care System. We will do this by becoming the health care employer of choice and by providing an environment that:
 - Pursues the highest level of safety and quality
 - Focuses on treating patients and colleagues with courtesy, honesty, respect and dignity
 - Recognizes people for their achievements and capabilities
 - Is professionally satisfying
 - Encourages the open exchange of views
 - Does not tolerate offensive and disruptive behavior
- **Our Community**
Dedicating ourselves to finding ways to improve the health of all North Carolinians is central to our leading, teaching and caring.

How We Work

Our primary focus must be improving the health of our patients and meeting their needs with our service excellence:

- We will have a culture dedicated to service and to measurable accountability.
- We will be state-of-the-art in meeting patient needs.

We must deliver excellent service and operate leading programs:

- Patients will experience a seamless and sophisticated system of care that is efficient, of high quality, safe and easy to navigate.
- Outstanding research programs will enable high quality patient care with the most recent medical advances.
- Students and trainees will enjoy a fully rounded and rich experience that integrates outstanding clinical care and leading academic research.

We must be deeply and broadly engaged with the people of North Carolina and the nation to meet their health challenges:

- We will be innovators in research, development and implementation of new means for improving the health of North Carolinians and sharing that knowledge with a national audience.
- We will have collaborative partnerships with Rex Healthcare, Chatham Hospital, AHEC, the health sciences schools, the State of North Carolina, employers, insurers, other health care providers and key constituencies.
- We will have clarity in our role as the State's safety net institution and our role as a leader among such institutions across the region and the United States.

We must maintain financial viability for the Health Care System, with margins sufficient to support our Missions.

- Financial viability will be a System-wide objective with specific expectations and accountabilities established for each component of the Health Care System.
- This financial viability and margin will come from continual improvements in our operations and from an explicit, unapologetic focus on productivity enhancement.

UNC Health Care’s Pillars

All entities of UNC Health Care are adopting a common set of “pillars” that will outline our priorities and key areas of focus. The five “pillars” of UNC Health Care are People, Quality & Service, Growth, Value and Innovation. They will guide us from our strategic planning all the way to our individual goals and work plans.



- People**—Attracting and retaining the best team members
- Service & Quality** – Providing an exceptional patient experience and achieving outstanding outcomes in a safe clinical environment
- Growth**– Expanding services to meet the needs of all North Carolinians’
- Value** – Increasing our efficiency across all UNC Health Care locations
- Innovation**– Delivering state-of-the-art patient care

Volunteer Services Department Scope of Care or Service:

The Department of Volunteer Services assists the hospital in its endeavors to provide comprehensive health care to the communities it serves, and to provide a meaningful outlet for the human need to be of service to others. The Volunteer Services Department recruits, orients and trains volunteers to meet these needs as they are developed. The Department endeavors to maintain a close integration of hospital activities and volunteer functions so as to create an environment conducive to the development of good relationships between personnel and volunteers by augmenting and supplementing the basic essential functions, for the professional staff, and by providing such services as will contribute to the comfort, care and happiness of the patients. The Department, through the Volunteer Association, provides fundraising opportunities to financially support special projects to enhance patient care.

Volunteer services provided to UNC Health Care include, but are not limited to- nursing units; gift shops; patient visitation, mail and flower delivery; pediatric cuddlers; playroom volunteers; emergency room liaisons; waiting room receptionists; a lending library and mobile library cart; clothing closet; military visitation program; serving special dinners to patient families; lay patient navigators; tea cart service; Door to Door Program and art carts for distractive activities; Pro Bono Legal Program for Oncology patients; and Compassionate Companions.

The Volunteer Services Department coordinates the UNC Health Care Shadow program to enable people to observe what various healthcare professionals do in their daily jobs.

SAFETY

Personal Safety

UNC Medical Center's **Hospital Police** provides around-the-clock services to protect the entire Health Care community. Services include preventive patrols, escorts after dark, valuables pick-up, and a shuttle to parking areas. Volunteers are encouraged to:

- Lock purses, wallets, or personal items in the trunk of your car.
- Avoid carrying valuables or large sums of money.
- Make sure "high theft" items such as computers and smart phones are locked away securely, even when you leave your work area momentarily.
- Keep car keys in hand and walk with someone when going to and from work. In the evening, use the free Public Safety shuttle to get to your car. The shuttle leaves every 10-15 minutes from the Children's Hospital entrance between 5:30pm and 2am. If you are a student at UNC, please access the Point-To-Point Express (P2P) service available from 7pm-3am.
- At the Chapel Hill location, report any suspicious activity immediately to Hospital Police (984-974-3686).
- "Safe Walk": Sun-Thurs 11pm-3am. A male-female pair of UNC Department of Public Safety trained students will walk you to your desired on-campus (and some off-campus) destination. www.safewalk.unc.edu

On-the-Job Safety

UNC Medical Center's employees and volunteers are exposed to a variety of potential safety and health hazards. Because of this increased risk, the **Environmental Health and Safety Department** helps protect you from on-the-job injuries and illnesses.

Safety is the act of conducting your daily routines in a way that protects you from injury or illness.

Areas of concern include:

- Slips and falls
- Back injuries (from lifting)
- Infectious diseases
- Sharp items (needle, knives and broken glass)
- Burns, including electrical and chemical
- Chemical exposures
- Explosions

While these are rare, should any of them happen to you while you are volunteering, please report the incident immediately to your liaison and to the Volunteer Services office.

Accident/Injury Procedure

UNCH employees/volunteers assigned through Volunteer Services at UNCH with occupational injuries should follow the guidelines below:

1. Report injuries to the supervisor who will complete a UNCH occupational injury form. A copy of this form will be sent with the injured person to receive treatment.
2. Employee/volunteer is responsible for their transportation to the treatment site, if physically able to do so. If not, the supervisor should arrange transportation.
3. Listed below are the locations treatment should be administered:
 - Weekdays:** Occupational Health- first aid, needle sticks
Emergency Department- more than first aid and trauma other than lacerations and simple fractures
 - Weeknights:** Emergency Department
 - Weekends:** Emergency Department
4. Send the proper paperwork to Infection Control nurse.

