



Volunteer Handbook

*...dedicated to enhancing the quality of living for those facing the final phases of life  
and to supporting those who love them.*

4445 Powhatan Parkway  
Williamsburg, VA 23188  
757.253.1220  
[www.williamsburghospice.org](http://www.williamsburghospice.org)

## WELCOME

Thank you for choosing to be a volunteer for Hospice House & Support Care of Williamsburg!

By supporting us as a volunteer you have joined a team of individuals who regularly provide their time and skills, to enable us to provide a quality service to our patients/guests and their families during a critical time. At Hospice House & Support Care of Williamsburg, we cannot do what we do without volunteers. You are vital to achieving our vision of enhancing the quality of living for those facing the final phases of life and to supporting those who love them.

As a volunteer you will be making a difference to patients whom have been diagnosed with a life-limiting illness, directly as a Patient and Family Volunteer or indirectly by serving as a volunteer in a number of other capacities. As a nonprofit organization, we are proud of the work we do and our hope is that you will be proud of being part of the team here at Hospice House & Support Care of Williamsburg.

We want to make volunteering a rewarding and enjoyable experience for you. This handbook is intended to give a brief outline of the work we do, and about your role as a volunteer. Further training may be required, dependent upon your volunteer role. It is important you take the time to read through this handbook and refer to it, should you have questions. If you do not find the information you are looking for, please contact us.

As a Hospice House & Support Care of Williamsburg Volunteer, you are part of a dynamic team, and your input is highly valued. You are encouraged to contact us at any time if you need support, guidance, have questions, concerns or feedback.

Thank you for your compassion and commitment!



Audrey Smith  
Executive Director

## History of Hospice

The term “hospice” originated in the Middle Ages to describe way stations, established along the route to the Holy Land. Pilgrims would travel by day and seek shelter, food, and other comforts at these hospices. The word has always had the connotation of a haven for people on a journey. In the 19<sup>th</sup> Century, the Irish Sisters of Charity cared for “incurables” in homes they called hospices.

The modern hospice originated in London, England, where Dr. Cicely Saunders opened St. Christopher's Hospice in 1965. It has been a model for all developing hospices throughout the world. In the United States, there are well over 2500 functioning programs. Increasingly, people who need and want hospice care are finding it available. The National Hospice Organization, headquartered in McLean, Virginia, is working to see that hospice care becomes an alternative in the health-care system.

Hospice is not a building. Hospice is a concept, a philosophy of care and an approach emphasizing palliative and supportive care for the terminally ill patient and family. Different adaptations of this approach include hospice facilities, hospice wards in acute care hospitals, hospice home care, etc. According to the National Hospice Organization:

“A hospice is a centrally administered program of palliative and supportive services which provides physical, psychological, social and spiritual care for dying persons by a medically supervised inter-disciplinary team of professionals and volunteers. Hospice services are available in both the home and inpatient setting. Home care is provided on a part-time intermittent, regularly scheduled and around-the-clock basis. Bereavement services are available to the family. Admission to a hospice program of care is on the basis of patient and family need.”

The hospice philosophy is: hospice exists neither to hasten nor postpone death. Hospice affirms life by providing support for the patient and family at home whenever possible. The goal is to provide physical, emotional and spiritual care so that people can live the remainder of their lives free from pain and symptoms surrounded by the people and things they love.

## History of Hospice House & Support Care of Williamsburg

In 1982, “Hospice of Williamsburg” was founded as a nonprofit charitable organization by lay and professional volunteers to enhance the quality of living for individuals facing the last phases of life and to support the people they love. Support services are provided to individuals living in Williamsburg, James City County or upper York County.

Staff and volunteers work in close cooperation with local healthcare providers to ensure patients and families receive needed services. These services are not restricted by age, treatment the patient is receiving, time it can serve a family or family finances.

In July 2002, the 4-bed Hospice House opened its doors. Created as a “home away from home” to provide short-term residential care for respite and end of life support, Hospice House was built following a community-wide capital campaign that raised more than \$1 million and garnered commitments of significant in-kind support from area contractors and suppliers. We are supported by the philanthropic gifts from individuals, businesses, supporting groups and foundations.

