



## Volunteer Handbook



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Milner, Georgia 30257

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[www.rsclinic.org](http://www.rsclinic.org)

## **ROCK SPRINGS CLINIC OVERVIEW**

Rock Springs Clinic was founded in 2008 to strive to meet the needs of uninsured individuals in Middle Georgia and surrounding areas. ***Our mission is to minister to the spiritual and physical needs of the underserved in the middle Georgia area with compassionate counseling and outstanding health care in a nurturing and caring environment.*** Our desire is to use the gifts that God has given us to reach out with our hearts and hands to those in need around us.

## **WHO WE SERVE**

Patients must meet the following criteria to be accepted as a patient at Rock Springs Clinic:

1. Have no health insurance
2. Live at or below 200% of the poverty level
3. Meet all eligibility requirements of the Georgia Department of Public Health
4. Meet with spiritual counselors before receiving medical services
5. Respect staff and other patients at all times
6. Adhere to "No Smoking on Rock Springs Church Property" rule

## **SCOPE OF SERVICES**

At the Rock Springs Clinic we provide the following health care services:

- ❖ Diagnosis and treatment of general and some chronic illnesses
- ❖ Limited laboratory tests and referrals
- ❖ Patient education and referrals to other health and social services as available
- ❖ Medications as provided by Pharmaceutical Patient Assistance Programs

## **HOW WE ARE FUNDED**

Rock Springs Clinic is funded through donations from corporations, churches, foundations, and individuals in the community. Fund-raising is vital to our program and we are continually seeking opportunities to form new partnerships for support.

## **VOLUNTEERING AT THE CLINIC**

Unique and essential to the Clinic program are the 75 active medical and non-medical volunteers who make up our on-site staff. Simply put, without our volunteer doctors, nurses, medical assistants, intake screeners, interpreters and administrative assistants, we would not be able to do what we do. You are truly the heart of our program!

The Rock Springs Clinic could not exist without the generous support of the volunteers who provide so many of our services. All interested persons must complete a Volunteer Application with a Confidentiality Statement.

All professional medical volunteers (physicians, nurses, pharmacists, etc.) must submit their Georgia Board License Number and are approved by the Georgia Department of Public Health.

## **VOLUNTEER APPLICATION PROCEDURE**

1. Fill out Volunteer Information Sheet
2. Meet with Volunteer Coordinator
  - Tour of facility
  - Overview by Executive Director or Volunteer Coordinator
  - Signing of Confidentiality Statement
  - Receipt of Volunteer Handbook
  - Determination of Initial Placement:
    - Medical
    - Nursing
    - Counseling
    - Clerical/Front Desk/Eligibility
    - Data Entry
    - Pharmacy
    - Med Desk
    - Special Projects
3. Pass Background Check
4. Receive or Document Any Required Training, Education or Licensure
5. Confirm Schedule for Regular Assignment

## **AS A VOLUNTEER IT IS YOUR RESPONSIBILITY...**

- ❖ To remember that “free care” in no way implies second-class medicine. Patients are treated with the utmost courtesy and respect, and receive the highest- quality patient care possible.
- ❖ To respect the confidential nature of our work.
- ❖ To accept an assignment with only as much responsibility as you can handle.
- ❖ To sign up for future clinic sessions, to be punctual when reporting for duty, and to give the Volunteer Supervisor as much notice as possible if you are unable to keep your commitment.
- ❖ To use good judgment in terms of your own physical condition, and not attend the Clinic with any communicable illness.
- ❖ To follow dress code guidelines.
- ❖ To discuss any patient requests with the Volunteer Supervisor or Clinic Director.
- ❖ To provide feedback, suggestions and recommendations to the Clinic Director and/or Staff.
- ❖ To be considerate, respect competencies and work as a member of the team with staff and volunteers.

## **IT IS OUR RESPONSIBILITY...**

- ❖ To provide a safe, efficient and organized environment in which to work.
- ❖ To assure a professional atmosphere with flexible guidelines, allowing you to exercise your best judgment.
- ❖ To maintain a friendly work place, always demonstrating mutual respect for one another’s skills.
- ❖ To quickly identify and remove any patient under the influence of drugs or alcohol, or who demonstrates abusive or abrasive behavior.
- ❖ To provide you with information that will clearly acquaint you with your role and with the mission of Rock Springs Clinic.
- ❖ To keep you informed about the Rock Springs Clinic Program through newsletters, telephone contact, e-mails and special events.

## **DRESS CODE**

Our Clinic desires to project a professional image and a caring attitude. Volunteers are expected to:

- ❖ Dress appropriately.
- ❖ Wear your polo or scrub top with your name on it at all times.
- ❖ No perfume or cologne. Perfume odors can cause an ill person to have an adverse reaction.
- ❖ Wear close-toed shoes.

## **ATTENDANCE**

Volunteers must honor the commitment they have made to Rock Springs Clinic so we can best serve our patients. You will be shown how to properly log in your hours. If you are unable to report for your scheduled session, please call the relevant Supervisor with as much notice as possible. If you plan to be absent for an extended period, please let the Volunteer Supervisor know so that we can plan accordingly.

