



FACULTY, STAFF, STUDENT & VOLUNTEER HANDBOOK

Mobile Health Clinic

UNC School of Nursing

Marianne Cockroft

1/1/20

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Student & Volunteer Acknowledgement Form

(this is not a contract)

The UNC School of Nursing's Mobile Health Clinic ("UNC SON MHC" or the "MHC") Employee Handbook provides general guidance on the UNC SON MHC resource policies, procedures and benefits as they relate to your student or volunteer responsibilities. It is a reference guide only.

Since the information, policies, guidelines, practice, and procedures described here are subject to change, I acknowledge that the Clinic may make any revisions to the handbook at any time. All such changes shall be communicated in writing, and revised information may supersede, modify, or eliminate policies. Only the Advisory Board has the right to adopt any revisions to the policies in this handbook.

Furthermore, I acknowledge that the Clinic is an "at-will" entity. Nothing set forth in this handbook is a contract or assurance of continued compensation, employment or benefits of any kind. The Clinic retains the right to discharge any student or volunteer at any time for any lawful reason, with or without notice or the necessity of compliance with any written or unwritten policy, practice, guideline or procedure.

I acknowledge that I have received the handbook, and I understand that it is my responsibility to read and familiarize myself with the information contained in this handbook and any revisions made to it. I understand that more information about the clinic and its structure is available to me at www.google.com

Print Name (please print full name)

Student or Volunteer Signature

Supervisor or Clinical Director Initials/Date

Please sign and return this page to your supervisor or Human Resources representative for placement in your employee file

WELCOME FROM OUR CLINICAL DIRECTOR

Welcome and thank you for joining the UNC School of Nursing's Mobile Health Clinic.

We are thrilled that you have chosen to work together with a dedicated group of nurses and laid volunteers to achieve one vital mission: promote wellness, assess those who are at risk for health problems, and assist individuals in managing chronic diseases.

Our volunteers are delivering on that mission by providing exceptional quality care to low-income individuals and the uninsured. Some whom sometimes do not have anywhere else to go for care, or who do not know where to go for affordable care.

The UNC SON MHC is the only mobile health clinic completely run by nurse in the Research Triangle. We bring together our expertise in patient care with our compassion and mission to advance health for all. Your talents at the center of our mission and are instrumental in helping us accomplish our goals.

We take great pride in the superior care we give to our visitors, especially as we do so with limited resources. We have no doubt that as you join our team, you too will develop great pride on the impact we have in the community and the impact we have on the people that with serve.

We encourage all of our volunteers, but especially our students, to embrace the many opportunities available to learn, grow, develop or enhance your skills here with us. By working together, we will reach our full potential.

Congratulations again and welcome to the team.

Marianne Cockcroft, PhD, RN

Marianne Cockcroft, Phd, RN
Assistant Professor
Public Health and Community Practice
UNC School of Nursing

INTENT AND SCOPE OF THIS HANDBOOK

This volunteer handbook provides a brief overview of the policies and procedures of the MHC as they relate to your work. It is a reference guide only. For specific information, please refer to the appropriate policies and procedures links provided throughout the handbook.

The policies and procedures outlined in this Handbook may apply to you depending on your circumstances. Policies and procedures described in this Handbook supersede previous policies and procedures.

UNC SON MHC's policies, procedures, and forms do not create an expressed or implied contract between UNC SON MHC and any of its staff, students or volunteers. Volunteer work with UNC SON MHC is at will and may be terminated at any time, with or without notice or procedure, for any reason.

UNC SON MHC reserves the right to modify, amend, change, or terminate any policies, procedures, forms, and employee programs, as permitted by law, at any time. Where possible, staff, students and volunteers will be notified in advance of any changes.

MISSION, VISION AND VALUES

Mission

Recognizing the impact of stress on health, the UNC School of Nursing Mobile Health Clinic aims to promote wellness, assess those who are at risk for health problems, and assist individuals in managing chronic diseases.

Vision

Grow a healthier community.

