

# VOLUNTEER SERVICES: ANNUAL COMPETENCY & REVIEW

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Updated 2023

# Annual Competency Contents

- **Children's Mission & Values**
- **Equity & Inclusion**
- **Reminders about volunteer policies**
- **Infection Prevention**
- **Confidentiality & HIPAA**
- **Boundaries & Safety**



**Children's**<sup>™</sup>  
MINNESOTA



*Kids first.*

## MISSION

We champion the health needs of children and families. We are committed to improving children's health by providing the highest-quality, family-centered care, advanced through research and education.

## VISION

Every family's essential partner in raising healthier children.

# THE CHILDREN'S WAY

## OUR MOTIVATION

Mission statement clarifies the purpose and path we walk to achieve our vision.

We champion the health needs of children and families. We are committed to improving children's health by providing the highest-quality, family-centered care, advanced through research and education.

## OUR ASPIRATION

Vision statement identifies what our company would like to achieve or become as we move forward.

Every family's essential partner in raising healthier children

## OUR OBLIGATION

Values reflect the behaviors that are truly important to us as an organization in order for us to live out our brand promise and achieve our vision.



Kids first.



Listen,  
really listen.



Own  
outcomes.



Join  
together.



Be  
remarkable.

## OUR DIRECTION

Strategic pillars define the overarching objectives, tactics and techniques we will employ to achieve our vision.

Improve the  
health of all kids

Redesign the  
care experience

Grow in  
partnership

Drive value and  
affordability

## OUR DISTINCTION

Brand positioning defines the unique experience we promise to deliver to our customers so we fulfill our mission.

Reimagining health care for the most amazing people on earth.



## Kids first.

It's all about the kids. We are inspired by children — they are optimistic, resilient and see endless possibilities. We channel that spirit, bringing courage and curiosity to find better solutions and do the right thing.

- I take it personally to create a safe environment, free from harm.
- I speak up when there is a better way or I'm concerned because "good enough" doesn't work at Children's.
- I make decisions that prioritize the needs of kids.
- I understand that health equity starts with me, and I strive to treat each person as they would like to be treated.
- I embrace the spirit of a child, applying a sense of joy, wonder, playfulness and fun to my work.



## Listen, really listen.

Each person has a story to tell, so we listen with compassion, ask meaningful questions, and build trusting relationships with individuals and communities. We respect each person's uniqueness.

- I am present in every conversation. I take time and give my full attention to others.
- I respond to what's being said with words and body language. I work to make it safe for others to share their opinions, ask questions and tell their stories.
- I manage my reactions. I understand the power of my words and body language, and commit to considering their impact on others.
- I appreciate opinions different from my own and seek to understand the situation from the other person's point of view.
- I ask questions to learn more about each individual's beliefs and priorities. I show respect by using people's names whenever possible.



## Own outcomes.

Results define us, so we are all in 200% — accountable to ourselves and to one another to provide extraordinary service. We are tireless in our pursuit of excellence and never stop learning and improving.

- I do my best. I know what's expected of me. I know what I'm good at and where I can improve.
- I help others to be their very best. I go above and beyond. I always ask, "What more can I do?" and never, ever say, "It's not my job."
- I view feedback as a gift. I seek and also provide honest and constructive feedback in the moment.
- I try out new ideas and learn from what goes well as well as what doesn't go as planned.
- I identify and solve problems quickly.



## Join together.

We are stronger together with our patients, families, community and one another. Super teams trump super heroes. We are all caregivers.

- I view us as one Children's team, working toward the same goal.
- I collaborate with others and trust the skills we each bring to the team.
- I communicate often and clearly. I don't assume that I'm understood.
- I think of the impact on others before making any decision.
- I believe mistakes create opportunities for improvement and I share what is learned from them with others.



## Be remarkable.

Kids are counting on us to deliver an experience unlike any other. We are innovators, reimagining what health care can be today and in the future. We go beyond what's expected because we have higher standards. We love our work and let it show.