All charges are submitted to the volunteer's insurance carrier. As long as care is necessary for the treatment of a condition incurred while performing your specific volunteer duties, as specified in your assignment description, and the care is provided by UNC Medical Center or UNC Physicians and Associates, there will be no cost to the volunteer above the amount paid by the volunteer's insurance.

Fire Safety

Fire education is essential to understanding how to respond if a fire should occur. The cause of fires varies, ranging from carelessness to unsafe equipment and conditions. Each year several thousand fires occur in healthcare facilities, primarily because of patient smoking. This is one reason why UNC Medical Center is a smoke-free facility. Another source of concern is food burning in unattended microwaves.

All volunteers should locate the red fire alarm nearest their work station. If a fire occurs, Health Cares' first responsibility is to remove patients and visitors from the danger area and sound the alarm. There are fire emergency alarms located throughout the Health Care system for emergency reporting of fires.

Please check with your liaison to make sure you know where the Site-Specific Fire/Emergency Response Plan is located for the area and review the information. Ask questions to seek clarification if needed.

IN THE EVENT OF A FIRE- THE FOLLOWING STEPS SHOULD BE TAKEN:

RACE:

R - Remove or rescue individuals in immediate danger

A - Activate the alarm by pulling the closest fire pull station **AND call 911**

C - Contain the fire (close units, door and windows)

E - Evacuate to a safe area **OR** extinguish the fire with proper extinguisher **IF IT CAN BE**

DONE SAFELY

- Discharge the extinguisher as you approach the fire to be sure it is working.
- Aim at the base of the fire from 6 – 8 feet away. Extinguishing agent should be applied even after flames are extinguished. **NEVER** leave an extinguished fire unattended.
- You should **REMAIN** in the area until the fire department arrives.

To properly use a fire extinguisher, you only have to remember **PASS**

P - Pull the pin between the handles

A - Aim the nozzle at the base of the fire

S - Squeeze the handles together

S - Sweep the extinguisher side to side

PLEASE NOTE:

Prior to opening a door during a fire emergency, feel the door and door knob with the back of your hand. If it is **HOT, DO NOT OPEN THE DOOR.** If the door and knob are **COOL**, stand to the side of the door and open it **SLOWLY.**

If a fire is in a trashcan, smother it with a pillow, towel, rug or blanket.

If electrical equipment catches fire, disconnect equipment from the wall outlet.

If a person's clothing catches fire, wrap them tightly in a blanket to extinguish flames.

If you catch on fire, STOP where you are, DROP to the floor, and ROLL.

Fire Drills

UNC Medical Center is required to hold fire drills as directed by OSHA. When a fire drill is being conducted, you will hear/see the following:

- Tones and light sensors will be activated
- An announcement will be made stating “This a Hospital-wide fire drill”
- Close all doors in the area until an “All Clear” is announced

Hazardous Materials

Hazardous materials are those substances that are potentially dangerous to your safety and health. Volunteers are **not** authorized to handle hazardous materials. Each hazardous material in the Health Care system has a Safety Data Sheet (SDS), a written document prepared and distributed by a chemical manufacturer or distributor that identifies a hazardous chemical. The Public Safety Department and each department using hazardous materials maintain copies of these data sheets for each hazardous chemical in the workplace.

Know Your Codes

Some of the more common codes are listed below and on your safety card that you wear with your Photo ID badge. Respond according to UNC Medical Center’s department where you volunteer or the Volunteer Services department.

Code PINK	Missing or abducted person less than 18 years old
Code BLUE	Medical emergency that warrants hospital code team treatment
Pediatric or Adult Rapid Response Team	Pt is approaching a condition requiring immediate evaluation
Code Medic	Non-patient requiring first responder evaluation
Code Walker	Missing patient older than 18 years of age.

Patient Safety & Transportation

Volunteers may be asked to transport patients by wheelchair from one location to another. This is permitted provided the volunteer is comfortable doing so, the patient is in no obvious distress, and has no IV or oxygen attachments. After training, certain volunteers may transport patients with IV’s.

Please observe the following steps when transporting a patient via wheelchair:

1. Lock wheels (an important step that even professionals will forget).
2. Adjust foot and leg rests.
3. Back through doors and elevators, pulling the wheelchair, rather than pushing it.
4. Face the patient toward the front of the elevator so they can see what is going on.
5. Move at a slow, steady pace.
6. Need Assistance? **Ask for help.**

A volunteer may assist staff in transporting a patient with IV’s or oxygen, but volunteers may NOT transport such a patient by themselves. Volunteers may transport patients with IV’s if specific training has been completed by designated staff only. Volunteers are allowed to assist in transporting patients on stretchers. This is to ensure that should a patient need medical attention, a healthcare professional will be present to provide assistance.

Patient Elopement

All employees and volunteers must review the following information carefully in order to know how to respond to patients who are off their inpatient unit or who are attempting to leave the Health Care System without permission (elopement).

- All patients must request permission to leave inpatient units unless attended by Health Care personnel.
- All patients who are off inpatient units must be wearing an “Off Unit Pass” which is in the form of a green sticker.
- If you see an inpatient in a non-patient area without this green sticker, please let a member of Guest Services (at the front information desks) know. An employee should accompany the patient back to the appropriate unit if the patient cannot produce the green pass.
- If the patient becomes belligerent, contact Hospital Police at 984-974-3686. If possible, stay with the patient until Hospital Police arrive to escort the patient back to the appropriate unit.
- If a patient has received permission to be off the unit and has a green sticker, they may only be off of the unit for one hour. If the patient does not return at the end of the hour, the patient will be overhead paged by name, asking them to return to the unit. If they do not return within 15 minutes, a **Code Walker** will be initiated.
- When a **Code Walker** is announced, it will include the patient's first and last name and a brief description. During a **Code Walker**, all staff must be alert for anyone matching the description and assist in locating the patient and returning him/her back to the unit.
- **Patients cannot be authorized to leave the building to smoke.** Inpatients are not allowed to smoke during their admission.

