



Fairfield Medical Center

Thank you for your interest in the Fairfield Medical Center Volunteer Services Program. Enclosed is an application that will provide information to assist us in making the best use of your interests and talents and a list that summarizes the process of becoming a volunteer. This application is for individuals 18 and over who are not currently in high school. To inquire about the Teen Volunteer Program (16 and over), please contact the Volunteer Services Department.

Fairfield Medical Center volunteers serve in a wide variety of departments and are valued members of our healthcare team.

At your convenience, please complete the application and call Heidi Reed at (740) 687-8109 to arrange a personal interview. Prior to your interview, please take a moment to review the enclosed list of possible volunteer opportunities so that we may better determine your area of interest during your interview. Applicants must be fully vaccinated against COVID-19. Please bring your completed application and COVID-19 vaccine documentation to the interview or return to the Fairfield Medical Center Volunteer Services office prior to your interview.

Sincerely,

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

Heidi Reed, CDVS, CAVS
Volunteer Coordinator



Volunteer Process

Step 1: The Application

Each potential volunteer is asked to complete a written application form providing pertinent personal information.

Step 2: The Interview

Each potential volunteer will have a private interview to determine his/her area of interest so a suitable volunteer position can be identified. You can arrange for the interview by calling Heidi Reed at (740) 687-8109.

Step 3: Background Check

Fairfield Medical Center must run a criminal background check and fraud check on each potential volunteer. Your signature on the application grants Fairfield Medical Center the authority to check the nationwide database.

Step 4: The Shadow

Each potential volunteer will shadow in one or two areas of interest to ensure that the volunteer opportunity is a good fit for both the potential volunteer and the department.

Step 5: General Orientation

General Orientation is provided to each new volunteer. Orientation will provide information about Fairfield Medical Center and those policies and procedures that affect all volunteers. You will also receive a tour of the facility, a TB Skin Test, and receive your ID badge and volunteer smock. Following General Orientation, you are ready to begin your volunteer assignment in your department (approximately 1.5 weeks following orientation).

Annual Requirements:

Each calendar year, every volunteer is required to complete an annual education packet. Volunteers are also required to receive a flu vaccine (requests for medical and religious exemptions are considered) or must take a leave of absence from mid-December through early April. Applicants also must be fully vaccinated against COVID-19.



Volunteer Application

Name: _____ Date: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Birth Date (year is optional): _____ E-Mail Address: _____

How did you become interested in volunteer opportunities at Fairfield Medical Center?

Why do you want to volunteer at Fairfield Medical Center?

Do you have previous volunteer experience? _____ If yes, please list:

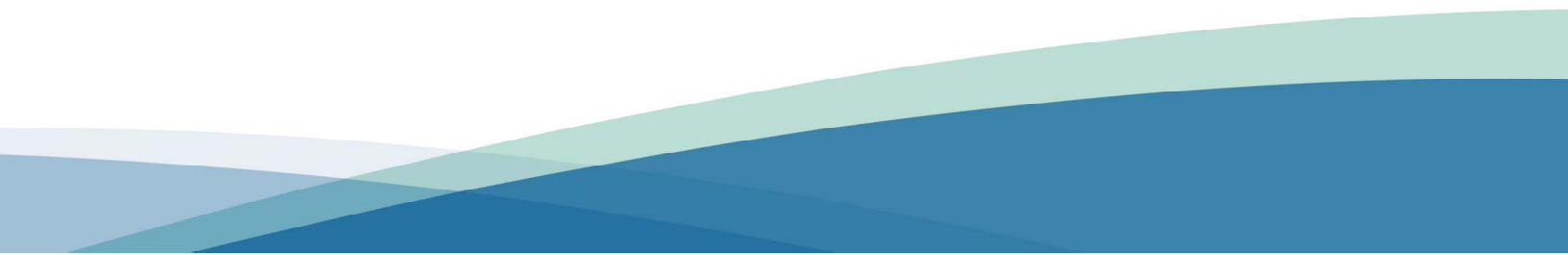
Educational Background: _____

Work Experience: _____

Please list skills, hobbies, or special interests you have: _____

Have you ever been employed by Fairfield Medical Center? If yes, when and in what capacity?

Have you ever been convicted of a crime? If yes, please explain:



Are you interested in an assignment with direct patient contact? Yes _____ No _____

Are you interested in an assignment that is physically active? Yes _____ No _____

Please indicate the timeframe(s) that you would be available and interested in volunteering:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

What areas are you interested in volunteering? (Please refer to list of possible opportunities.)

