

OVH VOLUNTEER PROGRAM

Opportunities for volunteering at the Oregon Veterans' Home include, but are not limited to, the following:

Bingo Caller

Gift Shop Clerk

Visiting with residents

Reading to residents

Outings with residents and Recreation Staff

Label clothing

Mending/sewing resident clothing

Board games with residents (Scrabble, etc.)

Card games with residents (pinochle, bridge, etc.)

Snack Cart/Popcorn Cart

Hydration Cart (coffee, cocoa, soda, juice)

Letter writing with residents

Arts/Crafts with residents

Wood working/Leather working with residents

Gardening activities

Organize library area/supply area

Baking with residents

Deliver mail to residents

Assist with resident smoking outside

Pet Therapy

Please indicate which of the above activities you would be interested in volunteering for. (Place a check mark next to those interests).



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You are an asset to our program and we want to get to know you better as a person. It is very important that Volunteers at the Oregon Veterans' Home are involved in opportunities that relate to their own interests and we want to know what your personal hobbies and interests are. Please give us a brief list of your own interests and accomplishments.

EMERGENCY CONTACT INFORMATION:

Name of person to notify: _____ Phone #: _____

Physicians' name: _____ Phone #: _____

REFERENCES:

1. Name: _____ Phone #: _____

Relationship: _____

2. Name: _____ Phone #: _____

Relationship: _____

VOLUNTEER ASSISTANCE WITH RECREATION OUTINGS:

All Outings: Loading and unloading the Recreation bus. The role of the volunteer is to be knowledgeable in locking and unlocking the wheelchairs, use of the bus mechanical lift system, and knowing how to fasten safety belts for the residents. Assist the Recreation staff with the following before residents load onto the bus:

1. Residents have proper attire (coats, hats, etc.)
2. All wheelchairs must have foot rests.

Lunch Outings:

1. Sit next to a resident and engage them in conversation.
2. Assist in opening straws, napkins, cutting food items if asked, getting cream & sugar for coffee, etc.
3. Notify staff immediately if a resident requires assistance to the restroom.
4. If a resident begins to stand, ask them to sit with you until staff arrive to assist.

Shopping Outings:

1. Follow the instructions on the volunteer name tag. If you do not have a name tag, please refer to the Recreation bus driver.
2. Residents may not purchase alcohol, lighters, knives, guns, cleaning products, or medicine.
3. If you are unsure if a resident should be purchasing a particular item, find Recreation staff and they will intervene.

Museum Outings: Assist with pushing residents in wheelchairs and know where the residents are at all times.

Bingo Outings:

1. Sit with residents and assist with their Bingo cards, mark numbers, etc.
2. Observe residents during breaks.
3. Know where the residents are at all times.



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VOLUNTEER APPLICATION

All questions on this application are voluntary. However, the information will help us find the most satisfying and appropriate service for you.

Name: _____ **Date:** _____

Address: _____ **Phone:** _____

City: _____ **Zip Code:** _____

Date of Birth: _____

Email: _____

Previous Work Experience: _____

Previous or Current Volunteer Experience: _____

How did you learn about our Volunteer Program? _____

Please Indicate Days and Times that you are available:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____



VOLUNTEER JOB DESCRIPTION

Position Title: OVH Volunteer

Supervisor: Linda Waters, Volunteer Coordinator

Work Description: Volunteers offer friendship, socialization, and non-medical support to residents of the Oregon Veterans' Home.

Duties: Provide tasks to the residents and the facility as reasonably requested by the Volunteer Coordinator. Visits may be strictly social or could include any of the following: shopping and meal outing assistance, computer work, calendar posting, mail delivery, reading to residents, bingo caller, bus driver, woodworking, gardening, playing board games or bingo, and letter writing. Every attempt is made to match volunteers and residents/duties, so the time spent volunteering is valuable to both parties. Volunteers do not perform personal care for residents.

Requirements: Completion of Volunteer Application, Criminal History Background Check, PPD(tuberculosis) test, Confidentiality Statement/HIPPA, Orientation Checklist, and Code of Conduct review.

Qualifications: Patience, compassion, flexibility, and active listening skills. Volunteers need to have the ability to establish and maintain boundaries. The volunteer must put the residents' interests first.

Reporting: Volunteers are to sign in and out when visiting the home and record hours worked, in the volunteer book.