Infection Prevention

The Department of Epidemiology (infection control/prevention) helps provide a safer facility for patients, staff and volunteers by preventing the spread of infections and infectious diseases. Volunteers routinely visit patient care areas and often have contact with patients. For this reason, it is vital that volunteers comply with the following infection control policies to help prevent the spread of infections:

- **Handwashing** is the single most important thing you can do to guard against infection. It is required:
 - * Before/after patient contact
 - * After sneezing or coughing
 - * Before/after leaving work
 - * Before/after use of the restroom
 - * Before/after beginning duties
 - * After removing gloves
- **Immunizations** must be up-to-date.
 - **Exposure** or suspected exposure to a communicable disease or infection should be reported by the volunteer to their liaison and the Volunteer Services office. Volunteers may also need to fill out an incident report, depending on the situation/exposure. Direct contact with patients should be avoided until the volunteer’s condition has been evaluated by Occupational Health Services.

- **Pregnant** volunteers should be especially cautious when attending to patients with certain communicable diseases.

- **Isolation/Precaution** signs, (blue for Contact or gold for Droplet), on a patient's door indicate volunteers should not enter the room unless you have had special training by your service area and authorized by your liaison to work with these patients. If you have any questions, please ask one of the nurses. **YOU SHOULD NEVER ENTER A PATIENT ROOM THAT HAS AN AIRBORNE OR ENTERIC SIGN ON THE DOOR.**

- **Blood or body fluid** contact is not permitted. Volunteers may not provide any services (including stripping or cleaning a patient bed) that may put them in contact with blood or body fluids. Please decline politely if asked to provide a service that might expose you to blood or body fluids. If you are unsure what to do, call the Volunteer Services office at 984-974-4793.

UNC COMMITMENT TO CARING

Caring for the people of North Carolina is our mission; it is the foundation of all we do.

To this end, UNC Health Care will advance to the next level of our mission through a focused initiative we are calling our Carolina Value.

Carolina Value is about:

- Improving the health of North Carolina
- Providing exceptional patient care and service
- Increasing our efficiency across all UNC Health Care locations
- Helping us work together as one team by leveraging the tremendous talent and best practices across UNC Health Care and the UNC School of Medicine

Carolina Value is much more than another “patient satisfaction improvement program.” It places the patient at the center of everything we do, provides a strategic framework for all Health Care System initiatives and holds us accountable to achieve our measurable goals. The outcome we seek is a culture of extraordinary service and operational excellence.

This is an important group effort that includes everyone from top leaders to front-line team members and volunteers. We need every person to be part of this effort if we are to accomplish and sustain our cultural transformation. By all of us working together in a concerted manner, we will fulfill our mission and provide the best care for the people of North Carolina.

The three ways people judge the quality of their service experiences:

- 1. Information**
- 2. Courtesy**
- 3. Responsiveness**

As a Volunteer at UNC Medical Center:

I AGREE to make a good first impression by:

- Dressing in a manner that reflects my important role in the health care environment.
- Keeping my attire (including accessories) clean, neat, safe and professional.
- Always wearing my UNC Medical Center ID badge.

I AGREE to respect my customers by:

- Introducing myself by name.
- Addressing all patients and family members as Mr. or Ms. unless otherwise requested.
- Acknowledging others with eye contact and a smile, even if I am busy.
- Providing timely assistance either in person or on the telephone.
- Respecting diverse cultural and religious backgrounds.
- Always saying, "Please," "Thank you" or asking, "How may I help you?" when engaging in conversation.
- Ending every conversation by asking, "Is there anything else I can do for you?"

I AGREE to be caring toward my customers by:

- Listening and exploring customers' concerns.
- Responding promptly to others' needs. If I am unable to answer a question, I will find someone who can.
- Following through on commitments.
- Resolving complaints in a satisfactory manner.
- Displaying personal warmth.

I AGREE to maintain a safe and secure environment by:

- Always abiding by HIPAA and Confidentiality rules.
- Always reporting spills, hazardous and/or unusual situations to my supervisor or Security.
- Always following safety procedures.

I AGREE to be a team player with my customers by:

- Reporting to work as scheduled.
- Working cooperatively with my department and with other departments.
- Recognizing the skills and knowledge of all UNC Medical Center team members.
- Volunteering to help when others need it.
- Displaying a sense of humor.
- Going the "extra mile" to ensure positive outcomes.

PATIENT CONFIDENTIALITY

Volunteers come in contact with many different patients. Some may be neighbors and friends and others may be community leaders or public figures.

It is imperative that volunteers respect the privacy of these individuals by keeping any information about them absolutely confidential. Volunteers may not discuss any patient with anyone else, inside or outside the Medical Center System, other than the patient's health care providers. If you are asked about a patient, politely decline to respond.

Volunteers may not provide any health status information to patients or families. This is the responsibility of their health care providers.

HIPAA

HIPAA (*Health Insurance Portability and Accountability Act of 1996*) is the federal law to safeguard against a breach of patient confidentiality. The act includes **privacy** regulations to ensure that information is handled in a confidential manner by all individuals who have access to it. HIPAA also includes **security** regulations to ensure that protected health information (PHI) is protected from intentional or accidental disclosure and from alteration or destruction.

Protected health information includes any unique identifying numbers or characteristics such as the following. PHI should not be disclosed without specific written consent.

Names	Telephone Numbers
Email addresses	Social Security numbers
Account numbers	Date of death
Birth dates	Health Care admission dates
Addresses	FAX numbers
Full face photos	Medical record numbers

To do your part in helping to ensure patient confidentiality, please remember:

- Access only information you need to perform your assignment
- Discuss confidential information in private locations (not elevators, restrooms or cafeterias)
- Share patient information with members of the healthcare team on a need-to-know basis
- Do not leave a computer on and unattended
- Maintain patient information in a secure and private area that is not accessible by patients, visitors and others that do not have a need-to-know

As a volunteer, your relationship with patients needs to be kept professional and confidential. Therefore, UNC Medical Center asks that you not engage in social media, such as Facebook and Twitter, with patients that you meet as a result of volunteering at the Hospitals.

