



st joseph home

Possibility overcomes disability

VOLUNTEER HANDBOOK

Mission Statement

St. Joseph Home creates a home for adults and children with developmental disabilities who have complex support needs and use a wheelchair for mobility. The Home, a non-profit started by the Sisters of Charity of Cincinnati, offers a creative, loving environment for those in the residential, respite programs, and day programs. Attention to the individual's medical, social, educational and spiritual development reveals the unique giftedness of each person. Compassionate care and respect for the dignity of life are the hallmarks of St. Joseph Home.

Vision Statement

St. Joseph Home will be a leader, creating a loving community to serve the most vulnerable individuals with significant developmental disabilities, maximizing their potential so that possibility overcomes disability.



Welcome to St. Joseph Home!

I am thrilled that you're planning to share one of your most valuable resources – your time – with our community. There is no greater gift.



Volunteers are a very important part of the fabric of St. Joseph Home. There are simply roles that no others can play, yet as a volunteer, you can. You can become that friend to share life with someone we serve. You can allow us to accomplish new things because you bring a skill set that we did not already have on our team. You can make more community explorations come to life for those we serve. No matter the role or roles you decide to serve in, your presence and passions are valuable to us and we are grateful. In turn, we hope you, too, are impacted as a person by the individuals we serve, their families, and the staff. If you're anything like me, it's impossible not to be.

In closing, wherever you land within our organization, I hope that you find life and hope in your time here. Thank you again for your generosity and I look forward to meeting you in our comings and goings from SJH. Thanks to you for helping possibility overcome disability at every turn!

In gratitude,

A handwritten signature in black ink that reads "Dan Connors". The signature is written in a cursive, flowing style.

Dan Connors, President/CEO

ST. JOSEPH HOME'S FOUR PILLARS

SJH over a 150-year long tradition of caring for those marginalized most by society - to serve the unserved and underserved because we care for each person. We are called to have the moral courage to be counter cultural. These FOUR PILLARS are the ground on we stand on and the aspiration we reach for.

- Servant leadership begins with the natural feeling that one wants to serve, to serve first. Caring is the essential motive behind servant leadership. Servant leaders establish vision, model an authentic life, focus on partnerships, and influence others around them by modeling service for and with others.

Here we practice Servant Leadership as taught by Robert Greenleaf. Together all staff have a share in the ownership of both success and failure, and most importantly ownership of the future of St. Joseph Home. Each team member is unique and respected. United under one mission, members are empowered to lead and serve.

- Community is a place of belonging, a place where people are earthed and find their identity. The very first community to which we belong is the family. The essence of community is a sense of belonging. Communities are open to others, remain vulnerable and humble, grow in love, and in humility.

The SJH Community is multigenerational, heirs to the love and commitment of generations before and builders and ground layers for future ones. Our community braids together families, neighbors, staff, individuals with care needs, donors, volunteers, legislators and more. Each day, community can be felt and seen through the culture and spirit at St. Joseph Home.

- Gentle Presence is about unconditional love between two hearts. It is based on caregivers changing themselves, finding their gentle spirit; to help others feel safe and loved. We believe that all humans are created with one desire, to love and to be loved. The injury suffered by lack of love is broken heartedness. We need to heal the brokenhearted to become whole again. Everyone must feel safe, loved, loving and engaged in life. In order to do this, we use the tools of presence, hands, words and eyes.

St. Joseph Home exercises great care and mindfulness in guaranteeing a safe, loving, engaging atmosphere for all. No matter your role, you are valued and can rely on St. Joseph Home for support. As John McGee noted, we all need to experience an environment where we feel safe and loved; where we can trust; and where we can engage in valued relationships.

- Heritage is the fourth and final pillar guiding SJH. St. Joseph Home has a strong, Catholic heritage. Founded by the Sisters of Charity of Cincinnati, the sisters have long stood against the culture of the times by serving those on the margins. We will continue, and not falter in this counter-cultural approach toward justice. We will continue to carry the tradition forward.

