Our Mission

To inspire hope and contribute to health and well-being by providing the best care to every patient through integrated clinical practice, education and research.
Our Vision

Mayo Clinic will provide an unparalleled experience as the most trusted partner for health care.
Our Primary Value

The needs of the patient come first.
Clinical Excellence

Mission:
To inspire hope and contribute to health and well-being by providing the best care to every patient through integrated clinical practice, education and research.

Vision:
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Service Excellence

Financial Stability

New Employee Orientation
Value Proposition

• Mayo Clinic has a moral responsibility to care for those who need hope and healing.

• We bring together teams of experts to provide comprehensive care and trusted answers, focused on the needs of each individual, to provide exactly the care each patient needs in a seamless experience.
Mayo Clinic Model of Care

**Our Environment**

- Physician leadership
- Integrated medical record
- Professional compensation
- Unique professional dress, decorum and facilities
Mayo Clinic Model of Care

Our Environment

- Highest quality staff mentored in the Mayo culture
- Valued allied health staff with strong work ethic and devotion to Mayo
- Scholarly environment of research and education
Mayo Clinic Model of Care

Patient care

- Integrated, team approach
- Unhurried exam
- Physician responsibility for direction of care in partnership with local physician
- Highest quality with compassion and trust
- Respect for patient, family and local physician
Mayo Clinic Model of Care

Patient care

- Comprehensive and timely evaluation
- Advanced, innovated diagnostic and therapeutic technology and techniques
“The best interests of the patient are the only interests to be considered.”

DR. WILLIAM J. MAYO, 1914

New Employee Orientation
An Unparalleled Patient Experience

MAKE A DIFFERENCE
We Value Patient’s Feedback
Patient Experience Definition

An unparalleled patient experience is the result of inspired and dedicated employees demonstrating excellence, compassion and respect by partnering with patients, family and colleagues to continuously improve the healthcare service experience.
Essential Communication Behaviors©

A
Acknowledge

I
Introduce

D
Duration

E
Explanation

T
Thank You

Decreased anxiety

Increased Compliance

Improved health outcomes & satisfaction

Service Recovery in Action

- Listen with empathy
- Acknowledge/Apologize
- Decide on Next Steps
- Problem Solve (if you can)
- Follow Thru and Follow Up

An apology is the most effective action. Offering an apology is not always as easy as it might seem. Research has found that in a breakdown situation a service representative says, “I’m sorry,” only half the time. Powerful apologies begin with taking personal responsibility, which goes back to our value statements. Offering an effective apology is an important skill toward service recovery.
PRIMARY VALUE
The needs of the patient come first

MAYO CLINIC VALUES

Respect
Integrity
Compassion
Healing
Teamwork
Innovation
Excellence
Stewardship

Mayo Clinic Orientation
Entrusted to Serve
Integrity and Compliance at Mayo Clinic
Mayo Clinic Code of Conduct

- Ethics
- Confidential information and trade secrets
- Conflict of interest and outside activities
- Use of Mayo funds and Assets
- Dealing with suppliers and providers
- Books and records
- Political activity and contributions
- Safety, health, and environment
- Employee relations
Integrity and Compliance Program

- Rooted in Mayo Clinic values
- Organizational safety net
- Tool to assist with the growing complexity of requirements
  - Ethical
  - Professional
  - Legal
Model Professionalism

- **Model integrity** – know and set an example in behavior consistent with professionalism at Mayo Clinic

- **Raise your hand** – ask questions, seek clarification

- **Speak out** – talk to your colleagues, report concerns
Privacy & Your Role in Protecting Patient Information
What is Patient Privacy?

- Respect for our patients and the information they entrust to Mayo Clinic in order to care for them and to support our business.

- **Health Insurance Portability and Accountability Act**
  - The Department of Health and Human Services issued HIPAA privacy standards and security standards that require health care entities to protect patient information from unauthorized use or disclosure.

HIPAA regulations apply to all Mayo Clinic entities including: Rochester, Arizona, Jacksonville, Mayo Clinic Health System
What does Patient Privacy mean to YOU?

- Our patients trust us to protect their privacy and keep their information confidential.
- By law, all Mayo Clinic employees, students, and contractors must keep protected health information private.
- No matter what your role with Mayo Clinic, you will likely encounter Protected Health Information.
What is Protected Health Information (PHI)?

- HIPAA standards apply to all protected health information (PHI) which includes demographic information and any identifying information about the patient including but not limited to:
  - Name
  - Address
  - Dates related to the patient (e.g., birth date, appointment dates)
  - Telephone numbers and email addresses
  - Identifying numbers that are specific to the patient, such as Social Security number or medical record number
  - Pictures of the patient

All patient information and demographic information is protected, whether it is on a computer, in a paper record, or verbal.
Patients have the right to:

- Access their medical information.
- Request amendments (changes) to their medical information.
- Obtain a list of when and why their medical information was shared externally.
  - Identified as Accounting of Disclosures request.
- Request to have their patient status remain confidential by opting out of the Patient Directory.
Patients also have the right to:

- Request restrictions from third-party access to their medical information.
- Request alternate communications.
  - How we communicate their information, including allowing others to receive their information.
- Release their information to others.
- File a complaint.
Permitted Use & Disclosure of PHI

• For Treatment Purposes
  • To provide, coordinate or manage their care.
  • Includes communication between health care providers and other members of the medical team, both within and outside of Mayo Clinic.

• For Payment Purposes
  • Use and disclose of PHI to create bills and collect payment from insurance companies.
Permitted Use & Disclosure of PHI

• For Healthcare Operations
  • Use and disclosure of PHI when necessary to improve the quality of care provided to patients.
  • Includes activities to improve patient care such as:
    • license staff to care for patients
    • prepare for state and federal regulatory reviews
    • train health care and non health care professionals
    • manage health care operations
    • improve health care services

You need written patient authorization to use patient information for purposes other than treatment, payment or healthcare operations. Check with your supervisor or Privacy Officer.
Permitted Use & Disclosure of PHI

• The need-to-know rule is HIPAA’s minimum necessary standard.
• Minimum necessary means the least amount of information you need to do your job function.
• If your job functions require access to PHI, remember to request, share and disclose only the minimum amount necessary to complete the task.

“Curiosity viewing” of patient records is absolutely prohibited.
Did you catch that?!

- You must have a treatment or business need-to-know to access a patient’s information.

- If you do not have a business need-to-know:
  - You MUST have a valid patient authorization on file in order to access the patient’s record for personal reasons.
  - Mayo Clinic Policy prohibits access to your minor child’s record using the Electronic Health Record (EHR).