Hospice House & Support Care of Williamsburg provides physical, emotional, social, and spiritual support to enhance the quality of living for individuals facing the last phases of life as well as providing support for the people that they love.

Hospice House & Support Care of Williamsburg is a non-medical, volunteer hospice organization that provides services not covered by Medicare or health insurance. We partner with medical organizations to provide the best care possible for individuals facing end-of-life.

Hospice House & Support Care of Williamsburg does not charge a fee for the services we provides, nor does it receive reimbursement from insurances, Medicare, or Medicaid. We operate solely on the generosity of donations from individuals, businesses, civic and religious organizations, foundation grants, county funds and the United Way.

## Mission, Core Values and Belief Statement

### The Hospice House Mission Statement

...to enhance the quality of living for those facing the final phases of life and  
To support those who love them.

### Hospice House & Support Care of Williamsburg Core Values

- Service to patients and those who love them
- Service tailored to each family's needs
- Respect for individuals, diversity, faith & lifestyle
- Community-based
- Cooperative relationships with other providers

### Hospice House & Support Care Belief Statement:

We believe that human beings have a right to live and die with dignity.

We believe that people should not die alone nor be alone in their grief.

We believe that all individuals deserve comfort.

We believe that being with the dying and their loved ones is a gift unlike any other.

We believe that we are all called to be agents of peace and comfort.

We believe that there is a need for quality, compassionate hospice care in our area,  
and we believe that our mission is to fulfill that need.

We believe that we are to give back to and care for our community because of what we  
have so graciously received from this place and the people in it.

We believe that we have a unique vision for the future of hospice care to share with our  
community, and ultimately the world.

### 2016 Board of Directors

*The board of directors are responsible for governance of Hospice House & Support Care of Williamsburg. The board has one employee, the executive director, who oversees operations of the organization.*

David Kilgore, Chairman

Mary Kay Dineen, MD, Vice-Chairman

Jim Lesnick, MD, Treasurer

John Miller, MD, Medical Advisor

David Bush

Bob Canfield

Jeff Clark

Carolyn Cuthrell

Lois Demerich

Michael A. Gaten

Susanna Hickman

Julie Hummel

Lisa Krass

Donald G. Murfee, Jr.

Stuart Patterson

Scott Ramer

Joanne Skahill

Brett Smith

Margaret Stockton

Amanda Ulishney

Jane Wilson

**HOSPICE HOUSE & SUPPORT CARE OF WILLIAMSBURG**  
Staff Listing



**Audrey Smith**  
Executive Director  
[asmith@williamsburghospice.org](mailto:asmith@williamsburghospice.org)



**Janet Reid**  
Deputy Director  
[jreid@williamsburghospice.org](mailto:jreid@williamsburghospice.org)



**Brenda Stout, RN**  
Clinical Director  
[bstout@williamsburghospice.org](mailto:bstout@williamsburghospice.org)



**Debra Maviglia Podish**  
Director of Patient/  
Family Volunteer Services  
[dpodish@williamsburghospice.org](mailto:dpodish@williamsburghospice.org)



**Hannah Creager**  
Chaplain/Bereavement  
Coordinator  
[hcreager@williamsburghospice.org](mailto:hcreager@williamsburghospice.org)



**Stacy Keating**  
Business Manager  
[skeating@williamsburghospice.org](mailto:skeating@williamsburghospice.org)



**Jackie LeClair**  
Operations Manager  
[jleclair@williamsburghospice.org](mailto:jleclair@williamsburghospice.org)



**Jen Barham**  
Business Assistant  
[jbarham@williamsburghospice.org](mailto:jbarham@williamsburghospice.org)



**Julie Baxter**  
Nurse Consultant  
[jbaxter@williamsburghospice.org](mailto:jbaxter@williamsburghospice.org)

## HOSPICE HOUSE & SUPPORT CARE OF WILLIAMSBURG IS A NON-MEDICAL, VOLUNTEER HOSPICE OR “SOCIAL HOSPICE” MODEL.

### What does this mean?

Hospice House & Support Care of Williamsburg is truly a unique community treasure. Few social hospices exist in the US. There are key differences between what we do, and what the medical hospices we partner with do. A few comparisons:

