

**Volunteer Services Department
Volunteer Orientation**



We are pleased you have chosen to be part of the UCLA Health Volunteer Program.
Welcome to the healthcare team!

AGENDA

- Welcome and Introduction
- Volunteer Expectations and Responsibilities
- Health Clearance and Vaccination Requirements
- Department Assignments
- Patient Confidentiality and HIPAA
- Safety and Security
- Infection Control and Universal Precautions

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CHAPTER ONE: OVERVIEW

Founded in 1955 as the primary teaching hospital for the UCLA School of Medicine (now the David Geffen School of Medicine at UCLA), the non-profit and self-supporting medical center is operated by the University of California Board of Regents. For more than half a century, UCLA Health has provided the best in healthcare and the latest in medical technology to the people of Los Angeles and throughout the world. Comprised of [Ronald Reagan UCLA Medical Center](#), [UCLA Medical Center, Santa Monica](#), [Resnick Neuropsychiatric Hospital at UCLA](#), [Mattel Children's Hospital UCLA](#), and the UCLA Medical Group with its wide-reaching system of primary-care and specialty-care offices throughout the region, UCLA Health is among the most comprehensive and advanced healthcare systems in the world.

The new state-of-the-art Ronald Reagan UCLA Medical Center has 520 large, private patient rooms and employs 1,500 full-time physicians and more than 2,500 support staff. UCLA Medical Center, Santa Monica is a 266-bed academic medical center with a tradition of high-quality and patient-oriented care that goes back to its origins as a community hospital in 1926. [Our physicians](#) are world leaders in the diagnosis and treatment of complex illnesses, and our hospitals are among the best in the country. [Consistently ranked one of the top ten hospitals in the nation and the best in the western United States by U.S. News & World Report](#), UCLA Health is at the cutting edge of biomedical research, and our doctors and scientists are leaders in performing pioneering work across an astounding range of disciplines, from organ transplantation and cardiac surgery to neurosurgery and cancer treatment, and bringing the latest discoveries to virtually every field of medicine.

Our Mission

Every day, we strive to deliver leading-edge patient care, research, and education



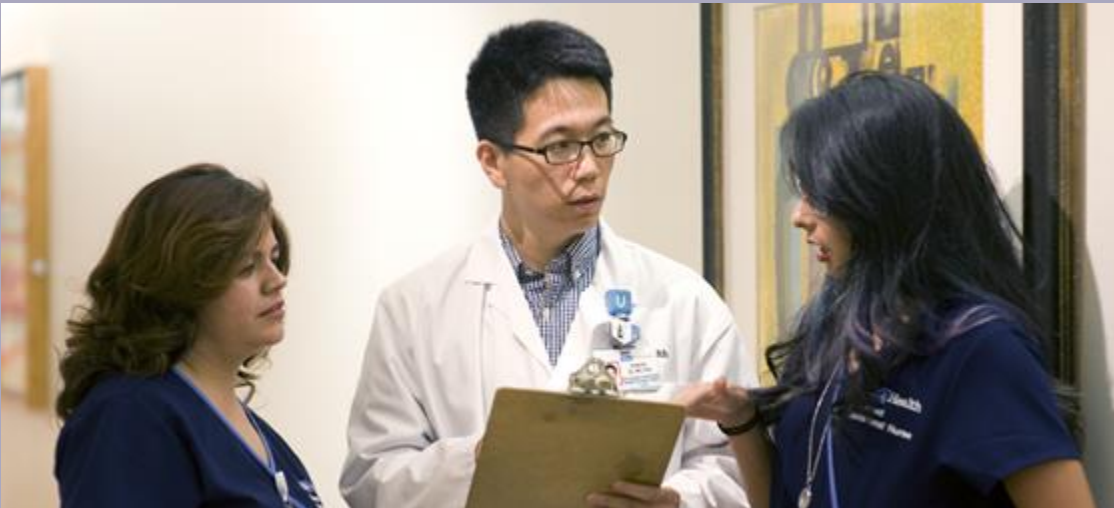
Our Vision

We are committed to healing humankind, one patient at a time, by improving health, alleviating suffering, and delivering acts of kindness.



Our Values

Compassion, Respect, Excellence, Discovery, Integrity, and Teamwork (CREDIT) form the foundation for everything we do.



CICARE – Our World Class Practices

CICARE is an acronym that serves as a set of guidelines for what is expected of every team member at UCLA Health.

Connect with Compassion

Introduce yourself with Integrity

Communicate with Teamwork

Ask with Discovery

Respond with Respect

Exit with Excellence

Our Service Promise

I will always keep my commitment to care, as I have been entrusted by patients, colleagues, and society.

GOALS

People, Quality, Safety, Service, Operations, Strategic Development and Finances


LEADERSHIP

The Regents of the University of California serve as the governing body for the Ronald Reagan UCLA Medical Center, the Resnick Neuropsychiatric Hospital and the UCLA Medical Center, Santa Monica. Authority to lead UCLA Health (which includes the Hospital System, Medical Group, and the Medical School) is delegated to Dr. John C. Mazziotta, Vice Chancellor, UCLA Health Sciences, Dean, David Geffen School of Medicine at UCLA and CEO, UCLA Health. Johnese Spisso, MPA, is the President, UCLA Health System CEO, UCLA Health and Associate Vice Chancellor, and delegates selected responsibility to key Hospital leaders, such as senior associate directors, senior nursing staff, department managers and unit directors for the daily operations of the hospitals. Medical Staff (physicians) are led by a self-governance process and elect a Chief of Staff. The Chief Medical Officer works closely with the Chief of Staff, elected officials and the Hospital and medical group leadership to achieve the mission of the hospitals.