Notary Witness: Volunteers can witness documents

You may serve as a notary witness for patient advanced directives, Living Wills and Health Care Power of Attorney. However, you must be at least 18 years of age. The witness to this process may not be an employee of the health care system. If you are asked to witness the signature of the patient for their Living Will or Health Care Power of Attorney, please do so. You are only witnessing the signatures that are being notarized. This will typically only take a few minutes of your time and is very important to the patient. Thank you in advance for your help.

Interviews with the Press

There may be times when newspaper or TV reporters may ask you questions. If they are asking you about your role as a volunteer you may answer questions ensuring that you do not violate a patient's privacy. In answering questions, you may not give any clinical judgments or act as a representative of the Medical Center System.

If you are unsure what to do, please call the Volunteer Services office and speak with the Director or one of the coordinators about the best way to respond. Usually, if there is an interview situation, the Volunteer Services staff is involved and will be with you to lend support and answer questions you are not comfortable answering.

Photographs

You may not take photographs of patients without formal written permission of the patient and the Medical Center. Please speak with someone in Volunteer Services prior to taking any photographs of patients.

CONFLICT OF INTEREST/VENDER RELATIONSHIPS

Vendor Relationships

- Policy intended to identify, account for, and manage of financial relationships with Vendors (a vendor is a salesman, or any other representative of a company, group or other business entity that is a supplier or potential supplier to UNC Medical Center of drugs, materials, supplies, equipment or services.
- Policy should limit inappropriate relationships that do not provide benefits to patients and trainees or that provide excessive benefits to individual (faculty, staff, volunteers or students)
- Policy intended to assure the safety and well-being of patients and the integrity of our institutions
- Vendor relationships are not necessarily bad, but they must be approved and managed

Applicability of the Vendor Relationships Policy

- Applies to all faculty, staff, and students of the School of Medicine and Medical Center
- Addresses any financial relationships with vendors and research sponsors
- Includes financial relationships of family and unmarried partners
- Financial relationships can come from income, ownership (except through mutual funds), in-kind compensation, gifts, and royalties

Gift Policy

- No gifts from Vendors regardless of the nature or value of the gifts
- No gifts to family members or indirectly given through third parties or separate entities
- No meals may be provided except as part of a general professional conference or meeting (also meals may be accepted as part of reasonable compensation on an approved consulting engagement)
- Gifts made to the University, HCS, Foundation, etc. that benefit an individual, their department, or their research are not prohibited but must be disclosed as a financial relationship.

PATIENTS' BILL OF RIGHTS

- Every patient admitted to the University of North Carolina Medical Center has the right:
- To access of treatment or accommodations regardless of race, creed, sex, religion, national origin or source of payment.
- To be treated with respect for personal dignity at all times under and all circumstances.
- To private and confidential examinations, consultations and treatments.
- To confidentiality regarding medical records, source of payment and communication with medical staff.
- To review information contained in personal medical records.
- To know the identity and professional qualifications of the individuals caring for the patient, as well as the professional relationship among individual medical staff providing treatment.
- To receive complete and current information regarding diagnosis, treatment and prognosis in a manner that is reasonably understandable.
- To be provided with an interpreter, when there is a language barrier, in order to communicate between patient, Medical Center, and medical staff.
- To have respect and recognition of wishes regarding treatment as expressed in advance directives, living wills or other legally recognized documents.
- To participate in and consent to decisions involving his or her health care, except in emergencies.
- To be advised of proposed clinical research affecting personal treatment or care, along with the ability to refuse participation in such projects.
- To refuse treatment, with the understanding of the consequences of such refusal and with the knowledge that upon refusal of appropriate medical care, the doctor may relinquish responsibility for care with reasonable notice.
- To be afforded reasonable continuity of care and advance notice of appointment times and physician availability.
- To receive complete explanation of the need for and alternatives to patient transfer to another facility, prior to the making of transfer arrangements.
- To receive itemized and detailed explanations of charges, regardless of method of payment.
- To be advised of Medical Center rules affecting care and conduct while a patient at UNC Medical Center.
- To be given the opportunity to express concerns or complaints about service and to have those issues promptly and adequately addressed.

DIVERSITY CELEBRATING THE DIFFERENCES

UNC Health Care, School of Medicine System Diversity Statement

UNC Health Care and the UNC School of Medicine are home to a diverse family of physicians, researchers and staff members who are dedicated to serving all the people of North Carolina. To illustrate this commitment, UNC Health Care and the UNC School of Medicine have created a diversity statement, which you can read [here](#).

“The UNC Health Care System and the UNC School of Medicine are committed to valuing all people throughout our organization, regardless of background, lifestyle, and culture. A diverse and inclusive work environment for staff and culturally appropriate care for our patients, are essential to fulfilling our UNC Health Care vision of improving the health of all North Carolinians.”

Training in diversity is important to the delivery of exceptional health care services. It is imperative that the employees and volunteers recognize and react to the differing needs of our patients. Diversity is not just about people of differing geographic cultures. Diversity includes issues of religious and cultural and sub-cultural groups such as:

- Individuals with developmental disabilities
- A person’s socio-economic status
- Individuals with substance abuse or mental health issues
- A person’s race and ethnicity, etc...

Not understanding the “rules” of another individual’s cultural background can lead to feelings of distress, helplessness and hostility towards the new environment.

We have great diversity in our patients, employees, and volunteers. Our job is to learn and respect our differences, and react accordingly.

TIPS FOR CULTURALLY COMPETENT CARE

- **DO UNTO OTHERS...** Don’t apply the “Golden Rule.” What is viewed as polite, caring, quality health care in one culture may be considered rude, uncaring or even evidence of poor standards of care in another culture. **THE PLATINUM RULE: “TREAT OTHERS AS THEY WOULD LIKE TO BE TREATED.”**

Example: Remember that a patient’s room is their temporary home. Please adhere to the following standards when entering a patient room.

Please knock.

Identify yourself and why you are entering the room.

Tell them what you are going to do before you do it.

Ask if there is anything you can do before you leave the patient’s room.