#### MEDICAL HOSPICE

Physician Services  
 Nursing Care Visits  
 Home Health Aide Visits  
 Medical Social Services  
 Therapists  
 Spiritual Services  
 Bereavement Services

#### HOSPICE HOUSE & SUPPORT CARE

Receive doctors’ orders from medical agency  
 Short term residential care for end of life or  
 respite  
 Trained patient volunteers in home and at  
 Hospice House  
 Bereavement Counseling – individual/group  
 Programs  
 Memorial Services fall and spring  
 Lending library  
 Medical equipment for loan to community  
 Volunteer training

#### PAYMENT

Medicare or Insurance  
 In-patient facilities charge for room & board

#### PAYMENT

No charge for any services provided

## THE BLOG

# Social Model Hospice Homes May Revolutionize End-of-Life Care in the U.S.

06/23/2015 04:12 pm ET | Updated Jun 23, 2015

---

- [Karen M. Wyatt, M.D.](#), Author, 'What Really Matters: 7 Lessons for Living from the Stories of the Dying'

The “social model” hospice home, an uncommon prototype for hospice care, may have great promise for resolving some future end-of-life issues in the U.S. The number of social model hospices in this country is currently small but growing at a steady pace as communities grapple with the question of how best to provide care for their dying members.

However, the social model hospice home is not a new idea at all: The first social hospices were created during the AIDS epidemic in the 1980s to house AIDS patients as they were nearing the end-of-life and in desperate need of terminal care. Many of these homes were literally private residences with multiple bedrooms where a small number of patients could be cared for and comforted through the dying process.

According to Dr. Mitcheal Metzner, the founder and CEO of [Gabriel’s House at Anam Cara](#), these residential hospice homes were largely replaced over time by the current model of mobile hospice agencies that provide medically-focused care in patients’ own homes. But Dr. Metzner sees a growing need for community-based social model end-of-life care homes and is opening Gabriel’s House in Topanga Canyon to meet that need for Southern California.

Dr. Metzner’s social hospice will provide a “home-away-from-home” for patients who cannot or do not wish to die in their own homes. Patient care will be provided by a combination of family members, volunteers and paid caregivers in partnership with medical hospice service providers. Gabriel’s House will be able to accommodate six patients in a home-like environment with a variety of holistic services and activities available to both patients and their families.

In reviewing the current and future issues surrounding end-of-life care in the U.S. it appears that this model of community-based social care homes may offer solutions for some of the problems that lie ahead. Let’s take a closer look at these issues and how this model might be helpful:

### **1. Shortage of family caregivers.**

According to a [study](#) reported by AARP Public Policy Institute there will be a severe shortage of family caregivers as the Baby Boom generation ages and faces the end-of-life. While there are currently seven potential family caregivers for every patient, this ratio is expected to drop to 3:1 by 2050.

Gabriel’s House at Anam Cara is already helping with this issue by recruiting and training volunteers who can give relief to family caregivers as part of the care team. In this way the

entire community can serve as a source of potential caregivers for future patients and decrease the need for family members to take on the entire burden of care.

## **2. Shortage of paid caregivers.**

In addition, a [study](#) published in the *Health Affairs* journal in June indicates that “at least 2.5 million more long-term care workers will be needed to look after older Americans by 2030.”

Along with other social model hospice homes, Gabriel’s House is also offering certified training with continuing education credits for professional caregivers for the terminally ill. These training programs will increase the number of workers available to meet the long-term care needs of our society.

## **3. Need for family respite.**

The Institute of Medicine’s 2014 report [Dying in America](#) points to a current need for respite and support for family caregivers to help avoid burnout and resulting emergency hospitalizations. Social model hospice homes can provide respite care as well as terminal care, allowing for much-needed rest for exhausted caregivers.

## **4. Need for home renovation for safety and mobility.**

The IOM report [“Dying in America”](#) also cites a lack of publicly-funded programs for retro-fitting homes for safety features and wheelchair accessibility. Social model hospice homes are already designed to meet safety and mobility standards and can eliminate the need for expensive renovations to family homes.

