

Volunteer Services Handbook



WELCOME TO ST. LUKE'S

Thank you for choosing to volunteer at St. Luke's Hospital. As a volunteer, you are part of St. Luke's Volunteer Services Department, which coordinates activities for more than 200 volunteers. You will have the opportunity to learn, meet new people and use your talents and skills to help others. We are looking forward to working with you and are excited to welcome you into the St. Luke's community.

Mission of the Volunteer Team:

The Volunteer Services Department at St. Luke's is responsible for supporting and enhancing the services provided to our patients, family members, visitors and staff. This is accomplished with well trained caring volunteers whose time, knowledge and abilities are donated to help with this mission.

St. Luke's Mission Statement:

The Patient Above All Else.

St. Luke's Vision Statement:

To be the provider and partner of choice for the region.

You are a part of this important mission and vision. We are glad to have you with us!

Please feel free to contact me with your questions and comments.

Mary Matlack

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Director of Volunteer Services

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INTRODUCTION

This booklet is prepared to help you learn more about St. Luke's and your responsibilities as a volunteer. Please read through the materials and become familiar with the information.

Placement opportunities will be discussed during your orientation session that is scheduled with the Director of Volunteer Services.

A tuberculosis screening and a State of Minnesota Background Clearance (adults & students only) are required for all new St. Luke's volunteers. Both are provided free of charge by St. Luke's. Call Occupational Health at **249-6822** to schedule your tuberculosis screening test. You will also need to complete a volunteer application and both reference check information sheets must be returned to us before volunteering.

PRIVILEGES AND BENEFITS

PARKING

Free parking is provided in the St. Luke's Building A parking ramp on Level 1 (ground level—1st Street). This lot can be accessed from First Street between 10th and 11th Avenues East. You will **NEED** to have a parking permit in your window for the security staff to see. You can get your permit in the Volunteer Office.

MEALS (Adults)

On days you volunteer for **three or more hours**, a courtesy meal ticket is provided in the amount of \$6.00 for use in the hospital cafeteria, located on the third floor. Meal tickets are available in the Volunteer Services locker room. The tickets can only be used on the day you are volunteering. You must wear your volunteer uniform and nametag when using a meal ticket. Please fill in the ticket with your name and date.

PHARMACY

Northland Pharmacy offers 20% over cost on over-the-counter drugs. You must wear your uniform and name tag to use this discount. Northland Pharmacy is located in the Northland Building on the 2nd floor just across the skywalk.

EDUCATION

Volunteers are invited and encouraged to take part in most educational programs offered by St. Luke's. Notices of programs are posted in the Volunteer Services Office or in the Main Artery. A special Education Day and luncheon is held in the spring for volunteers.

PRIVILEGES AND BENEFITS CONTINUED....

FITNESS CENTER

There are discounted memberships available for St. Luke's Fitness Centers located at the Lakeview Building and Mount Royal Medical Clinic.

GIFT SHOP

Volunteers get a 10% discount on all purchases of regular priced merchandise in the Gift Shop. This excludes balloons, candy, cards, fresh flowers and magazines. This discount may not be used on sale merchandise

RECOGNITION (Adults)

Each spring, volunteers are recognized for their hours of service. Volunteers who have served over 100 hours receive a pin. Hourly bars are awarded for each additional 500 hours of service. Recognition is also given for years of service.

FUTURE RECOMMENDATIONS

The Volunteer Services Office keeps records of your volunteer service. The Director of Volunteer Services may be contacted to write recommendations for scholarships or school applications.

GUIDELINES AND PROCEDURES

REPORTING FOR SERVICE

When coming to volunteer, first report to the Volunteer Services Office, located on 3 East in the hospital. Lockers are available. Put your possessions in a locker. Put on your uniform and nametag. Sign in on the touch screen computer. If the screen saver is on, touch the screen on a corner to bring up the number pad. Use the same process to sign out. **Do not** leave valuables in the pockets of your uniform or unattended in any area. Cell phones are permitted during break times. Remember to leave the key in the locker at the end of your shift.