PROVIDING THE BEST HEALTHCARE EXPERIENCE POSSIBLE

Communication - The practice of

Customer service is at the heart of providing an environment in which exemplary patient care can flourish. Be aware of who your customers are. Greet them and offer assistance, help them solve their problems, and welcome them to come to you again if they need anything else. Practice CICARE when interacting with patients, their families, visitors, or internal departments. For patient/visitor care interactions, use the following:



UCLA Health

ciocare
Our commitment to excellence

We are committed to a compassionate, collaborative and professional environment of care for our patients, families and each other.

Connect with the patient, family and colleagues by addressing them by their preferred name.

Introduce yourself and your role.

Communicate what you are about to do, how long it will take, and how it will impact the patient, family or colleague.

Ask and anticipate questions from the patient, family and colleagues.

Respond with immediacy to questions and requests from the patient, family and colleagues.

Exit every encounter with empathy and share what will come next.

CICARE Phone Etiquette

Often the first impression patients and visitors get to the Medical Center is through telephone contact. Please help make that experience a positive one. Be courteous when speaking to callers. Make sure you identify yourself and the department when answering the phone. Make certain you write down the message and deliver it promptly. Practice CICARE phone etiquette during all phone interactions:



- Before answering the phone, discontinue conversations or activities that may be heard by the caller.
- Answer the phone within 4 rings.
- Identify your department, give your name, and offer assistance such as, “May I help you?”

Courtesy

Always exercise courtesy whenever patients, family members and visitors are present. This includes the cafeteria, patient and visitor waiting areas, hallways, elevators, treatment areas and patient rooms.

- Make eye contact and smile with patients, visitors and staff. Offer a greeting when passing, such as, “Good morning.”
- Allow patients and visitors to go first when getting in/out of elevators, doorways and in the hallways.
- Offer to help visitors get to their destination, or provide directions.
- Speak in moderate tones; be aware of the level of your voice (speaking loudly or yelling) in the hallways or elevators.
- Demonstrate professional behavior whenever patients, family members or visitors are present. Avoid lying down, sleeping, removing shoes, using hospital linen, eating, laughing or speaking loudly or disruptively. Avoid boisterous behavior in areas within earshot of patients and visitors.
- Maintain appropriate conversations, being respectful of patient and employee confidentiality. Conflicts or disagreements of a work-related or personal nature should be discussed where patients, their families or visitors are not present.
- In order to provide a safe environment of care, speak only English or the language of the patient/visitor you are helping. Arrange for interpretation services when needed.
- Personal cell phones or listening devices may only be used during break times and only in designated break areas.

Respect

- Respect privacy and dignity.
- Knock on a patient’s door before entering and ask permission to enter.
- Ask permission before examining a patient, and provide explanation of the examination or procedure.
- Do not make disparaging remarks about other departments or staff in front of patients or visitors.
- Respect individual and cultural differences.

Professionalism

Maintain professionalism in the presence of patients, their families, visitors or co-workers.

- Show pride by maintaining professional appearance while on duty. Adhere to organizational appearance standards. Wear name badge appropriately.
- Demonstrate an ongoing responsibility and commitment through good attendance and by being on time to work.
- Demonstrate pride in UCLA Health by keeping areas clean and safe.
- When within hearing of any patients, family members, visitors or staff members, keep comments about patients, co-workers, physicians or any part of UCLA Health positive and appropriate.
- Teamwork: recognize that each person has an area of expertise and that his or her contribution is valuable.



CHAPTER TWO: VOLUNTEER APPLICATION PROCESS

As UCLA Health volunteers, it is our responsibility to treat patients, families, visitors and each other with courtesy, dignity, respect and professionalism.

1. GENERAL INFORMATION

Position Description

All departments are required to have a written service description. Do not do anything you are not trained to do. Do not do anything you are not comfortable doing. Know what you can and cannot do.

Age Requirement

The age requirement to volunteer is 16 years old and older.

Volunteer Hours

You are required to make a 100-hour commitment as a volunteer. The minimum commitment is to volunteer 4 hours a week in your assigned department. The maximum hours per day is 6 hours. The maximum hours per week a volunteer can serve is 20 hours. The exact schedule must be agreed upon between you and your supervisor.



For each blood donation, you will receive:

- 6 hours for blood donation
- 12 hours for platelet donation
- 8 hours for double red cell donation

These hours do not go towards your department commitment. You can donate blood every 56 days or up to 6 times a year. Platelet donations take about two hours. Please see the UCLA Blood & Platelet Center website for eligibility requirements: www.gotblood.ucla.edu.

The UCLA Blood & Platelet Center has 2 locations: 1045 Gayley Avenue, Westwood and on the UCLA campus in the Ackerman Student Union. To contact them, call (310) 825-0888 and press 2. Hours of operation are: Monday from 10:00am-5:30pm, Tuesday through Friday from 8:00am-3:30pm, and the second Saturday of each month from 8:00am-1:30pm. Platelet donation hours are Monday through Friday from 7:00am-4:15pm, and every Saturday from 7:00am-11:30am.

Changing Departments

You must complete 50 hours of volunteer service in one department, in the same site/location, before becoming eligible to transfer to, or add-on another volunteer assignment. **Do not start another volunteer assignment without first notifying Volunteer Services.** A department will spend a good deal of time training you, and investing their valuable time in you. Please make the commitment and fulfill the 100-hour commitment. Some departments may have a higher hour requirement. Please check with the department supervisor about department-specific hour requirements. **If you quit or leave before fulfilling 100 hours, you will not be eligible to receive an hour verification letter, certificate of completion, and may be terminated from the program.**

If you have completed your commitment and would like to transfer, simply make an appointment with your volunteer coordinator to discuss available opportunities. Students volunteering in the Ronald Reagan UCLA Medical Center (Westwood) may walk-in without appointment Monday – Thursday from 2:00pm – 3:00pm. Santa Monica volunteers should make an appointment with their designated coordinator.

Sign-In Requirements

It is critical that you sign-in and sign-out every time you are here to volunteer. These rules are for safety, legal and liability reasons. You are covered under the health system’s workers compensation plan only if you are signed in properly in the event of an injury. Additionally, if there is a disaster, we want to be able to locate you.