- Do you have written permission or will the access benefit the patient or Mayo Clinic? If the answer is no, the access is personal curiosity and is strictly prohibited by law.
Pop Quiz

Access to a patient’s medical record is authorized in which of the following scenarios:

1. Your parent was seen by a provider today; you review provider’s instructions regarding medications in the medical record to be sure your parent understands them correctly.

2. Your hip replacement patient is experiencing shortness of breath. Although you are in Orthopedics, you review previous cardiac consultation notes.

3. A patient was seen by your preceptor for an ankle fracture. You are curious about a scar on the patient’s neck.

4. Your sister asks you to check her son’s medical record to verify whether or not a prescription has been called in for his ear infection.
If you answered #2, you are correct. There is a business need-to-know in this scenario, in order to provide optimal patient care.

Your hip replacement patient is experiencing shortness of breath. Although you are in Orthopedics, you review previous cardiac consultation notes.

In all other scenarios, you would need to have a valid patient authorization on file in order to access the patient’s record for the purposes indicated.
Breach Reporting

- **A Breach** occurs when PHI is accessed (viewed) or disclosed (shared) without a business need-to-know.
- Staff are required to report a discovered or suspected breach to the Privacy Office.
  - Contact your site/regional Privacy Officer
  - Report anonymously by calling 1-888-721-5391 or online at www.mayocliniccompliancereport.com
- Mayo Clinic strictly enforces the Anti-Retaliation Policy
- Staff who knowingly violate Mayo Clinic privacy policies will receive appropriate corrective action, up to and including termination of employment.
Basic Security Requirements

- Protect yourself and protect our patients
  - Lock up or keep out of sight any confidential information to ensure that unauthorized people do not see it.

- Always remember to lock your workstation or log off when you leave your work area and do not share your username and password.
  - Any activity under your username is your responsibility!
Confidentiality

Simply by being on the Mayo campus, you may encounter confidential information concerning patients, employees and business information. Confidential information includes all material (oral, paper-based and electronic) related to the operation of Mayo including but not limited to:

- Financial information
- Patient names and other identifying information
- Patient personal and medical information
- Patient billing information
- Employee names including salaries and employment information
- Proprietary products and product development
- Marketing and general business strategies
- Any discoveries, inventions, ideas, methods, or programs that have not be publicly disclosed
- Any information marked as “confidential”

Unauthorized access, use or release of confidential information may be cause for immediate dismissal.
Conclusion – Key Points

- Do not access or disclose patient information to anyone unless there is a need-to-know.
  - Social media use should not include any identifiable (or potentially identifiable) patient information.

- Discuss patient information in a private place where others cannot overhear. If you overhear other staff discussing patient information, respectfully bring it to their attention.

- Keep patient information out of public areas. Do not leave paper containing patient information where others can see it. Dispose of PHI properly.
Pop Quiz:

Which of the following might breach patient confidentiality and be potential cause for dismissal?

1. Taking a selfie on your work unit and posting to Twitter

2. Discussing patient care while on an employee elevator

3. Doing a quick check of your brother’s x-rays to see if you identify a broken bone

4. Sending an email to your school adviser regarding the unique case you saw this afternoon
All scenarios may be a breach:

1. If a patient is in the background, this is potential breach.

2. Although an employee elevator may seem like a safe place to discuss patient care, a relative or friend of the patient may be on the elevator.

3. Unless you have a valid authorization from your brother on file, you may not access any part of his medical record – even if he verbally requests it.

4. If any information is disclosed by which someone might identify the patient, a breach has occurred. Of note, patient information should never be sent via email unless encrypted.
Succeeding at Mayo Clinic
Work Atmosphere

• Teamwork
• Personal Responsibility
• Integrity
• Innovation
• Communication
• Trust → Empowerment
Professional Conduct

• Professional Behavior
• Dependability
• Confidentiality
• Integrity
Commitment to Safety in a Fair and Just Culture

Clearly Defined Behaviors

- Pay attention to detail
- Communicate clearly
- Have a questioning and receptive attitude
- Handoff effectively
- Support each other

Accountability for Behavior
Mutual Respect

• Foster mutual respect and support Mayo’s commitment to diversity

  ▪ Mutual Respect policy
  ▪ Harassment policy
  ▪ Title IX Sexual Misconduct policy

Everyone has the right to pursue his/her career free from harassment, coercion or disruptive conduct from coworkers or organizational superiors.
Mutual Respect Standards

- **Respect**
  - For patients, visitors, and coworkers at all times

- **Language**
  - Verbal, written, electronic
  - Courteous and professional with everyone at all times

- **Feedback**
  - Provide prompt, direct and constructive feedback

- **Behavior**
  - Appropriate treatment of everyone at all times

- **Confidentiality**
  - Protect the privacy, confidentiality of patients, employees, and business information
Sexual and Other Harassment

An unwelcome behavior or action of a sexual nature is sexual harassment when

- Made a term or condition of employment affecting an individual
- Used as the basis for employment decisions affecting the individual
- Interferes with one’s work performance or creates an intimidating, hostile, or offensive work environment

Third party harassment can create a hostile work environment.

- May not bother the two people involved in a conversation, but bothers a third party.
Disrespectful Behavior

- Disrespectful behavior of any kind, ranging from subtle hints to overt acts is not acceptable. It may be a one time incident or pervasive bullying behavior.
Reporting

• Attempt to resolve with person involved
• Report to direct supervisor/director
• Report on Employee Intranet using Mutual Respect tab
• HR Service Partner will assist if needed
• A complete investigation is conducted
• Retaliation not tolerated
Mutual respect is one of our values. It is important to create an inclusive environment by treating everyone in our diverse community with respect and dignity.
Thoughts on Diversity

“Within its walls, all classes of people, the poor as well as the rich, without regard to color or creed, shall be cared for without discrimination.” DR. WILLIAM J. MAYO, 1914
Diversity and Inclusion

Mayo Clinic will be recognized by patients, employees, peer institutions, and the community as the leading model for diversity and inclusion.

Diversity is broader than race, ethnicity or gender. It’s diversity of thought, opinion and work style.
Diversity and Inclusion Priorities

1. **Caring with Awareness** - Provide high quality, culturally appropriate care in a welcoming environment to all patients

2. **Reflecting our Community** - Increase the diversity of Mayo Clinic patient population

3. **Welcoming of All** - Improve inclusiveness and participation of diverse employees at all levels of the organization

4. **Balancing Opportunities** - Increase the proportion of women and minority students, faculty and administrators and staff where under represented

5. **Developing Talent** - Increase the proportion of women and minorities in senior leadership

6. **Pursuing Health Equity** - Identify and eliminate health disparities; become a national leader in the science and promotion of health equity
There are no inferior jobs in any organization. If it is done well and with dignity, it contributes to the function of everything around it and should be valued accordingly by all.