ATTENDANCE

Volunteers are assigned specific days and times for service. If you are unable to serve for any reason, call the **Volunteer Office** at 249-5344. Staff and patients rely on you and the tasks you perform, we hope you place a priority on your volunteer work. Failure to appear for scheduled volunteer assignments or frequent cancellations will result in termination as a volunteer.

GUIDELINES AND PROCEDURES CONTINUED....

DRESS AND APPEARANCE

The hospital provides you with a volunteer uniform and nametag. You may wear a skirt or slacks with the uniform. Shorts, skirts above the knee, leggings without a long top, blue jeans, baseball hats and low cut tops are **NOT** permitted.

Footwear should be clean, safe and comfortable. Do not wear sandals or open toed shoes without socks. You should appear neat, clean and well-groomed at all times. Avoid wearing dangling or noisy jewelry.

Do not wear perfume, scented lotions or aftershave as the fragrance may be irritating to other people. Long hair should be tied back when in patient care areas.

Your appearance should meet professional standards.

ILLNESS OR ACCIDENT

If you have an accident or become sick as a result of your volunteer work, immediately notify your supervisor and the Director of Volunteer Services. You may be treated in Urgent Care or the Emergency Department. We have insurance which provides secondary coverage to your personal coverage.

SMOKING

For the health of our patients, visitors, and our employees, St. Luke's is a tobacco-free Campus. This includes all areas on the grounds of the hospital and the clinics. You **MUST** be off the campus grounds to smoke.

HOSPITAL ETIQUETTE

We ask that all volunteers and staff to be considerate of patients and visitors. Because of the constant activity present in a hospital, we ask that you walk cautiously and keep to the right. Please talk quietly.

In order to protect patient dignity: If there is a patient on a stretcher in the elevator you are waiting for, please wait for the next elevator. When a stretcher is moved onto an elevator you are riding, ask the staff person if they would like you to exit. Use the mirrors located near the ceiling to watch for oncoming traffic.

FLOOR AND ROOM NUMBERING

St. Luke's is divided into an East and West Side. There are 6 floors on the East Side and 8 floors on the West Side. The first, second and third floors are the main corridors for crossing from East to West. The SLH Clinic Building and Building A can be accessed by walking East on the 3rd floor. The Lakeview Building, Northland Building, Pavilion Building can all be accessed by going East on the 2nd floor of the hospital

Refer to the St. Luke's Campus Map for the location of specific departments.

USING YOUR TALENTS AND SKILLS

Your special skills, interests and time commitment are matched with the St. Luke's needs. You may work directly with patients, families and visitors or in an ongoing role in a hospital department or clinic. The following opportunities are available:

ADMISSION SERVICES

Escort patients and visitors, run errands, return wheelchairs to proper departments and deliver patient mail.

Morning, Monday through Friday.

BREAST CENTER RECEPTION DESK

Greet patients and communicate information to them. Escort patients within the Breast Center. Call patients to remind them of upcoming appointments.

Morning and afternoon, Monday through Friday

CANCER CENTER WAITING AREA/INFUSION THERAPY

Greet and communicate information to patients and their families in the waiting area. Visit with patients and family members while they are waiting. Escort patients as needed. Keep waiting area presentable (coffee area, magazines etc).

Mid-day, Tuesday through Thursday.

CHAPLAINCY (Adult)

Call clergy to inform them when members of their congregations are hospitalized, hospital visits as requested with patients and additional tasks as requested.

Morning, Monday through Friday.

CLERICAL ASSISTANCE

Perform clerical duties as needed in a specific department.

Morning and afternoon Monday through Friday.

CLINIC VOLUNTEER

St. Luke's Medical Clinics. Help with office work and duties as requested by the clinic staff.

Morning and afternoon, Monday through Friday.

FLOWER DELIVERY

Log flowers in from florists and deliver flowers to patients in their rooms.

Afternoon, Monday through Friday.

GIFT SHOP CLERK AND CASHIER

Assist customers in making selections while paying attention to the other customers in the shop. Use cash register to ring up sales, clean shelves, mark and display merchandise.