COMMON TERMS AND PHRASES

“Possibility Overcomes Disability”...

Let's be clear – we are not the ones bringing possibility to those living with disabilities. Those that SJH exists to serve are the gift, the opportunity, the possibility for us to overcome the world's desire to “disable” our people. We need to choose to bring the gift of the residents to the larger community and world for all to learn and grow from. We need to create pathways for the world to see the potential and capability of all members of our community.

Person-centered Planning

Person-centered planning is a way of understanding people so that together we can support choice, maximize opportunity and share control. It is a way to identify personal choices and the actions to support them. Remember: choice, opportunity, and control.

To ensure that you remain person-centered, keep the following tenets in mind:

- 1) Begin with a thorough knowledge about the person receiving services. Their likes and dislikes. What is important TO them? What is important FOR them?
- 2) Empowering informed choices increases independence.
- 3) Involving trusted supports/relationship increases opportunities for success.
- 4) Enhancing natural supports/relationships increases community membership.

Self-determination

Self-determination is a combination of attitudes and abilities that lead people to set goals for themselves and to take the initiative to reach these goals.

Principles of self-determination include:

- 1) **Freedom** to plan a life with the necessary supports
- 2) **Authority** to control a certain sum of their own dollars to purchase necessary supports
- 3) **Support** to build a life in the community through the arrangement of resources and personnel that can assist to ensure a life in the community that is rich in social associations and contributions
- 4) **Responsibility** to give back to the community through a valued role or roles

Community Inclusion

Community inclusion (or the opportunity to live like everyone else) should result in a community presence and participation of people with disabilities similar to that of all others without a disability label. Encompasses housing, education,

recreation, civic engagement, peer support, employment, health, spirituality/religion, valued social roles, and self-determination.

People First Language

People First Language is a sensitive, accurate, and respectful way of referring to any person, especially people with disabilities in our case. Words have a profound impact on shaping attitudes and perceptions. Incorporating People First Language demonstrates that people are unique in their abilities and that an individual's disability is part of who they are, but does not define them. At SJH, we hold one another accountable to these terms because it fosters a community of mutual respect and opens lines of communication and acceptance.

Tips to incorporate use of People First Language include:

- It is best to ask the person which words or phrases are acceptable to them
- Avoid using descriptions that connote pity, such as “afflicted with” or “suffers from” because these terms carry assumptions that the person is living with a reduced quality of life, which simply may not be the case.
- Use neutral language whenever possible when describing a person with a disability
- Emphasize abilities rather than limitations
- Focus on a person's accomplishments, creative talents, and skills

Examples of People First Language include:

- | | | |
|----------------------------|----|-------------------------|
| ▪ Congenital disability | vs | Birth defect |
| ▪ Blind/visually impaired | vs | Blind person |
| ▪ Person served/supported | vs | Client/consumer |
| ▪ Has a disability | vs | Is handicapped/crippled |
| ▪ Accessible parking | vs | Handicapped parking |
| ▪ Communicates nonverbally | vs | Is mute/dumb |
| ▪ Uses a wheelchair | vs | Is wheelchair bound |

(Content in this section is adapted from guide produced by Hamilton County Developmental Disabilities Services and Ohio Valley Goodwill, 2015)

SJH STATEMENT OF RESIDENT'S BILL OF RIGHTS

St. Joseph Home presents this Resident's Bill of Rights to all residents and/or guardians at the time of admission.

St. Joseph Home expects these rights to be supported by the entire staff and volunteers.

Legal precedent has established that the residence itself has responsibility to the resident and/or guardian. It is in recognition of these factors that these rights are affirmed.