DR. CHARLES H. MAYO
Mayo Clinic’s Commitment to Quality

...seeks to continuously improve the processes and services which support patient care, education, and research.
Additional Policies

- Social Media
- Dress and Decorum
- Equal Employment
Social Media Guidelines

Visit the Mayo Clinic Social Media Network page via the intranet

- Do not share confidential or proprietary information about Mayo Clinic.
- Must maintain patient privacy.
- Applies whether posting to own sites or commenting on other sites.
- Photographs containing any patient identifiable information are strictly prohibited.
Dress and Decorum

• Impacts patients' perceptions of Mayo Clinic
• Maintains our commitment to quality and excellence associated with Mayo Clinic tradition
• Maintains Mayo Clinic’s professional image
Volunteer Dress Code Policy

• It is the policy of Mayo Clinic Health System that each volunteer’s dress, grooming, hygiene and demeanor support MCHS’s standards of professionalism in health care.

• It is therefore the responsibility of each volunteer to dress, groom and conduct themselves in a manner that is appropriate to their work setting and that presents a positive image of Mayo Clinic Health System.
Clothing

- All clothing, including volunteer vests, will be neat, clean and a conservative length.
- Hosiery/socks will be worn at all times in patient care areas.
Name Badges

- Mayo Clinic Health System NWWI identification cards are worn on the upper torso with the photograph side of the card visible between the neck and waistline.

- The identification cards must be worn at all times while on the premises. The identification card may be displayed using lanyards, retractable cord badge reels, clips, or plastic magnetic holders.
Identification

Mayo Clinic Orientation

Dress & Decorum
Grooming/Hygiene

- Cosmetics and fragrances should be used conservatively
- Hair must be clean and neatly styled; extreme hair colors and styles are prohibited
- Beards and moustaches must be short, neatly trimmed, well groomed
- Clothes and/or hair must not smell of cigarette smoke, or other offensive odors
Body Piercing/Tattoos

- Visible body piercing, other than the ears, is unacceptable during your volunteer shift.
- Tongue and facial jewelry are not acceptable except nose piercing.
Nails

- Artificial nails and extenders of any type are not allowed on clinic or hospital volunteers who have direct patient contact.

- Natural nail tips should be less than ¼ inch long, clean and well trimmed; nail polish, if worn, should be unchipped. Appliqués are unacceptable.
The following items are not acceptable:

- Denim pants, any color
- Shorts
- Overalls
- Spandex pants/skinny jeans/leggings
- Athletic/yoga pants
- Low cut tops, tank type tops
- Clothing with inappropriate advertising or symbols/designs including camouflage
- Flip flops (only open toed shoes in non-patient positions, i.e. gift shop, clerical)
- No sweatshirts, hooded sweatshirts or hooded sweaters
- No caps
- No caps
Hygiene

Not Appropriate

Appropriate

Dress & Decorum

Mayo Clinic Orientation
Inappropriate Attire

Dress & Decorum

Mayo Clinic Orientation
Footwear
Food/Beverages

• Consumption of food, including gum chewing, is not allowed in any area that is visible to the public

• Generally food and beverages should be consumed in areas out of public view
Infection Prevention and Control
Everyone’s Responsibility

MAKE A DIFFERENCE
"It is unfortunate that so few appreciate from what small causes diseases come."

DR. CHARLES H. MAYO
The Chain of Infection

- Infectious Agent
- Susceptible Host
- Portal of Entry
- Mode of Transmission
- Portal of Exit
- Reservoir
Primary Prevention – Stay Healthy

• Eat healthy
• Drink water
• Exercise
• Get proper rest
• Routine check ups
Primary Prevention – Stay Home When Sick

- Fever
- Persistent cough
- Diarrhea
- Vomiting
Primary Prevention – Stop Transmission at Work

- Hand hygiene
- Respiratory etiquette
- Disinfect your work area
- Immunizations
- Stay informed
Your Role – Hand Hygiene

• Soap and water
  ▪ Before eating
  ▪ After using the restroom
  ▪ When hands are visibly soiled

• Waterless alcohol-based hand rub
How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

Duration of the entire procedure: 20-30 seconds

1a. Apply a palmful of the product in a cupped hand, covering all surfaces;

1b. Rub hands palm to palm;

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

3. Palm to palm with fingers interlaced;

4. Backs of fingers to opposing palms with fingers interlocked;

5. Rotational rubbing of left thumb clapsed in right palm and vice versa;

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

7. Once dry, your hands are safe.

World Health Organization

Patient Safety

SAVE LIVES

Clean Your Hands

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WHY is it important to perform hand hygiene?

- **Hand hygiene is the simplest, yet most important step in preventing the spread of bacteria and other disease-causing organisms.**
Your Role – Follow Respiratory Etiquette

• Cover your cough or sneeze
• Perform hand hygiene
Your Role – Disinfect Your Work Area

• Establish a regular schedule for disinfecting your work area
• Follow your work area expectations
How Can You Break the Chain?

Hand hygiene & disinfect your work area

Hand hygiene & immunizations

Hand hygiene & respiratory etiquette

New Employee Orientation
Your Role – Get Your Immunizations

- At risk of illness
- Vaccinated
Summary

Stay healthy

Stay home when sick

Soap & Water
• Before eating
• After restroom
• Visible soil

Break the Chain
• Hand hygiene
• Respiratory etiquette
• Disinfect your work area
• Immunizations
• Stay informed
Security

MAKE A DIFFERENCE
Security Officer Duties

• Provide a safe environment for patients, staff and visitors

• Assists all NWWI sites with security related issues

• Quarterly duress alarm testing and monthly fire extinguisher inspections.