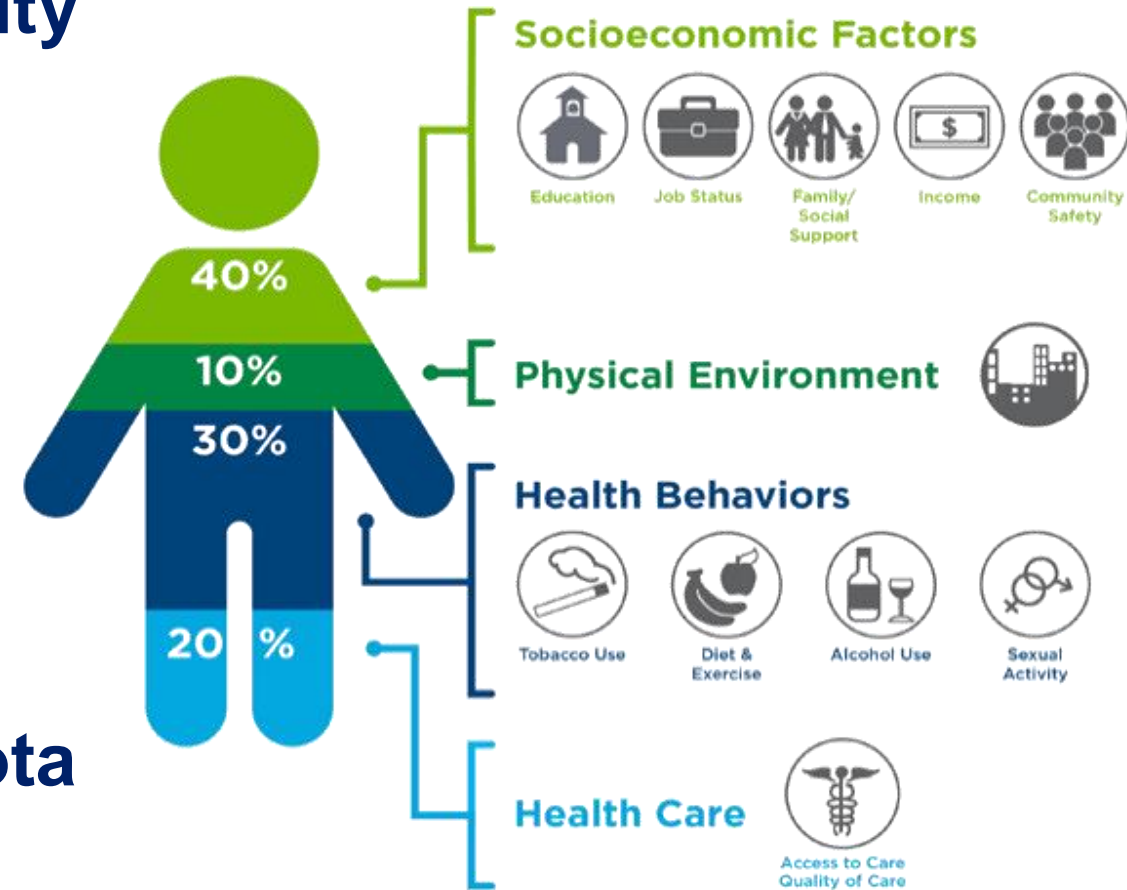
- I give whatever makes me special and am generous with my time, creativity and support of others.
- I never overlook someone who needs help or something that needs attention.
- I am positive. I expect the best and give my best to find a real connection with each person. I meet and personalize my approach so each person feels unique.
- I care. I anticipate the needs of others and take action.
- I do whatever it takes to provide the best service.

# EQUITY & INCLUSION



# What is health equity?

- **Everyone has a fair & just opportunity to be healthier**
  - Requires removing obstacles
    - Ex. Poverty, discrimination, & their consequences
  - Requires removing barriers
    - Ex. Powerlessness, lack of access to quality, employment, education, housing, safe environments, & healthcare
- **Removing barriers is everyone's responsibility at Children's Minnesota**



# Structural/Institutional Racism

**RACISM  
IS A  
PUBLIC  
HEALTH  
CRISIS**

As of August 2020, more than 20 cities & counties & at least three states, including Minnesota, declared racism as a public health crisis.

- **Embedded** in our historical, political, cultural, social, & economic systems & institutions
- **Systematically disadvantages people of color** & has a negative impact on other marginalized populations
- Produces **racial inequity & adverse outcomes for people of color**
  - Impacts health, wealth, careers, education, infrastructure, & civic participation
- Produces **unfair & unjust practices & policies**
  - Limits the participation & prosperity of people of color



# Have you ever said/thought these things before?

## These are/could be examples of bias

“Where are you actually from?”

“Your name is really hard to pronounce. Can I call you...”

“You must be mom/dad/sister!”

“Merry Christmas!”

“They/them is grammatically plural. It’s just too hard for me to change.”