1. You have the right to a normal home with a good setting. Your home should be clean and safe.
2. You and your guardian or advocate should be told about your medical condition, how you are doing, and problem behaviors, the risks of treatment, and your right to refuse treatment.
3. You have the right to be free from unnecessary drugs and restraints and are provided active treatment to reduce these.
4. You do not have to work without pay. If you have a job, you have the right to get paid fairly. Helping around the home, such as cooking or cleaning is not considered work, but is a responsibility. Responsibilities are what you need to do in order to have your rights and continue your services.
5. You may meet with other people in a place where you can be alone.
6. You can send and receive your mail without anyone opening it. If you need help sending, opening, or reading your mail, you can ask someone to help you.
7. You have the right to choose and keep any objects and clothing that are yours. You have the right to wear clothing that fits, is in good condition, and keeps you warm or cool enough. If you don't have suitable clothing, it will be provided for you. You should also be provided a place to store your things.
8. If you are married and you both live in the same home, you have the right to share a room.
9. You should always be treated with respect. You have the right to not have anyone hurt you, say mean things to you, be too personal with you by touching you in the wrong way, or make you feel bad by what they say or do to you. Tell staff, your parent, guardian, or advocate if this happens. Report all abuse to ICF/MR at 1-800-458-9858.
10. You have the right to have regular meal times. You, your doctor and/or nutritionist can help decide what kind of food is best for you.
11. You have the right to visit anyone you want. You can meet privately with visitors. Be careful not to bother others in your home because of your visits. Your friends and family can visit you here and, if it is okay with your friends or family, you can go visit them.
12. You have the right to manage your money, be trained to manage your money, or have help in handling your money. You can ask staff if you need help or have questions. You can look at records that show how much money you have. If you have a guardian, they may decide how your money is managed.
13. You have the right to make and receive telephone calls in private. You can ask staff to help you.
14. You have the right to make decisions about your daily life, including things like what you want to wear.
15. You have the right to privacy during treatment and care of your personal needs and when you want to be alone. If staff helps care for your personal needs, they

- should close the door so other people cannot see you. Everybody should knock before entering, and wait for you to answer if you can, before entering your room.
16. You have the right to be out of bed and out of your room most of the day, moving around and doing things. Staff will help move you if you need help.
 17. You should be provided with basic personal items and supplies, like shampoo and toothpaste. If you like a different brand or type of personal need item, you can buy the item you like with your own money.
 18. You have the right to receive medical and dental care just like everyone else in the community.
 19. You have the right to have services and supports that will help you do things for yourself like taking care of your own personal needs. A plan for your treatment will be developed by you, your guardian, and your team. You have the right to go to meetings about you and tell your team what you want to learn and be involved in. This includes your annual planning meeting. You can also invite a friend or advocate to your meeting.
 20. You do not have to be moved from where you live without a good reason, unless it is an emergency. You should be given enough time to get ready to move. If you feel you are being rushed, ask for more time to get ready.
 21. You have the right to have an opportunity to participate in social, religious, and community group activities.
 22. You have the right to know the rules and regulations of St. Joseph Home.
 23. You have the right to be treated like everyone else. Be able to complain or ask for changes if you don't like something without being afraid of getting into trouble.

VOLUNTEER POLICIES

Approval Process: All potential volunteers must go through an application and screening process. This process includes a tour and the sharing of general information on the type of services provided and volunteer opportunities available. In accordance with the HIPPA (Health Insurance Portability and Accountability Act), no personal information of a confidential nature will be disclosed at this stage.

Potential volunteers will be screened by the Volunteer Coordinator. If chosen to move forward, the applicant will be walked through all the necessary paperwork. Once placed, a specific introduction to the role will be arranged for the new volunteer and the volunteer will be transitioned from communicating primarily with the Volunteer Coordinator to their long-term staff contact connected most closely to their selected role.

COVID 19: All volunteers are required to be fully vaccinated prior to their first shift volunteering. Proof of vaccination is required to begin volunteering. If you have been exposed to COVID 19, please let the volunteer coordinator know immediately. A negative test result is required in order to return to volunteer assignment.

TB Testing: If volunteers are expected to exceed 40 hours within a calendar year and volunteers are eighteen years of age or older, the prospective volunteer is required to have an annual TB test. The TB test can be performed by St. Joseph Home nursing staff or by a personal physician. The test must be read within **48-72 hours** and results given to St. Joseph Home in writing. If an applicant has results of a prior TB Test within six months, that can be provided at this stage to be kept on file. A screening for signs and symptoms must be completed by St. Joseph Home nursing staff annually thereafter.