- **ADDRESS ALL ADULT PATIENTS BY THEIR SURNAMEN UNLESS SPECIFICALLY TOLD TO USE A FIRST NAME.**

Most other cultures are more formal than American culture, and many individuals born and raised in other cultural environments consider it a lack of respect to be addressed by their first names. This is especially true when there is a big difference in age among staff member/volunteer and patient.

HINT: If in question, ask the patient how they would like to be addressed.

- **DON'T RAISE YOUR VOICE!**

When speaking to a patient who seems to have a limited knowledge of English, don't shout! Remember, the patient may have difficulty understanding, but is not hard of hearing. Speak slowly and softly. Try to avoid words and expressions that are dependent upon one's knowledge and familiarity with American life and culture.

HINT: You can improve the patient's understanding of what you are saying by repeating it several times in different ways and using gestures, pictures, and other non-verbal forms of communication.

- **EVERY CULTURE HAS ITS OWN RULES FOR TOUCHING AND DISTANCE.**

HINT: Refrain from judging persons from other cultures by such culturally determined matters as the strength of the handshake, whether the person maintains eye contact, or keeps a distance that is comfortable. Observe the patient closely and try to "negotiate" distance so that it is acceptable to both of you.

- **DON'T ASK A PATIENT WHO SPEAKS LIMITED ENGLISH, "DO YOU UNDERSTAND?"**

If the patient nods his or her head and answers "Yes" to your question, it may only mean that the patient heard you, not that they understood your question and agrees with you.

HINT: Try to ask questions beginning with the words "when", "where", "what", "why" and "how." Listen carefully to the answers for clues to the patient's degree of understanding or real agreement. You can also check understanding and agreement by asking the patient to repeat to you, step by step, exactly what you have said.

- **FOR MANY PATIENTS, SATISFACTION WITH TREATMENT IS HEAVILY INFLUENCED BY THEIR "COMFORT LEVEL" WITH THE PHYSICIAN AND THE OFFICE STAFF, AS WELL AS BY THE QUALITY AND/OR SUCCESSFUL OUTCOME OF TREATMENT.**

This includes having patience, a willingness to take the time to explain, making sure the patient understands, and responding to the patient's needs and expectations.

HINT: The best place to start and end is to never assume that a patient wants what you want or expects the same type of care and service that you want. Instead, take the time to learn about a patient's culture, traditional health/wellness beliefs and practices, and to demonstrate your knowledge and interest by customizing rules of courtesy, procedures, and treatment plans to suit a patient's needs and expectations.

COMMUNICATION

Volunteers have the time to slow the pace and give one-to-one time to patients. Volunteers do not have to have all the answers, they just need to listen. This is particularly true for volunteers in the ICU Waiting Room, Emergency Department, Cancer Hospital, Cuddlers in the Children's Hospital and the Patient and Family Advisory Board members.

Press Ganey Patient Satisfaction surveys tell us that patients place high value on emotional and spiritual needs. Thus addressing emotional and spiritual needs is a top priority for quality improvement. Evidence exists to indicate a relationship between patient satisfaction with emotional and spiritual care profitability.

It is important to remember that in a tense situation, we respond with what makes us feel better.

What is emotional support?

- Start where the patient and family are and go on their journey with them.
 - Leave your own "stuff" at the door of the hospital when you come to volunteer
 - You must actively listen to what they are saying
- Being Human with another human being

- Expressing warm, caring and supportive behavior towards the patient
- Empathy – trying to put yourself in the patients’ situation
 - How does it feel to be them and going on their specific journey?
 - What are their challenges?
 - How might they be feeling?
 - What might they need?
- Being present (LISTENING)
 - Slowing the pace – volunteers have time to do this
 - Listening is not a passive skill! Quiet the inner voice.
 - Example: If a patient tells you they have just been diagnosed with cancer and I am going to die.
 - I have two small children...
 - Response: May I sit with you while you talk through this news.
 - Don’t say you know how they feel
 - Don’t say I remember what it was like for me
 - Don’t show shock, surprise or disgust
 - People in crisis just need you to sit and comfort
 - Don’t tell the story of your own illness and treatment
 - Make the conversation about the patient
 - Help them focus on the family strengths
 - Skills: paraphrasing and reflective feelings.
 - Refraining from telling the patient how they should be feeling...just be in the moment and really hear what the patient is communicating both verbally and nonverbally.
 - Nonverbal Care: smiles, gestures, eye contact, body language.

Barriers to connecting with patients

- Race/culture, language, gender, generational, socio-economic, personality, disabilities
- What are your biases, what is your background, what are your politics, what is the norm in your family?
 - Patients may try to hook volunteers with conversations regarding politics and religion.
 - Safe subjects include weather, pets, children/grandchildren, sports
- How do you perceive people? Are you quick to judge?
- Staying non-judgmental and unbiased!!
 - Remember that people lose control when they go to the hospital.
 - There are 3 sides to every story

Putting Emotional Support to the Test – Difficult Things to Hear...

- The food is horrible, this hospital is the worst, I hate the nurses! Why is this happening to me? ...and then crying. (misdirected anger, blame, fear)
- “What is happening? It is taking so long to get the test results back. Usually when it takes this long to get results, it’s bad news, right? What do you think? (anxiety, fear)
- I know why this is happening...it is because I wasn’t always nice to my wife... (guilt)
- “Can I have a blanket... can I have more water... when will my doctor be here to see me...can I have more medication... can I have another pillow...” (loneliness, needy)
- “We have already made a connections, I feel so comfortable with you. I am going to be discharged today. Can we stay in touch when I am discharged?” (manipulation, needy)

Strategies/Possibilities

- Do you want to tell me more about that?
- It is hard not knowing... (about the test results, diagnosis, etc.)
- Yes, I know it must seem unfair what is happening.
- What do you think?
- Sounds like you're really struggling with what to do.
- So let me make sure I am hearing you right...
- Would you like to talk?
- Sounds like you're angry about ...
- It's ok to cry... (ok to sit quietly with a patient)
- **Avoid saying:**
 - I know just how you feel
 - It will get better
 - It will be ok
 - Don't cry, don't be angry, don't be sad, don't be afraid (or any other feeling the patient might be expressing)
 - When the "right words" don't come to you...please know that SILENCE, not saying anything at all, yet staying in the room and being present with the patient expresses care and support towards them.
 - A newly diagnosed oncology patient was admitted for surgery the following day. Her husband stayed with her all day and well into the evening when she finally convinced him to go home and get some rest before her surgery the next day. As soon as he left, she crumbled in tears. When her nurse came in and found her crying, she turned off the lights, went to the bedside and took the woman's hand and sat quietly holding her hand. Finally, the woman rolled over and looked at the nurse and thanked her. She explained that she had held back her emotions all day to ensure that her husband was ok. She told the nurse that she just needed a good cry.

