



# Stanford Health Care

*Patient & Family Partner Program:  
New Volunteer Orientation*



# Agenda

Welcome

Introduction to SHC and Volunteer Resources

C-I-CARE

Policy Review & Confidentiality

PFPP Overview & Best Practices

Volunteer Procedures

Questions?



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# Introductions

# Introductions

## Please introduce yourself!

- Your name
- Where you're zooming in from
- Why you decided to volunteer

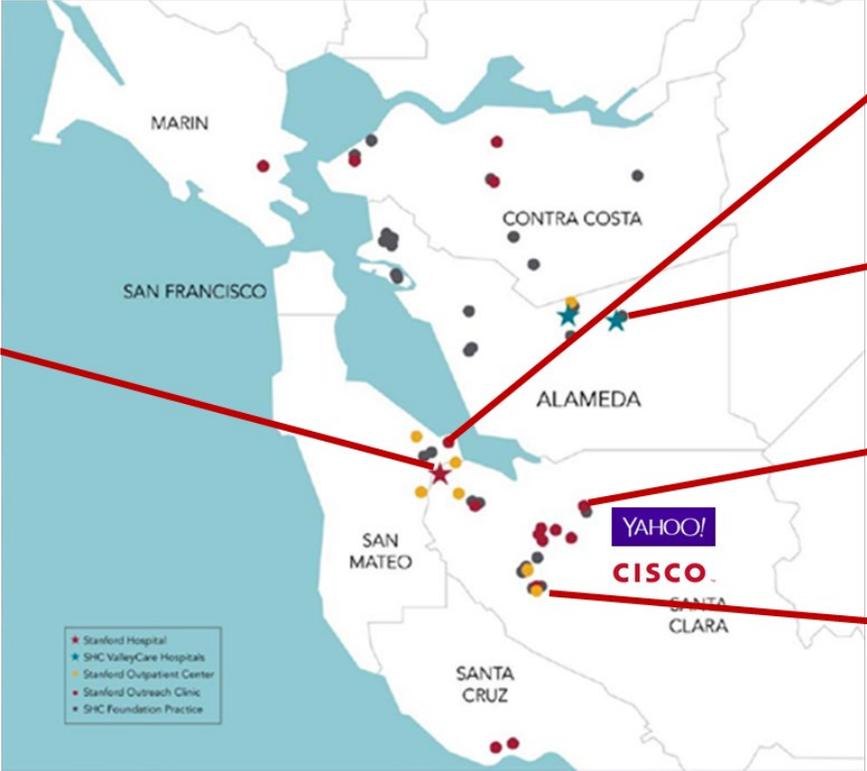
# Introduction to Stanford Health Care



*Founded in 1959, Stanford Health Care is a not-for-profit academic healthcare system with leading edge clinical capabilities led by world-renowned Stanford University physicians.*

## Vision

Healing humanity, through science and compassion, one patient at a time



# Introduction to Volunteer Resources

## Our Vision:

To provide a valuable and rewarding experience for volunteers, who support our families, patients and staff.

## What We Do:

- Recruit, select, onboard, and train over 300 volunteers each year
- Match volunteers to roles throughout our hospital and clinics, supporting nearly 100 different departments
- Manage several independent volunteer programs such as Pet Assisted Wellness at Stanford (PAWS) and the Patient & Family Partner Program
- Provide ongoing support for volunteers and volunteer supervisors

