



1



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3

Administration 418.100

(g) 3. Competency Assessment/Evaluation
 A hospice must assess the skills and competency of all individuals furnishing care, including volunteers furnishing services, and as necessary provide in-service training and education programs where required. The hospice must have written policies and procedures describing its methods(s) of assessment of competency.

- Performance & Competency Assessments
- Related Policies
- Annual Education/Learning
- Volunteers treated as staff
- Volunteers should know who they report to and where to access information



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Recruitment/Retention 418.78c

The hospice must document and demonstrate viable and ongoing efforts to recruit and retain volunteers.



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Misc. Rules

1. Volunteers must be used in day to day operations, particularly administrative and patient support capacities
2. IDG Must show clear assessment for volunteer needs and there should be literature that notes volunteer services available
3. Cost Savings via volunteers must be demonstrated
4. Volunteer services should have a careplan with interventions and specific frequencies and volunteers must document their visits
5. Volunteers serving in professional capacities must be appropriately licensed if required (hairstylists, massage therapists, nurses for example)




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The 5% Requirement

Helpful Hints:

- Travel Time Dilemma
- Have an accurate report from the EMR for staff time
- What Counts? What Doesn't?
 1. Is this activity providing direct patient care or administrative support for direct patient care?
 2. Is there direct/phone contact with the patient/family?
 3. Is the individual trained as other volunteers in similar roles?
- The Travel Time Dilemma

NO Crafting Groups – Bakers - Fundraising
Training – Board work – Thrift Stores
Outreach – IDG Time



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What Next?

DON'T OVER THINK THE RULES!

- How can we make training programs more accessible and still meet the requirements? Empath Health Case Study
- Can items that do not qualify for the 5% benefit patients and families?
- Can volunteers doing non 5% eligible items be cultivated into eligible roles?
- Can volunteers with unknown talents create programs that are differentiators? (PARO, Doulas, Bedside Legacies, Nurses)
- How can we not put volunteers in traditional "boxes?"



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Activity – Open Space Technology

- ◆ What are your burning questions about what has been discussed so far?



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Activity – Open Space Technology

◆ 4 Principals, 1 Law, 2 Totems



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Activity – Open Space Technology

4 Guiding Principles:

- ◆ Whoever comes are the right people
- ◆ Whenever it starts is the right time
- ◆ Whatever happens is the only thing that could have
- ◆ When it's over, it's over (in this session)



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Activity – Open Space Technology

The Law of Two Feet



If you find yourself in a situation where you are neither learning nor contributing, **you are responsible** for using your two feet and moving to a place where you can be more productive.



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**Activity –
Open Space Technology**

Roles or Totem animals

Show their colors in the workshops



Circulate ideas from one workshop to another workshop



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**Activity –
Open Space Technology**

Three burning questions in the room



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**Activity –
Open Space Technology**

Debrief



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Resources

NHPCO's Hospice Volunteer Program Resource Manual (2015)
NHPCO's *Regulatory Resources for Volunteer Managers* (2012)
NHPCO's Standards of Practice for Hospice Programs (2010)
- download at www.nhpc.org/quality
<http://www.nhpc.org/interdisciplinary-team/volunteers>



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The End



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