## **5. Cultural barriers to hospice care.**

In an interview for [End-of-Life University](#), Dr. Donald Schumacher, the President and CEO of the [National Hospice and Palliative Care Organization](#), stated that cultural barriers to hospice care must be addressed in the future. Some of these barriers include a lack of cultural diversity in hospice staffs, mistrust of the healthcare system, and worry about insurance coverage and cost of care.

The community-based social model hospice home has the potential to overcome some of these barriers by utilizing volunteers and caregivers from the patient’s own cultural group and neighborhood, by functioning largely outside the health care system, and by eliminating financial concerns through unique funding streams (see #6).

## **6. Reduction in Medicare payments for hospice and home care.**

The IOM [report](#) mentioned above indicates that hospice payments from Medicare will be reduced by 11.8 percent over the next decade, which will likely create financial stress for smaller hospices and lead to decreased access to care.

Under the social model of care for the dying there is no federal or state funding because these homes do not function as medical facilities. In many states they are licensed under the Department of Social Services rather than the Department of Health. Social model hospice

homes rely on foundations and grants, community fundraising, and contributions from individual donors for funding. They tend to be cost-effective organizations that provide care for free or at low-cost and on a sliding scale.

While there are no perfect solutions to the issues facing end-of-life care in the U.S., the community-based social model seems to offer an important and viable addition to the current system of hospice care. This model encourages communities to take responsibility for the needs of their own citizens and provides an opportunity for creative involvement in end-of-life care for everyone.

In addition, existing houses can be utilized for the social model care homes, eliminating construction costs for new facilities and reducing the barriers to starting such a project. The flexibility of this model and the lack of Medicare regulation allows for adaptation to the unique requirements of each community.

There is hope that the model will be adopted in many towns and cities across the country, as stated by Dr. Metzner:

“Our desire is to create a sustainable social model template that can be replicated and adapted to meet the emotional and spiritual needs of different socio-economic populations in various geographic areas. This would give us the future options of consulting for other organizations, franchising our model, and expanding into other communities.”

*Dr. Karen Wyatt is a hospice and family physician and the author of the award-winning book “What Really Matters: 7 Lessons for Living from the Stories of the Dying.” She is a frequent keynote speaker and radio show guest whose profound teachings have helped many find their way through the difficult times of life. Learn more about her work at [www.karenwyattmd.com](http://www.karenwyattmd.com).*

## Description of Services Offered

∴

The level of care at home or at Hospice House is non-medical and supportive; at Hospice House, as in the patient's own home, medical care continues to be coordinated by the medical agency hospice nurse and personal physician. Support in the home includes:

- Care needs assessment – Director of Patient/Family Volunteer Services
- Respite for caregivers – A trained volunteer will stay with the patient to give the caregiver time out
- Volunteer assistance with transportation to medical appointments, errands, etc.
- Equipment and supplies – Various sick room supplies and equipment are available for loan
- Caregiver support/guidance – Nurse Consultant
- Spiritual care and bereavement support – Chaplain
- Library– Educational, supportive and inspirational literature and books

### DIRECT SERVICES AT HOSPICE HOUSE

Hospice House is a spacious residential center designed as a “home away from home” for those who are caring for a terminally ill loved one. With four guestrooms, a kitchen, family room and sunroom, surrounded by gardens and woods, Hospice House accommodates up to four guests, with ample space for family and friends to gather.

Caregivers are welcome to remain with the guest as much as they like, but are also encouraged to take ‘time out’ as needed in our shared family quarters that include kitchen and living areas. Hospice House is staffed around the clock, and visiting hours are unlimited. Respite care for those with a hospice certification may be scheduled for up to a week. End of life care is scheduled as needed.

- 24-hour care provided by trained staff including assistance with personal hygiene
- Assistance in taking medication
- Light meals
- Bed and bath linens provided
- Spiritual care and support

#### ADMISSION CRITERIA

- The patient and caregiver are being served by a hospice agency.
- The patient's behavior is not disruptive and does not present a danger to self or others.
- The patient and caregiver agree to a plan for care that includes a projected length of stay and a plan for discharge.
- Level of care at home or at Hospice House is non-medical and supportive. At Hospice House, as in the patient's own home, medical care continues to be coordinated by the Hospice nurse and personal physician.

#### ELIGIBILITY

The Hospice Support team considers requests for admission based on admission criteria and individual needs.