• Provide security escorts for staff members
Contacting Your Security Team

- Security should be contacted for:
  - Workplace violence incidents or concerns
  - Criminal Activity
  - Suspicious people or activity
  - Card Access or Access Control issues
  - Any security related concerns or issues
- Contact Information
  - Main Security Line answered 24/7: 8-3994 / (715)838-3994
  - EMERGENCY: 9-911 (Police)
  - Internal Emergency/Overhead Paging 8-3333
How Security can help you…

• Provide Customer Service to Patients and Visitors

• Ensures a safe work environment for MCHS Employees

• Conduct reporting and follow up on various issues:
  – Theft Reports
  – Suspicious Activity/Persons
  – Disorderly Conduct Reports
  – Employee/Patient Threat Assessment

• Provide Training and Education for MCHS Departments
  – Example: Workplace Violence Awareness
  – Women’s Self-Defense
Culture of Security

Be Alert
Be Responsible
& Communicate
Be Alert

- Awareness of surroundings
- Awareness of people out of place
Be Responsible

• Secure property & confidential information
• Doors, Filing cabinets, etc.
• Don’t bring highly valuable personal items to work
Be Responsible

- Personal responsibility
- Maintain confidentially of assigned ID’s, passwords and all other access control devices including, but not limited to:
  - Cypher codes
  - Key
  - MCHS Access Identification Cards
  - PIN
Responding to Security Alerts
Security Alert: Active Shooter

• An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims.

• Announcement heard overhead: "Security Alert - Active Shooter" (location)

• Before an incident occurs, have a plan and know:
  ▪ The exits from your department
  ▪ Rooms to hide in
  ▪ What to do with patients in rooms
Run/Hide/Fight
Your Response Will Include:

• Exiting the building if at all possible
• Directing patients and visitors away from the location(s) reported
• Not confronting the shooter
• Barricading/locking yourself and others in a room if you can’t exit
• Turning off all communication devices & lights
• Waiting for an “All Clear” announcement
Security Alert: Active Shooter

- **Active Shooter; How to Respond** booklet is an excellent ‘how to’ guide.

- Click on this link and watch [Run Hide Fight; Surviving an Active Shooter Incident](#), a great video that shows you how to respond (5 minutes). When you have finished watching the video complete the Active Shooter Response document in your orientation folder.
Initial Response to an Active Shooter

- Anyone who becomes aware of a person armed with a gun(s) needs to call 911 when it is safe to do so.

- Provide your name, location, number of shooters and any other pertinent information.
Security Alert: Active Threat

• Active Threat is a person who is attempting to harm someone using a weapon other than a firearm (such as using a knife to stab people) and the action will continue until they no longer have the capability to do so.

• Response to an Active Threat would be the same as an Active Shooter response: RUN/HIDE/FIGHT

• Announcement heard overhead: "Security Alert - Active Threat" (location)
Security Alert: Emergency Dept./Facility Lockdown

- Lockdown – The act of securing the entrance(s) to a normally free access facility or area in order to ensure that only authorized persons are granted access, generally to prevent a security threat from entering the area.

- Announcement heard overhead; “Security Alert - Emergency Dept. or Facility Lockdown Plan is now in effect”
Volunteer Response to Lockdown

Expectations for volunteers during the lockdown event include:

• Report to work through designated employee entrances and do not allow others to enter.

• Wear your Mayo Clinic Identification/Access badge to and from work as only card access entry will be allowed to some areas.

• Don’t defeat security measures by allowing anyone to gain entry into the facility.

• Remain alert to unknown persons entering work areas and know how notify appropriate response personnel.

• Don’t talk to the demonstrators or media, other than referring them to the Public Affairs spokesperson or designee.
Security Alert: Building Threat

This announcement is to alert all departments that bomb threat search procedures are to be started.

- Person receiving the threat or call:
  - Obtain as much information as possible using the bomb threat card
  - Call your local emergency response number with the information
  - Participate in a search using your department Bomb Search Card and procedures

- Additional response; participating in a search
  - Look around your unit to determine if anything is or has taken place.
  - Check if an unusual package/container has been left in your area that cannot be identified or does not normally belong there.
  - If you find something out of the ordinary, notify Security. Do not touch or move anything you find!
  - DO NOT conduct intrusive searches or inspections of boxes, packages or containers that could expose you to risk! Do not touch anything you find!
Security Alert (location)

• This announcement would be made during a hostage situation

• Overhead announcements (if made based on site specific characteristics) shall refer to incident as “Security Alert”, and list the location of the incident, so that staff who are not involved in the incident know to avoid the area and to direct patients/visitors away from the area.

• The primary goal of organizational response to any hostage situation will be to notify local law enforcement and facilitate their response so that they may take control of the situation as quickly and seamlessly as possible, in order to minimize risk of harm to those taken hostage as well as others in the facility.
Hostage Situation

It is important to know how to respond to situations where a person or persons may be taken hostage.

- If you have been taken hostage, or if a hostage has been taken in your area:
  - Assume the hostage taker is armed.
  - **REMEMBER: SAFETY FIRST**
  - Cooperate with the person. Do what they tell you. Do not antagonize them or threaten them.
  - Believe what they tell you.
  - Evacuate as much as possible; at least to another floor or preferably outdoors.
  - Be the best witness possible. Note as many details of person as possible.
  - When at all possible, call site emergency number of a hostage situation; where upon, Switchboard will initiate announcement: “Security Alert- building and floor”.
  - If someone is able to, call 9-911 to notify the police. Provide them with as much specific information as possible.
Volunteer Response to Missing Child/Infant

- If you witness an abduction or are aware an infant or child is missing, call:
  - NWWI Security: 8-3994
  - Site specific Emergency Number

- “Security Alert – Missing Infant or Child” (building, dept., floor, age, sex) will be then be announced over the public address system
Volunteer Response to Missing Child/Infant

• **The most critical** part of our Missing Child/Infant Procedure takes place on the first floor exits or main exit doors

• Departments near an exit are asked to post someone at the doors to ask people leaving the building to open coats and bags to check for hidden infants

• Do not to leave the post until the “all clear” is announced
Security Awareness: It is Everyone’s Responsibility!

• REMEMBER: If you see anything suspicious, call **Security** to assess the situation.

• Be as descriptive as possible

• Timely reporting is important, notify security as soon as possible
It is OUR Responsibility

This section provides an overview on how to safely respond to a fire emergency.
This training helps meet standards established by The Joint Commission (TJC).
The Fire Triangle – Fire Prevention

- Fuel, heat and oxygen must come together and stay together for a fire to burn.
- Prevent the three legs of the Fire Triangle from coming together and you prevent a fire
- Remove the fuel, heat or oxygen leg of the fire triangle and you put out the fire
Fire Response - RACE

The **R.A.C.E.** procedure teaches you how to safely respond to a fire.

- **R** - Rescue... The Person in Danger
- **A** - Alarm... Pull the Fire Alarm
- **C** - Confine... The Fire (close doors & windows)
- **E** - Evacuate... or Extinguish
Fire Response Procedures – R.A.C.E.