“Wow, I love your hair! Can I touch it?”

“Staff said family is never here. I guess they don’t care about their child...”



**We ALL have bias.**

*It is our job to actively work against biases.*



The Bias	Why is it harmful?	What to say/do instead
“Where are you actually from?”	<ul style="list-style-type: none"> <li>Implies that the person does not belong in this country</li> <li>Causes feelings of alienation</li> </ul>	<ul style="list-style-type: none"> <li>Ask yourself “Why do I really need to know?”</li> <li>Build rapport by engaging in authentic conversation around topics of interest</li> </ul>
“Your name is really hard to pronounce. Can I call you...”	<ul style="list-style-type: none"> <li>Diminishes the identity of the person</li> <li>Centers your comfort over the autonomy and identity of the other individual</li> </ul>	<ul style="list-style-type: none"> <li>Ask what they want to be called and how it’s pronounced</li> <li>Practice with the person</li> </ul>
“They/them is grammatically plural. It’s just too hard for me to change.”	<ul style="list-style-type: none"> <li>Not everyone identifies as male/female</li> <li>Does not support a person’s authentic self/identity</li> </ul>	<ul style="list-style-type: none"> <li>Ask a person what pronouns they use</li> <li>Introduce yourself, including your pronouns</li> <li>If you make a mistake, apologize without becoming defensive or making excuses. Keep the apology brief</li> <li>Avoid gendered language (ex. “Hey ladies/gents/guys/girls!”); instead use inclusive language (ex. folks, y’all, team, etc...)</li> <li>Practice using gender neutral language (refer to everyone as <i>them</i> until you know a person’s pronouns, )</li> </ul>
“Merry Christmas!”	<ul style="list-style-type: none"> <li>Implies Christianity as the cultural norm</li> <li>Insensitive to an individuals’ religious/spiritual identity</li> </ul>	<ul style="list-style-type: none"> <li>Learn about other religions and holidays/significant dates</li> <li>Use non-denominational greetings/salutations</li> </ul>
“Staff said family is never here. I guess they don’t care about their child.”	<ul style="list-style-type: none"> <li>Supports assumptions that may be false</li> <li>Could play into racial/socioeconomic stereotypes, which is unhelpful and perpetuates false and damaging narratives</li> </ul>	<ul style="list-style-type: none"> <li>Put yourself in other peoples’ shoes</li> <li>Assume best intentions</li> <li>Refrain from engaging in gossip/hear-say</li> </ul>
“Wow, I love your hair! Can I touch it?”	<ul style="list-style-type: none"> <li>Disrespects physical boundaries</li> <li>Can make a person feel “on display”</li> </ul>	<ul style="list-style-type: none"> <li>Refrain from commenting on peoples’ physical appearance</li> <li>Maintain physical boundaries</li> </ul>
“You must be mom/dad/sister!”	<ul style="list-style-type: none"> <li>Implies that the “nuclear family” is the only way families exist</li> <li>Discredits other types of support (ex. foster parents, grandparents, cultural/communal families, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>Use inclusive language (ex. guardian, care giver)</li> <li>Create space for the various ways that families/support systems show up or how those systems might present</li> </ul>



# Challenging our biases

- Acknowledging **3 kinds of bias**:
  - **Conscious bias** - Prejudiced thoughts & discriminatory actions based on differences in race, gender, age, sexual orientation, disability
  - **Unconscious bias** - Ingrained habits of thought that can lead to errors in how we perceive, reason, remember, and make decisions. Ex. If a person is speaking slowly, that could be interpreted as them being unintelligent
  - **Affinity bias** - When we meet someone we feel we have an affinity with such as same school, grew up in same town, reminds us of someone we know and like
- We are **ALL** human & we **ALL** make mistakes
  - **Accept**
    - “I appreciate you telling me.”
  - **Acknowledge**
    - “I recognize that I hurt/offended you”
  - **Apologize**
    - “I am sorry I did/say that”
  - **Adjust:**
    - “I will do my best to ensure that this does not happen again”