Our Values

Respecting the dignity of each individual. Each visitor to the Clinic should be treated with the greatest level of respect and extended the utmost level of dignity in the care they seek.

Serve a Diverse Community

The MHC strives to become culturally competent in the areas we serve and seeks to meet the health and wellness needs of the under and uninsured members of these communities, and of individuals going through a crisis situation.

Provide Outreach Services Within the Community

Outreach activities are essential to meeting the needs of these communities. One of the Clinics' main objectives is to educate the community on health and wellness.

Work Collaboratively with Volunteers

Since the Clinic's inception, volunteers have been a critical component to our growth and success. The Clinic Director values its volunteer staff and encourages staff to utilize volunteers as a Clinic resource.

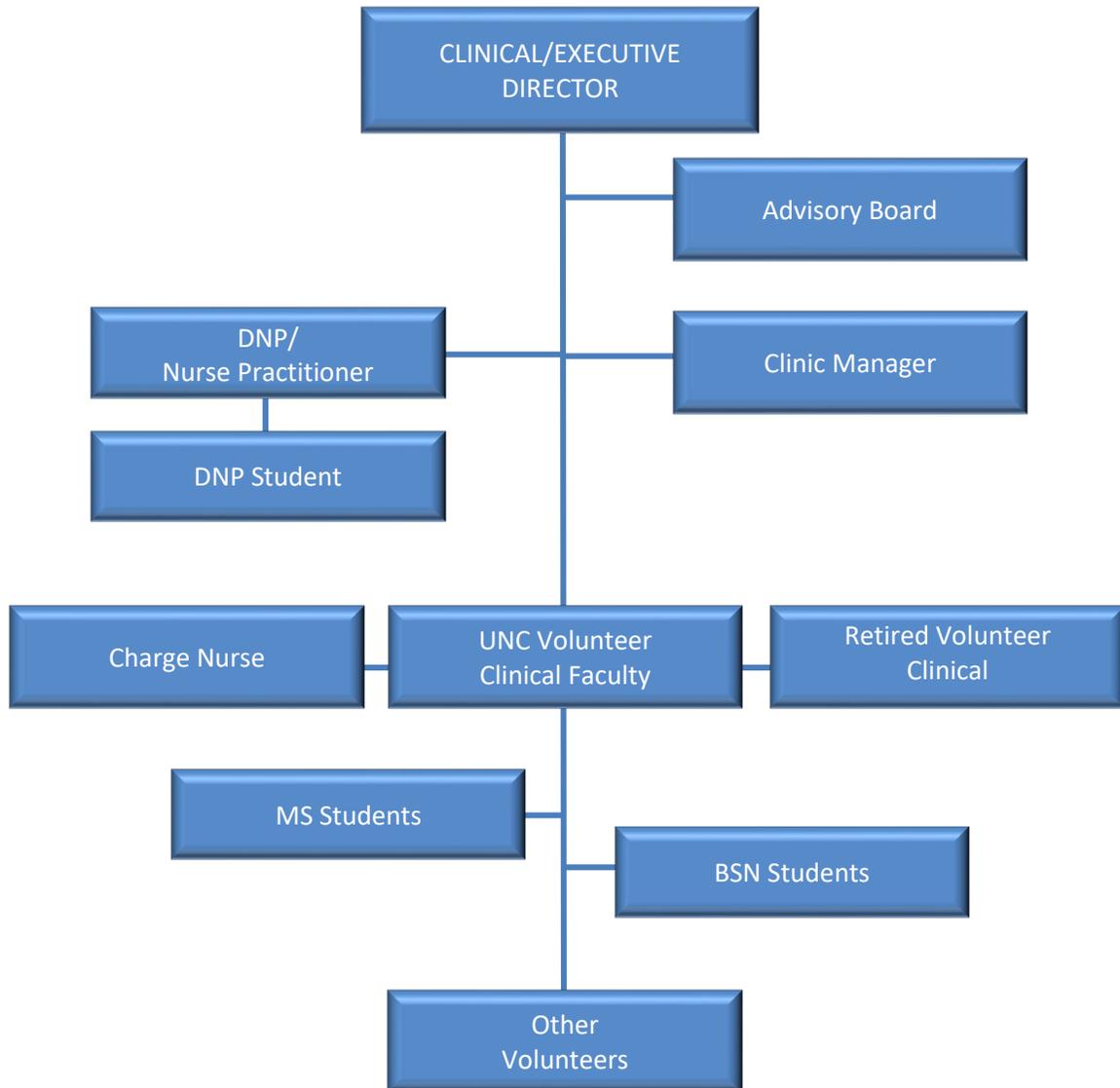
Foster Individual and Community Partnerships