BOUNDARIES

- Refrain from talking about yourself too much...always try and turn the conversation back to the patient and/or family. We never want patients and/or families to feel they are entertaining us...**Be Aware** of when it is time to leave the room!
- Don't make promises you can't keep
 - "I promise to come back at the end of my shift..."
- Never give out personal information
 - If a patient would like to contact you, they may do so through the Volunteer Services office.
- Remember, there are often underlying factors contributing to the "connection" a patient feels to you.
- No "shoulding" allowed.

DIFFICULT PEOPLE and SITUATIONS

- Promise: You will encounter difficult people and difficult situations!
- Please do not internalize or personalize what people may say to you.
- Most people you will encounter are polite and grateful for your help! With that said, because of the stress of being in a hospital or worrying about loved ones, you will also deal with people who may be abrupt or rude.

- Please know that what patients and/or families say or do is not really aimed at you, but comes from frustration.
- Don't get hooked into feeling that you have to respond the way you would like to respond, but that you know that you have the control to decide on the appropriate way to respond.
- **Listen, Listen, Listen!!!**
 - "Do you want to tell me more about that..."
 - Everyone wants to be heard. Allow patients/families to vent with an open ear. Do not interrupt.
 - Refrain from taking a side or point-of-view, instead, acknowledge the other person's concerns while remaining neutral (do not blame or argue).
 - Remember, there are 3 sides to every story!
 - Do your best to resolve the issue through chain of command.
 - In most cases it is best to go to the supervisor in the area where you are working and let them know the situation
 - If additional help is needed, please talk with the Volunteer Services staff or Patient Relations staff.
 - Report any unresolved issues to Volunteer Services.

WORDS AND WAYS THAT WORK

These suggested phrases will help to navigate tough conversations with patients or families who may be upset or frustrated by something that has happened during their stay.

The "Blameless Apology"

Instead of: It's not our fault... That department never gets it right... They are always slow...

Use the Blameless Apology: I'm sorry you had to wait... Let me see what I can do...

I apologize for the inconvenience. Let me speak with my manager for you...

I'm sorry this happened. We are going to do _____ to resolve this for you...

Also, use the HEART acronym to address concerns:

When there are service recovery moments, don't forget to HEART

- **Hear** the patient's concern (listen with care)
- **Empathize**
- **Apologize** (give a blameless apology – "I am very sorry that happened. That is not the experience we want for you. What can I do to make this better for you?")
- **Respond** (fix it if you can or call for support to help you address it)
- **Thank them** ("Thank you for telling me. My plan is to ...")

RELATIONSHIP BUILDING

- Relationships are the foundation of good work – this program is no exception.
- Nurture relationships with the nursing staff and social workers on each unit.
- If you know the person you are connecting with is busy, timing is poor or staffing is low, acknowledge this. It will keep the person from having to let off their frustration by telling you how busy, understaffed, etc., they are.
- Thank the person for taking the time to help or listen to you... reinforce the end result of their time ("thank you for taking the time to talk with the patient. I know they will be relieved.")
 - Provide a "High 5" as indicated.
 - Let Volunteer Services know if we need to do something special for the staff

RESOURCES

- Know your RESOURCES!!!
 - Volunteer Services
 - Case Management/Social Work
 - Patient Relations
 - Pastoral Care
 - Guest Services

BENEFIT TO PATIENTS

- Why is meeting the emotional needs of patients important to you, patients, staff and the hospital? Research shows:
 - Causal relationship between social support and physical health
 - Depressed patients = longer hospital stays (opposite... happy patient/shorter stays)
 - Patients who have their emotional needs were met will come back to the hospital in the future (patient satisfaction).
 - Patients HIGHLY value their emotional needs while in the hospital.

BENEFITS TO THE VOLUNTEERS

- Being able to connect with patients as human beings (seeing the person behind the patient).
- Volunteer satisfaction, resulting from smiles, appreciation and understanding from patients.
- Relationship building with staff (AND increased nurse morale). When nurses see volunteers effecting positive change in their patients by their presence, they will gravitate towards the volunteers and appreciate their role on the unit and in the health care system.
- When volunteers take the time to listen, support and understand the patients, they will reap the rewards.
- When volunteers are trained appropriately and are placed in the right area, they will always “get” more than they “give”.

Adapted from ASDVS Workshop 2008
Allison Rotter, MSW, DVS
Cedars-Sinai Hospital, Los Angeles, CA

DRESS CODE

Following the dress code listed below will allow you to be safe and comfortable while volunteering at UNC Health Care. We expect a neat and clean appearance to be maintained at all times. The volunteer dress code is modeled after the UNC Health Care’s dress code policy.

- Always wear your UNC Medical Center issued photo ID badge above the waist when you are volunteering. When you leave the volunteer program, please turn in your name badge to the Volunteer Services. The ID Office may impose a fine of \$50 on individuals who are inactive volunteers and haven’t turned in their ID’s.
- All volunteers must purchase a polo or jacket and wear it with pants or appropriate length skirts.
- No shorts are allowed, even if they are long shorts.
- For your safety and comfort, wear closed-toe shoes with low heels and soft soles. No sandals or flip-flops are permitted.

- Volunteers may not wear body fragrances such as perfume, cologne, talc powder or after-shave lotions. Smoke odors will not be permitted.
- Hats should not be worn unless you are volunteering outside.
- Do not chew gum while you are volunteering.
- Visible tattoos and excessive body piercings must be covered.
- Costumes may be worn for special events with prior approval.
- Jewelry should be kept to a minimum. Do not wear dangling jewelry.