Are you willing to volunteer for a minimum of 2 hours/week for one year?

Are you seeking employment at Fairfield Medical Center?

Do you have any specific needs we should be aware of?

All information provided in this application will be treated confidentially and utilized solely by Fairfield Medical Center.

I understand that I will not be paid for my services and that I will be expected to abide by Fairfield Medical Center policies and procedures. I understand that the only way to receive paid employment is to apply through the Human Resources Department, and that volunteering will not necessarily increase my chances of employment. Fairfield Medical Center is not obligated to provide a volunteer placement, nor am I obligated to accept the volunteer position offered. Opportunities for volunteers are provided without regard to religion, creed, race, national origin, age, or sex.

I have read the rules governing the volunteer experience and agree to abide with them.

Signature

Date

Please return your completed application to the Fairfield Medical Center Volunteer Office.



Volunteer Agreement

In consideration of my volunteer experience at Fairfield Medical Center, I agree to conform to the rules and regulations of this facility. I understand that my experience can be terminated at any time and for any reason, at the discretion of Fairfield Medical Center, the school or myself. I understand that this volunteer experience does not enter me into an agreement of employment with this facility. I hereby affirm that the information provided on this application is true and complete. I understand that any false or misleading representations or omissions may disqualify me from this volunteer experience. I hereby authorize persons, school, and employers named in this application to provide this facility with any relevant information regarding my potential volunteer experience, and I release all such persons from any liability regarding the provision or use of such information.

Confidentiality Statement

I understand that as a volunteer prospect completing my volunteer exploration experience at Fairfield Medical Center, I may be exposed to confidential information regarding patients and financial information produced by or held by Fairfield Medical Center. During the term of my visit with Fairfield Medical Center and any related activities, or any time thereafter, I shall not directly or indirectly, make or cause to be made, any disclosure or other use not authorized by Fairfield Medical Center of any confidential information acquired during the course of my experience at Fairfield Medical Center unless such information is or becomes otherwise legally available to the public. For purposes of this agreement, the term "confidential information" means any business, medical or financial information not generally known to the public at large regarding the business and operations of Fairfield Medical Center and its patients, employees and physicians. Any breach of confidential information by me shall constitute grounds for immediate termination from my volunteer experience at Fairfield Medical Center and can further be grounds for any legal action taken by the offended parties.

Waiver of Liability/Release with Assumption of Risk and Indemnification

In exchange for the agreement of the Hospital to permit participation in any volunteer exploration experience, I hereby voluntarily assume the risk of injury and waive, release, and agree to hold harmless and indemnify the Hospital, its employees and agents from any and all liability, arising from negligence or otherwise, and all damages in any way resulting from participation in any student/intern/shadow experience at the Hospital, including but not limited to bodily, personal, or mental injury.

Volunteer Applicant Expectations

During the volunteer application process, applicants will not have (or attempt to obtain) computer access. Applicants must dress professionally and conservatively and abide by the Fairfield Medical Center dress code throughout the application process. Professional behavior is expected, including refraining from the use of cell phones and other personal activities while serving in your volunteer role.

The undersigned, has read all of the above carefully, understand its significance, and voluntarily agree to all of its terms.

Signature

Date

COVID-19 Safety

Fairfield Medical Center is committed to safety and we remain vigilant in following the safety guidelines to prevent the spread of COVID-19. By initialing and signing below, you indicate that you have reviewed and agree to abide by all safety requirements and expectations in order to return to volunteer service at Fairfield Medical Center. Please read the statements below and initial next to each one to indicate that you are in agreement:

_____ I attest that I am not experiencing any symptoms of illness such as a fever, chills, cough, shortness of breath/difficulty breathing, fatigue, muscle/body aches, headache, new loss of taste/smell, sore throat, congestion/runny nose, nausea/vomiting, diarrhea.

_____ If I develop these symptoms, I agree that I will contact the Volunteer Services office and my Staff Liaison as soon as possible to cancel my scheduled shift, even if I have minimal contact with others while volunteering. If I have the symptoms of a viral respiratory disease listed above, I understand that I should stay home until I have been approved to return by the Volunteer Office (volunteers will follow the same guidelines as employees regarding returning to volunteer).

_____ I acknowledge that my return to service as a volunteer at Fairfield Medical Center is my choice.

_____ I acknowledge that the requirements of this agreement are for my own safety, as well as that of patients, visitors, other volunteers, and employees of Fairfield Medical Center.