The Clinic views its ability to collaborate and build partnerships with other health and social services organization throughout the community as one of its greatest strengths.

Respond to the Changing Health and Wellness Needs of the Community

The Clinic sees itself as an organization flexible enough to meet the ever changing and evolving health and wellness needs of the community. We seek meaningful consumer input and perform detailed program evaluation to adequately meet the communities changing needs.

ORGANIZATIONAL STRUCTURE



JOB DESCRIPTIONS

Clinical Director

Overview

The Clinical Director is responsible for maintaining quality of care at the Mobile Health Clinic. The Clinical Director has experience in a nursing leadership position, a strong ability to work with a team, and have an in-depth knowledge of the healthcare industry.

Functions

-
- Lead the nursing staff in delivering excellent care to clinic visitors and offering quality support to the nurse practitioner, nursing students, volunteer faculty, and lay volunteers.
 - Displays an understanding of local, state and federal laws and guidelines to ensure that each nurse on staff is properly certified and abides by the standards for care established by our organization and state and federal laws.
 - Keep abreast of changing standards in nursing administration.
 - Creates new policies and update existing policies to help improve the level of care for each visitor.
 - Implements quality improvement programs designed to help deliver the highest possible levels of service.
 - Interprets basic budgeting and financial reporting while controlling budgets and monitoring expenses.
 - Ensures that all patient care plans have the documentation necessary to provide the proper type of care.
 - Exhibits strong organizational and communication skills and ability to collaborate with an aptitude for problem solving.
 - Evaluates staff performance and patient outcomes to assure safe quality patient care, using evidenced based management.
 - Organizes and coordinates intake and patient care procedures.
 - Manages record-keeping procedures

Employment Standards

-
- Proven leadership capabilities.
 - Planning, organization and prioritization
 - Analytical problem solving
 - Management control
 - Interpersonal sensitivity
 - Understand and follow protocol for the proper lines of communication
 - Clear understanding of Clinic mission and values.
 - Ability to work independently and as part of a team.

Executive Director

Overview

The Executive Director is responsible for Responsible for the operations, staffing, finances, direction and administration of the UNC School of Nursing Mobile Health Clinic. Accountable to and receives direction from the Advisory Board.

Functions

ADMINISTRATIVE

- Participate in recruitment, interview, selection, disciplining and evaluation process for directly supervised staff and other key positions. Hiring, evaluating and disciplining UNC SON MHC staff is the responsibility of the Executive Director
- Recruit volunteers and provide for their orientation, training, and evaluation
- Convene and lead the Management Team to ensure delivery of quality services and programs
- Maintain administrative reports and statistical information on all aspects of the Clinic
- Prepare and maintain budgets, all necessary financial reporting, assure that the Clinic utilizes general acceptable accounting practices (GAAP)
- Writes grants and secures funds to assure that the UNC SON MHC has a sound financial base and can grow as necessary
- Functions and administers under Personnel Policies, fiscal policies and other policies and procedures adopted by the Advisory Board
- Plan and be responsible for compliance with all legal requirements of the Clinic's functions and programs and the physical facility
- Undertake routine assessment of the Clinic's functions and make necessary changes in line with the expansion of service and efficient clinic operations
- Organize, plan, supervise, coordinate and assign work to Clinic staff
- Recommend total personnel wage to the board as part of the annual budget presentation to the Board
- Oversee all operational and administrative functions of the Clinic
- Other duties necessary to assure that the UNC SON MHC is operating in an efficient manner