# Equitable ways of thinking

**Listen  
authentically**



**Be present**

**Be  
intentional**

**Acknowledge  
& challenge  
your biases**

**Be  
uncomfortable**

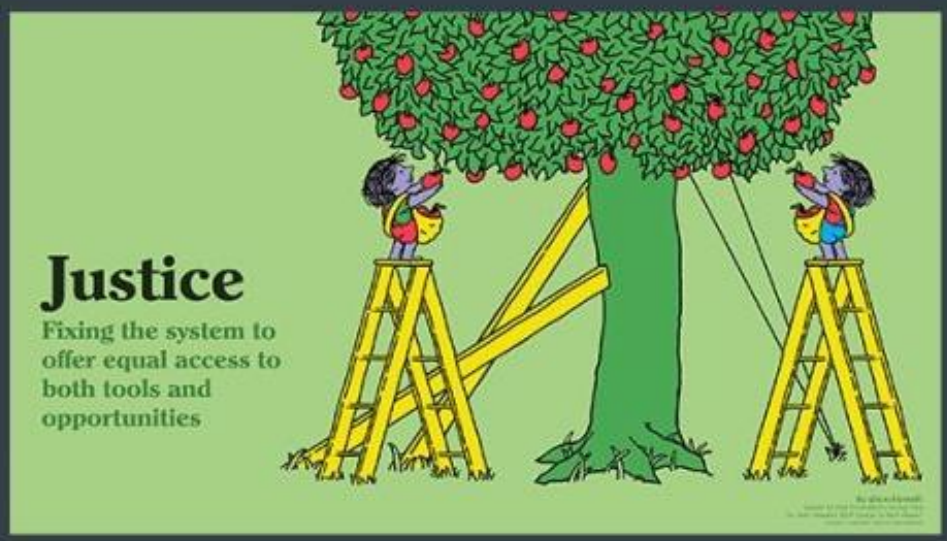
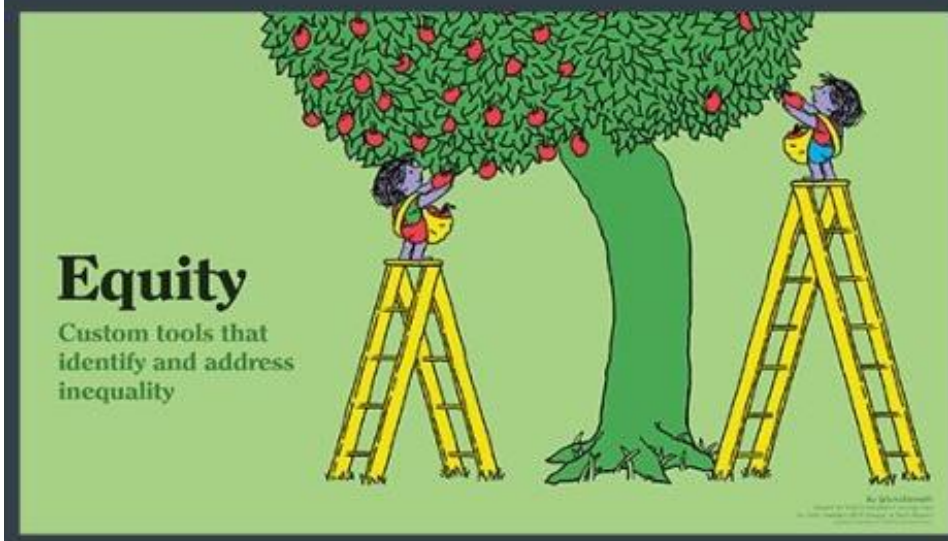
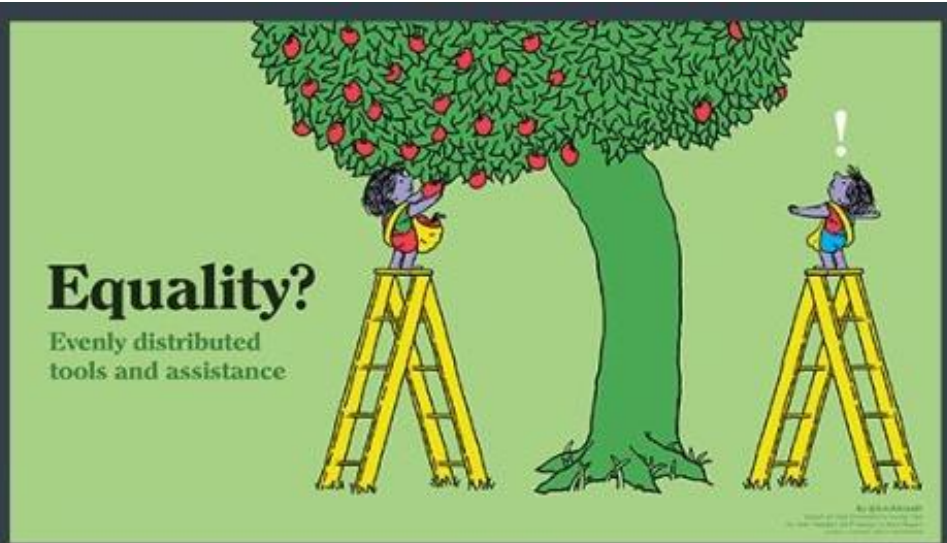
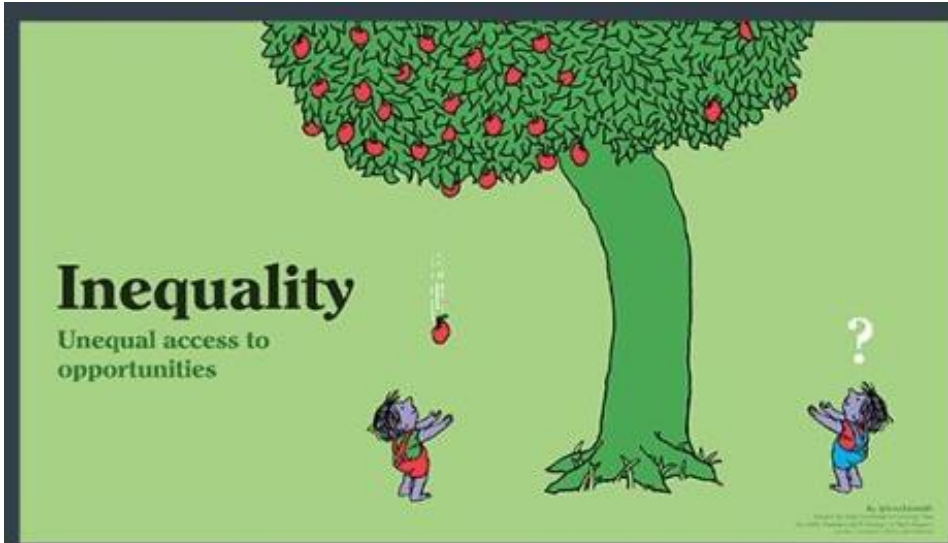