Background Check: If volunteers are expected to exceed 40 hours within a calendar year and volunteers are eighteen years of age or older, the volunteer is required to undergo a BCI criminal background check which is renewed every 5 years.

Time Tracking and Commitment: All volunteers are responsible for signing in and out each time you are volunteering in the Volunteer Tracking binder available at each site. Volunteers are expected to arrive on time each time they are scheduled to volunteer. If unable to make it, the volunteer is responsible for informing their supervising staff member.

Identification: If a volunteer is expected to exceed 40 hours within a calendar year, a badge will be provided by SJH. If a volunteer is not expected to exceed 40 hours, they will be provided a name tag each time they arrive at their service site. The SJH badge or name tag must be worn at all times on SJH premises. Volunteers have a responsibility to inform staff of their whereabouts (with or without resident) when on the premises as this helps to ensure everyone's safety.

Confidentiality & HIPAA: No one but a SJH staff member (with appropriate authorization) or the legal guardian of a resident shall take photographs of the individuals we serve. As a volunteer, you are not permitted to take photographs or videos of residents for your own personal use, including your social media accounts. You also cannot transmit photographs of residents or residents' information without prior authorization.

In accordance with HIPAA, all information and records pertaining to the resident's care and programming are treated as confidential. SJH must obtain written permission from the parent/legal guardian before releasing information to another individual or agency.

As a volunteer, you may come into possession of confidential information but any information you receive about the residents or their families must be kept in strictest confidence. This information should not be discussed with anyone who is not directly involved in the care of the residents or participants at SJH and has a need to know.

Personal Possessions: SJH is not liable to volunteers for loss of or damage to personal property while at SJH or participating in a scheduled SJH activity off-site. SJH will, however, reimburse volunteers for damages to clothing, eyeglasses, etc., when caused by a supported individual. The alleged incident must have occurred while the volunteer was officially on duty. If any personal property (clothes, glasses, etc.) is damaged by a resident, please contact the Volunteer Coordinator and your primary site contact at the time of incident to make necessary arrangements.

Residents' Personal Property and Equipment: Volunteers are asked report any damage they find to a resident's wheelchair, adaptive equipment, or personal clothing to the nearest staff member immediately.

Drugs and Alcohol: SJH will not tolerate any use, exchange or distribution of drugs. Anyone suspected of being under the influence of drugs or alcohol in any program will be dismissed immediately and permanently.

Snacks and Drinks: Snacks and drinks are permitted and available in the break room of each location only. You are welcome to use these spaces and the vending machines while volunteering. No food, other than the residents', is allowed in residential or day program spaces.

Dress Code: Volunteers are asked to refrain from wearing dangling jewelry or heavy perfumes, colognes or after-shaves due to respiratory difficulties of some of those we serve. Recommended attire includes closed-toed shoes, socks, shirts with sleeves, and shorts or pants. Volunteers with long hair are encouraged to pull it back.

Smoking: St. Joseph Home is a smoke-free environment. If you smoke, please use the designated outdoor smoking area in the back of the parking lot on main campus and other designated spots at other sites. Please note that those we serve are not permitted in the smoking area.

Emergency Procedures: In the event of an emergency, remain calm and get help. Calmness is key in working with the individuals we serve. Copies of the fire and severe weather policies are located in the cottages as well as later in this handbook. In case of emergency, follow the directions of the Nurse Supervisor and other leadership on duty at the time.

Health and Safety: If you have a cold or are sick, please call your primary staff contact or the Volunteer Coordinator (513-563-2520 ext.183) to notify SJH that you will not be coming in. If you or a member of your family find out that you have been exposed to

Covid 19, measles, chicken pox, the flu or other contagious diseases/ illnesses following a recent visit to SJH, please notify the Volunteer Coordinator ASAP.