You will be trained to use the volunteer computer to sign-in and sign-out and to retrieve important volunteer-specific messages. In order to get an accurate account of your total volunteer hours, please make sure you stop at a specified computer terminal to sign-in before going to your assigned area and sign-out before leaving to go home.

Volunteers who are offsite or do not have access to one of our computer terminals, must log in hours through our VOLGISTIC VICNET program. This program is available from any internet-connected mobile or computer. If you are at an offsite location, it is your responsibility to request VicNet Access from your initial volunteer onboarding coordinator.

Calling in Sick/Late Arrivals – Procedure

If you are sick, do **NOT** come to the hospital to volunteer. You can infect staff and more importantly, our patients. If you are expected, please call your supervisor to let them know you will not be in. They are relying on you. Please follow-up appropriately. If you are going to be late, please call the department and let them know. **If you have 3 unexcused absences, you will be terminated from the program.**

Leave of Absence

You are granted 1 leave of absence each calendar year. Please give ample time to inform your department, and the Volunteer Office of your leave. If you will be taking time off for summer or if our records indicate you have not volunteered for more than 90 days we will “inactivate” you, and you will be required to re-apply. Requests to extend leave of absence beyond 90 days will be denied. If you know you will be away for more than 90 days, please visit www.uclahealth.org/volunteer/forms to fill out a Leave of Absence form and turn your ID badge in to the Volunteer Services office before your leave.

Termination Policy

The Volunteer Services Department reserves the right to terminate a volunteer’s privileges if such action is in the best interest of UCLA Health and/or the volunteer. Such termination could result from the failure to comply with general UCLA Health rules and regulations. If you are not abiding by hospital and/or the Volunteer Department policies, you may be subject to suspension or termination as a volunteer. The following actions are cause for termination:

- HIPAA violation
- Outdated health records (Annual TB and annual flu)

- 3 month absence without taking a “Leave of Absence”
- Failure fulfilling your 4-hours per week requirement
- Failure to complete your 100 hour commitment
- 3 unexcused absences
- Falsifying health records
- Failure to call your department when you are sick or late
- Failure to show-up on scheduled days, or showing up on unscheduled days
- Falsifying hours
- Inappropriate or concerning behavior
- Other breeches/violations

Dress Code

Volunteers represent UCLA Health, and are often the patients’ first impression our hospital. Therefore, we ask that you adhere to the following uniform guidelines. Please ask the Volunteer Services staff if you have any questions.

The volunteer jackets are available for purchase in the Center for Health Sciences Bookstore. Most importantly, **BLUE JEANS, SHORTS, or any OPEN-TOED SHOES are PROHIBITED.** Please dress professionally and follow the guidelines in the policy. Uniforms must be washed regularly and be neat and clean. Please keep your uniform pressed and in good condition. Volunteers not wearing proper attire may be asked to leave their shift.

I. Uniform

Official volunteer jacket, buttoned up with a white collared shirt underneath. Light khaki (not olive or brown) pants with no holes or tears. **NO JEANS OR SHORTS ALLOWED AT ANY TIME IN ANY AREA.**

*Business attire is acceptable if required in your area. Please check with your supervisor.

II. Jewelry

Small sized jewelry is acceptable. Large or ornate jewelry is not appropriate.

III. Personal Hygiene

Clean hair, nails and clothing are basic and very important in the health care setting. All volunteers should employ appropriate use of cosmetics and deodorant and avoid excessive use of perfume, cologne and after-shave lotion.

IV. Hair

Hair will be neat, clean and trimmed. Long hair will be tied back, or a head covering will be worn in clinic areas. Facial hair must be neat, clean and trimmed.

V. Nails

Artificial nails or extenders are not to be worn in patient care areas. “Natural” nails are to be kept clean and neatly trimmed to ¼ inch long. Polish is to be in good repair with no nail “jewelry”. Nail length is not to interfere with the job or pose a hazard to the patient or another employee.

VI. **Clothing**

Clothing must be clean, well-fitting and wrinkle-free. Under garments must be worn at all times.

Unacceptable clothing includes: tight fitting garments, shorts, skirts more than 2" above the knee, sweat pants, Capri pants, leggings, sheer or crochet type fabrics, caps and backless, shoulder-less, spaghetti strap, halter, or tube tops. **Unacceptable pants include:** too tight or loose fitting, below the waist and touching the floor.

VII. **ID Badges**

Badges issued by Volunteer Services and the Security Department must be worn at all times displayed on the upper one-third of the body, above the waist, picture facing forward. It must be clearly visible and without marking, defacement or pins. You must always identify yourself as a VOLUNTEER when asked your job title or position.

VIII. **Footwear**

Closed-toed, soft-soled tennis shoes (preferably white). No backless shoes. Stockings or socks must be worn at all times. Shoes must be tied. Thongs, beach shoes, deck shoes, high heels and slippers are unacceptable.

Certificate of Completion

You must volunteer 100 service hours to be eligible to receive a certificate of completion. Upon completion of 100 hours AND returning your volunteer ID badge to the Volunteer Services office, the volunteer must fill out a request form -

<https://www.uclahealth.org/Volunteer/Workfiles/Hours%20of%20Verification%20and%20Awards%20Form.pdf> - and turn it in to the Volunteer office. Please expect 2 weeks to process your request.

Hours Verification

Upon completion of 100 hours AND returning your volunteer ID badge to the Volunteer Services office, Volunteer Services office can provide verification of hours stating the period of time you volunteered, the total number of hours, and the capacity in which you volunteered.

Letters of Recommendations

You must volunteer 100 hours to be eligible to request a letter of recommendation. Letters of recommendation are at the discretion of the volunteer supervisor and they are NOT obligated to write letters of recommendations. Keep in mind that 100 hours is Volunteer Services minimum commitment and may not warrant a letter of recommendation, but rather verification of hours. Verification of hours of when or where you volunteered (department or hours) will be available until you meet the 100-hour commitment.