Illustration by Tony Ruth

# VOLUNTEERING REMINDERS!



# Volunteer dress code



**You should be in dress code every shift**

# Fragrances, nails, jewelry, oh my!

- Children's is a **fragrance-free environment** as patients & staff may have allergies or sensitivities
- Nails should be **clean and natural**, no longer than the end of your finger with no chipped polish, gel, or acrylics
- **Inpatient volunteers: No jewelry below elbows** (bracelets, rings, watches, etc.) – as much as possible





# Attendance

- **Need to miss a shift/ running late? Please let us know!**
  - The more notice you can give us, the better, so that we can notify staff accordingly
  - Proper notice of absences gives us the opportunity to open your shift for other volunteers to pick up!
- **Please call your campus' main line or email us:**
  - Minneapolis: 612-813-6200
  - St. Paul: 651-220-6141
  - [volunteer.services@childrensmn.org](mailto:volunteer.services@childrensmn.org)



- **Unexcused absences/ “No show”**
  - If you do not show up for a shift without letting us know, this is considered an unexcused absence.
  - **Two “no shows” may be grounds for dismissal** from your volunteer position

# What if I am sick?

- **If you are not feeling well or have any ill-like symptoms:**
  - Please stay home & take care of yourself
    - We do NOT want to bring any illnesses into the hospital
  - **E-mail or call Volunteer Services that you will not be in for your shift**
    - Don't wait to see if you feel better by the start of your shift- please let us know as soon as possible
  - If you come in for your shift & are visibly ill, we will send you home



**When in doubt, please err on the side of caution & stay home.  
We want to keep our patients safe!**

# Cell phones, cameras, & Social Media

Had a great day  
volunteering at  
Children's!



Had fun visiting  
John in room  
5013!



- **Social media is a powerful tool**

- Misuse could cause unintended risks to patients & families, fellow volunteers, staff, or the organization
- It should **NOT** be used to maintain contact with patients & families outside of your role at Children's

- **You can share about your volunteer experience on social media, but be mindful of what you post**

- **Cell phones**

- Please leave your cell phone in the Volunteer Services lockers during your shift
- We want you to be present & enjoy your time at Children's!