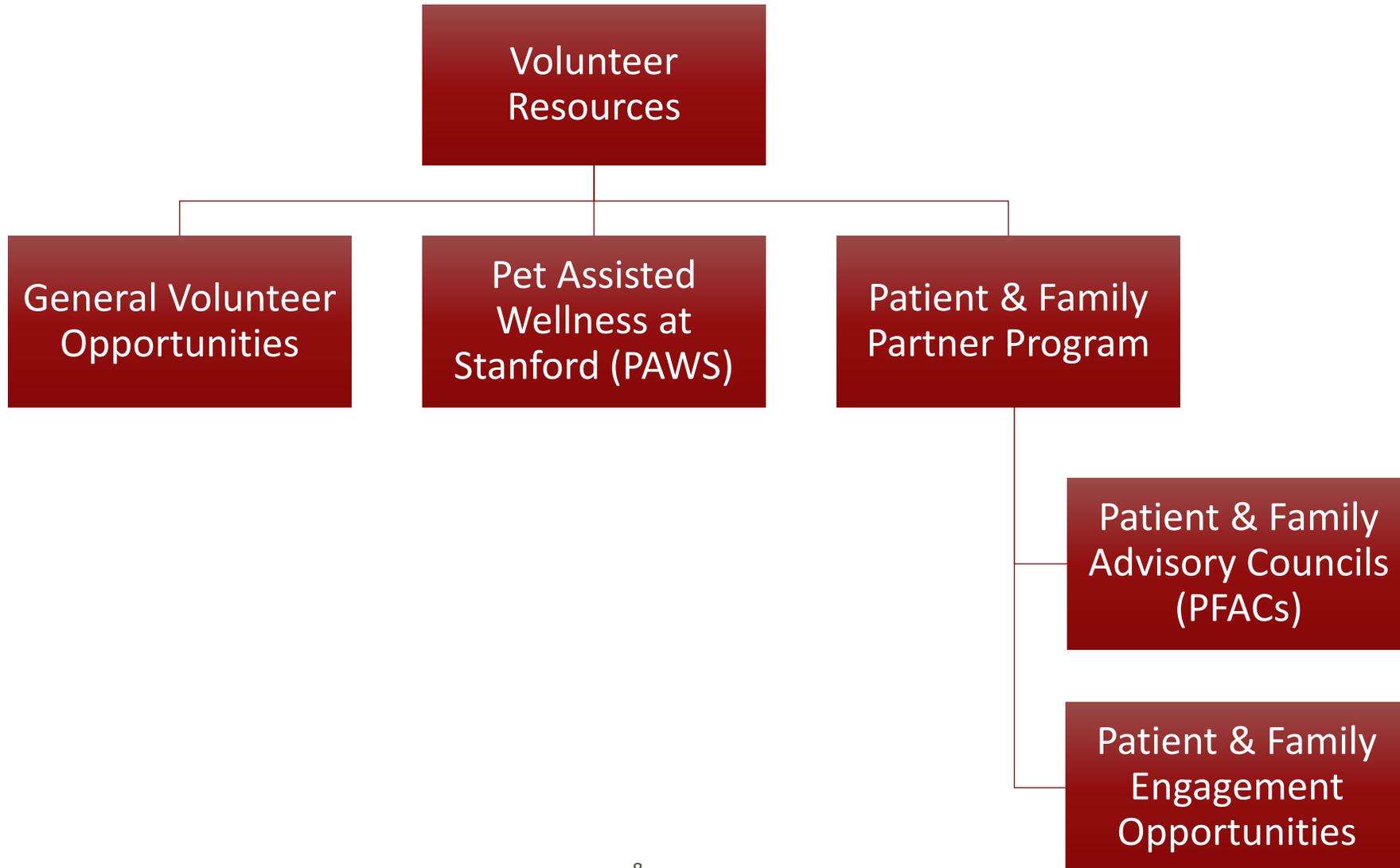
## Contact Us!

[VolunteerResources@stanfordhealthcare.org](mailto:VolunteerResources@stanfordhealthcare.org)

(650) 723-7424



# Office of Patient Experience



# The Patient & Family Experience



Patient experience is the sum of all interactions, shaped by an organization's culture, that influences patient perceptions across the continuum of care.

– The Beryl Institute



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**C-I-CARE**

# Imagine Yourself Here



# What is C-I-CARE?

**c.i.care**

is a framework for structuring best practice communications and developing relationship-based care approaches with patients, families, and our colleagues.

- **C**onnect with people by calling them their proper name or the name they prefer (Mr., Ms., Dr.)
- **I**ntroduce yourself and your role
- **C**ommunicate what you are going to do, how it will impact the patient
- **A**sk permission before entering a room, examining a patient, or undertaking an activity
- **R**espond to patient's questions or requests promptly; anticipate patient needs
- **E**xit courteously with an explanation of what will come next



# C-I-CARE: Connect

## Be Ready

Smile, Express Empathy

Position Yourself at Eye Level (if possible)

Behave with Respect, Deference and Politeness

## Greet Warmly

Offer a Sincere Greeting

Acknowledge Everyone in the Room

## Personalize

Use Everyone's Proper or Preferred Name

Use Their Name in Conversation

Find Commonalities



# C-I-CARE: Introduce

Introduction is an important opportunity to continue building or maintaining a trusting relationship. There are two components to a good introduction.