“E” stands for **EVACUATE/EXTINGUISH**
PASS that Fire Extinguisher

P Pull safety pin from extinguisher
A Aim low, and point nozzle at base of fire
S Squeeze lever below handle
S Sweep from side to side
CODE RED

• Our alert code for fire is called Code Red

• You will hear this announcement: “Code Red – building name, floor, location, area”

• Code Red procedures are all the actions you need to take in case of a fire to keep yourself and everyone safe
Your Role If the Fire Alarm Sounds

If you are walking in the hospital or transporting a patient in the hospital when the fire alarm sounds:

- Listen to the announcement
- Determine if you are in the department where the fire is located
  - If you are in the department where the fire is located, move beyond the first set of fire doors
  - Wait until the "all clear" is announced
- Be sure to explain to patients what is happening and offer reassurance.
This section provides an overview on how the organization will manage staff during an emergency. This section addresses Joint Commission Regulation and CMS:
“As part of its Emergency Operations Plan, the organization prepares for how it will manage staff during an emergency – the hospital trains staff for their assigned emergency response roles”
The Emergency Operations Plan provides an organized process to initiate, manage, and recover from a variety of emergencies, both external and internal, which could confront Mayo Clinic Health System in the Northwest Wisconsin Region and the surrounding community.

The Emergency Operations Plan takes an “all hazard approach managing emergency incidents. “All Hazards” approach means taking preparedness actions that will help facilities deal with hazards of all types much more efficiently and effectively by using a standardized method.
EOP Locations

• Site Emergency Operations plans are found in the [Emergency Operations Plan- NW WI Region](#) under Related Documents.

• Or Quick Links – Emergency Management
Responding to an Incident

Whether there is a planned or unplanned incident, if it is significant enough to disrupt our daily work routine, we need to implement the Incident Command system.
Managing Incidents at Mayo Clinic Health System

• We manage incidents by using HICS (Hospital Incident Command System)

• HICS assists hospitals in improving their emergency management planning, response and recovery capabilities for unplanned and planned events

• It strengthens hospital disaster preparedness activities along with community response agencies
“Incident Command Alert - Briefing”

- Not all incident command activation will require a briefing but when it does, the overhead announcement will be “Incident Command Alert - Briefing”
- VPs or administrators, directors, supervisors, house supervisor, physician chairs and Nursing Administration or their designees attend briefings to receive information from the incident commander about the incident
Volunteer response to an “Incident Command Alert- Briefing"

- If assigned to work in a specific department/area, remain there and perform duties as assigned.
- If not assigned to a specific department/area, report to the Volunteer Services office for assignment (Labor Pool possibly)
- Staff assigned to the Surgery Family Information desk transfer event related calls to the Switchboard (0).
Volunteer Response to Facility, Medical and Weather Alerts
<table>
<thead>
<tr>
<th>Announcement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Code Red + (location)</strong></td>
<td>Identify location/type of fire. Know the location of fire extinguishers and fire alarm pull stations in your area. Evacuate to the nearest Smoke Compartment through Smoke or Fire doors or exit the building. See the General Fire Safety “Code Red Instructions policy.”</td>
</tr>
<tr>
<td><strong>Emergency Response Team + (location)</strong></td>
<td>A person needs immediate emergency help. “MedicalAlert” summons assistance to any area of facility. See Emergency Response Team Activation policy.</td>
</tr>
<tr>
<td><strong>Alpha C Section + (location)</strong></td>
<td>A status cesarean section. Only designated personnel should respond per procedure. See Cesarean Section Classification policy.</td>
</tr>
<tr>
<td><strong>Code Blue + (location)</strong></td>
<td>Initiate for any cardiac or respiratory arrest in the medical center. Person finding an unresponsive person call out for help. Call your site’s emergency number, initiate CPR and send someone for an AED if one is located nearby. See Code Blue Response Plan policy.</td>
</tr>
<tr>
<td><strong>Code Decon + (location)</strong></td>
<td>Instruct the contaminated person to leave the building using the same door they entered. Only Decontamination Team members should respond. See Hazmat Decontamination policy.</td>
</tr>
<tr>
<td><strong>Trauma Team Red/ Trauma Team Yellow</strong></td>
<td>Trauma Team Red/ Trauma Team Yellow – Emergency Department room X, ETA X minutes. See Barron, Bloomer, Eau Claire, Menomonie and Osseo policies.</td>
</tr>
<tr>
<td><strong>Security Alert</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Active Shooter</strong></td>
<td>Exit the building immediately, moving away from the path of danger. If a safe exit is not possible, shut, lock and barricade your work area doors and wait for further instruction. See Active Shooter Response policy.</td>
</tr>
<tr>
<td><strong>Assistance Needed + (location)</strong></td>
<td>A disrupting or threatening situation. Designated response personnel will respond immediately to the location announced. All others should avoid the area until “All Clear” is announced. See Threats to Person or Property policy.</td>
</tr>
<tr>
<td><strong>Building Threat</strong></td>
<td>Bomb threat or disrupting/threatening situation. Only designated personnel should respond. See Bomb Threat policy.</td>
</tr>
<tr>
<td><strong>Facility Lockdown</strong></td>
<td>Immediately secure entrances in event that could result in property damage or potential harm to staff, residents, patients or visitors. See Lockdown policy.</td>
</tr>
<tr>
<td><strong>Missing Person</strong></td>
<td>The announcement will indicate “adult,” “child” or “infant” and provide descriptors. Be watchful of anyone carrying an infant or child, an infant car seat, bulky bag or package or is wearing bulky clothes. Post two staff (if possible) by all doors. See Missing Infant/Child and Elopement – Missing Patient/Resident policies.</td>
</tr>
<tr>
<td><strong>Evacuation + (location) + (details)</strong></td>
<td>If some or all of facility becomes unsafe and requires a complete or partial evacuation, and it is necessary to protect life and safety of patients, staff and visitors. Hospital Incident Command will give the order to evacuate in collaboration with Local Authorities in a Unified Command. See Hospital Evacuation Plan policy.</td>
</tr>
<tr>
<td><strong>Incident Command Alert + (descriptors)</strong></td>
<td>Announcement will include which staff members should report and where. The Administrator on-call or House Supervisor/Lead Nurse will determine when Incident Command is activated. See Incident Command Activation and Termination policy.</td>
</tr>
<tr>
<td><strong>Weather Alert</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Thunderstorm/Tornado Watch/Warning</strong></td>
<td>Watch. Monitor weather announcements. Close all curtains and avoid windows. See Thunderstorm/Tornado policy.</td>
</tr>
<tr>
<td><strong>Winter Weather Advisory/Winter Storm Warning</strong></td>
<td>The National Weather Service has issued a (Winter Weather Advisory/Winter Storm Warning) for our area from X to X a.m./p.m. (A PA announcement of a winter weather warning is for the first 24 hours, then daily, for the warning’s duration.) See Winter Weather Advisory – Ice and Snow Storms policy.</td>
</tr>
<tr>
<td><strong>Facility Alert</strong></td>
<td>A utility or system failure: airborne hazard, electrical, flooding, medical gas, sewer system &amp; water. See Emergency Management/Facilities Services policies.</td>
</tr>
</tbody>
</table>
Medical Alert