## **CONFIDENTIALITY**

All information pertaining to any patient must remain confidential and secure in our clinic. Under no circumstances is a patient's condition or situation discussed outside Rock Springs Clinic. Federal law mandates that all patient information is to be kept confidential and secure and even the fact that someone has come to Rock Springs Clinic for service is included in this law. Discussion of any patient outside Rock Springs Clinic may result in termination of a volunteer.

- ❖ Patient confidentiality pertains to patient interactions and record keeping.
- ❖ It is important to provide privacy at all times when confidential information is obtained: during the screening process, while interpreting, and during the assessment / examination.
- ❖ The patient medical record is a legal document used to service the interests of the individual patient. Patient medical records are to be kept strictly confidential and will be maintained in a secure place within the clinic.

## **VOLUNTEER LIABILITY COVERAGE**

The Georgia Volunteer Health Care Program, of the Department of Public Health (DPH), provides FREE Sovereign Immunity (malpractice /liability protection) to contracted licensed volunteer health care professionals who donate treatment to uninsured individuals below the federal poverty level at no cost.

In 2005, the General Assembly passed as House Bill 166, the “Health Share” Volunteers in Medicine Act which authorizes the State of Georgia to offer state-sponsored Sovereign Immunity protection to uncompensated, licensed health care professionals who provide donated care to eligible patients. Three Acts (O.C.G.A. § 43-1-28, O.C.G.A. § 43-11-52, and O.C.G.A. § 43-34-45.1) were also created to allow certain health care professionals who are retired or licensed in another state the ability to obtain the appropriate license to volunteer in free clinics. A 2009 Georgia Assembly amendment allows all compensated licensed practical nurses, registered professional nurses, certified nurse midwives, and advanced practical nurses working in a free clinic to also receive SI protection.

All medical professional Physicians, Physician Assistants, Nurse Practitioners, Nurses, Pharmacists, and others must provide their license number for approval through the GA Department of Public Health.

## **SEXUAL-HARRASSMENT**

Sexual harassment is unlawful verbal or physical conduct of a sexual nature. It violates both federal and state anti-discrimination laws. Volunteers who believe they have been subject to sexual harassment are urged to report it to the Administrative Director.

## **TERMINATION**

If it is determined that it is in the best interest of the volunteer and Rock Springs Clinic to discontinue service, the volunteer will be contacted by the Administrative Director or the Executive Director. Reasons for termination may include poor attitude, sharing confidential information, disregard for Rock Springs Clinic policies and procedures, displaying behavior that could jeopardize the health and welfare of another person, and/or reporting for duty under the influence of alcohol or drugs, or not possessing the necessary skills required to perform your assigned duties.

## **Termination (continued)**

If you experience difficulties in your volunteer position, please ask to meet with the Volunteer Supervisor or Administrative Director. You should expect your request to be granted within a reasonable period of time and that an attempt will be made to resolve the issues. The Clinic reserves the right to terminate a volunteer who breaches confidentiality; exceedingly cancels or doesn't show for scheduled volunteer hours; treats patients(s) disrespectfully; is verbally abusive or physically threatening; or whom the Clinic feels has not been able to utilize the training and guidance offered.

## **VOLUNTEER GUIDELINES AND HELPFUL HINTS**

- ❖ This is a no smoking facility for clients and staff.
- ❖ Upon arriving on duty at the Clinic, please sign-in on the clipboard in the nurses' station. It is important that you do this so that we can keep track of your volunteer time.
- ❖ Please wear your "VOLUNTEER" shirt at all times when on duty at the Clinic. This not only gives your first name, but also reminds people that you are a volunteer, someone who cares!
- ❖ When a client approaches you, introduce yourself, using your first name only, and offer any assistance possible. For your own privacy and safety, do not give out your last name, office phone number, home phone number, or home address.
- ❖ No matter how much you may be concerned about a client, your only contact with the client should be within the confines of the Clinic. If you see a client on the outside, you should not acknowledge the relationship, unless that person comes up to you and reminds you that you met in the Clinic.
- ❖ Regardless of the circumstances, DO NOT give money to any of the clients! Please discuss your concerns with the Director to see if assistance is available.
- ❖ Many clients are illiterate, hard of hearing /understanding, or have language difficulties, so speak slowly, read all instructions to them and then ask if they understand. If they do not, try to rephrase the information and go over it once again, slowly. Validate the client's humanity. Be sensitive to the client's personal space.
- ❖ If you feel at any time that you are "in over your head," get help from the Director, a medical professional at the Clinic, or even, if necessary, the police using the 911 number.

## **PARTING THOUGHTS...**

- ❖ Please be sensitive to the patients and do not have personal conversations in their presence.
- ❖ If for any reason you are not satisfied with your volunteer role, please speak to the Volunteer Supervisor or Administrative Director.
- ❖ Volunteers are expected to be prompt, conscientious, and knowledgeable about Rock Springs Clinic.
- ❖ We welcome your input; please feel free to share your thoughts and ideas with the Rock Springs Clinic management.
- ❖ Please accept our heartfelt thanks. Without you, there would not be a Free Clinic Program.

## **STAFF CONTACTS**

Executive Director:                    770-229-8663  
Cameron Shiflett  
[cameron@rockspringslive.com](mailto:cameron@rockspringslive.com)

Administrative Director:            678-327-9673  
Bobbi Riley

Volunteer Coordinators:            678-688-1950  
Vickie Lochbaum