## Initial Introduction

- Use a caring and empathetic tone of voice (remember that the person you're interacting with may be very nervous or not feeling well)
- Provide your name clearly and slowly
- State your title or role
- Explain how your role will impact the other person
- Ensure your ID Badge is clearly visible

## Return Interaction

- Offer friendly reminder of familiarity by restating their name, reminding them of your name/title and when you last were interacting with them
- Remind the person of what your role will be in the encounter and how you are here to help

# C-I-CARE: Communicate

## Support

- Look for facial expressions and body language
- Anticipate commonly asked questions for your role
- Provide words of encouragement, when appropriate

## Share

- Explain what you would like to do
- Ask permission before proceeding with an action
- Respect privacy if there are other colleagues or visitors present

## Describe

- Use easily understandable language
- Let them know how long the interaction will be

# C-I-CARE: Ask

## Inquire

- Keep questions short (10 or less words)
- Ask what questions they have
- Avoid Closed/Binary Questions (Yes/No)
- Provide Time and Silence to allow for complete answers

## Clarify

- Repeat the question back to confirm mutual understanding

## Closed vs. Open Questions

Is this a good time?

**When might be a good time?**

Did you have a good visit?

**How was your visit/is there anything we could improve?**

Do you speak Spanish?

**What language would you prefer to read or speak during your care?**

# C-I-CARE: Respond

Responding builds trust. It helps us to better understand and anticipate future needs of others. It gives us a chance to provide excellent service to our patients and everyone we interact with!



## Tips for Follow-Up

- Own the follow-up, even if it's outside of your scope!
- Match the requestors tone and urgency when completing the request
- Confirm next steps and timeline
- If solution is going to take a longer time than anticipated, let the requestor know you are still committed to their ask
- Confirm the loop is closed

# C-I-CARE: Exit

## Leave them better than you found them!

- Ask how else you can be of assistance
- Let them know next steps if they'll be waiting for something else to happen after you leave
- If applicable, make “warm hand offs” to the next person they'll be interacting with
- Show gratitude and thank them for choosing Stanford Health Care



# C-I-CARE: Closing



**“Empathy: The Human Connection to Patient Care”  
Cleveland Clinic**

[https://www.youtube.com/watch?v=cDDWvj\\_q-o8](https://www.youtube.com/watch?v=cDDWvj_q-o8)



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# Policy Review

# Policy Review: Code of Conduct

## *All Volunteers Must Comply with the Code of Conduct*

- Follow all SHC rules and policies
- Avoid Conflicts of Interest
- Only engage in ethical business practices
- Respect the property of SHC and others
- Use Hospital assets (supplies, computers, etc.) only for conducting hospital business
- Volunteers are required to treat every patient, visitor and employee with equal respect and dignity. Discrimination towards any individual, including microaggressions, will not be tolerated.
- HIPAA Compliance: keep all medical records, patient information, employee information, financial information and proprietary information about SHC confidential.
- **An important part of volunteering in the hospital is establishing and respecting clear boundaries with patients and their family members.**

# Policy Review: Misc. Policies

## Representation

Volunteers are required to wear their badge and uniform (if applicable) while they are volunteering on any Stanford site. However, volunteers are not permitted to wear their badge or uniform on or off-site outside of volunteering hours. This includes any interactions with SHC as a patient.

## Patient Standing

Volunteers who are also patients at SHC must maintain good standing with SHC. Volunteers who display violent, disruptive, or inappropriate behavior as a patient or visitor at SHC may be terminated as a volunteer.

## Criminal Activity Reporting

Volunteers are required to report any new criminal activity (including arrests, misdemeanors, and felony charges) to Volunteer Resources within 5 days of the event. Failure to report criminal activity may result in disciplinary action.

## Attendance

Volunteers should aim to be on time for each volunteer shift. Volunteers should avoid “no-shows” (missing a volunteer shift without notifying your supervisor in advance). However, please cancel with your volunteer supervisor if you are feeling sick as soon as possible.