Morning and afternoon, Monday through Friday.

USING YOUR TALENTS AND SKILLS CONTINUED....

HOSPICE CARE (Adult)

Provide services for patients and families through the Hospice program.
(Separate orientation required with Hospice coordinator)

INFORMATION DESK (Adult)

Answer the telephone, greet and direct visitors, sort mail.
Morning and afternoon, Monday through Friday

INTENSIVE CARE WAITING AREA

Greet and direct visitors, provide information about the unit and waiting area. Respond to questions and requests for information about St. Luke's and the Duluth community

Morning and afternoon, Monday through Friday

LIBRARY CART

Offer books and magazines to patients in their rooms, stock waiting areas with magazines.
Afternoon, Monday through Friday.

MESSENGER SERVICE

Sort and deliver mail to hospital departments and adjacent clinics.
Morning and afternoon, Monday through Friday.

FITNESS CENTERS

Greet patients, assist therapist and clerical duties.
Morning and afternoon, Monday through Friday.

NURSING UNIT

Provide nursing units with assistance in clerical support services and patient care.
Morning and afternoon, Monday through Friday

PHARMACY

File orders, photocopy, transfer labels, file records, box records, clean shelves
Morning and afternoon, Monday through Friday

SPECIAL AGENTS

Provide specialized visits and caring services to patients, families and visitors to St. Luke's
Late afternoon/evening, Monday through Friday.

SURGICAL AND PROCEDURAL CARE

Greet patients as they arrive for surgery/procedures, enter patient arrival time into the computer, escort families to patient bedside and doctor consultation rooms, assemble charts for the unit, answer phones, direct (escort if necessary) families and visitors to hospital locations.

Morning and afternoon, Monday through Friday.

Other duties and special requests may be requested by the Volunteer Office.

CUSTOMER SERVICE

As a volunteer, you have a unique opportunity to enhance St. Luke's commitment to provide the best possible service to everyone who enters. Whether these people are employees, patients, visitors, physicians, or vendors, they are the St. Luke's customers. At St. Luke's, Customer Service means treating everyone with whom we come in contact with caring, hospitality and dignity. Since you have the opportunity to create a powerful first impression on our customers, you play an important part in making St. Luke's a customer driven organization.

Here are some ways you can help:

When someone needs assistance, try to help the person or find someone who can. The Information desk, employees (identified with name badges) or any office staff can help you.

Always smile and greet people.

Break the ice with people. Introduce yourself; call people by their names.

Look at things from a customer's perspective. What would you like to see or not like to see? For instance: if you notice a scrap of paper on the floor, pick it up.

The hospital setting is stressful, please have patience and assist the best you can.

*Remember, that in your role as a volunteer, **you** are St. Luke's .*

CODE OF ETHICS

All medical care personnel, including volunteers, are bound by a code of ethics for the protection of the patients, and families we serve. The following rules **must** be observed:

Keep confidential the many things you see, hear or learn while volunteering. Even a patient being in the hospital is confidential information.

Learn the names and titles of persons in your assigned area and maintain a professional attitude at all times. Be accepting of the supervision of staff members.

Be a good listener, lending a sympathetic ear without offering advice. If someone has questions about symptoms, treatments, or a diagnosis, refer them to a staff member.

Only inquire about a diagnosis or facts of a case if it is necessary to perform your assignment.

Keep opinions about doctors or hospital staff to yourself.

When volunteering, don't ask your personal physician about your own health concerns.

Only persons professionally connected with a patient have access to patient records. You, patients or their families should not read charts or records.

If professional services are being given to a patient, wait until they are completed before entering the room. When entering a patient's room, knock softly, say their names and announce yourself and why you want to enter their room.

If you feel you have not been trained to do an assignment requested, decline the request.

While on duty, you must not promote any cause, religious, political or otherwise.

SAFETY AND HEALTH MANAGEMENT POLICY

It is a St. Luke's policy to provide a clean, safe and favorable environment for employees, patients, students, volunteers, physicians and the public, thereby contributing to a high quality patient care environment. Every reasonable effort is made in the interest of accident/injury prevention, fire protection and the preservation of health.