• **Emergency Response Team**: For a non life-threatening situation:
  - Call site specific emergency number
  - Give exact location and nature of the emergency

• Should a patient become faint or lose consciousness inside the buildings:
  - CALL FOR HELP!
  - Call a CODE BLUE
  - Call site specific emergency number
  - Give exact location and nature of the emergency
Severe Weather Tornado

- **Tornado Watch** - Weather conditions are favorable for severe thunderstorms that could produce tornadoes. Tornadoes can occur in or near the watch area.

- **Tornado Warning** - A term used by the National Weather Service to inform the public that a tornado has been sighted or is imminent based on radar indications.

Tornados are a high threat situation in the Northwest Region, and are likely to happen. Know how to respond at work and at home.
Safe Areas

• Areas designated as **Safe Areas** are not intended to imply that these spaces guarantee safety during a storm, but are identified as the safest available areas in the building.

• These areas describe a location or locations in a building identified as the safest areas available in a building during a storm.

• Each department and regional sites have their own specific procedure identifying their safe area(s) during a severe storm or tornado.
To request an emergency alert:

<table>
<thead>
<tr>
<th>Location</th>
<th>Dial</th>
<th>Location</th>
<th>Dial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barron</td>
<td>7-6955</td>
<td>Menomonie</td>
<td>7-2222</td>
</tr>
<tr>
<td>Bloomer</td>
<td>7-1000</td>
<td>Mondovi</td>
<td>7-3333</td>
</tr>
<tr>
<td>Chippewa Falls</td>
<td>7-6789</td>
<td>Osseo</td>
<td>7-8759</td>
</tr>
<tr>
<td>EC-Clairemont</td>
<td>8-6789</td>
<td>Rice Lake</td>
<td>7-8596</td>
</tr>
<tr>
<td>EC- Luther</td>
<td>8 – 3333</td>
<td>All Other</td>
<td>911/9-911</td>
</tr>
</tbody>
</table>

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Volunteer Response to a Mass Casualty Incident
On-Duty Volunteer Response

- Volunteers: Stay in your area or if directed to do so report to the labor pool.
Volunteer Response to Workplace Violence and Security Alerts

MCHS NWWI Region
Workplace Violence

• Workplace Violence is defined as: Threats, threatening behavior, acts of violence, or any related conduct which disrupts an employee's work performance.

• Acts include the use of weapons of any kind and/or any unwanted physical attack such as hitting, pushing, scratching or throwing objects.

• Threats include any expression designed to frighten, terrorize, or otherwise place a person in fear of bodily injury.
Safety is a Priority

- Conduct that threatens, intimidates, or coerces another employee, volunteer, patient, or a visitor and/or violence of any nature will not be tolerated.

- Actions that threaten employees, volunteer, patients and/or visitors should be dealt with immediately by supervisors, managers and/or Security personnel.
## Warnings and Signals

<table>
<thead>
<tr>
<th><strong>Anxiety</strong></th>
<th>a change or increase in behavior (e.g., pacing, finger-drumming &amp; withdrawal).</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Defensive</strong></td>
<td>beginning to lose rationality (e.g., noncompliant and belligerent).</td>
</tr>
<tr>
<td><strong>Risk Behavior</strong></td>
<td>behaviors that pose a risk to self or others (e.g., strikes, kicks and grabs).</td>
</tr>
<tr>
<td><strong>Tension Reduction</strong></td>
<td>a decrease in physical and emotional energy (e.g., crying and apologizing).</td>
</tr>
</tbody>
</table>
Reporting

• Actions that threaten employees, volunteers, patients and/or visitors should be dealt with immediately. Report to your supervisor, manager and/or Security.

• The incident must be reported to Security, and a workplace violence statement form should be completed.

• For NWWI Region, contact the Security Control Center at 83994
Objectives

• Describe volunteer responsibilities for:
  ▪ Solid Waste
  ▪ Regulated Medical Waste (Infectious Waste)
  ▪ Hazardous Waste
  ▪ Recyclable Materials
  ▪ Electronic Equipment
Key Points

• Avoid direct contact with hazardous materials, infectious waste and hazardous wastes

• Only trained staff should have direct contact with those materials

• Report unusual items to staff
Solid Waste

• Solid waste: Common trash or garbage

Examples:
- Paper towels
- Candy wrappers
- Facial tissue
- Food
Solid Waste Disposal

Place solid waste in clear bags for disposal in a landfill.
Regulated Medical (Infectious) Waste

- Contains pathogens that can lead to infectious disease
- Mainly blood and body fluids
Regulated Medical (Infectious) Waste Disposal

- Volunteers do **not** handle infectious waste
- This is a responsibility of trained staff
Hazardous Waste

- Hazardous waste is capable of causing injury or death and may damage or pollute the land, air or water
- Volunteers do **not** handle hazardous waste
- This is a responsibility of trained staff
Examples of Hazardous Waste

- Unused medications
- Mercury-containing items
- Bulk chemotherapy agents
- Alcohols and alcohol-based materials
- Nicotine and Warfarin and their packaging
- Unused chemicals, including cleaning chemicals
Aerosol Can Disposal

- Place aerosol cans next to waste baskets for collection by Environmental Services
Hand Sanitizer Container Disposal: Non-Empty

- Hand sanitizer containers that are **not empty** are considered a flammable hazardous waste.
Hand Sanitizer Container Disposal: Non-Empty

• Place non-empty hand sanitizer containers next to wastebaskets for collection by Environmental Services
Hand Sanitizer Container Disposal: Empty

- Place **empty** alcohol-based hand sanitizer containers in the regular trash
Recyclable Material

Recyclable material is solid waste that is returned to productive use as material or energy.
Paper Recycling