ATTENDANCE

Patients, staff and visitors are counting on you! It is important to be a reliable and punctual volunteer and let your liaison know if you will be unable to volunteer for any reason.

- **Sign In:** Always sign in and out at one of the computer kiosks. At the Chapel Hill medical center, the kiosks are located at the Information Desks of Memorial, Women’s, and Cancer Hospitals. At Hillsborough Hospital, you may sign in and out in the Volunteer Services workroom. Your sign-in is a form of your birthday. You must “check-in” to your specific area after you login.
- **Sign Out:** At the end of your shift, please sign out. The kiosk computers are “real time” and will record the time you clock-in and out.
- **Off-Site:** If you are in an off-site volunteer area, please log in your hours to: <http://www.uncmedicalcenter.org/uncmc/support/volunteer-services/>
- **Inclement Weather:** Volunteers are not expected to come to work if the roads are hazardous or there are other adverse weather conditions. However, we welcome anyone who can make it to the hospitals.
- **Holidays:** Volunteers are not expected to work on Medical Center holidays. However, we welcome volunteers who wish to come on those days if your volunteer area is working. The workroom is open 24 hours/day. Holidays that are observed by UNC Medical Center include:

New Year’s Day
Martin Luther King’s Birthday
Good Friday*
Memorial Day
Independence Day
Labor Day

Veteran’s Day*
Thanksgiving Day
Post-Thanksgiving Day
Christmas Eve*
Christmas Day

*Denotes a Floating Holiday and the Volunteer Services office may be open.

CONDUCT

Nothing should be said or done to diminish the healthcare provider/patient or family/patient relationship.

- **Confidentiality:** Is a must! HIPAA (Health Insurance Portability and Accountability Act of 1996) states that staff, including volunteers, must safeguard against the breach of patient confidentiality. The act includes privacy regulations to ensure patient information is handled in a confidential manner by all who have a need for access. HIPAA also includes security regulations to ensure that medical information is protected from intentional or accidental disclosure and from alteration or destruction. Violations of confidentiality will result in a volunteer's dismissal.
- **Tasks:**
 - * Volunteers should not perform medical procedures or give medical advice.
 - * Volunteers should not sit or lean on a patient's bed.
 - * Strict hand hygiene procedures must be followed before and after contact with a patient or their belongings.
 - * Volunteers should always inform a staff member about patient/family requests or information that may impact the care of the patient.
- **Privacy:**

Volunteers should always knock on a patient's door, open the door just a little, and wait for a response or tell them you are a volunteer and why you are entering the room. Do not enter a room when medical professionals are in the room.
- **Cell Phones/iPods and other electronic devices:**

Volunteers may not use their cell phones, iPods, earbuds or other personal electronic devices while volunteering.

CORRECTIVE ACTION

Should a volunteer be involved in or witness a situation that requires counseling, coaching or corrective action, the following steps will be followed:

- The volunteer will be asked to come to the Volunteer Services Department to meet with the Director, coordinator and any other staff member or volunteer involved to provide an accounting of the incident.
- Documentation of the points discussed will be outlined on the Corrective Action form and signed by those in attendance.
- If additional follow-up is required, a date will be set to meet again.

MISCELLANEOUS

Other useful information to know:

Telephones: All phones in the Medical Center require that you dial “9” for an outside line. Do not use a phone in a patient room. When answering a phone, identify the department and yourself. Messages should include the date and time of the call, the message and your name. Be sure to repeat the phone number to the caller to ensure the number is correct.

Solicitation: No solicitation other than those organizations identified by UNC Medical Center’s Public Affairs Office is allowed.

Education: As directed by Volunteer Services, volunteers are required to complete competency reviews, in addition to on-the-job training. Volunteers may attend Health Care educational seminars as appropriate.

TAX DEDUCTIONS

Mileage and the cost of uniforms incurred by volunteers are tax deductible. Please review current tax laws/and or contact your tax accountant. The Volunteer Services Department will provide documentation of hours and dates of volunteering as requested.

UNC MEDICAL CENTER VOLUNTEER ASSOCIATION

The UNC Medical Center Volunteer Association was organized in 1952 to advance the objectives and interest of patients and UNC Health Care by providing service in a volunteer capacity and resources through approved fund-raising activities. The Association also seeks to provide better community understanding of the Medical Center’s mission.

The UNC Medical Center Volunteer Association, in conjunction with the Department of Volunteer Services, conducts, sponsors and assists in the following activities:

- Cranberry Corner and Butterfly Boutique and Hillsborough Gift Gallery
- Health Careers Symposium for high school students
- Sponsorship of selected Health Care services and programs
- Scholarships for medical allied health students and UNC Health Care Medical Center and Hillsborough Hospital employee’s students
- Lending Library for patients, volunteers, and staff

Membership in the UNC Medical Center Volunteer Association is automatic when you become a UNC Medical Center Volunteer. Getting involved is a way of showing your support for the activities the Association supports.

If you are interested in learning more about what this leadership group does or would like to become involved, please ask one of the staff to provide information. We will provide a current member for you to talk to about opportunities.

THE VOLUNTEER'S PLEDGE

- I will be punctual and conscientious in the fulfillment of my duties and accept supervision graciously.
- I will conduct myself with dignity, courtesy and consideration.
- I will consider all information confidential that I may hear, directly or indirectly, concerning a patient, doctor or any member of personnel and will not seek information regarding a patient that is not on a "need-to-know" basis.
- I will take any problems, criticism, or suggestions to the Director of Volunteer Services.
- I will give my best effort to make my work of the highest quality.
- I will uphold the traditions and standards of UNC Medical Center and interpret them to the community at large.

A BILL OF RIGHTS FOR VOLUNTEERS

Every University of North Carolina Health Care Volunteer has the right. . .

