

	<b>Dimensions:</b> <b>Safety</b>	<b>HAO Standard:</b> <b>3.2 a</b>	<b>Policy:</b> <b>Safety #5</b>
	<b>Original Approval Date:</b> <b>March 17, 2003</b>	<b>Date Revised:</b> <b>February 2, 2009</b>	<b>Revision Approval Date:</b> <b>August 31, 2009</b>

## **TOPIC:   NON-MEDICAL EMERGENCY AND UNUSUAL INCIDENTS**

### **POLICY STATEMENT:**

The NNPCN (N/PS) has a process for informing volunteers of their roles and limitations in the event of a non-medical emergency or unusual event such as caregiver not returning home at designated time, falls-client or volunteer, theft, fire, or forced evacuation from the care setting that may occur during the performance of their role as a volunteer.

### **PROCEDURE:**

During a regular volunteer visit, any unusual incident that directly involves the client, family caregivers and/or the volunteer must be reported as soon as possible to the Team Leader or Program Administrator:

1. In the event of a fire, the volunteer must immediately shut off the oxygen supply and move the client to safety. If the client has a portable oxygen supply, it should be moved with the client and connected once a safe place is reached. **DO NOT HOOK UP PORTABLE SUPPLY WHERE THERE IS AN OPEN FLAME.** Client and volunteer safety is always the primary concern.
  - Once the client and volunteer are safely away from the fire, the volunteer or designate contacts 911.
  - The volunteer is to state:
    - i. Who you are-name and volunteer status
    - ii. Client's name, address, phone number and information about the location of the fire
    - iii. In rural areas, provide emergency house number and names of main intersecting roads nearest to the client's home (if known)
  - Contact the family/caregiver (if not already done)

- Contact the NNPCN (N/PS) and the Team Leader
2. In the event that a caregiver does not return home at the designated time, the volunteer must advise the emergency contact person of the situation and the need for an immediate replacement. The volunteer must advise the Program Administrator/Team Leader of this event and follow procedure # 3.
  3. When a volunteer contacts NNPCN (N/PS) to report an event they need to include:
    - Date
    - Time
    - Description of incident
    - Any remedial steps taken (contacting emergency services, police etc.)
  4. The Program Administrator or designate:
    - completes the Incident Report (Form 027)
    - contacts Hospice insurer, if appropriate
    - contacts client/caregiver/volunteer for follow-up, including client's insurance information, if applicable
    - consults with the Chair and the Executive Committee of the Board

**REVISION HISTORY:**

<b>DATE mm/dd/yyyy</b>	<b>REVISED BY</b>	<b>REVIEW ONLY (✓)</b>	<b>COMMENTS / MODIFICATIONS</b>	<b>BOARD APPROVAL DATE: mm/dd/yyyy</b>