Acceptable:
- Paper materials/forms
- Newspaper, magazines and manuals
- Post-it® pads
- Adhesive labels and stickers
- Overhead transparencies
- Diskettes and computer disks
- Videotapes
- Legal paper

Unacceptable:
- Food
- Gum and candy
- Candy wrappers
- Plastic wrappers
- Drinking cups
- Facial tissues
Recycling Cans, Glass and Plastic Bottles

- Place cans, glass bottles and plastic bottles in designated containers near your work area.
Battery Disposal

- Place spent batteries in designated collection containers
- Place protective covers or tape over battery terminals of nine volt batteries before placing in collection containers
Questions About Waste Disposal

• Contact staff with questions about waste disposal
Safety Data Sheets (SDS)

• Provide information about chemical hazards

• Contact the department in which you work, Volunteer department leadership, Environmental Services or a Safety Coordinator if you want to see a SDS for a certain product
Container Labels

- Container labels include pictograms, signal words, precautionary statements and other specific information about the products.
Transporting Specimens

• If items are not packaged or secured properly – Do not handle – Contact staff from that department

• If a specimen container is leaking or a spill occurs – Do not handle – Contact staff from that department
Contaminated Patient Encounters

• Avoid direct contact with the patient.
• Notify staff of situation
• Luther campus - have someone dial 8-3333, request the Emergency Response Team, and indicate patient decontamination is needed
• Clairemont Campus – have someone dial 9-911
• At the Regional Sites dial your Site Specific Emergency Phone Number
• Direct patient back outside and assure them they will receive care
State Statute

Wisconsin statute section 146.40 (4g) (4r) states that all employees, physicians, volunteers and people under contract with Mayo Clinic Health System and its affiliates are required to immediately report any occurrences of suspected employee caregiver misconduct or injuries of unknown source.
Definitions and Examples of Various Employee Caregiver Misconduct

• **ABUSE:** is the willful infliction of injury, unreasonable confinement, intimidation or punishment with resulting physical harm, pain or mental anguish. Examples include, but not limited to:
  - Any intentional hitting, slapping, kicking, pinching of a patient or resident.
  - Any inappropriate touching of a sexual nature by a caregiver to a patient or resident.
  - Verbal threats or intimidation of a patient or resident.
  - Any conduct that is not part of the treatment plan or is in conflict with organization’s policies & procedures that result in physical pain or injury, mental or emotional damage to a patient or resident.

• **NEGLECT:** is the failure to provide goods and services necessary to avoid physical harm, mental anguish or mental illness

• **MISAPPROPRIATION OF PROPERTY:** (or theft) is the deliberate misplacement, exploitation or wrongful temporary or permanent use of a patient’s belongings, money or medications without the patient’s consent
Employee Reporting of Caregiver Misconduct

• Report **immediately** (definition of immediately – as soon as possible after the discovery of the incident)

• Report to one of the following: (not necessarily in this order)
  - Immediate supervisor
  - Department director/Assistant administrator
  - House supervisor
  - Human Resources representative
  - Department vice president
You Will Not Get into Any Trouble!

Mayo Clinic Health System will not tolerate any form of retaliation against anyone who reports suspected employee caregiver misconduct.
Abuse Prevention

We must do all that is within our control to prevent occurrences of mistreatment, neglect or abuse of our patients.
Managing Your Stress

- Stress can lead to physical, emotional or behavioral symptoms in a person.
- It is important to recognize these symptoms in yourself and to take care of yourself in order to minimize stress.
- As a professional, it is your job to manage stressful situations with as much knowledge, calmness, preparation, training and self-control as possible.
- As a member of the healthcare team, it is your responsibility to help ensure an environment that promotes patient and resident sensitivity, security and prevention of mistreatment, neglect and abuse.
Patient’s Bill of Rights

• The Patient Bill of Rights was written for the protection of patients and was an effort to educate healthcare providers, as well as patients, regarding patients’ right to information about their health status.
Everyone is Responsible!

- All staff are responsible for ensuring that patients’ rights are respected and protected at all times.
- Failure to adhere to these standards can result in large fines, loss of facility accreditation or the revocation of a license to operate.
How Does Mayo Clinic Health System Support Patient Rights?

- Provides informed patient consent
- Involves the patient/family in their plan of care
- Maintains patient safety
- Uses policies and procedures to provide standardized, evidence-based care
- Provides patient/family education
- Abides by HIPAA
- Investigates all situations of violations
- All clinic and hospital care providers, physicians, department directors, and patient service representatives are committed to understanding and resolving a patient concern in a timely and respectful manner
Reporting Concerns or Complaints

- Patients are instructed to report their concerns or complaints if we fail to meet their expectations.
- Concerns or complaints may be reported in the following manner (in no particular order):
  - To a care provider or physician
  - To the director of the hospital department or transitional care
  - To a patient service representative (888-838-4777 or 715-838-3311)
Patients **Always** Have the Right to Contact:

- **The Wisconsin Division of Quality Assurance:**
  One West Wilson Street, P.O. Box 2969 Madison, WI 53701-2969. Phone: 608-266-8481

- **The Joint Commission:** 800-994-6610 or their online complaint form
Relinquishing Custody of Newborns
Description

It is the policy of Mayo Clinic Health System to comply with the Wisconsin Act 2 Law: "Relinquishing Custody of Newborns."

The purpose of this section is to guide volunteers on proper procedures for responding to such situations.
Upon receiving a child under protection of this law, the staff member shall:

• Try to get as much voluntary information as possible from the person who surrenders the child, including:
  ▪ The child’s date and time of birth
  ▪ Any known medical history of the child and birth parents
  ▪ Contacts if they are willing to provide them
  ▪ Names if they are willing to provide them
Procedure

- In the event a newborn child is surrendered under the protection of this law, the staff member taking the child into custody shall take any action necessary to protect the health and safety of the child.

- Volunteers should contact paid staff as soon as possible.
Additional Information
Body Mechanics

• Volunteers do not usually become involved in lifting heavy items
• Call Environmental Services (Housekeeping) to do any lifting of heavy items
• Volunteers never lift patients/visitors
• Call nursing to assist patients/visitors if lifting is required
Oxygen Tank Safety Hazards

• Compressed gas cylinders are extremely dangerous if not handled properly, as the pressure inside a full tank is 2200 pounds per square inch!

• It’s extremely important to handle them carefully; if they inadvertently tip over and the valve at the top becomes damaged, it becomes a missile and can cause serious harm to patients and staff in the vicinity.