Personal Care of Residents: No volunteer shall lift or transfer, feed, change, or bathe an individual that SJH supports. These are private and skilled efforts to be provided by staff only to maintain safety and dignity.

CODE OF CONDUCT

The Code of Conduct provides guidance to all St. Joseph Home employees, volunteers and interns to assist them in carrying out their daily activities and insures that everyone has a common understanding of what types of behavior and conduct are expected.

These requirements apply to our relationships with residents, families, guests, vendors, and each other, and create a climate that is conducive to a positive work environment and fosters a community feeling for residents and everyone working at St. Joseph Home:

- Treat all those we serve, guests, other volunteers, and staff with a spirit of kindness, patience and understanding.
- Respect the needs and desires of every person we serve when habilitation and health care decisions are made.
- Serve all with respect, concern, courtesy and responsiveness in the performance of your designated role. All services will be provided in a manner that does not discriminate, harass or bully any person, or jeopardize anyone's safety.
- The highest quality care will be given to all of those we serve at all times.
- Work in a cooperative manner with management and supervisors, coworkers, residents, volunteers, and guests, parents and guardians, and other members of our community.
- Follow all policies and procedures on revealing or disclosing confidential information regarding residents, other staff, (HIPAA) and/or St. Joseph Home (including financial or sensitive information).
- Demonstrate high standards of personal integrity, honesty and professionalism in the workplace and community, which includes interacting with the public, residents and guests, families, other volunteers, and staff in a civil, courteous and respectful manner.
- Perform all duties without favoritism and without improper influence by family, social, or other relationships.
- Do not solicit tips, personal gratuities or gifts from families of those we serve or from outside vendors.
- Engaging in conduct that is deemed to be vulgar, obscene, threatening, intimidating, harassing, and/or unlawfully discriminatory (as further defined by our Anti-harassment and Bullying policy and Non-Violent Workplace policy) is prohibited.
- Refrain from threatening, intimidating, coercing or otherwise interfering with the job performance of employees or fellow volunteers.

- Protect and preserve the assets and resources of St. Joseph Home, its employees, volunteers, and the individuals we serve by following procedures to prevent their loss, theft or unauthorized use, including that information held within computers.
- St. Joseph Home time, property, equipment and resources will not be used for personal gain.
- Abide by company policies and cooperate fully in any investigation that the company may undertake.

This list is not all inclusive and serves as a general overview of the conduct that all employees, volunteers and interns should display. Failure to comply with this Code of Conduct may need to result in termination from the established role.

Nothing stated in this Code of Conduct alters the at-will status of employment or volunteering with St. Joseph Home.

UNUSUAL INCIDENTS (Incident Reports)

Definition: Unusual Incident: An unusual incident is any incident involving an individual that is not consistent with routine operation, policies, procedures, care, or habilitation.

- Will be reported in writing to the nurse supervisor on the Incident Report Form
- The completed report and associated paperwork given no later than 24 hours after the incident occurrence to Director of Nursing or Designee.
- The nurse filling out the Incident Report must report injuries of unknown source to the President and CEO immediately.
- The President's signature on the incident report serves as verification that she/he was notified.
- The appropriate documentation for unknown source injuries will be completed by the nurse including as appropriate: *Initial Investigation Form* and having staff fill out *Witness Statement Forms*, if applicable).
- The President and CEO of St. Joseph Home will ensure appropriate actions have been taken to protect the health and safety of the individuals.
- All Unusual Incidents will be investigated and an appropriate plan of prevention developed.
- The Safety Coordinator will review incidents weekly for possible trends/patterns
- The Safety Coordinator will maintain a log of unusual incidents and make this and other records available to County Board Personnel and Department upon request.
- Any information shared with an individual or agency that contains PHI will be released in accordance with the Health Insurance Portability and Accountability Act, state law and facility policy.