Letters of recommendation should be requested within 12 months of completion of your volunteer service. Please be considerate and give your supervisor ample time to produce your recommendation.

The letter of recommendation is based on your performance from the supervisor of your assigned area. Build a rapport with your supervisor. The letter comes from your supervisor because they see first-hand your skills, commitment, and work ethic. The volunteer office does not necessarily know your skills.

Student Awards

Each year, the UCLA Medical Center Auxiliary recognizes student volunteers with awards. Information will be emailed to all active volunteers in late January. To be eligible, a student must have completed 150 hours of

volunteer service in a calendar year. Interviews are conducted with finalists, and winners are announced in late spring and recognized at a special Auxiliary event. High school students are not eligible.

2. HEALTH CLEARANCE AND VACCINATION REQUIREMENTS

UCLA Health requires the following vaccinations and tests from each incoming volunteer: Tuberculosis, MMR, Varicella, Tdap, and Flu (during flu season); Hepatitis B may be required in certain departments. You cannot volunteer in any department without having proof of immunity against these diseases.

Tuberculosis Screening (Mandatory + Required ANNUALLY)

All volunteers must show *proof* of **two** negative PPD skin tests **OR one** QuantiFERON Gold (t-spot) blood test.

If you obtain two PPD skin tests, the *first* must have been administered within the past 365 days and the *second* must have been administered within the last 90 days prior to volunteering. If obtaining the **QuantiFERON Gold (t-spot) blood test, it must have been administered within the last 90 days** prior to volunteering.

If you are a **UCLA student**, then you may receive the 2-Step TB skin tests or QuantiFERON Gold blood test from Arthur Ashe Student Health & Wellness Center on the UCLA campus. UCLA students are required to have their health clearances done at the Arthur Ashe and obtain a free letter from the Ashe Portal under “Messages” – this letter will clear you of all your requirements (including MMR and Varicella, noted below).

All **Non-UCLA Students** may go to their own physician, urgent-care center or free clinic to obtain the 2-Step TB skin test or QuantiFERON Gold blood test.

If you have had a history of positive TB skin test and have received prophylactic medical treatment, please bring proof of positive TB skin test and diagnosis of a negative chest x-ray within the past 90 days to the volunteer coordinator. Chest x-rays are valid for up to 5 years, but an additional TB Symptom Questionnaire must be completed annually. The TB Symptom Questionnaire is available in the Volunteer Services Department.

If you go out of the country for a vacation, you may have to get another TB skin test or chest x-ray upon your return. You may discuss this with your family doctor.

Why is Two-Step Testing Conducted?

Two-step testing is useful for the initial skin testing of adults who are going to be retested periodically, such as health care workers or nursing home residents. This two-step approach can reduce the likelihood that a booster reaction to a subsequent TST will be misinterpreted as a recent infection.

MMR Vaccination (Mandatory)

All volunteers must **show proof of 1st and 2nd MMR vaccinations** prior to volunteering. Blood titers indicating immunity to MMR are also accepted if the volunteer does not have the official dates of vaccination.

Varicella Vaccination – Chickenpox Vaccine (Mandatory)

All volunteers must **show proof of 1st and 2nd Varicella vaccinations** prior to volunteering. Blood titers indicating immunity to Varicella are also accepted if the volunteer does not have the official dates of vaccination. If you had the chickenpox disease, **you must show documentation of a “titer” blood test showing positive immunity.** History of chickenpox or indication of “Had Disease” on immunization records will NOT be accepted.

Tdap – Submission of a Consent of Declination Form for the Tdap vaccine (Mandatory)

The California Department of Public Health (CDPH) recommends that all health care personnel, particularly those who have direct contact with infants and pregnant women, be immunized with Tdap to protect their patients and themselves from Pertussis. Pertussis (whooping cough) is highly contagious and is spread by inhalation of respiratory droplets or aerosols. According to policies set by UCLA Health, all volunteer applicants must either sign a consent or declination form for obtaining the Tdap vaccine. Either form must be brought to your Check-in Day, to be collected by Volunteer Services personnel. Those who agree to be vaccinated for Tdap must sign the consent form and bring it to the session; those who instead decline to be vaccinated must sign and bring the declination form.

Immunity from Pertussis disease is not long lasting and immunity from the vaccine only lasts about 10 years; hence the need to vaccinate most adults with Tdap now that the vaccine has been available since June 2005.

Flu (Seasonal; Annually November 1st – April 30th)

Flu season is November – April. Annual proof of flu vaccination is required during flu season. Volunteers must show proof of flu shot to volunteer during flu season. *Volunteer Services respects individual volunteers’ decision to decline the flu shot.* Declining the flu shot, however, will mean those individual volunteers will not be able to actively volunteer for the duration of the flu season and must wait until May (or health system approved date) to begin volunteering again. Volunteers will need to submit a Leave of Absence if declining the flu shot and temporarily halting volunteer services until May.

Other Helpful Vaccinations (Recommended for some areas)

Hepatitis B Vaccination

Due to possible exposure to blood or other potentially infectious material, it is **recommended** but not mandatory that you receive the Hepatitis B vaccine series in areas, e.g. all Dental areas, ER, Children’s Health Center or Child Life/Child Development.

CHAPTER THREE: KEY MEDICAL CENTER POLICIES AND HIGHLIGHTS

1. PATIENT CONFIDENTIALITY

Every patient has a right to privacy and it is every employee's responsibility to protect that confidentiality. This means keeping information about patients' health care private. Both federal law (the Health Insurance Portability and Accountability Act or "HIPAA") and California state law require the protection of all Patient Identifiable Health Information, including all identifiers, images and other information which could be used to determine the identity of a patient. The privacy laws apply to all forms of patient health information including, paper, electronic and verbal information.