#### COST

There is no charge for services of Hospice House & Support Care of Williamsburg.

#### DIRECT SERVICES FOR THOSE IN GRIEF

Support during time of bereavement can help bring healing, renewal and hope for the future. Staff at Hospice House & Support Care maintain contact with bereaved families following the death of a loved one to offer comfort, support, referrals and services as needed.

#### ELIGIBILITY:

Bereavement Support is open to all in the community regardless of their previous connection to Hospice House & Support Care.

#### COST

There are no charges for services of Hospice House & Support Care of Williamsburg.

#### PROGRAMS AVAILABLE

##### One-on-one meeting with the Chaplain

Confidential 1-1 with the Chaplain to help match your needs with the most appropriate resource.

##### Bereavement Workshop

For adults mourning the death of a loved one. Focused resources and conversation on finding meaning through grief. Each group is limited to 10 participants and pre-registration is required. Workshops are offered three times per year: winter, spring and fall at HHSCW. Commitment of 6 Sessions meeting every other week.

### Walking/Social Group

Ongoing social group to meet others in the same situation. Need not walk to join! Other activities include dinner/movies, coffee, lunch, concerts.

Regular walks every Tuesday, Thursday and Saturday, times vary.

### Women's Lunch Bunch

This is a group for bereaved women who have lost their partners. The group meets monthly in the home of a HHSCW bereavement volunteer or in an area restaurant. It is an opportunity for grieving individuals to talk openly about their feelings and challenges with one another as well as to find fellowship over food. Many of the women who participate in this program establish solid friendships when they might have been left completely alone in the area at the death of their spouse or partner. Pay-your-own-way.

### Men's Lunch Bunch

This is a group for bereaved men who have lost their partners. The group meets monthly at a local restaurant for lunch. Like the women's lunch group, this group provides an opportunity for grieving individuals to find commonality and friendship through the sharing of grief journeys over a meal. Pay-your-own-way.

### Meditation

Meets every 1st and 3rd Wednesday 2-3 pm on 2nd floor of Hospice House. No previous experience needed, just willingness to practice mindfulness and openness with others who are also bereaved.

### Survivors of Suicide Loss

This is a peer run group that is for the support of any person touched by the death of a loved one to suicide. The group offers a confidential setting in which to explore your feelings and find comfort in not being alone on your grief journey.

### Compassionate Friends.

The Compassionate Friends is a local chapter of an international organization. Participants are all bereaved parents (guardians), adult siblings, or grandparents who are dealing with the death of a child.

### Memorial Services

For many individuals and families, a time of shared remembrance with reflection, music and prayer brings comfort during special times of the year.

- Candlelight Memorial Service – A nondenominational candlelight memorial service is offered each year during November to remember loved ones. This service is open to the Williamsburg Community.

A "Celebration of Life" service is held early in April on the patio at Hospice House. Led by the Chaplain, this memorial service celebrates those who died at Hospice House during the previous year.

#### INDIRECT SERVICES

- Public education programs on death, dying and hospice care
- Consultation on planning for hospice care
- Resource center on hospice care
- Cooperative relationships with other groups serving the dying

## Referral Process and Admission Criteria

### **Referral Process**

Services are available to anyone with a life-limiting diagnosis, or anyone suffering a death loss in the greater Williamsburg community.

#### FOR ADMISSION TO THE HOME PATIENT/VOLUNTEER PROGRAM:

- Patients should have a life-limiting illness. Patients who are receiving treatment and are fully expected to recover are eligible for this program.
- Family member and/or caregiver calls 757.253.1220 or emails Debra Podish :  
volunteer@williamsburghospice.org
- The Director of Patient Family Volunteer Services will meet with/talk to the caregiver to identify needs.
- The Director of Patient Family Volunteer Services will meet with the patient to assess the situation to see how a patient volunteer can assist.
- The Director of Patient Family Volunteer Services will match a volunteer with clear expectations for time, etc.
- Periodic check-ins will take place between the Director of Patient Family Volunteer services and the volunteer and the family.