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# Confidentiality

# Confidentiality: HIPAA

## What is HIPAA?

The **H**ealth **I**nsurance **P**ortability and **A**ccountability **A**ct of 1996 (HIPAA) is a federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge.

True or False: An **individual** person can be held personally, financially responsible for a HIPAA violation.

True! Depending on the circumstance, individuals can be held personally and/or financially responsible for HIPAA violations.

# Confidentiality

Discuss patient information only with those who have a job-related need to know

Use and disclose the minimum amount of patient information necessary to perform your job duties

Ask patients for permission before discussing their healthcare or any private information in front of family or visitors

Be aware of your surroundings and keep your voice down when discussing patient information with co-workers

**Do not place patient information (photos, documents, names, etc.) on social media (Instagram, Facebook, Twitter, etc.) or any public internet sites**

***Immediately report privacy concerns to  
Volunteer Resources***

**For further investigation, report privacy  
concerns to the Privacy Office**

**[PrivacyOfficer@stanfordhealthcare.org](mailto:PrivacyOfficer@stanfordhealthcare.org)**

**Hotline: 800-216-1784**

**Anonymous reporting options are available**

# Confidentiality: Social Media

Do not place patient information (photos, documents, names, etc.) on social media (Instagram, Facebook, Twitter, etc.) or any public internet sites.



Would this be an appropriate picture of yourself to post online? Why or why not?



Could you post this photo online? Why or why not?

# Confidentiality: Electronic Devices

Stanford Medicine has strict requirements to prevent PHI from being intentionally or accidentally copied to unapproved, unsecured devices and applications. "PHI" includes patient medical records, patient data or research subject information. Violation of these requirements puts the medical center and the individual user at risk.

You may have access to Stanford data, computers and software in your time volunteering with us. Here are some tips for keeping patient data safe:

- Use encrypted hospital devices instead of personal devices
- Only use hospital approved cloud applications to store information; never save PHI on a personal device or unapproved system
- Avoid sending emails with PHI through your personal email; if using an SHC email address, add appropriate sensitivity labels (High Risk, Secure, Private) when sending PHI



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# PFPP Overview & Best Practices

# Role of Patient & Family Partner

To represent the voice of patients and families  
**to improve patient and family-centered care** in  
collaboration with staff, physicians, leaders,  
and other patient & family partners.

# Role of Patient & Family Partner

## Current Role

Patient, caregiver,  
consumer of healthcare.

### Advisor

Patient/caregiver shares  
perspective and  
recommendations after  
care.

Power is unidirectional-  
staff makes decision.

## New Role

Part of the Patient and  
Family Partner Program.

### Partner

Patient/caregiver works  
collaboratively on  
improvement projects.  
Has an equal voice.