Social media "sharing" on sites such as Facebook, Twitter, etc. must also be avoided to help protect patient confidentiality. Sharing patient pictures, names, ID numbers is a violation of privacy. Volunteers are required to only use or access that amount of patient information that is minimally necessary to complete a task, responsibility or function. Volunteers are responsible to only use and access information on patients for whom they are providing care, or which they need the information to complete a task that is part of their responsibilities.

Failure to comply may lead to disciplinary, academic, or legal action against the volunteer and UCLA Health.

Confidential information includes a wide variety of information about a patient's health care. Examples of confidential information include:

- Patient identifiers such as medical record number, name, date of birth, Social Security Number, address, phone number, contact information, photographic images and any other unique code or characteristic that could be used to identify an individual patient
- Details about illnesses or conditions (particularly AIDS, psychiatric conditions, genetic testing or alcohol/drug abuse)
- Information about treatments
- Health-care provider's notes about a patient
- Patient billing information
- Conversations between a patient and a health-care provider

General patient information in the facility directory such as patient name and condition may be released as provided by California state law and federal privacy regulations without the patient's specific authorization unless the patient requests that they not be listed in the facility directory or census. Your department may have special rules regarding when to release this information. We do maintain all patient information with appropriate confidentiality controls.

At the time of admission or at the first outpatient direct service encounter, each patient receives a "UCLA Health Notice of Privacy Practices" which explains how UCLA Health uses patient information, and the rights the patients have over their own health information.

Patients have certain rights granted under federal and state law to control their protected health information, including the right to access and receive a copy of their health information, request addendums to or changes to their health information, request restrictions on how and to whom their information is used or disclosed, request alternate methods for communicating with them, and to obtain a list of individuals or organizations to whom UCLA Health has provided access to their information. These rights apply to both the patient's medical and billing records.

2. ABUSE RECOGNITION AND REPORTING

Every volunteer has the obligation to look for, recognize, and report suspected or actual abuse of patients. The abuse may be child abuse, elder abuse, intimate partner abuse (domestic violence), or abuse from an assault. The following conditions may alert you to the fact that abuse may be occurring:

- There is no explanation for the injury, or the explanation does not seem believable
- There has been a delay in seeking medical treatment
- The patient has a previous history of injuries or the injuries are in different stages of healing
- The patient's behavior changes or is inappropriate when in the presence of family or significant others
- Other family members do not allow the patient to speak for him or herself

If you suspect or have knowledge of abuse to a patient, please contact your supervisor.

CHAPTER FOUR: AGE SPECIFIC GUIDELINES AND CARE OF SPECIAL PATIENT POPULATIONS

In order to assure that each patient's care meets his or her unique needs, volunteers who interact with patients as part of their job must develop skills or competencies for delivering age appropriate communications, care and interventions. People grow and develop in stages that are related to their age and share certain qualities at each stage. Patient care providers use different types of communication, care, and interventions with patients of different age groups and populations. By adhering to these guidelines, volunteers can build a sense of trust and rapport with patients and meet their psychological needs as well. Age-specific guidelines are as follows:

1. NEONATES (LESS THAN 30 DAYS)

- Provide security and ensure a safe environment.
- Involve the parent(s) in care.
- Limit the number of strangers around the neonate.
- Use equipment and supplies specific to the age and size of neonate.

2. INFANTS (GREATER THAN 30 DAYS & LESS THAN 1 YEAR)



- Use a firm direct approach and give one direction at a time.
- Use a distraction, e.g., pacifier, bottle.
- Keep the parent(s) in the infant's line of vision.
- Use equipment and supplies specific to the age and size of infant.

3. PEDIATRICS (GREATER THAN OR EQUAL TO 1 YEAR & LESS THAN 12 YEARS)

- Give praise, rewards, and clear rules. Encourage the child to ask questions. Use toys and games to teach the child and reduce fear.
- Always explain what you will do before you start. Involve the child in care.
- Provide for the safety of the child. Do not leave the child unattended.
- Use equipment and supplies specific to the age and size of the child.

4. ADOLESCENTS (GREATER THAN OR EQUAL TO 13 YEARS & LESS THAN 18 YEARS)

- Treat the adolescent more as an adult than a child. Avoid authoritarian approaches and show respect.
- Explain procedures to adolescents and parents using correct terminology.
- Provide for privacy.

5. ADULTS (GREATER THAN 18 YEARS AND LESS THAN 65 YEARS)

- Be supportive and honest, and respect personal values.
- Support the person in making health care decisions.
- Recognize commitments to family, career, and community.
- Address age-related changes.

6. GERIATRICS (GREATER THAN OR EQUAL TO 65 YEARS)

- Avoid making assumptions about loss of abilities, but anticipate the following:
 - Short term memory loss
 - Decline in the speed of learning and retention
 - Loss of ability to discriminate sounds
 - Decreased visual acuity
 - Slowed cognitive function (understanding)
 - Decreased heat regulation of the body
- Provide support for coping with any impairments
- Prevent isolation; promote physical, mental, and social activity. Provide information to promote safety.

7. CULTURAL AND RELIGIOUS DIVERSITY



All patients have the right to care that is sensitive to, respectful of, and responsive to their cultural and religious/spiritual beliefs and values. An assessment of patients must include cultural and religious practices in order to provide appropriate care to meet their special needs and to assist in determining their response to illness, treatment, and participation in their healthcare.

To comply:

Be self-aware; know how your views and behavior is affected by culture. Appreciate the dynamics of cultural differences to anticipate and respond to miscommunications. Seek understanding of your patient's cultural and religious beliefs and value systems. Determine their degree of compliance with their religion/culture (do not assume). Respond to their special needs, which may include:

- Food preferences
- Visitors
- Medical care preferences
- Rituals
- Gender roles
- Eye contact and communication style
- Authority and decision making
- Alternative therapies
- Prayer practices
- Beliefs about organ/tissue donation



CHAPTER FIVE: ENVIRONMENT OF CARE

1. EMERGENCY MANAGEMENT

Department Plans

Every department has their own specific disaster plan. Volunteer Services' disaster plan is in the volunteer department. In a disaster, wait for instructions.