- **Cameras/taking photos**

- Taking photos/videos of patients or families is strictly prohibited

# Can I bring a snack/beverage to my shift?

- Volunteers may bring a snack or beverage to have when in the office or other designated break spots (cafeteria, outside, etc.)
  - We encourage you bring a water bottle as we do not have cups available in the office
- **Food & beverages cannot be brought up onto the units**
- If you need a break during your shift, please take one!
  - Breaks should be limited to 15 minutes
- Please refrain from chewing gum during your shift



# Security

- Need assistance & we are not in the office? Security can help!
  - **After hours** is considered **before 8am, after 4:30pm, & weekends**
- If you require assistance, please dial 612-813-7777 or 5-7777 (if on a hospital phone) & ask for Security 24/7
- Security can assist you with:
  - Escorts to the parking ramp
  - Unlocking office door in St. Paul
    - Minneapolis door code: 9-8-7-6-5
  - Opening your locker, if locked out
  - Lost & found items



# INFECTION PREVENTION



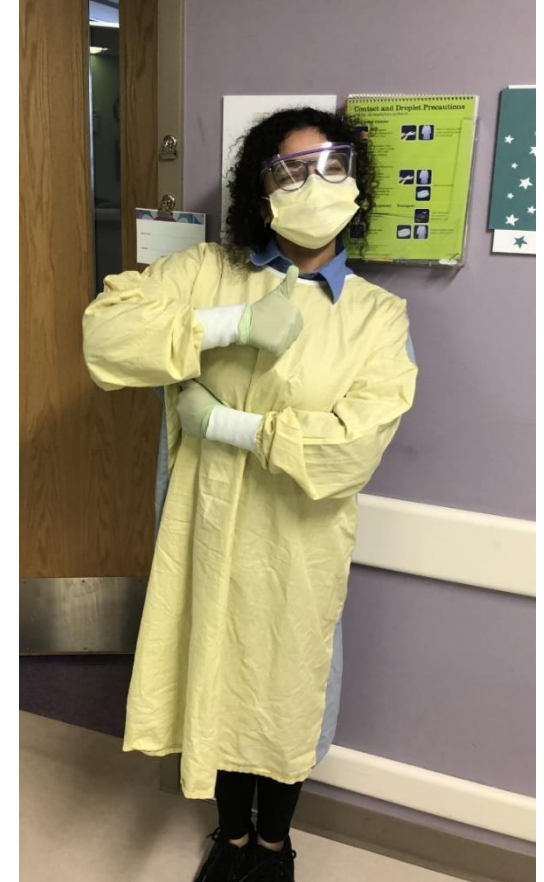
# Children's Masking Policy

- Masking is optional\* for patients, visitors, staff, & volunteers **except when required by policy & infection prevention guidelines**
  - Anyone who wishes to wear a mask may do so
- **\*Masking guidelines may change** based on guidance from the CDC and/or community or facility transmission rates
  - Volunteer Services will keep you informed of any changes



# How can I help protect patients & families?

- **Consistently wash/sanitize** hands while at a Children's MN facility
  - This is the most **effective way** to prevent the transmission of infections
  - You must sanitize when entering & exiting patient rooms, regardless of your role or length of time spent in the room
- Make sure you have the **required personal protective equipment (PPE)** on before entering a patient's room
  - Check the patient's precaution sign
    - **Ex.** You may be required to don (put on) a mask, eyewear, gown, & gloves in order to enter
- **Stay home if you are sick**
  - Remember to notify Volunteer Services that you will not be in





1



Wet hands with water.

2



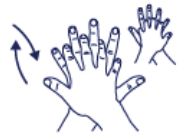
Apply enough soap to cover all hand surfaces.

3



Rub hands palm to palm.

4



Right palm over left dorsum with interlaced fingers and vice versa.

5



Palm to palm with fingers interlaced.

6



Backs of fingers to opposing palms with fingers interlocked.

7



Rotational rubbing of left thumb clasped in right palm and vice versa.

8



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.

9



Rinse hands with water.

10



Dry hands thoroughly.

11



Use towel to turn off faucet.

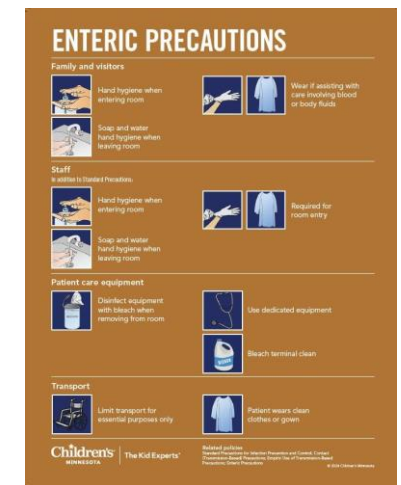
**HOW TO HAND-RUB**

Follow steps 2 - 8 with an alcohol-based product, if hands are not visibly soiled.