_____ I am aware that I must follow all safety and hygiene protocols that have been implemented by Fairfield Medical Center.

_____ I agree to wear a facemask upon entering and while on premises of the Fairfield Medical Center until such time that it is determined by Infection Prevention that facemasks are no longer needed at Fairfield Medical Center.

_____ I agree to follow the six feet social distancing guidelines while in my assignment and traveling through Fairfield Medical Center, including in my interactions with employees and other volunteers. I will not congregate in gathering areas such as hallways, dining areas, or workspaces.

_____ I agree to disinfect my workspace before and after my shift. All wheelchairs and carts must be disinfected after each use.

_____ I agree to abide by all HIPAA and confidentiality laws pertaining to the privacy of patient information. This includes information pertaining to any COVID patients.

_____ I understand and agree to abide by these requirements, until such requirements are lifted, in order to maintain a safe environment for myself, those I work with, and the patients and visitors of Fairfield Medical Center.

_____ I understand and acknowledge the possible risk of exposure in volunteering in a healthcare setting. If I do not agree to follow these protocols, I understand that I may take a Leave of Absence until Fairfield Medical Center returns to normal operations.

Signature

Date

Printed Name



Volunteer Opportunities

Please contact the Volunteer Services Department at 740.687.8109 for specific openings.

Main Campus

Cancer Care and Infusion Center

Provides advocacy and services to all patients, families, and visitors at the Cancer Care and Infusion Center. Greets all visitors. Assists with resources and retail items. Distributes complimentary refreshments to patients.

Clerical Support

Volunteers provide clerical support in a variety of departments, such as Accounting, Administration, Cardiovascular Services, Case Management, Contracts & Collections, Endoscopy, the Foundation, Human Resources, Learning & Development, Marketing, Outpatient Therapy Services, and the Volunteer Office.

Cookie Cart

Visits various waiting areas with the Cookie Cart to offer complimentary refreshments to visitors.

Chaplain Services

Visits patient bedsides to identify the patients' church affiliation; notifies churches of any hospitalized parishioner(s).

Crafters

Enjoy knitting, crocheting, sewing, and creating? Join our Volunteer Crafters and create handmade items for patients in Maternity, Cancer Care, and Palliative Care.

Diagnostic Services (satellite location – E. Main St.)

Greets patients arriving for testing; assures that patients get through the registration process in a timely and orderly manner; escorts patients to testing area.

Emergency Department

Provides advocacy and support to patients and visitors in the Emergency Department by rounding to patient rooms and to the Emergency Department Waiting Room.

Gift Shop

Provides customer service and assists visitors, patients, and staff with any purchases in the gift shop. Uses cash register and assists with stocking and inventory.

Information Desk

Greets the public; escorts patients and visitors; responds to telephone inquiries; delivers patient mail and floral arrangements; provides directional information.

Messenger Services

Picks up and delivers inter-departmental correspondence throughout the building and transports U.S. mail to and from the mailroom.

Meal Delivery

Assists Nutrition Services with the delivery of patient meals. Provides assistance as need to patients in opening packaging and arranging food items.

Menu Education

Visits newly admitted patients to explain how a patient orders his/her meals and to ensure a positive dietary experience.

Outpatient Therapy (satellite location – E. Main St.)

Greet patients as they arrive for therapy and ensure that each patient is taken care of in a timely manner. Provide wheelchair escort for patients when needed. Provide directions and utilization of resources to patients and visitors.

Patient Pal

Serves as an advocate to patients and visitors in a specific patient care unit by rounding to patient rooms to ensure needs of patients and visitors are met.

Pet Therapy

Visits patients with a registered therapy dog. Your dog must be registered through an acceptable organization with all paperwork on file to proceed.

Riverview Surgery Center (satellite location)

Provides support services and promotes positive public relations to families of surgical patients while serving as a greeter and receptionist in the surgery waiting room. Escorts patients and family members and provides wheelchair assistance. Assists staff as needed.

Storeroom

Prepares and affixes stickers to incoming patient items, shelves incoming inventory items.

Surgery Waiting

Provides support services and promotes positive public relations to families of surgical patients while serving as a greeter and receptionist in the surgery waiting room. Assists Patient Representative as needed.

River Valley Campus**Guest Services**

Greet community members as they arrive through the Columbus St. entrance. Provide wheelchair transportation for patients when needed. Provide directions and resources to patients and visitors.

Women's Health

Greet patients as they arrive for their women's health appointments. Escort patients to and from testing locations. Assist patients in the waiting area. Provide wheelchair escort for patients when needed.