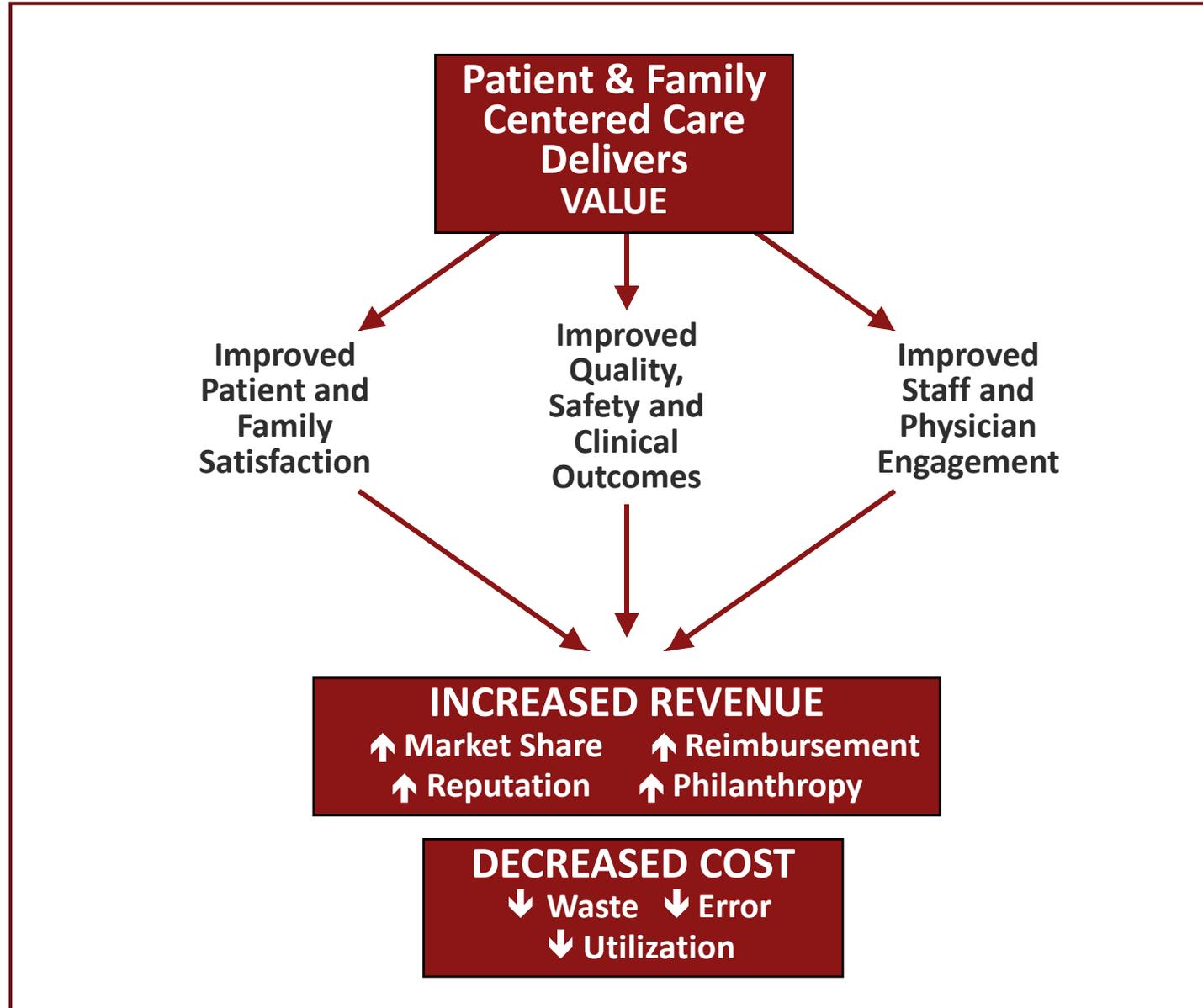
Power and decision-  
making is multi-  
directional.

REACTIVE



PROACTIVE

# Why is it important?



# Patient & Family Partner Program Opportunities



## Patient & Family Advisory Councils (PFACs)

Forum for ongoing partnership within specific service or department



## Speaking Engagements

Patient & Family Partners who teach and motivate by telling their personal healthcare stories



## Interviewers

Patient & Family Partners who support the hiring process of staff and leaders at Stanford by participating in interview panels or 1:1 interviews

# PFPP Opportunities

## Continuous Improvement

Patient & Family Partners engage in improvement opportunities in 4 major categories:

1. **Improvement Events:** Participate in half day to multi-day improvement events or workshops with staff and providers
2. **Workgroups/Committees:** Participate in key decision making and improvement projects through ongoing meetings
3. **Consultations:** Provide 1:1 consultation on specific initiatives through meetings or phone calls
4. **Focus Groups:** Provide dialogue and input through one-time or periodic meetings