## Children's handwashing protocol

# Precaution signs

- Before entering a patient’s room, you **must** review their **precautions sign**
  - The sign is located just outside of the patient’s room
- Precautions signs indicate **which PPE are required** to enter the room
  - Volunteers follow the PPE direction under ‘Staff’ (required for/upon room entry)
    - Ex. In addition to your mask, you may also need gown, gloves, & eyewear
    - **When in doubt, ask staff what type of PPE is required**
  - PPE is required once past the threshold (doorway) of the room



# DO NOT ENTER rooms

- Patients with a pending test or known COVID-19 diagnosis will have a red precautions sign
- Volunteers **DO NOT** enter these rooms
  - This includes any rooms that require an N95 mask\*\* or full respirator (**Contact with Respirator and Eye Protection/Airborne/Airborne Contact**)



\*\*Even if you are fit tested or wearing an N95 mask, you still cannot enter these rooms

# Donning & Doffing Review

## Donning (putting on PPE)



Hand Hygiene



Gown



Mask / Goggles



Gloves

## Doffing (taking off PPE)



Gloves



Gown



Goggles / Mask



**\*\*Hand Hygiene**

**\*\*Enteric precautions** (brown sign) : You **must** wash your hands with soap & water in addition to hand sanitizing.

# Donning & Doffing Review\*

## Donning (putting on PPE)

\*If Children's has implemented universal masking



Mask & eye protection already on



Hand Hygiene



Gown



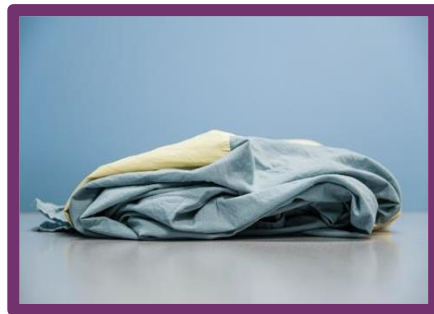
Gloves



## Doffing (taking off PPE)



Gloves



Gown



\*\*Hand Hygiene



Mask & eye protection STAY on

\*\**Enteric precautions* (brown sign) : You must wash your hands with soap & water in addition to hand sanitizing.

# CONFIDENTIALITY & HIPAA



# Why is confidentiality important?

## Health Insurance Portability & Accountability Act (HIPAA)

- Federal regulation that promotes & ensures patient/family confidentiality
- Privacy education program, required for all volunteers & staff

## Protected Health Information (PHI)

- Identifying information about a child &/or family
- Name, address, diagnosis, etc.

**It is against the law to share PHI about patients or families that you encounter at Children's.**



# Protecting patient & family confidentiality

- **What you see & hear STAYS here**
  - If you need to discuss any interactions you had with a patient or have any questions or concerns, you can talk to a staff member, including Volunteer Services staff
- All volunteers have signed a **confidentiality agreement**
  - Any breach/misuse of PHI may result in the termination of your volunteer role
- Any **notes/paper with PHI on it** should be placed in the **shredder**
- Information will be shared with you as appropriate
  - You can ask “need to know” questions: Patient likes or dislikes, how a baby likes to be held, etc.
- **You must adhere to Children’s policies regarding HIPAA & PHI to protect patient & family privacy.** Includes but not limited to:
  - Cell phone policy
  - Cameras/photography policy
  - Social Media policy





# BOUNDARIES & SAFETY





# The importance of boundaries

- **Boundaries provide the framework for a healthy & professional relationship**
- **Your role as a volunteer is to provide support to patients & families in a fun way**
  - There are policies & guidelines in place that help define the role of volunteers & provides them with emotional, physical, & legal protection
- **You should not be involved in the issues surrounding why a particular patient is receiving services at a hospital or clinic**
  - It is human nature to be curious, but it simply is not part of your role to be involved in patient matters
- **Please refrain from engaging in discussion that is speculative or involves judgments**
  - All families are different & often the whole story is not evident