• Please click here to watch The Myth Busters in a controlled demonstration of an oxygen cylinder.
Safe Oxygen Tank Handling

- If you see an unrestrained oxygen tank:
  - Keep it under your direct control and contact the Respiratory Care Dept. or other staff in unit
  - Place in oxygen tank dolly and return to Respiratory Care Dept.
Transporting Patients

Volunteers may transport patients/visitors
- to the parking ramp through the covered walkway
- to a waiting vehicle at the clinic/hospital entrances

Volunteers may transport patients in w/c without staff if:
- Patients can transfer independently or are assisted by staff to transfer
- Patients have no IV's, or other accompanying equipment
- Patients are considered in stable condition.
- Patients are not under any infectious precautions

Volunteers may transport patients in w/c with oxygen if:
- Volunteer contact with oxygen tank is limited to placing the tank into holder.
  - Oxygen tank is secured in an oxygen tank holder
  - Attached to the wheelchair.
- In an oxygen tank dolly and an additional person assists with the transport.
- Volunteers may transport patients with home oxygen units in self-carry bags.

Volunteers can assist staff in transporting patient's with IV's and other accompanying equipment that needs to be pushed
- Patients may be in wheelchair or on a bed
- Volunteers will not perform these transports independently
Signs on Patient Room Doors

Dove: Patient is dying and on comfort care measures only
Signs on Patient Room Doors

Oak Leaf - Patient has recently passed, family and/or patient is still in room
Isolation Precautions: Staff, volunteers and visitors who are trained and have the proper equipment to enter a room with contact precautions.
Other Signs on Patient Doors

- Leaf with Tear Drop: Loss Related to Pregnancy
- The swirl card is used as a visual aid in the ED to identify all high risk patients.
NWWI Mission and Vision for Volunteer Services

Our Mission

Volunteer Services provides compassionate, supportive, well trained volunteers who respond to the needs of those we serve.

Our Vision

Volunteer Services will work in collaboration with senior leadership, department leaders and staff along with the community of NWWI to develop, implement, and sustain rewarding, value-added volunteer roles which enhance the patient experience.
Role of Volunteers in Hospital, Clinic, and Home Setting

- Volunteers play a vital role providing support services to our patients, their families and our staff.
- Volunteers provide unpaid support services that supplement essential services and contribute to the enhancement of patient care.
- Supervision of volunteers will be performed by staff in their assigned department. The staff is responsible for supervision, including initial and ongoing training, performance evaluations, and performance issues.
Benefits For Volunteers

- Complimentary food and beverage allowance with a minimum of a 2 hour shift
- 20% Discount on Eye Glasses
- 10% Discount at Medical Store
- Annual Recognition Event
- Fitness Center membership as offered to employees
- Flu Shots
- Complimentary ECT bus pass
Keeping Track Of Your Volunteer Hours

• Please remember to sign in when you start your shift and sign out when you finish.

• Your site specific coordinator will show you where your sign in area is located and how to use it.
Scheduling/Absences

• If you have a last minute absence (less than 48 hours in advance), please call the department you volunteer in directly to notify them of your absence.

• You may also add yourself to any shift in your area that has a Help Wanted notice.

• An automatic email notification for schedule changes will be sent to the Volunteer Services staff and the supervising staff in your assigned area.

• If you do not have access to a computer with internet, please call your Volunteer Coordinator with the information.
Scheduling/Absences cont.

- If you have a planned absence, please remove yourself from the schedule for your area. You will be shown how to do this via the computer on your first day of training.

- We understand that you may be gone for an extended vacation. Please give us as much notification as possible.

- If you need to be gone more than 50% of the time during the year, we will talk about the option to fill in as a substitute, giving others who are here year round the opportunity for a more regular position.
Weather Emergencies

• Volunteer and gift shop activities will be cancelled if the following criteria is met:
  ▪ Activation of the Emergency Staffing Plan for Mayo Clinic has been made by the Hospital Operations Administrator (or Administrator On-Call after hours) or the Mayo Clinic Incident Commander.
  ▪ Area schools have been canceled.
  ▪ Unnecessary travel is not advised.

• In the event volunteering activity is canceled, volunteers should not report for duty.
Valuables

• We strongly encourage our volunteers to leave items of value in their car or at home, as we are not able to guarantee the safety/security of these items while volunteering.

• If you loose an item, you can check with Lost and Found.

• If a lost item is turned in, please report it to Lost and Found immediately, as this is the best way to ensure items are returned to their rightful owner.
Personal electronic devices

• Use of personal electronic devices, including cell phones (and texting) for personal business or entertainment is not allowed during work shift except in emergency situations.

• Volunteers and staff are expected to portray a professional image and be alert to their surroundings.
Mayo expects all volunteers to conduct themselves in accordance with high personal, moral and ethical standards. This includes adherence to the law, both in their professional and personal lives. The volunteer’s role and responsibilities at Mayo Clinic will be considered in determining the appropriate action to be taken based on an investigation of the nature and circumstances of the charges.
Criminal Charges/Reporting/Notification Policy continued

- Anyone who has charges pending or has been charged with or has been indicted or found guilty of a crime including alcohol or drug offenses, excluding minor traffic violations (e.g., parking, speeding), must notify their Supervisor within five days of the event and or before returning to work, whichever occurs first.
Reporting Injuries

- If you are injured while volunteering you must report your injury to your immediate supervisor and also to a member of the Volunteer Services staff.
- If your injury requires immediate attention, you should go to the Emergency Department (not to Employee Health) and register for treatment. Payment is the responsibility of the volunteer.
- Your injury must be documented on the online Incident Reporting Form, the same form we use for patients and visitors.
- If the supervisor or staff member does not fill out this form, the Director of Volunteer Services will complete it.
Training and Orientation of Volunteers

• Volunteers are required to complete
  - Orientation PowerPoint
  - First day orientation
  - Department specific orientation
  - Annual in-service
  - Other trainings as necessary
Please complete and/or turn in the following items within the first 30 days of volunteering. If you have any questions, please call the Volunteer Office. Thank you!

- [ ] Health History Form
- [ ] 1st TB Skin Test
- [ ] 2nd TB Skin Test (within 1st 21 days)
- [ ] MMR Dates or Titer
- [ ] Flu Vaccine Tracking Form (Oct – Mar)
- [ ] Orientation PowerPoint/Completion Form
- [ ] Active Shooter Response Training Sheet
- [ ] Computer User Agreement (First Day)
- [ ] Service Area Training Sheet (within 1st 30 days)
Please contact the Volunteer Services staff if you have any questions.

Thank you