Overhead Emergency Pages

Emergency overhead pages are used at the Medical Center to alert staff to potential emergency situations and to summon staff who are responsible for responding to specific emergency situations. You may hear the following emergency pages while you are working:

- CODE **RED** – Fire
- CODE **BLUE** – Medical Emergency
- CODE **TRIAGE** INTERNAL or EXTERNAL – Disaster
- CODE **ORANGE** – Hazardous Material Spill or Release
- CODE **PINK** – Infant Abduction
- CODE **PURPLE** – Child Abduction
- CODE **GRAY** – Abusive or Combative Person
- CODE **SILVER** – Person with Weapon/Hostage Situation

Building Evacuation Locations

- RRUCLA and RNPH – South side of the medical center between the Resnick NPH entrance and the Medical Plaza Buildings
- Center for Health Sciences – the corner of Tiverton and Le Conte
- Medical Plaza – between 300 Med Plaza and Westwood Plaza
- Stein Eye Institute – JSEI Plaza (Grassy area west of Doris Stein)
- SMUCLA – 16th St. hospital entrance and the Harman Gardens (grassy area outside of the cafeteria)

2. FIRE SAFETY

The RRUCLA Medical Center, RNPH, and SMUCLA Medical Center have fire response procedures that all staff and volunteers must know and be prepared to implement in order to protect patients, co-workers, themselves, and property from real or suspected fires.

a) Fire Evacuation Routes/Procedures



- Fire doors, corridors and stairs must always remain clear, unobstructed and free from storage to allow for safe evacuation during an emergency.
- There are always two different exit routes out of your work area or floor.
- Evacuation Routes, corridors and stairwells are clearly marked by “EXIT” signs.
- Emergency stairwells are located in the pods and once entered, you can only exit on the first floor.

- Building Core stairwells allow staff to travel between floors and are called communicating stairwells.
- Do not use elevators during a fire. Use the stairs.
- Do not use stairwell as an exit to the roof.
- In patient care areas within the Medical Center, it is preferable to “defend-in-place” by closing doors unless the fire or smoke is directly threatening patients. If evacuation is necessary, evacuate horizontally, staying on the same floor but proceeding past a set of fire doors in the corridor. If you must leave the floor, try to go vertically down a few floors, but stay in the building. Follow instructions from supervisor.
- In the Medical Plaza buildings, evacuate the entire floor or area.
- During construction in which exits are blocked, evacuation routes are altered, or fire safety systems are compromised, special compensatory measures are implemented, called Interim Life Safety Measures (ILSM).
- Use readily available materials such as beds and blankets to assist with patient evacuation efforts.

b) Reporting a Fire (Code Red)

- Go to the nearest fire alarm box; swing pivot to break the glass, or pull handle down.
- Go to the nearest phone and dial “#36”. State the following information: 1) This is (your name) reporting a fire at: (location/engineering room number) 2) Describe the type of fire (i.e. smell smoke, see smoke, see flames etc.)
- If it is safe to do so, go back to the fire alarm box to direct responding personnel.
- “911” calls and fire alarm pulls are received by UCLA Police Department dispatch and then forwarded to the Los Angeles Fire Department.
- “#36” calls go to the Medical Center operator who activates the proper Fire Response Group.

c) Emergency Actions (R-A-C-E)

- **REMOVE** patients and personnel from the immediate fire area if it is safe to do so.
- Activate the **ALARM** using the Fire Alarm Box and/or call 911 and #36. Notify a supervisor and others in the area. Fire alarm activation gives a visual and audible alarm in area and notifies the police department and the fire department.
- **CONTAIN** the fire and smoke by taking advantage of the building’s compartmentalization features by closing all doors to the immediate fire area. Do not lock them.
- **EXTINGUISH** the fire with the proper fire extinguisher only if safe to do so.
- Or, **EVACUATE** as necessary

d) How to Use a Fire Extinguisher (PASS)

While holding the fire extinguisher upright:

- **Pull** pin
- **Aim** at the base of the fire
- **Squeeze** lever
- **Sweep** side to side

e) Important Points to Remember:

- Code Red means that there is a fire reported in the building.
- Know the location of fire safety equipment in your work area. Know where the alarms, exits, extinguishers, etc. are located.
- If you are not at the fire alarm's point of origin, still continue to listen to overhead pages to obtain updates.
- The Fire Response Group consisting of representatives from Administration, Environmental Services, Campus Facilities Management, Health System Facilities, Respiratory Therapy, Safety and Security who are prepared to assist with fire suppression and evacuations. In addition, in the in-patient care areas, representatives from adjacent areas respond to the fire alarm location with a fire extinguisher to assist.

f) Smoking Regulations



Effective January 2nd, 2014, the University of California prohibits smoking and the use of tobacco products at all UC facilities including RRUCLA Medical Center, SMUCLA Medical Center and RNPH, whether owned or leased. Smoking, the use of smokeless tobacco products, electronic smoking devices (e.g., e-cigarettes), and the use of nicotine products not regulated by the U.S. Food and Drug Administration for treating nicotine or tobacco dependence are strictly prohibited in indoor and outdoor spaces, including parking lots. Smoking is prohibited on the hospital grounds and UCLA campus. At RRUCLA, smoking is allowed south of Le Conte Avenue and W. Gayley Avenue. At SMUCLA, smoking is allowed on the sidewalk at Wilshire Blvd. next to Staples up until the driveway to the 1223 16th Street building, beyond the Arizona parking structure, and across the street on 15th Street.