MAJOR UNUSUAL INCIDENT

Definition of MUI “Major Unusual Incident”: The alleged, suspected or actual occurrence of an incident when there is a reason to believe incident may be adversely affected, or an individual may be at a likely risk of harm. MUIs include, but are not limited to the following:

Appendix A

- Accidental or suspicious death. “Accidental or suspicious death” means the death of an individual resulting from an accident or suspicious circumstances.
- Exploitation “Exploitation” means unlawful or improper act of using an individual or individual’s resources for monetary or personal benefit, profit or gain.
- “Failure to report” defined as: A person who is required to report has reason to believe that an individual has suffered or faces a substantial risk of suffering any wound, injury, disability, or condition of such a nature as to reasonably indicate abuse, misappropriation, exploitation that results in a risk to the health and welfare or neglect of that individual, and such person does not immediately report information.
- Misappropriation: means depriving, defrauding or otherwise obtaining real or personal property of an individual by means prohibited by the Revised Code, including Chapters 2911 and 2913.
- Neglect. “Neglect” means when having a duty to do so, failing to provide an individual with medical care, personal care, or other support that consequently results in serious injury or places an individual or another person at risk if serious injury. Serious injury means and injury that results in treatment by a physician, physician assistant or nurse practitioner
- Physical Abuse: The use of physical force that can reasonably be expected to result in physical harm or serious physical harm as those terms defined in section 2901.01 Of the revised code, such force may include, but is not limited to, hitting, slapping, pushing and throwing objects at the individual
- Prohibited sexual relations. “Prohibited sexual relations” means a developmental disabilities employee engaging in consensual sexual conduct or having consensual sexual contact with an individual who is not the employee’s spouse, and for whom the developmental disabilities employee was employed or under contract to provide care or supervise the provision of care at the time of the incident.
- Rights Violation: Any violation of rights enumerated in section 5123.62 of the Revised Code that creates a likely risk of harm to the health or welfare of the individual.
- Sexual Abuse: “Sexual Abuse” means the unlawful sexual contact/conduct or sexual contact as those terms are defined in section 2907.01 of the revised code

and the commission of any act prohibited by Chapter 2907 of the Revised Code (e.g., public indecency, importuning and voyeurism).

- Verbal Abuse: “Verbal abuse” means Using words or gestures to threaten, coerce, intimidate, harass, or humiliate an individual. (Foul language directed toward a resident or in the presence of a resident)

Appendix B

- Death: Other than accidental or suspicious. Death of an individual by natural cause without suspicious circumstances.
- Law Enforcement: An event, which results in arrest, charges, or incarceration of an individual with DD.
- Attempted Suicide: Actual physical attempt by an individual that results in emergency room treatment, in-patient observation or hospital admission.
- Medical Emergency: means an incident where emergency medical intervention is required to save an individual’s life (e.g. choking relief techniques such as back blows, CPR, epinephrine auto injector usage or IV for hydration.
- Significant Injury: Any injury of known or unknown cause that is not considered abuse or neglect and that results in concussion, broken bone, dislocation, second or third degree burns or that requires immobilization, casting, or five or more sutures. Significant injuries will be designated as known or unknown cause in the incident tracking system.
- Missing Individual “Missing individual” means an incident that is not considered neglect and an individual’s whereabouts, after immediate measures taken, are unknown and the individual is believed to be at or pose an imminent risk of harm to self or others. An incident when an individual’s whereabouts are unknown for longer than the period of time specified in the individual’s service plan that does not result in imminent risk of harm to self or others shall be investigated as an unusual incident.
- Peer to peer act: means any of the following incidents involving two individuals:
 - Exploitation
 - Theft
 - Physical act- a physical altercation that results in examination or treatment by a health care professional; or Involves strangulation, a bloody nose, a bloody lip, a black eye, a concussion, or biting which causes breaking of the skin; or Results in an individual being arrested, incarcerated or subject of criminal charges.
 - Sexual act which means sexual conduct and /or contact for the purposes of sexual gratification without the consent of the other individual;
 - Verbal act which means the use of words, gestures, or other communicative means to purposefully threaten, coerce, or intimidate the other individual when there is the opportunity and ability to carry out the threat.