The goal of St. Luke's Safety and Health management policy is to **PREVENT** occupational accidents and injuries.

Employees, students, physicians and volunteers are expected to follow safe procedures and to take an active part, when necessary, in protecting themselves, patients, co-workers, visitors and St Luke's property. You are encouraged to detect and report to your supervisor or the Volunteer Office staff any hazardous conditions, practices and/or behavior and to make suggestions for correction. Responsibilities include the following:

- Follow the instructions of supervisors.

- Report all accidents, near accidents, injuries, work-related illnesses, special occurrences and other emergencies immediately.

- Submit recommendations for safety and accident prevention.

- Respond appropriately in case of fire or other emergency.

- Volunteers are required to demonstrate knowledge of safety policies and procedures annually.

- Demonstrate a good safety and health conscious attitude.

WHEELCHAIR USE

Volunteers **MUST** receive training from the St. Luke's staff before providing wheelchair transportation. Volunteers are only allowed to transport patients and visitors that can sit, stand and walk without assistance.

To assist a patient safely into a wheelchair:

- Set brakes on both wheels before seating the patient.

- Raise foot pedals upward to provide a clear entry to the chair.

- Hold chair handle with one hand and steady patient with your hand.

- After seated, gently lift patient's feet onto foot rests. Lift, do not squeeze or press any muscular part of the leg.

To transport:

- Release brakes.

- Use both hands and stand upright. Leaning into the chair strains lower back muscles.

- Use overhead mirrors to check hallway intersections.

- When possible, back wheelchairs into an elevator. If the front wheels catch in the doorway, bear down slightly on the handles to relieve weight from the front wheels.

HAZARDOUS SUBSTANCES

Products and chemicals are hazardous if they present any physical or health hazard to the people who use them. Examples are combustible flammable, unstable or radioactive materials. Injuries occur when an individual comes too close to the materials under the wrong circumstances. Other materials are hazardous because they cause illness or injury during use or as a result of exposure. Examples of these health hazards include chemicals which are carcinogenic (cancer producing), toxic agents, irritants, corrosives and agents which damage the lungs, skin, eyes or mucous membranes.

To be a health hazard, a potentially hazardous substance must come in contact with or enter the body. The routes of entry are skin contact, ingestion (swallowing), inhalation (breathing in). Depending on the route of entry, ill effects can include but are not limited to, rash, nausea, burn, cramps, cough, diarrhea, headache and dizziness. Different products or agents can result in different adverse health effects.

Know how to handle an emergency **before** it occurs. If a splash or other injury occurs:

Rinse affected skin thoroughly.

Flush eyes immediately, continuing for at least 15 minutes. If available use an eyewash station.

Notify your supervisor and complete an occupational accident report form.

MSDS (Material Safety Data Sheets)

At St. Luke's, every department and nursing unit has access to a MSDS for every hazardous substance used in that department. A MSDS is an informational sheet provided to the hospital/clinic by the manufacturer or supplier of the product. Its purpose is to provide individuals with information about the product and its safe use. The MSDS sheets are available to you at any time by asking the department you are volunteering in or the volunteer office.

If the proper steps are taken, products can be used safely.

Always read the product MSDS for instructions, precautions and warnings.

Always read the product label.

In general, do not mix products.

Wash and rinse hands thoroughly after use.

Wear gloves, goggles and other personal protective equipment if it is recommended by the MSDS.

Be Safe. Follow directions for any products.

ELECTRICAL SAFETY

It is our personal responsibility to use caution around electricity. By following the precautions listed below you can help prevent an accident or injury.

Report defective equipment immediately, tag it with specific problem and bring it for repairs to the Volunteer Office or the manager of the area you are working in.

Do not use extension cords. Approved power strips may be used.

Do not work near any electrical equipment or outlets when hands, counter, floors or equipment are wet.

Do not use any electrical equipment, appliances or wall receptacles that appear to be damaged or in poor repair.