OTHER REGULAR DUTIES

- Purchase equipment, supplies, furniture, medications and other supplies needed for the Clinic operations and when appropriate under adopted policies and procedures
- Maintain the Clinic physical site and make adjustments in layout as appropriate for staff and patient growth
- Manage the Clinic in line with the established goals, aims and objectives expressed by the Board.
- Responsible for the application, implementation and interpretation of established Board policies in the operation of the Clinic and oversight of all staff
- Acts as the liaison between the Advisory Board and the Clinic staff
- Attends all meetings of the Advisory Board, committee meetings, and provides direction and input into decisions affecting the Clinic and its staff

- Support the Advisory Board. Ensure integrity and strength of Board leadership and address issues around clarity of role, governance, bylaws/policies and corporate structure
- Assist with the cultivation and recruitment of new Board members
- Prepare Executive reports to the Advisory Board and the Executive Committee
- Provide staff support and attend various Committee meetings
- Between Board meetings, the Executive Director is to provide, as appropriate, general information, policy changes, and developments to the President or Vice-president of the Board
- Strategize the organization's short range and long-range program goals particularly in organizing and planning:
 - work with the Management team to ensure quality programs and services are provided
 - work with the Development Director to identify overall resource development goals and fund-raising plan
 - establish, cultivate and maintain relations with donors, foundations, and other resources to support organizational programs and activities
 - maintain accountability for current year operating budget
- Other duties as assigned by the Advisory Board

SPECIAL ASSIGNMENTS

- Must be cognizant of and maintain regular contact with all available funding resources and prepare applications, submit applications and report secured funding to the Board.
- Executive Director is authorized to undertake necessary execution of grant documents to secure funding
- Maintain a high level of public acceptance, interaction with medical community and community at large necessary to maintain the future success of the Clinic
- Serve as the organization's principal leader, representative and spokesperson to the greater community
- Must respect full confidentiality of patient records, treat patients with respect and care and lead staff in that regard

Employment Standards

- At least a master's degree in health or health administration, management or related field.
- Experience as grant writer, Executive Director or manager of health care center or similar setting/undertaking
- Knowledge of financial systems, policy and procedure development and strong financial background in administration and management
- Skills in interpersonal, community and group relations
- Ability to exercise sound leadership and judgment.
- Public relations knowledge and expertise to maintain good public image of the Clinic

Nurse Practitioner

Overview

The Nurse Practitioner is responsible for providing advance nursing services, primary care, administering patient health assessment, creating strategies to improve or manage a patient health, and introducing habits for health promotion. Accountable to and receives direction from Clinic Director.

Functions

- Perform physical examination and identify abnormal findings
- Help provide primary care to patients
- Perform physical exams and patient observations
- Record patient medical histories and symptoms
- Create patient care plans and contribute to existing plans
- Order, administer and analyze diagnostic tests
- Monitor and operate medical equipment
- Diagnose health issues
- Detect changes in a patient's health and change treatment plans as necessary.
- Administer medicines and treatments
- Evaluate responses to treatments and medications
- Consult with healthcare professionals
- Train patients and families on managing illnesses or injuries and disease prevention.

Employment Standards

- Current faculty member at the University of North Carolina School of Nursing
- Must have RN licensure in North Carolina or a compact party state and be board certified by either ANCC or AANP
- Must have prescriptive authorization
- APN authorization in the State of North Carolina to practice in Family Health by the Board of Nurse Examiners
- Must be proficient with medical instruments and equipment required by the work.
- Knowledge of computer-based data management programs and information systems, as well as medical records and point-of-interview technology.
- Ability to communicate effectively, in verbal and written form, with retail and medical partners at various levels, patients, family members, physicians and representatives of the community.
- Sound understanding of all federal and state regulations including HIPAA and OSHA.
- Experience providing primary care as a family nurse practitioner
- Knowledge of disease prevention.