Appendix C

- Law Enforcement means any incident that results in the individual served being tased, arrested, charged, or incarcerated.
- Unanticipated Hospitalizations means any hospitalization or hospital admission, stay over 24 hours that is not pre-scheduled or planned. A hospital admission associated with a planned treatment, pre-existing condition that is specified in the individual service plan indicating specific symptoms and criteria that requires hospitalization need not be reported.
- Unapproved behavioral support means use of a prohibited measure as defined in rule 5123-2-06 of the Administrative Code or use of a restrictive measure implemented without approval of the human rights committee or without informed consent of the individual or the individual's guardian in accordance with rule 5123-2-06 of the Administrative Code, when use of the prohibited measure or restrictive measure results in risk to the individual's health and welfare.

Reporting Responsibilities

- Take all measures necessary to ensure the health and safety of the individual. These measures may include immediate and on going medical attention. If an employee or volunteer is involved, appropriate disciplinary actions will be taken per Ohio Department of Development and Disabilities guidelines.
- In the event of a case of suspected abuse or neglect, the report must be made to HCDDS MUI Unit within four hours of the discovery.
- Notify the District Police if the MUI would constitute a possible criminal act, including abuse and neglect.
- Notify 241-KIDS if the individual is under 21 years old and abuse or neglect is suspected.
- Any MUI of a very serious nature or a death, contact the MUI Investigator on call at HCDDS.
- Any information shared with an individual or agency regarding MUIs, will be released in accordance with the Health Insurance Portability and Accountability Act, state law and facility policy.

Investigation Responsibilities

- SJH shall: Review and analyze reports to identify trends/patterns. Review quarterly report to identify trends/patterns and take appropriate action as needed.

PREVENTION OF MISTREATMENT, ABUSE, NEGLECT

Definitions of Abuse and Neglect:

- Neglect is defined as when there is a duty to do so, failing to provide an individual with any treatment care, goods, supervision or services necessary to maintain health and safety. (No actual harm is required)
- Abuse is the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish.
- Investigations will include interviews and actual physical evidence gathering as well as working with any outside agencies with their investigations. Any staff person or volunteer involved in the alleged abuse will be placed on a leave of absence until the investigation is complete and the appropriate action has been taken.
- Any information shared with outside agencies or individuals regarding the investigation that includes Protected Health Information will be released in accordance with the Health Insurance Portability and Accountability Act, state law and facility policy.

SJH HARASSMENT POLICY

It is the policy of St. Joseph Home to expressly forbid any forms of harassment. The term "harassment" refers to engaging in conduct that is deemed to be vulgar, obscene, threatening, intimidating, harassing, and/or unlawfully discriminatory (as further defined by our Anti-harassment and Bullying policy and Non-Violent Workplace policy).

Volunteers who feel they are being harassed in any way should inform their immediate staff contact as well as the Volunteer Coordinator. It is the individual's responsibility to bring such concerns to the proper person. Any and all concerns will be handled immediately and kept confidential.

Volunteer Dismissal:

All volunteers, regardless of classification, status, or length of service, are expected to meet and maintain SJH standards for performance, attendance and behavior. The Advancement Team staff is responsible for dismissing any volunteer whose service is detrimental to SJH, visitors, staff, volunteer program, or if the volunteer does not meet the requirements of the program. If a volunteer is dismissed from one area/department of SJH, they are not permitted to join/continue in another. A volunteer may be separated for any of the following reasons but not limited to:

- Being repeatedly absent or late
- Entering restricted areas without authorization
- Imposing personal, religious or political views on others

- Failing to comply with the SJH Drug & Alcohol Policy
- Failing to comply with HIPPA regulations
- Failing to observe established SJH regulations
- Failing to observe volunteer program regulations
- Stealing SJH property or property of staff or those we serve
- Performing a task for which you have not been properly trained or approved to do

If a situation occurs where a volunteer chooses to end their service relationship with St. Joseph Home, it is customary for the volunteer to make an appointment with the Volunteer Coordinator to discuss the reason for leaving and to access summary information on the exit process. The discussion is confidential and volunteers are encouraged to honestly disclose any issues and/or concerns that precipitated their separation. This information is collected and used to review benefits and policies that may have unintentional effects on volunteer service. Departing volunteers should return all SJH property, including identification badge to the Volunteer Coordinator.