# Patient & Family Advisory Council

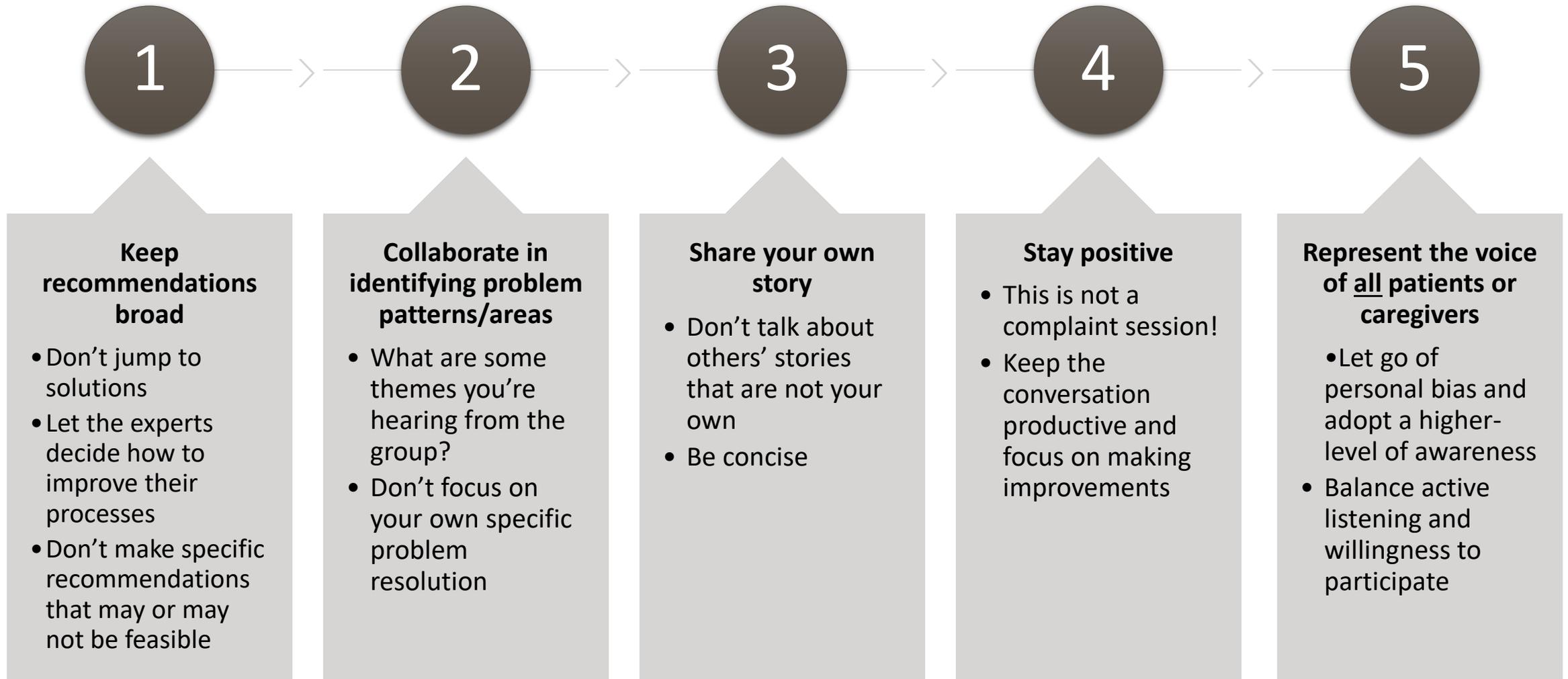
- PFACs are forums for communication and collaboration between staff and patients/caregivers
- PFACs are Service Line or Location-specific
- Participation includes a monthly 2-hour meeting and potential offline work (depending on your goals)
- PFACs also work on issues identified by PFAC and assist staff with ad hoc requests for feedback
- PFACs Set 3 goals per year:
  - ❖ PFAC Goal
  - ❖ Community Goal
  - ❖ Service-Line Goal
- Each PFAC has a **Chair**: a patient or caregiver who is nominated by the council
- PFACs also have a **Staff Advisor** who helps facilitate meeting logistics and advises Council



# Stanford Health Care Patient and Family Advisory Councils (PFACs)

| Specialty                      | Hospital-Wide | Transplant                   | Cancer                          |
|--------------------------------|---------------|------------------------------|---------------------------------|
| Adult Congenital Heart Disease | Disabilities  | Heart Transplant             | Adolescent & Young Adult Cancer |
| Cystic Fibrosis                | Founding      | Lung & Heart-Lung Transplant | Cancer Center                   |
| Emergency Medicine             | Tri-Valley    |                              |                                 |

# How to Share Feedback Effectively



# Things to Avoid

## Looking for Support/Therapy

We want all PFPs to be emotionally stable and to have their own support systems at home

## Individual Problem Resolution

It is unlikely that your specific problem will be relevant to the PFAC goals. Feel free to take your concerns to your Staff Advisor offline.