Report all shocks immediately; even small tingles may indicate trouble and precede major shocks. Do not use the equipment again until it is inspected and/or repaired.

INFECTION CONTROL

The precautions listed below are to be followed by **ALL** volunteers. Volunteers never should come in contact with another person's body fluids (e.g., blood, feces, wound drainage, oral secretions, bile, vomit, etc.). Precautions are essential to prevent transmission of potentially infectious agents among patients, employees and visitors. Protective items, such as gloves, necessary to implement these precautions are used by employees when body fluids are present.

Hand washing is the single most important procedure for interrupting transmission of infections to patients employees. Hands should always be washed:

Before volunteering in patient areas or handling food products.

Following contact with patients or equipment.

After using the bathroom.

When leaving a work area.

After sneezing or coughing.

Before eating.

(After contact with blood, body fluids, or human tissue, even if gloves are worn).

Precautions for patients with airborne diseases

There is a "**Stop Sign Alert**" on the door.

Patients are in a private room

The door is closed.

Rooms labeled this way should not be entered.

BACK CARE

Impairment of the back and spine is the most frequent cause of activity limitation in persons under the age of 45. Back problems affect 80% of the population to some degree during their lifetime.

The majority of back problems are caused by an accumulation of abuse, misuse and neglect of the back over a long period of time.

The neglect, misuse and abuse factors are:

- Poor or declining levels of physical fitness.

- Static work postures, such as prolonged sitting without breaks, driving vehicles for long hours and a bent over posture.

- Bending and twisting of the back in the same movement.

- Poor lifting habits that place stress on the spine.

You own your back and are responsible for its care. Here are some helpful hints:

- Maintain a high level of physical fitness. It is very important to have good muscle strength, endurance and flexibility of your trunk and legs

- Since the back gets tired or strained when in any one position for prolonged periods, change or reverse your position frequently to relieve strain.

- If your job or hobbies require a lot of sitting, make sure you stand and move around at least every hour.

- If you drive vehicles long distance, stop and get out to stretch every hour or two. Stand and bend backwards 5-10 times and walk around the vehicle.

- Avoid bending at the waist, especially for prolonged periods. If you must bend, make sure you frequently stand straight and bend backwards 5-10 times to relieve the strain before your back gets tired and achy.

Use correct body mechanics that will relieve the stress on your back when lifting:

- Get a firm footing by keeping your feet apart.

- Keep your back upright and straight. Don't round your back into a flexed position.

- Bend your knees and lift with your leg muscles.

- Keep the load close to you. The closer to your spine, the less force the load exerts on your back.

- Avoid twisting your back when lifting. Pivot your whole body when turning.

- Learn to contract your abdominal muscles that help to brace your spine.

- Never** lift loads that are heavier than your safe capability. **Get help!!**

AGE RELATED GUIDELINES

Everyone is aging! Understanding some of the differences seen at various ages helps us better understand the way individuals respond to being hospitalized. The following identifies some age-related issues for volunteers who interact with patients for short time periods.

Remember SAFETY is an important concern at every stage of development.

Newborn to 2 years

Unable to understand explanations. Vocalization consists of coos, babbles, chuckles and crying. As they approach one year they start talking using 4-5 words. They are very aware of things going on around them. Like to be held, touched, talked to and smiled at. Begin to fear strangers and can become upset when parents are absent. Sudden or rapid movements may be seen as threatening. Tend to put everything in their mouths.

2 – 6 years

Vocabulary starts to increase. Use play to learn and express self. Have difficulty differentiating reality from fantasy. Have limited understanding of time. Start experimenting with independence and cannot differentiate actions that are dangerous. Explain things in very simple terms.

6 – 10 years

Begin to be able to do things by self but still need directions. Begin to read and write. May act silly. Start to understand what is dangerous but still need reminders. Easily distracted. Be specific; use simple word and short sentences.

Early Adolescence 10 – 14 years

Accelerated growth period. Increasing awareness of physical appearance. Decisions influenced by peers. Need privacy. Able to understand more complex directions. Wide mood swings.