- To be treated as a co-worker.
- To a suitable assignment, with consideration for personal preferences, temperament, experience, education and employment background.
- To know as much about UNC Medical Center as possible, its policies, people and programs.
- To job training, thoughtfully planned and effectively presented.
- To continuing education on the job, including information on new developments and training for greater responsibility.
- To promotion and a variety of experiences through advancement of assignments, transfer, or special assignments.
- To be heard, to feel free to make suggestions, and to be respected for an honest opinion.
- To recognition in the form of awards and expressions of appreciation.

Abbreviations

Departments:

ACC	Ambulatory Care Center	MPCU	Medical Progressive Care Unit
BICU	Burn Intensive Care Unit	NCCC	Newborn Critical Care Center
BMTU	Bone Marrow Transplant Unit	NSICU	Neurosurgery Intensive Care Unit
CDU	Clinical Decision Unit	OR	Operating Room
CCU	Critical Care Unit	OT	Occupational Therapy
CICU	Cardiac Intensive Care Unit	PT	Physical Therapy
CSSU	Children's Short Stay Unit	PACU	Post-Anesthesia Care Unit (recovery room)
CTICU	Cardiothoracic Intensive Care Unit	PICU	Pediatric Intensive Care Unit
ER/ED	Emergency Room/Department	SICU	Surgery Intensive Care Unit
OB/GYN	Obstetrics and Gynecology	STPU	Stroke Treatment and Prevention Unit
ICCU	Intermediate Cardiac Care Unit	VR	Vocational Rehabilitation
ISCU	Intermediate Surgical Care Unit	WHIC	Women's Health Information Center
L&D	Labor and Delivery		

Medical Terms:

ad lib	as much as needed	lac	laceration
adm	admission	LOC	loss of consciousness
AMA	against medical advice	meds	medications
amb	ambulatory (not confined to bed)	MVA	motor vehicle accident
anes	anesthesia	NAD	no acute distress
b.i.d.	twice daily	N & V	nausea and vomiting
BP	blood pressure	NPO	nothing by mouth
BR	bathroom	OOB	out of bed
CAD	coronary artery disease	p.o.	orally
cath	cathererization	p.r.n	whenever necessary
CHF	congestive heart failure	pt	patient
CPR	cardiopulmonary resuscitation	q.d	every day
cult	culture	q.h.	every hour
CVA	stroke	q.h.s	every night at bedtime
CXR	chest x-ray	R/O	rule out
D/C	discontinue	SOB	shortness of breath
d/c	discharge	s/p	status post
DM	diabetes mellitus	Stat	at once
ECG/ EKG/ EEG	electroencephalogram	TB	tuberculosis
ENT	ear, nose and throat	temp	temperature
FTT	failure to thrive	t.i.d.	three times a day
GI	gastrointestinal	trauma	wound or injury
HBP	hypertension (high blood pressure)	triage	prioritizing patient care according to severity of illness or injury
I &O	intake and output	Tx	treatment
IV	intravenous	vs	vital sign
		wt	weight

Staff:

CNA	Certified Nursing Assistant
CCLS	Certified Child Life Specialist
Dr./M.D	Doctor/Physician
LPN	Licensed Practical Nurse
MT	Medical Technologist
OT	Occupational Therapist
PA	Physician Assistant
PT	Physical Therapist
RN	Registered Nurse
RT	Respiratory Therapist or Recreation Therapist
SW	Social Worker

Miscellaneous:

CMS	Center for Medicare and Medicaid Services
DFS	Department of Facility Services

Other Common Terms:

CDC – Centers for Disease Control and Prevention. A branch of the U. S. Department of Health and Human Services, the CDC is responsible for providing leadership and direction in the prevention and control of disease and other preventable conditions and responding to public health emergencies; it provides guidelines to health care facilities for prevention and control of infection.

HIPAA – Health Insurance Portability and Accountability Act of 1996 is the federal law to safeguard against a breach of patient confidentiality. The act includes **privacy** regulations to ensure information is handled in a confidential manner by all who have access. HIPAA also includes **security** regulations to ensure that protected health information (PHI) is protected from intentional or accidental disclosure and from alteration or destruction.

TJC – The Joint Commission. TJC (formerly known as JCAHO) is a national agency that sets voluntary standards for healthcare. Healthcare facilities submit to surveys to demonstrate compliance with meeting these national standards of service. Healthcare facilities must maintain accreditation to qualify for funding from certain government agencies.

OSHA – Occupational Safety and Health Administration. A branch of the U.S. Department of Labor, OSHA is responsible for assuring that working men and women have safe and healthful working conditions. Failure to comply with OSHA standards can result in fines up to \$70,000 for each violation.

Patient Self Determination Act – This act is designed to educate patients about advance directives, documents that state a patient’s wishes to refuse or accept needed treatment should a patient become incapacitated and unable to speak for himself or herself. Living wills and health care powers of attorney are examples of advance directives. Medical Center employees may **NOT** serve as witnesses for these documents, but volunteers can if they are willing to do so.

Universal Precautions – Practicing blood and body fluids precautions for all patients. All human blood and other potentially infectious materials are treated as if known to be infectious.

SDS – Safety Data Sheets. These data sheets can be found online. It includes information such as ingredients, first aid, spill procedure, etc.

Chapel Hill- Important Telephone Numbers

(From a hospital phone, you only need to dial the last 5 digits)

Emergencies	984-974-4111
Environmental Health & Safety	984-974-0749
Cranberry Corner Gift Shop	984-974-8740
Hospital Police	984-974-3686
Environmental Services/Housekeeping	984-974-5611
Epidemiology	984-974-7500
Occupational Health Services	984-974-4489
Operator	984-974-1000
Pastoral Care	984-974-4021
Patient Relations	984-974-5006
Volunteer Services	984-974-4793

Hillsborough- Important Telephone Numbers

(From a hospital phone, you only need to dial the last 5 digits)

Emergencies	984-974-4111
Gift Shop	984-215-2035
Hospital Police	984-215-2703
Environmental Services/Housekeeping	984-215-2065
Information Desk	984-215-2095
Occupational Health Services	984-215-2352
Operator	984-974-2000
Pastoral Care	984-215-2090
Patient Relations	984-974-9348
Volunteer Services	984-215-2037