Job description and responsibilities may be modified only by the Clinic Director

Clinic Manager

Overview

To Clinic Manager provides administrative support and assists the clinical director with training of students and volunteers, community outreach efforts and patient education. Accountable to and receives direction from Clinic Director.

Functions

- With the clinical director, coordinate the training of new staff members
- Plan, organize, and coordinate clinic services and activities in conjunction with the Clinical Director
- Attend and represent the Clinic at regular meetings.
- Supervise students and volunteers working in support of the clinical services.
- Ensure compliance with medical and regulatory standards of care and operation.
- Monitors maintenance of necessary and appropriate clinic certification including, but not limited to: OSHA and CLIA
- Disseminate updates on policies and procedures to clinic staff, volunteers and patients as indicated.
- In coordination with the Clinical Director, reach out to partner organizations to maintain and expand community connections with partner clinics, providers, hospitals and other safety net organizations.
- Design and implement business strategies to help the clinic meet organizational goals
- Manage staff by assigning and delegating tasks as needed
- Develop protocols and procedures to improve staff productivity
- Act as a liaison between patients, their families and additional care staff
- With the clinical director, writes and designs and develops annual report
- Ensure that all policies and procedures function in accordance with state and federal laws

Employment Standards

- At least a master's degree in a health-related discipline from an accredited institution
- Experience working in health care setting
- Understanding and willingness to work with a culturally and economically diverse patient population
- Planning, organization and prioritization
- Bilingual (Spanish and English) skills
- Experienced with Word, Excel, Publisher, Google Drive and Qualtrics
- Team-player with strong motivation to maintain a collaborative culture
- High degree of communication (verbal, listening, writing) and interpersonal skills
- Attentive to the needs of co-workers and clinic visitors

Job description and responsibilities may be modified only by the Clinic Director

Nurse Volunteer

Overview

Volunteers nursing duties for the clinic, including patient education. Referral of patients for appropriate follow up care. When appropriate, can function under established medical protocols. Accountable to and receives direction from the clinic director. When the clinic director is absent, receives direction from Nurse Practitioner or Clinic Manager.

Functions

- Supervises nursing students
- Sustains and supports patients during diagnosis and treatment
- Obtains health history and assessing health/illness status
- Maintains quality assurance of assigned patients
- Provides patient education in the areas of health promotion and preventive medicine
- Refers patients as necessary to other health providers and/or social service agencies
- Appropriate follow up of patients with chronic and acute health problems
- Commensurate with education and training and when appropriate, can function under established medical protocols for minor illness and treatment of same
- Performs other duties emanating from the Executive Director, Nurse Practitioner or Clinic Manager

Employment Standards

- Degree in nursing and significant experience functioning as a nurse
- Understanding and willingness to work with a culturally and economically diverse patient population
- Thorough knowledge of the expanding role of Nursing
- General knowledge of quality assurance practices and procedures
- Skills in interpersonal, community and group relations
- Ability to exercise sound leadership and judgment

Job description and responsibilities may be modified only by the Clinic Director

Student Nurse

Overview

Student nurses work to maintain, promote and restore the health of patients while gaining practical experience at the clinic. The student nurses must follow the instructions of her clinical instructor and must adhere to all the required policies and procedures. Working at the Clinic gives student nurses the chance to practice what they have learned in school. It is a challenging experience that involves several duties.

Functions

- Sets up the work area at the beginning of the day
- Ensure equipment, including glucometers, pressure cuffs/Sphygmomanometer are working properly
- Perform blood pressure and pulse oximeter competence validation criteria
- Perform blood glucose meter competence validation criteria
- Processes intake forms
- Chart the patient's condition, medication list, treatment plan and symptoms
- When necessary, and every time the patient is assigned to meet with the nurse practitioner, record patient information including heart rate, blood glucose, pulse, oxygen saturation, temperature, weight, height, and body mass index
- Read and understand the patients' designated vital signs
- Follow clinical pathway instructions
- Report all technology issues to the supervisor

Employment Standards

- Student must be enrolled in a BSN, MSN, or DNP program at UNC Chapel Hill
- Show cultural competence
- Employ clear and compassionate communication
- Practice critical thinking skills
- Serve as patient advocate
- Skilled in modern technologies, which are important for patient care.
- Experience with Microsoft Office Suite (Word, Excel, PowerPoint, etc.)
- Strong listening skills
- Understand and follow protocol for the proper lines of communication
- Clear understanding of the Clinic's mission and values.
- Ability to work as part of a team.