Risks: Standard precautions should be practiced whenever there is a risk of infection. Volunteers will be notified of specific precautions when necessary. At times, volunteers may develop close relationships with residents. Volunteers need to have the ability to recognize that OVH provides 24-hour nursing care for residents who are in the final stages of life. Volunteers should understand this fact and have the ability to effectively deal with death and grief.

Benefits: The benefit of helping others who are not able to help themselves is priceless. Volunteers are invited and encouraged to participate in social/appreciation events, as recognition for their dedicated service to the residents of the Oregon Veterans' Home.

I have read the above job description for the volunteer position and understand and accept all that the job requires.

Signature: _____ Date: _____



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ORIENTATION CHECKLIST:

To be completed with the Volunteer Coordinator or designee.

- Resident Precautions list- food & beverages
- Wheelchair techniques, transporting residents to/from events
- Where and how to obtain assistance
- Hearing and vision loss
- Call lights, door/fire alarms, wander guard
- Confidentiality
- When in doubt: Always ask.
- How to find Volunteer Coordinator, staff, wing nurses stations, Receptionist, etc.
- Outdoor strolls- sunscreen, hats, etc.
- Notify Nursing or Recreation Staff when taking residents off a wing
- Approval required for taking residents off OVH property.
- Report questionable occurrences to Volunteer Coordinator
- Code of Conduct
- Core Values and Core Purpose
- Death and Dying
- Proper handwashing techniques
- Tour of building and departments-sign in and suggestion box

Volunteer signature: _____ **Date:** _____

Volunteer Coordinator signature: _____

CODE OF CONDUCT

Employees, volunteers, students, and contracted personnel shall at times in the performance of their duties:

- Observe and comply with the organization's mission, vision, values, policies, procedures and all applicable rules, regulations and laws.
- Promote a culture of continuous quality improvement in care and service.
- Promote a cooperative environment among staff and providers that fosters an environment of trust, exchange of information, identification of errors, and problem solving.
- Provide a physical environment that is safe for all residents, contractors, visitors, family, staff, volunteers, visitors, and students.
- Refuse to accept any gifts or gratuities from residents, contractors, visitors, families, or vendors.
- Treat as confidential and safeguard at all times, medical, billing, employee, and other facility owned information.
- Ensure that all medical record documentation is timely and accurately completed, signed, and dated as appropriate.
- Report any instances of known or suspected non-compliance with applicable laws, rules, regulations, policies, or procedures to the organization's Compliance Officer, Senior Staff, Management, or Supervisor, without fear of retaliation.
- Treat all residents, family, staff, volunteers, visitors, contractors, and students with Safety, Honor, Integrity, Respect, Trust, and professionalism.
- Comply with the organization's zero tolerance policy with respect to harassment, threats, intimidation, discrimination, and retaliation.
- Ensure that all bills are accurate and reflect services actually provided and documented.
- Use the organization's property, network, and software appropriately and only in connection with legitimate organizational activities.
- Cooperate fully with the organization's Corporate Compliance Program, including training activities, audits, and implementation of corrective actions.

COMPLIANCE HOTLINE: 1-800-541-3732



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CONFIDENTIALITY STATEMENT- OVH VOLUNTEER APPLICATION
(REQUIRED)

Confidentiality is the preservation of privileged information concerning the residents, which is disclosed in a professional working relationship. Part of what you learn is necessary to provide services to the resident; other information is shared within the development of a helping, trusting relationship. Therefore, most information gained about individual residents through an assignment is confidential in terms of the law, and disclosure could make you legally liable or could damage your relationship with the resident and make it difficult to help the person.

All records dealing with specific residents must be treated as confidential. General information, policy statements, or statistical material, which is not identified with any individual or family, is not classified as confidential.

Before you begin your assignment as a volunteer, you should be aware of the laws and penalties of breaching confidentiality. Although the Oregon Veterans' Home is liable for our acts within the scope of our duty, giving information to an unauthorized person could be interpreted as not acting within the scope of duty and the Oregon Veterans' Home could refuse to support you in the event of legal action. Violation of the Oregon Revised Statute regarding confidentiality of records is punishable upon conviction by a fine of not more than \$1,000 or by imprisonment in the County Jail for more than 60 days, or both.

My signature below certifies that I have read the material above and understand the confidentiality policy. I understand that my duty as an agent of the state, is to abide by the laws and policies regarding preservation of confidential information.

Signature: _____ Date: _____