# ⚡ Maintaining boundaries ⚡

## Appropriate

- Introducing yourself & clarify your role
  - (“Hi; I’m volunteer Max. I use he/they pronouns. I’m here to hang out/play.)
- Calling a patient what they want to be called
- Talking about topics outside of the hospital, such as sports, hobbies, pets /animals, etc.
- Being a good listener and refraining from sharing advice (medical or otherwise)
  - Notify a staff person if you feel that follow-up is required
- Saying “Goodbye. I had fun playing with you today!” instead of “See you later”
- Respecting the autonomy of patients
  - Letting the patient make their own choices, including what activities you do together or whether they want to spend time with you or not

## Inappropriate

- Bringing gifts for specific patients
- Sitting/laying on a patient’s bed
- Hugging, kissing, or initiating snuggling with patient or siblings
- Discussing topics such as religion, politics, discipline, etc.
- Sharing your own personal Children’s story/connection or child’s medical journey
- Telling a patient to get well/feel better soon
- Telling a patient/family that you will be back to see them next week
- Picking up shifts to see a particular patient or seeking out one particular patient during your regular shift

# ◆ Patient & volunteer safety ◆

- Volunteers cannot take patients off the unit without staff supervision.
- Do not turn off monitors/IVs- staff will respond.
- When holding patients, you must remain awake & alert throughout your entire shift.
  - This means **keeping your eyes open**. Let staff know if you need a break.
- Obtain staff permission before leaving a room with a patient.
- Notify staff if a patient needs to use the restroom or a diaper change. Volunteers do not toilet patients of any age.



- If a patient asks for food/drink, check with staff before offering to the patient.
  - You cannot feed patients, which **includes bottle feeding infants**
- When holding a patient, remain seated (no walking/standing). Do not pick up or set down a patient.
  - **All** patient transfers are performed by staff.
- Volunteers are unable to supervise siblings.
  - Unless if they are in Sibling Play Area or Child Life Zone
- Volunteers cannot exceed 10 hours of volunteering each week.

# Hospital Code Alerts



- **You may hear these alerts (with location) called over the hospital intercom:**
  - **Code Blue/Dr. Blue:** Cardiac/Respiratory Arrest
  - **Code Green:** Used when a patient or visitor's behavior is escalating and help is needed.
  - **Security alerts:** Active threat, lockdown, bomb threat or suspicious package, missing infant or child.
  - **Safety alert:** Fire, evacuation, chemical spill, mass casualty incident, power outage.
  - **Weather alert:** tornado warning, severe thunderstorm, winter weather warning, flash flood warning.

Typically, you do not need to respond when codes are called but we want you to know what they mean

For quick reference, view your blue VOLUNTEER hang tag located behind your photo ID badge.

# Security Alert, Active Threat

- When faced with an active threat, please remember three key words; **run, hide, fight**.
  - **Run:** In the face of an active threat, running is the safest option. You should have an escape route to a safe refuge in mind.
  - **Hide:** If running is not possible, hiding is your next safest choice. Be sure to lock, barricade doors, turn off lights and remain silent.
  - **Fight:** Fighting should always be your last resort.
- Knowing these three words can help keep you safe in the event of an active threat.



# WORKPLACE VIOLENCE & PREVENTION



# What is workplace violence?

- The **act or threat of violence** towards persons at work or on duty by another staff person, patient, family member, or volunteer.
- Workplace violence can look like:
  - Physical assault from another person
  - Any threat of physical violence
  - Verbal abuse
  - Harassment
  - Threatening behavior
  - Intimidation
  - Other threatening disruptive behavior
- Violence can happen to anyone at Children's & it is our job to know how to **recognize, respond, & report** any violent acts or threats



# Recognize, respond, & report!

- **Recognize**

- Observe behaviors of those nearby
- Is someone becoming agitated?
- Is someone acting suspicious
- Listen to your gut feelings
- Be mindful that behaviors can have different meanings based on culture (for example: eye contact, raised voice, emotional expression and gestures can be perceived and mean different things to different cultures)

- **Respond**

- If something is making you feel uncomfortable, leave the situation & report it
- If you are in a patient's room, press the nurse button & wait for staff to arrive. Do not leave the patient alone

- **Report\***

- Contact Volunteer Services or Security
  - Security numbers are located on the blue tag behind your ID badge
- If you **see something, say something**



*\*Any person, including volunteers, who has been deemed as having made threats, exhibits threatening behavior, or engages in violent acts on Children's property may be removed from the premises & shall remain off Children's premises pending the outcome of an investigation.*

**THANK YOU!**