#### TO RECEIVE BEREAVEMENT SERVICES:

- Anyone in the area, regardless of their previous involvement with HHSCW is eligible to receive services.
- A brief conversation with the Chaplain will discuss the programs available, as well as the needs of the individual.
- Individuals may determine which program(s) they would like to use. The Chaplain will add to the walking group email list (if appropriate).

#### FOR ADMISSION TO HOSPICE HOUSE:

- Anyone entering HHSCW for care, whether a respite or end-of-life stay must have the following in place:
  1. A Signed Do Not Resuscitate Order
  2. A Hospice Certification
  3. Have selected a medical hospice agency
- A physician, hospice agency, discharge planner, family member/caregiver, or the individual themselves may call inquiring about admission.
- The Clinical Director will discuss needs of the individual seeking admission. In addition, the clinical director will need to receive copies of the individual's medical records for review. HHSCW cannot admit anyone with open wound or an infectious disease. Anyone who wanders, or is unable to be appropriately cared for by HHSCW staff cannot be admitted as well. In

some cases, the Hospice House Clinical Director will need to visit the individual at home or in the hospital for assessment.

- The HHSCW Clinical Director will meet in-depth with the family to discuss Hospice House services and operations. It is important that the family understand that, when entering for end of life especially, only comfort measures will be taken. Admission paperwork will need to be signed.
- The medical hospice team or hospital discharge planner will arrange transportation to HHSCW. Medications should be delivered prior to admission.
- All admissions, whether for a one-week respite or end-of-life stay will have a documented discharge plan prior to admission which will be enacted in the event of improvement or stable conditions. (Respite stays have a 1-week maximum.)

## Volunteering at Hospice House & Support Care of Williamsburg (HHSCW)

### *The Hospice Guild*

**Volunteer:** Individuals, without compensation or expectation of compensation beyond reimbursement, performs a task at the direction of and on behalf of HHSCW. Volunteers must be at least 15 years of age.

**Hospice Guild:** All volunteers are members of the Hospice Guild, which comprises the volunteer arm of HHSCW. Patient Volunteers, Bereavement Volunteers and General Guild volunteers are all part of the Hospice Guild.

**Patient Volunteer:** A patient volunteer is an individual who has completed 20 hours of classroom training and mentoring to provide direct support to individuals with life-limiting illness and their caregivers. Patient volunteers may complete their tasks in the individual's home or at HHSCW.

**Bereavement Volunteer:** Volunteers who have dedicated themselves to supporting the efforts of the bereavement program at HHSCW. All bereavement volunteers receive 3 hours of specific training on the grief process and how to work with the newly bereaved.

**Hospice Teen Outreach Volunteers:** Members are high-school age and volunteer individually and in groups to support HHSCW directly by working inside the office, cleaning, cooking or helping outside in the gardens. These volunteers also take ownership of select group projects for which they will take responsibility.

---



“Volunteering for Hospice has restored my faith in humanity. It has been so rewarding for me, and I've met some incredible people and had some unbelievable experiences, and it's something I don't ever see myself not doing.”

---



## HOW TO BE A HOSPICE HOUSE & SUPPORT CARE OF WILLIAMSBURG VOLUNTEER IN THE WORLD

Volunteers are the heart of Hospice House & Support Care of Williamsburg (HHSCW). Volunteers help in many different ways: direct contact with patients and families in the home or at HHSCW, manning our telephone/reception desk, data entry, event planning, Open House facilitation, hospitality, gardening, bereavement support, photography, maintenance and more. In all of these activities, we remember the way we present ourselves reflects on HHSCW as a whole and is important to our success.

We are eternally grateful to our volunteers and the difference their efforts make for our work and our community. We were founded through the efforts of dedicated volunteers, and volunteers continue to play a vital role in every aspect of what we do. Our volunteers are members of our team. As team members, we believe volunteers should be treated with respect, dignity, humility and as equals.

Your work for Hospice House & Support Care of Williamsburg is an investment of time in exchange for making a difference in the lives of the terminally ill and their caregiver. We ask that you come with an open mind, a positive attitude, and the willingness to follow-through on commitments made to HHSCW.