FIRE EMERGENCY AND/OR DRILL PROCEDURES

Fire or Smoke that You Discover:

- 1 Activate nearest fire alarm pull station
- 2 Locate nearest SJH staff member and inform them of the location of the fire/smoke. Ask the staff member to call 9-1-1.
- 3 If you are with a resident, guest or participant, go to the nearest cottage and follow instructions of the staff.
- 4 Ask staff to call the resident's home cottage and inform them of the individual's whereabouts.
- 5 Wait for the "ALL CLEAR" signal to return the resident's home cottage.
- 7 If you are not with a resident during a fire/smoke emergency, move to the nearest cottage follow instructions of staff and assist as needed.

Fire Alarm Sounds:

1. If you are with a resident, go to the nearest cottage and check in with staff.
2. Ask staff to call the resident's home cottage and inform them of your resident's whereabouts.
3. Follow instructions of the staff, assist as needed.
4. If fire is in your location, evacuate cottage following instructions of the staff.
5. If you are engaged in a scheduled activity in another area of the campus or site, follow the instructions of the nearest staff member.
6. If you are not with a person we serve during a fire/ smoke emergency, move to the nearest gathering space and assist as needed.
7. If you have to evacuate, do not return to your previous location until an all clear has been received.

SEVERE WEATHER SAFETY RULES

While on St. Joseph Home premises, the safest place to be in the event of severe weather is in the building in the designated locations. It is not recommended that volunteers leave the building in these situations. Minors need to stay here unless a parent has informed us otherwise or comes to get them. It is strongly advised that all volunteers remain and offer assistance as much as possible.

Procedures to be followed for severe weather and /or tornado watches:

When the weather radio, building alarm, or nearby siren has gone off:

1. Staff will prepare the tub rooms with the appropriate equipment (radios, flashlights and rescue blankets), and get the residents prepared to be moved into the tub rooms, if necessary.
2. If volunteers are beyond the normal assigned space, return to the nearest gathering space immediately. If volunteers are not in a building, they are to move to the nearest indoor location so a staff member can get a proper head count.
3. Follow the instructions of the nearest staff leader.
4. TV and Weather radio should be on, to keep staff updated on current weather status. If the weather gets worse, building leadership may request implementation of the following procedures.

Tornado Warning on Main Campus

1. The residents are to be moved into the tub rooms for safety. They should be placed in wheelchairs if possible and the rescue blankets should be taken. Close the door.
2. Weather Radios should be plugged in to the red outlet in the tub room so staff can listen for updates.
3. Staff and volunteers should try to keep residents engaged to minimize the anxiety level of both staff and the residents. Singing and storytelling are appropriate activities.
4. Wait for the "all clear" signal before leaving the tub room.
5. If the tub rooms are too crowded for volunteers, please take cover in the employee rest room off the kitchen which is also a designated safe place. Do not come out until a staff person tells you it is "all clear".
6. *If you are involved in a scheduled activity in another area, follow the instructions of the nearest lead staff person.*

St. Joseph Home
Volunteer Handbook Acknowledgement

I, _____, (print name) have received a copy of the St. Joseph Home Volunteer Handbook.

I understand that any previously issued handbook is superseded by this handbook and that St. Joseph Home retains the right to change this handbook as desired.

I further understand that it is my responsibility to fully read and comply with all the rules and regulations in this handbook and to ask my site contact or Volunteer Coordinator if I have any questions. I agree to insert and replace any revised or new policies, rules, or regulations as implemented by St. Joseph Home and will comply with them as they are implemented.

I also understand that failure to comply with the policies set forth could result in the disciplinary action up to/including my termination from the SJH volunteer program.

Volunteer's Signature

Date

Please remove and return to Volunteer Coordinator