Adolescence 14 – 18 years

Growth starts decelerating. Idealistic. Somewhat self-centered. Acceptance by peers very important. Need for privacy continues. Tend to withdraw when upset or feelings are hurt. Increasingly able to understand complex directions and abstract ideas.

Adult 19 – 65 years

Physically mature. Understands what is happening. May have a lot of pressures besides being hospitalized, such as work and family concerns.

Older Adult 65 years and older

As a person ages, physical changes occur naturally in the body regardless of any disease process. There may be great variation in mental acuity. Some older individuals may feel isolated or abandoned. Many are afraid they may lose their independence and have to go to a nursing home. Communication is very important. Some are hard of hearing and/or have visual problems. Speak clearly and distinctly, speak louder if necessary but do not shout or yell. Allow time for hearing, comprehending and understanding.

The progression of changes associated with aging varies in each individual. Each person must be considered as an individual with unique capabilities and needs.

PLAN ALERT	DESCRIPTION	INITIAL RESPONSE	SECONDARY RESPONSE	FOLLOW-UP
ARMED INTRUDER	Person actively shooting/assaulting staff/patients/volunteer	Run/hide/fight. Call 9+911.	Notify PBX at 5220 and take action as needed.	Activate Continuity Plans as needed.
MASS CASUALTY INCIDENT	Impending arrival of a large influx of patients as a result of a disaster	Find and read the Mass Casualties plan including the specific instructions for your department in the plan. Available managers report to Incident Command Center to assist filling Incident Command jobs.	Follow departmental plan.	Send staff to Labor Pool as they become available.
FIRE	Fire, smoke or smell of something burning.	Rescue those in immediate danger (if safe to do so) Activate the alarm (dial 5220 and pull manual alarm) Contain the fire (close the doors) Extinguish the fire (if safe to do so)	Return to your home department to assist as needed. Follow your departmental fire plan. Shut doors & windows. Clear corridors.	Protect patients and visitors in place if possible. Security will control traffic to fire area. Follow directions by fire department authority or chief. Evacuate horizontally then vertically if immanent danger.
CARDIAC ARREST	Cardiac arrest or other medical emergency in the hospital	Call 5220 to initiate. Response team action only required		
MISSING PERSON	An infant, pediatric, or vulnerable adult has been abducted or is missing from their unit after a rapid search of the unit has been conducted.	Call 5220 to initiate and request "missing adult or child" is paged overhead. Give description to missing person to operator. All available SLH staff goes to the nearest hospital exit that discharges at ground level. Watch for anyone with large package or an infant/child that is not being escorted by staff. If exits are covered by two (2) people report to Security Office to participate in an internal & external search of SLH.	Charge nurse to call 9+911 after 5 minutes of searching. SLH staff remains at exits until ALL CLEAR is called.	Security initiates/coordinates thorough search of SLH, is liaison with/assists police & FBI. Administrative supervisor keeps VP on call, CEO & PR informed. One SLH PR staff member works with Police spokesperson. An Incident Report is written by security and the person in charge at the unit.
DISRUPTIVE PERSON	An employee observes physically aggressive or dangerous behavior that is believed to be uncontrollable.	Employee assessing the need for a Disruptive Person Assistance Response calls or designates someone to call 5220 and immediately announces Disruptive Person and the location.	Administrative Nursing Supervisor, Security, or Mental Health Staff may call 9+911 when warranted.	Document patient safety report, employee accident report (when necessary), and conduct debriefing.