### TRAINING

All volunteers are expected to attend the initial volunteer training, which will provide you with much of the information provided in this handbook as well as a tour of the house. Telephone and reception volunteers will spend several hours mentoring with an experienced volunteer to learn how the position works. Those interested in being a patient volunteer or bereavement volunteer may need to complete more in-depth training relative to their roles. Our goal is to ensure that our volunteers have a positive, productive and rewarding volunteer experience with us.

### OPEN LINE OF COMMUNICATION

As a team, we are all working to help those at end-of-life or in grief, and it takes each one of us to do it. We encourage volunteers to have an open line of communication with their staff contact regarding problems or concerns. This is for the protection of the volunteer as well as the organization.

### CONFIDENTIALITY

It is asked that all volunteers keep any information they may be privy to in strictest confidence in order to protect the privacy of employees and other individuals using the services of Hospice House & Support Care of Williamsburg to include:

- A. All interviews, observations, conversations and personal data between HHSCW staff are regarded as private information and will not be discussed with other family members, individuals or professionals. This includes information about patients

names, diagnosis, treatment or special problems, and about HHSCW business concerns. Even the fact that a patient and/or family is seeking or receiving hospice care are not to be disclosed. The only exceptions to the above are:

1. Volunteers taking telephone messages from patients or family members, or about patients/families and passing such messages along to the appropriate hospice staff member.
2. Sharing pertinent patient information with hospice team members who need to know the information in order to provide hospice care.
3. Discussions in consultation with peers during volunteer support groups, such as those held for patient volunteers and bereavement volunteers.

All volunteers will be asked to sign a Memorandum of Understanding about the privacy policy.

Any volunteer proven to have breached patient/family confidentiality will be released from volunteer activities with Hospice House & Support Care of Williamsburg.

## VOLUNTEER CODE OF ETHICS

- As a Hospice House & Support Care of Williamsburg (HHSCW) volunteer, I realize I am subject to the same Code of Ethics that binds all professionals in the positions of trust we hold.
- I accept these responsibilities and respect matters of confidentiality.
- I understand as a HHSCW volunteer I have agreed to work without monetary compensation. Having accepted this position, I will do my work according to the same Standard Operating Procedures as paid staff is expected to do their work.
- I believe that all work should be professionally planned and carried out in a professional manner.
- I will work with my supervisor to ensure that I am assigned to a job I can enjoy and want to perform.
- I have an obligation to my work and will carry out my share of the work that I volunteered to do.
- I promise to maintain an open mind and train diligently for my job.
- I promise to remain truthful and strive to avoid misrepresentation.
- I will seek to ensure that confidential or privileged information is used only as intended.
- I will strive to be inclusive and embrace diversity in all of our activities.
- I will respect the dignity of every person with whom I have contact.
- I will honor and embrace the partnership of volunteer and staff as we work to advance the mission of HHSCW.
- I pledge to exercise good stewardship.
- I will not condone coercive or unscrupulous behavior in any of our business dealings with volunteers, staff, donors, clients or vendors.
- I will keep safety – for myself and others - at the forefront of all volunteer activities.
- I will set boundaries for myself and know my limits.
- I will follow guidelines of training and will report all injuries immediately to a staff person.
- I will display compassion, respect, & sensitivity for people I work with.
- I will communicate my concerns and needs with the appropriate staff member.
- I will strive to promote a positive work environment.

---

**Acknowledgement and Receipt**

---

**Receipt and review of policies form**

---

Signature on this receipt acknowledges that you have reviewed the Hospice House & Support Care of Williamsburg volunteer handbook. Please sign and date the receipt.

Volunteer Handbook Statement of Certification

I, \_\_\_\_\_, certify that I have received and reviewed the Hospice House & Support Care of Williamsburg Volunteer Handbook.

I further understand that, by signing this statement as required I am indicating that I have read the Volunteer Handbook and understand its contents, or have discussed questions I have with the Volunteer Manager. I also realize that this statement will become a permanent part of my volunteer personnel file.

\_\_\_\_\_  
Volunteer Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Date

\*Please print, sign and return to:  
Hospice House & Support Care of Williamsburg  
ATTN: Volunteer Coordinator  
4445 Powhatan Parkway  
Williamsburg VA 23188  
[volunteer@williamsburghospice.org](mailto:volunteer@williamsburghospice.org) \* Fax: 757.253.2599