3. HAZARDOUS MATERIALS

Hazardous spills can present an enormous danger to patients and staff. Learn to be continuously aware of any hazardous materials in your area and know the risks involved.



a) Responding to a Major Chemical, Biological or Radioactive Material Spill

- Remove yourself and others from the area of the spill.
- Report to the supervisor.

4. SAFETY AND BODY MECHANICS

Be aware of the risks involved in your job and set an example of safety awareness and safe practices for coworkers.

a) General Safety Rules

- Approach all aspects of your job with safety in mind.

- Use good body mechanics at all times.
- Keep hallways and corridors clear.
- Become familiar with safety hazards and evacuation routes in your work area.
- Report to your supervisor any unsafe conditions, situations or practices.

b) Injury and Illness Prevention Program

The Injury and Illness Prevention Program is designed to maintain a safe environment for visitors, patients, and employees. Volunteers are expected to be knowledgeable about the components of this program:

- **Volunteer Reporting of Unsafe Conditions:** Volunteers are responsible for immediately reporting any unsafe condition or potential hazard to their supervisor. Supervisors are expected to evaluate the concerns and implement corrective actions or direct the problem to the Safety Office.
- **Back Safety:** Volunteers should be knowledgeable of the back safety risks involved when performing their job functions, and proactively prevent unsafe working conditions and job practices. Back safety training can be provided upon request by the Safety Office.
- **When doing lifting jobs, remember:**
 1. Size up the job before beginning and plan how to accomplish it. Ask for help. (“Life twice rule”)
 2. Use the large muscles of the legs, hips and arms. They are the strongest in your body.
 3. Avoid bending at the waist. Maintain normal curves in your back by bending at the knees and hips.
 4. Use a broad base of support by keeping feet shoulder width apart. This will increase your stability and balance.
 5. Avoid twisting your back when carrying or lifting. Lift up your feet to turn.
 6. Keep loads close to your body. Avoid over-reaching.
 7. Avoid lifting heavy objects higher than your waist whenever possible.
 8. Use a stool or ladder to reach items above shoulder height. Consider moving frequently used items to waist level.
 9. Avoid carrying heavy objects long distances, use a cart if possible.



- **Injuries:** All volunteers who incur an injury while providing service should report the injury to their supervisor as soon as possible.
 - For volunteers who receive a needlestick, follow these procedures: 1) Flush with water 2) Report the incident to your supervisor. Your supervisor will sign an Industrial Injury Referral Form and a Needlestick Form 3) Call the Exposure Page Number for direction. Dial 231 and page #93333. After-hours, an employee will be directed to the Emergency Department for care or proceed directly there yourself.

- **Workers Compensation Program:** When an injury or illness results from service or service conditions, the Workers Compensation (Workers Comp) Program provides assistance for the volunteers’ prompt recovery. Volunteers must be logged-in and providing service, at time of injury or illness.

c) Transporting a Patient

Make sure you verify that the patient you are about to transport is the right person. Check the board on the wall at the nursing station to confirm the patient's room number. When entering the patient's room, ask the patient's name. Check the name on the patient's ID band against the name on the chart.

When you arrive at a destination, **never leave the patient unattended**. Do not leave until a staff member has acknowledged receipt of the patient and has taken responsibility for the patient. For discharges, never leave a patient until someone has arrived to claim the patient.

5. SECURITY

Personal security for oneself and one's work environment is influenced by knowledge of surroundings and available resources.

General Consideration

- All employees, staff, physicians, and volunteers are required to wear a hospital issued picture identification badge at all times while in the RRUCLA Medical Center, SMUCLA Medical Center, Stewart and Lynda Resnick Neuropsychiatric Hospital, and 200 & 300 Medical Plazas.
- Call the Security Command Center (x77100) immediately to report security incidents against patients, visitors, staff or property requiring Security Officer involvement.
- To contact the UCLA Police Department: For emergencies, dial 911 from any campus phone, from Off-campus UCLA phones located in Westwood, (i.e. 924 Westwood, Oppenheimer, Wilshire Center, Brentwood Labs), dial 8+911. For non-emergencies, dial x51491 from any UCLA phone.
- There is safety in numbers, walk with groups of people.
- Intimidation, harassment, assault and battery in the workplace violates the Campus Workplace Violence Policy and state law and must be reported to your supervisor immediately.
- Events to be reported include: Alleged Assault and/or Battery Against Health Care Workers (report form by same name), crimes in progress or events of crime after the fact (call UCLA Police Department and/or use the on-line event reporting system or complete the "Confidential Report of Incident/Occurrence form").
- During established hours, building access is monitored to verify authorization to enter.
- The Westwood Plaza entrance to the RRUCLA Medical Center is designated as the after-hours access point for staff and visitors. A security checkpoint will operate from 9pm-6am and all persons entering the hospital are required to show identification. The RNPH and Mattel Children's Hospital entrances are open from 6am-8pm.
- The 16th Street entrance to the SMUCLA Medical Center is designated as the after-hours access point for staff and visitors. All persons entering the hospital are required to show identification. The 15th Street Orthopaedic wing entrance to the medical center is open 6am-9pm.
- Police and Security respond to alarms initiated by unauthorized persons to sensitive areas, duress alarms located at various areas, and staff assistance requests throughout the facility.
- All volunteers are to be alert and politely contest anything carrying, transporting or concealing an infant or child during a Code Pink or Purple overhead page (Infant or Child Abduction).

CHAPTER SIX: PATIENT SAFETY

1. EVENT REPORTING

An “event” at UCLA Health is considered to be an unusual occurrence and should be reported to your supervisor. Examples are:

- An incident or action that is not consistent with the routine care of a patient
- A major violation of established procedure
- A disturbance or unfavorable situation that could disrupt UCLA Health functions or damage UCLA Health’s public relations

CHAPTER SEVEN: INFECTION CONTROL

Infection Control education is required upon hire and annually thereafter as mandated by the OSHA Blood borne Pathogens rule.