PLAN ALERT	DESCRIPTION	INITIAL RESPONSE	SECONDARY RESPONSE	FOLLOW-UP
FACILITY LOCKDOWN	Lockdown of an area of the hospital for patient or staff protection purposes	SLH Staff to avoid area if possible. Security to lock all doors into the specified area and designate an access point for staff providing critical services to the area.	Designate service access points and assign staff to control access to the space (lock and unlock the door)	Security to schedule staff for monitoring access using outside services or activated labor pool if necessary.
SECURITY ALERT	An act of violence or confrontation that is potentially violent.	Hospital Operator announces code. Secure your area; lock doors into your work area if possible; close doors as a minimum.	Limit all movement throughout the facility to that required for immediately essential patient care. Await instructions.	
SEVERE WEATHER	Severe thunderstorm, snow storm or tornado.	Hospital Operator announces plan. If Tornado, close doors, windows & blinds. Shield patients with blankets.	Keep patients calm. Limit phone usage. Wait for further instructions.	If tornado touches nearby be prepared to activate the MCI plan.
HAZARDOUS SPILL	<u>Emergency Spill:</u> Any spill which may present a hazard to people or the environment or the effects are unknown. <u>Incident Spill:</u> Small spill presenting NO hazard to trained employee or the environment.	Hospital Operator announces plan. If you are in the identified spill area leave immediately, otherwise close doors to your area and avoid the spill area. A plan is not called for Small spills. Isolate the spill area and evacuate. Deny entry to others. Notify your Supervisor.	<u>Security:</u> Secure area, contact local HazMat disposal team. <u>Plant Services:</u> Create a negative pressure in the area by shutting down outside air dampers of the fans supplying the area. Treat anyone who may have been exposed.	Evaluate the spill. Take precautions to prevent recurrence. Eliminate any other hazardous material in area. Make certain spill is entirely cleaned up.
BOMB THREAT	Notification of a bomb on campus, usually by an outside caller.	Obtain as much information as possible – where is the bomb, when will it go off, what does it look like, why was it placed, etc.	Follow departmental plan. Notify officer of day & house supervisor.	Security & SLH staff will conduct search. Police will aid if suspicious item found. Do not touch anything!
EVACUATION	Duluth Fire/Police department has advised Administration that remaining in an area may be hazardous to life, health, or safety.	<u>Administration:</u> Notify staff to evacuate and designate horizontal or vertical evacuation. <u>Staff:</u> Evacuate ambulatory, wheelchair, then stretcher / bedridden. Take records and meds as safety permits.	Move patients out of building only as a last resort. Use outside resources to help move or transfer patients.	Keep in contact with command center & inform them of current status. Maintain contact, track and document all patient movements.
VERY IMPORTANT PATIENT (VIP)	Potential arrival of very important patient with potential to disrupt routine operations	Set up Command Center if necessary. Administration/Admin Supervisor works with Federal Security Agencies to set up Hospital Campus security as needed and address any other needs.	Initiate VIP plan. Public Relations set up to work with Secret Service PIO person. SLH Security works with Secret Service and other security agencies.	Debrief in Command Center once the event is over.



**MINNESOTA DEPARTMENT OF HEALTH LICENSED FACILITIES
SUPPLEMENTAL NURSING SERVICES AGENCIES, EDUCATIONAL PROGRAMS, TEMPORARY
EMPLOYMENT AGENCIES, PROFESSIONAL SERVICES AGENCIES**

BACKGROUND STUDY PRIVACY NOTICE

Because the Minnesota Department of Human Services is requesting that you provide private information about yourself, the Minnesota Government Data Practices Act requires that you be informed of the following:

1. Purpose and intended use of the information: Minnesota Statutes, section 144.057, requires the Minnesota Department of Human Services (DHS) to conduct background studies on individuals who have direct contact with patients and residents in hospitals, boarding care homes, outpatient surgical centers, nursing homes, home care agencies, residential care homes, board and lodging establishments registered to provide supportive or health supervision services, individuals employed by supplemental nursing services agencies, and controlling persons of a supplemental nursing services agency; and all other employees in nursing homes. The background studies are to be completed according to the requirements in Minnesota Statutes, chapter 245C. The information requested will be used to perform a background study of you that will include at least a review of criminal conviction records held by the Minnesota Bureau of Criminal Apprehension and records of substantiated maltreatment of vulnerable adults and children. DHS may also later require you to submit additional information and/or your fingerprints if necessary to complete your background study. For all individuals who are subject to background studies by DHS, the corrections system will report new criminal convictions for disqualifying crimes to DHS. County agencies and the Minnesota Department of Health report substantiated findings of maltreatment of minors and vulnerable adults to DHS.