## Attempt to Gain Undue Advantage or Influence

Seeking financial relationships as a PFP is grounds for dismissal (jobs, consulting roles, etc.). Additionally, PFPs should refrain from reaching out to physicians, staff, or leaders outside of assigned projects (this excludes regular healthcare communications).





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# Next Steps

# Volunteering Onsite: Logging Volunteer Hours

Logging your volunteer hours is extremely important!

The screenshot shows a user dashboard for a volunteer. At the top right, there is a navigation bar with a home icon, 'Dashboard', and 'Logout'. The main header says 'Welcome Back, \*Cristal!'. Below this, there are three summary boxes showing '0 hours' for 'This month', 'This year', and 'Since forever!'. A left sidebar contains a profile picture placeholder, a 'Volunteer ID #' field with the value '16691', and two buttons: 'Report Hours' and 'Edit Profile'. The main content area has three sections: 1. 'Announcements' with a 'Welcome to your volunteer dashboard!' message and instructions on how to use the dashboard. 2. 'Compliance Dashboard' with two items: 'Position Description and Core Competency Checklist' (with an 'Upload' button) and 'Tuberculosis (TB) Screening'. 3. 'Training' with a message 'You've been placed with this opportunity.' and links for 'see details' and 'Report Service'. At the bottom right, there is a link 'See All Assigned Opportunities'.

# Volunteering Onsite: Logging Volunteer Hours



Volunteer ID #  
16691

[Report Hours](#)

[Edit Profile](#)

Welcome Back, \*Cristal!

|                       |                      |                           |
|-----------------------|----------------------|---------------------------|
| 0 hours<br>This month | 0 hours<br>This year | 0 hours<br>Since forever! |
|-----------------------|----------------------|---------------------------|

#### Announcements

Welcome to your volunteer dashboard!

This page can be used to update your contact information, view any volunteer compliance items that are due, and view your volunteer assignments. You can also log your volunteer hours by clicking the "Report Hours" button on the right.

If you have any questions or feedback about the dashboard, please reach out to us at [volunteerresources@stanfordhealthcare.org](mailto:volunteerresources@stanfordhealthcare.org).

Thank you!

#### Compliance Dashboard

##### Position Description and Core Competency Checklist

An email will be sent to you when you receive your final assignment.

If you did not receive this email, please reach out to Volunteer Resources for further assistance.

[Upload](#)

##### Tuberculosis (TB) Screening



#### Training

You've been placed with this opportunity.

[see details](#) [Report Service](#)

[See All Assigned Opportunities](#)

## Report & View Hours

[Report Service](#)

[Logbook](#)

### Select an Opportunity

Select an Opportunity ▼

# Volunteering Onsite: Logging Volunteer Hours

## Report & View Hours

[Report Service](#) [Logbook](#)

Select a Survey

Hours  [change opportunity](#)

### Training

Start Time  End Time  Hours

| March 2022 |    |    |    |    |    |    |
|------------|----|----|----|----|----|----|
| Su         | Mo | Tu | We | Th | Fr | Sa |
|            |    | 1  | 2  | 3  | 4  | 5  |
| 6          | 7  | 8  | 9  | 10 | 11 | 12 |
| 13         | 14 | 15 | 16 | 17 | 18 | 19 |
| 20         | 21 | 22 | 23 | 24 | 25 | 26 |
| 27         | 28 | 29 | 30 | 31 |    |    |

Comments (optional):

## Report & View Hours

[Report Service](#) [Logbook](#)

Summary Totals Month: 0 Year: 0 All Time: 0.08 [show more details >](#)

### Recent Service History

(NEW) Training

- Date/Time: 03/07/2022 8:00 am - 8:05 am  
[more details](#) | [edit](#)

[View All Service History](#)

# Volunteer Onboarding: Next Steps

You will not be approved to volunteer until all onboarding requirements have been completed. When all requirements are complete, Volunteer Resources will email you and your PFAC leadership (if applicable). You will also be added to our PFP Engagement distribution list!

Volunteers are required to complete the following items annually:

- TB Screening
- Participation in the Flu Program
- HealthStream Modules

Volunteers must log all service hours through their volunteer dashboard. If you have any troubles with logging your hours, please reach out to Volunteer Resources!



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**Questions?**