Infections occur in many settings. If an infection occurs during a patient's care, it is called a Health care associated infection. If the infection was incubating prior to the patient's entry in the health care system, it is called community associated. Infection control programs are designed to protect patients from healthcare associated infections. According to estimates from the Centers for Disease Control and Prevention (CDC), each year nearly two million patients in the United States get an infection in hospitals, and about 90,000 of these patients die as a result of their infection. Infections are also a complication of care in other settings including long-term care facilities, clinics and dialysis centers. Infection Control is EVERY Healthcare Workers job. For example, after a patient has been discharged, a room used for airborne isolation must be left vacant for one hour.

1. STANDARD PRECAUTIONS

Standard precautions are work practices that help prevent the spread of infectious disease in health care facilities. They include:

- Hand washing before patient contact and after contact with the patient or the patient's environment
- Use of protective barriers or Personal Protective Equipment (PPE) such as gloves, gowns, masks, and goggles for anticipated contact with any bodily secretion or fluid.

Standard precautions, are the best protection against infection. Standard precautions are recommended for use with all patients, since it is not always possible to tell who is or may become infected. Standard precautions help protect health-care workers and staff, patients and their families, as well as volunteers.

If you have exposure to a blood borne pathogen or receive a 'needle stick', follow this procedure:

- Flush the area with water
- Report the incident to your supervisor. Your supervisor will sign an Industrial Injury Referral Form and a 'needle stick' form.
- Go to OHF during business hours or the ER after hours, with completed paperwork and any applicable patient ID information.
- If initially seen in the Emergency Department, report to Occupational Health Facility the next business day.

Isolation

Volunteers should AVOID entering any isolation rooms. Personal Protective Equipment (PPE) training is required to enter isolation rooms. Do not enter isolation rooms if you do not have PPE training. Please see the chart below for isolation room precautions and the corresponding colors.

Droplet Precautions (Orange)
Contact Precautions (Red)
Contact/Spore Precautions (Pink)
Airborne Precautions (Green)
Neutropenic Precautions (White)

Volunteers should never enter these rooms for the three following reasons:

1. They are patients that have an infectious disease and do not want to spread the disease to anyone else.
2. It has not yet been determined if the patients have an infectious disease and health-care workers are being cautious until results are confirmed.
3. They may be patients that are immune-suppressed (perhaps they have cancer or HIV) and the use of mask protects the patient from exposure to additional germs.
4. **NO ONE** may wear isolation gowns, clinical (latex) gloves, masks (even if just hanging around your neck), shoe covers, surgical caps (any type) outside the patient room, away from their work area (such as the OR), to the cafeteria, crossing the street, shopping, etc.

Types of Infection Transmission



1. **CONTACT/SPORE** – These organisms are spread by touch. They are carried along by objects, hands, etc. Ex: MRSA, VRE, and C. difficile
2. **DROPLET** – Large particles droplets that can be generated by coughing, sneezing, etc. spread these organisms. Ex: Pertussis, meningitis, German measles
2. **AIRBORNE** – These organisms are spread by droplet nuclei < 5 microns in size that remain suspended in air and can be disbursed widely by air currents. Ex: Pulmonary tuberculosis, Varicella & Herpes Zoster, and Measles.



Reminders

You are protecting yourself and you are also protecting the staff and patients around you by following standard precautions. You must not wear gloves outside a patient's room. You may get a phone call and pick up the receiver with your gloves on. Then you have exposed many other people to unwanted germs.

Basic Questions

What are the basic things you need to know if you are new to a floor and you want to make sure you are properly protected?

1. Where the Personal Protective Equipment, like gloves, masks, gowns are located?
2. How to wear a mask? Please note, volunteers do not wear masks that require fitting (airborne, droplet)
3. What is your glove size?

4. Where the phones, fire extinguishers, and exits are located?
5. Where the emergency eye wash and emergency showers are located?

Mandatory Reporting

One of the most critical elements of your assignment is to make sure the patients are safe. IF you hear a patient reveal anything that might compromise their safety, such as issues involving rape or abuse or suicide, please report that to the nurse. This is your obligation. You may find that a patient confides in you regarding certain things. If it has something to do with their well-being or safety, you must report it.

NPO (Latin abbreviation for: *Nothing by mouth*)

These patients may not have anything by mouth, not even water. This is usually because they are preparing to go into surgery. Always check with the nurse before giving a patient food or water.



2. HAND HYGIENE

Numerous studies show that proper hand hygiene reduces the spread of bacteria in various healthcare settings. Guidelines developed by the Centers for Disease Control and Prevention (CDC) and infection-control organizations recommend that healthcare workers use an alcohol-based hand rub (a gel, rinse or foam) to routinely clean their hands between patient contacts, as long as hands are not dirty.

Use an alcohol-based hand-rub for routinely cleaning your hands

- Before having direct contact with patients
- After having direct contact with a patient’s skin
- After having contact with body fluids, wounds or broken skin
- After touching equipment or furniture near the patient
- After removing gloves

Here are some tips on how to use an alcohol-based hand rub

- Apply 1.5 to 3 ml (about the size of quarter) of an alcohol gel or rinse to the palm of one hand, and rub hands together;
- Cover all surfaces of your hands and fingers, including areas around/under fingernails; and
- Continue rubbing hands together until alcohol dries (about 15-25 seconds)
- Make sure your hands are completely dry prior to putting on gloves.
- Wash your hands with soap and water when you feel a “build-up” of emollients on your hands

Wash your hands with plain soap and water; or with antimicrobial soap and water if:

- Your hands are visibly dirty
- Hands are visibly contaminated with blood or body fluids
- Before eating
- After using the restroom

To effectively wash your hands with soap and water:

- Wet hands first with warm water (avoid HOT water);
- Apply 3 to 5 ml of soap to hands;
- Rub hands together for at least 20 seconds;
- Cover all surfaces of the hands and fingers
- Rinse hands with water and dry thoroughly
- Use paper towel to turn off water faucet