2. Whether you may refuse or are legally required to provide the information: Minnesota Statutes, chapter 245C, states that the individual who is the subject of a study must provide sufficient information to ensure an accurate background study.

3. Known consequences that may arise from supplying the information: Individuals who have histories with the characteristics identified in Minnesota Statutes, chapter 245C, will be disqualified from positions allowing direct contact with (and, where applicable, access to) persons receiving services. Health-related licensing boards will make a determination whether to impose disciplinary or corrective action on individuals regulated by health-related licensing boards who have been determined to be responsible for substantiated maltreatment. Individuals who do not have disqualifying characteristics will not be disqualified.

4. Known consequences that will arise from refusing to supply the requested information: Only items identified as "optional" may be left blank. Refusal to provide the information necessary to ensure an accurate and complete background study will result in your disqualification and an order to the agency or facility to remove you from any position allowing direct contact with (and, where applicable, access to) persons receiving services.

5. Identification of other agencies or entities authorized to receive this information: The information you provide will be shared with the Minnesota Bureau of Criminal Apprehension. If DHS has reasonable cause to believe that other agencies may have information pertinent to a disqualification, the information may also be shared with county attorneys, county sheriffs, courts, county agencies, local police, the Federal Bureau of Investigation, the Office of the Attorney General, agencies with criminal record information systems in other states, and juvenile courts. Background study results may be shared with the Minnesota Department of Health, the Minnesota Department of Corrections, the Office of the Attorney General, non-licensed personal care provider organizations, and health-related licensing boards. If you have a disqualifying characteristic, the facility will be told only that you are disqualified and will not be told what caused your disqualification, unless you were disqualified for refusing to cooperate with the background study or for serious and/or recurring maltreatment of a minor or vulnerable adult. The

information about you received as part of a background study is classified as private data and, except for the agencies noted, cannot be shared without your consent.

6a. If CURRENT background study results in a disqualification that is set aside upon reconsideration: If you are disqualified as a result your background study, and you request reconsideration and your disqualification is set aside for the program/agency that initiated the current background study, subsequent background studies initiated by other programs/agencies may result in the disqualification being set aside for other programs/agencies when the following criteria are met:

1. While you are disqualified, you are not disqualified for an offense specified in section 245C.15, subdivision 1 or 2;
2. the program that initiates the subsequent background study is licensed or regulated under the same provisions of law and rule as the program for which your disqualification was previously set aside;
3. the commissioner has not received any new information to indicate that you may pose a risk of harm to any person served by the program; and
4. the previous set aside was not limited to a specific person(s) receiving services.

If the above criteria are met, the notice of disqualification sent to the program/agency that initiates the subsequent background study will state that you are disqualified and will include the reason you are disqualified. It will also state that your disqualification has been set aside for their program/agency, and that upon request, and without your consent, information about the factors that were the basis for the decision to set aside your disqualification are available to them. (§245C.22, subd. 5)

6b. If a PREVIOUS background study resulted in disqualification that was set aside: If you were the subject of a previous background study which resulted in your disqualification, and your disqualification was set aside upon reconsideration, DHS will review the information in your record in connection with your current background study and determine whether the following criteria are met:

1. While you are disqualified, you are not disqualified for an offense specified in section 245C.15, subdivision 1 or 2;
2. the program that initiated the current background study is licensed or regulated under the same provisions of law and rule as the program for which your disqualification was previously set aside;
3. the commissioner has not received any new information to indicate that you may pose a risk of harm to any person served by the program; and
4. the previous set aside was not limited to a specific person(s) receiving services.

If the above criteria are met, the notice of disqualification sent to the program/agency that initiated the current background study will state that you are disqualified and will include the reason you are disqualified. It will also state that your disqualification has been set aside for their program/agency, and that upon request, and without your consent, information about the factors that were the basis for the decision to set aside your disqualification are available to them. (§245C.22, subd. 5)