

Mt. Grant General Hospital/Lefa L. Seran SNF

Volunteer Orientation Procedure Policy & Checklist

NAME _____

Instructions for the New Volunteer:

As a new Volunteer, you must complete and sign-off on the following list of orientation duties before volunteering at Mt. Grant General Hospital/Lefa L. Seran SNF. If you have any questions please contact Human Resources at ext. 266 (in the Business Office Annex).

*** Please give this checklist and all required forms to the Human Resources upon completion ***

	Return To/ Filing Location	Empl Initials	HR Initials
<input type="checkbox"/> Fill out and sign the Application	Human Resources Volunteer File		
<input type="checkbox"/> Complete and sign the "Conviction Questionnaire" that is attached to the application.	Human Resources Volunteer File		
<input type="checkbox"/> Sign and return Volunteer Agreement, Consents and Releases, and Conditions	Human Resources Volunteer File		
<input type="checkbox"/> Sign and return Volunteer Duties Description	Human Resources Volunteer File		
<input type="checkbox"/> Complete the "Volunteer Data Record"	Human Resources		
<input type="checkbox"/> Pick up a volunteer badge from Shelly Skvarna in Central Supply			

MEDICAL

	Return To/ Filing Location	Vole Initials	HR Initials
<input type="checkbox"/> Read and sign the Vaccine Consent Form.	Human Resources Volunteer File		
<input type="checkbox"/> Take the TB Testing form to the Acute Nurse's Station. <input type="checkbox"/> tuberculosis test #1 <input type="checkbox"/> tuberculosis test #2	Results Human Resources Volunteer File		
<input type="checkbox"/> COVID Vaccine or Exemption with Mandatory testing			

TRAINING

	Return To/ Filing Location	Vol Initials	HR Initials
<input type="checkbox"/> Read the "Elder Abuse Training." Complete and sign the test and return only the test.	Human Resources Volunteer File		
<input type="checkbox"/> Safety and Disaster Training Return Acknowledgement only. <input type="checkbox"/> Disaster & Emergency Evacuation Training	Human Resources Volunteer File		

EDUCATIONAL VIDEO PRESENTATIONS

	DATE VIEWED	Vol Initials	HR Initials
<input type="checkbox"/> 1 View the "Resident's Rights - Right to Know" video			
<input type="checkbox"/> 6 View the "The Best Defense: Hand washing" video			
<input type="checkbox"/> 7 View the "Protecting Patient Privacy (HIPAA)" video			

POLICIES

	Return To/ Filing Location	Empl Initials	HR Initials
<input type="checkbox"/> Read the "Volunteer Policy Manual" and sign the Volunteer Acknowledgement Form. ❖ <i>Retain the "Volunteer Policy Manual" for your reference.</i>	Human Resources Volunteer File		
<input type="checkbox"/> Read the "Abuse Suspected & Unwitnessed Injuries - Prevention & Reporting Policy", sign and return the acknowledgement form only.	Human Resources Volunteer File		
<input type="checkbox"/> Acknowledgement of Confidentiality Agreement. Return Acknowledgement only.	Human Resources Volunteer File		
<input type="checkbox"/> Workman's Comp Policy Review and discuss the Workman's Compensation Policy and reporting forms so you will know what to do should you suffer an injury while at work. <ul style="list-style-type: none"> ▪ C1 form "Notice of Injury or Occupational Disease": Volunteer fills this out with receipt acknowledged by employer. ▪ C3 form "Employer's Report of Industrial Injury or Occupational Disease": Hospital fills this out. ▪ C4 form "Volunteer's Claim for Compensation/Report of Initial Treatment": Volunteer and physician complete form. ▪ Return Acknowledgement only. 			

<input type="checkbox"/> Facility tour and introductions.			
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Sign and date below

This acknowledges that you have completed and understood every item on this "New Volunteer Orientation Checklist" for which you have initialed.

Volunteer Signature

Date

Human Resources Signature Date

*** Please give this checklist and all required forms to the Human Resources upon completion ***