MARQUETTE COUNTY MEDICAL CARE FACILITY VOLUNTEER APPLICATION

NAME:	
IN CASE OF EMERGENCY:	
CONTACT:	
RELATIONSHIP:	
PHONE:	
SPECIAL EDUCATIONS OR TRAINING WORKING WITH NURSING HOME RE	G WHICH YOU FEEL IS RELEVANT TO ESIDENTS: ETS:
COMMUNITY GROUP AFFILIATIONS	(CLUBS, COMMITTEES, CHURCH, ETC.):
DAYS AND HOURS PREFERRED:	
WOULD YOU CONSIDER VOULNTEE	RING FOR SPECIAL EVENTS:
	ME, RELATIONSHIP, PHONE NUMBER):
SIGNATURE	DATE

Why volunteer?

- Opportunity to be with other people
- Broaden your horizons
- Gain new skills
- Share your skills
- Do something for others
- Gain self-confidence
- Make a difference in a life

What can you do?

You can best answer this question.

- What do you like to do?
- Do you like to do crafts? Cook?
- Do you like to work with groups? Are you a leader?
- Are you creative? Are you organized?
- Do you like to work closely with people?

How often and when can I come?

You can best answer this question.

- Do you want to come twice a week? Once? Every tow weeks? Once a month?
- Do you want to serve 1 hour? 2 hours? Longer?
- What days do you want to come? What time periods?

What are some examples of volunteer jobs available?

- Reading and Visiting
- Teaching your special skills to other
 - Music, Singing
 - > Flowers, Arts
 - ➤ Gardening, Houseplants
 - Crocheting, Knitting
- Writing letters for residents
- Playing games ó card, checkers, puzzles, etc.
- Offering manicures (polish)
- Wheelchair rides
- Assisting with outings
- Assisting with parties and special events
- Assisting resident to and from activities
- Taking residents outdoors
- Offering religious services
- Providing pet visits

• Assisting with the care of pets

The list is endless. What type of job interests you?

What do I do if a problem arises?

Your Activity Director supervises all volunteer activity at MCMCF. If a problem occurs while you are volunteering, or you are unhappy with your volunteer assignment, please, talk with the Activity Director.

If for some reason, they are not available, leave a message for them and they will get back to you as soon as possible. If you feel the problem cannot wait, talk to someone in the activity department and they will do what they can to help you. Remember that good volunteers are happy volunteers and we want to ensure your happiness.

Volunteer Doøs

- 1. Be on time. If you cannot fulfill your commitment, please call.
- 2. Sign in and out in the volunteer sign in book.
- 3. At all times be courteous and helpful to others.
- 4. If you happen to be injured while serving, report to the Activity Director, or the Nursing Supervisor immediately.
- 5. Be alert for sudden changes in a resident¢s behavior or physical condition ó report any changes immediately to the nurse in charge or the activity staff.

Miscellaneous Information:

PRIVACY

- Do not enter a room bearing a sign stating isolation.
- Do not enter a curtained area in a resident or room.
- Do not enter a room where a nurse is administering treatment.
- Do not enter bathrooms when residents are using them.
- Always knock and introduce yourself before entering a resident som.

SAFETY

- Do not attempt to administer any õhands-onö care.
- Do not attempt to transfer a resident. If a resident needs any physical assistance call a member of the nursing staff.
- If a resident falls, do not assist them up. Call a member of the nursing staff to the scene.

INFECTION CONTROL

- Always wash your hands thoroughly before and after any resident contact.
- If you are ill, please stay home.
- You will be asked to submit to a TB test if you have 10 hours a month of one-on-one contact with the residents.

FIRE OR FIRE ARLARM

• In the event there is a fire or a fire alarm sounds keep the residentes in the room and close all doors and windows immediately. If it is a drill, wait until it is announced that the drill is over.