Job description and responsibilities may be modified only by the supervisor

COLLABORATIVE PRACTICE AGREEMENT

Collaborative Practice Agreement refers to the formal written statement addressing the parameters of the collaborative practice that are mutually agreed upon by the advanced practice registered nurse and one or more licensed physicians or dentists.

Collaborating Professionals refer to

(provide Collaborating Physicians' names) and

(provide APRN's name and licensed APRN specialty, i.e. FNP, ANP)—respectively "Physician" and "APRN"—have entered into collaborative practices (list all Physicians below):

Clinic Practice Guidelines refers to written documents, jointly agreed upon by the collaborating professionals that describe a specific plan, arrangement, or sequence of orders, steps, or procedures to be followed or carried out in providing patient care in various Clinic situations. These may include textbooks, electronic communications, Internet references, and resources.

Responsibilities of the APRN are to see patients in a timely manner, follow practice guidelines and consult collaborating physician as needed.

Responsibilities of the Collaborating Physician are to be available for collaboration at all times either in person or electronically.

Methods of Patient Care—The above APRN is authorized to provide professional services within the scope of a _____ (provide APRN licensed specialty) within collaborative practice guidelines agreed upon by the collaborative parties.

The parameters of this practice include initial or follow-up assessment, history taking, physical examination of patients, and utilization of differential diagnosis, appropriate interventions, consultation and referral as indicated. Emergency treatment and stabilization are also authorized.

The parameters of this practice also include (please mark each box that is applicable):

- Pharmaceutical diagnostic testing
- Legend drugs
- Controlled substances, see Addendum A, Parts 1 & 2
 - *If APRN is requesting any controlled substances, Addendum A, Part 1 must be completed, and Addendum A, Part 2 must be signed by the APRN and all physicians.*
- Therapeutic regimens

- Medical devices and appliances
- Receiving and distributing a therapeutic regimen of prepackaged drugs prepared and labeled by a licensed pharmacist
- Receiving and distributing free samples supplied by a drug manufacturer
- Receiving and distributing gratuitous drugs in controlled setting

Clinic Practice Guidelines agreed upon within this collaborative arrangement are meant to provide guidelines for safe and effective care and will:

- Be mutually agreed upon by the decision of the collaborating professionals.
- Be specific to a variety of Clinic situations, and to the practice setting.
- Describe a general plan, arrangement, or sequence of orders, steps, or procedures to be followed in providing patient care in various Clinic situations, including medications and referral procedures.
- Be adjusted on an on-going basis to fulfill individual patient's needs/situations and to accommodate ongoing research and changing standards.
- Be maintained on site and readily available in the Clinic to the collaborating professionals.
- Be reviewed and signed yearly, or more frequently, as appropriate by both parties.

Clinic Practice Guidelines—To be utilized from among the following (list below all Clinic practice guidelines, or type and attach to CPA):

- 1. Documentation** – Documentation of active medical records, such as the SOAP format will be utilized. Medical documentation will include subjective data, objective data, assessment, and recommendations for treatment, referral, and/or follow-up. Documentation will indicate cases discussed in the Clinic setting. Documentation must delineate evidence of collaboration when applicable. There is a mutual obligation and responsibility of the APRN and collaborating physician to insure acts of prescriptive authority are properly documented.
- 2. Diagnostic/Lab Requests**—Diagnostic tests and/or laboratory tests, within the scope of a _____ (provide APRN licensed specialty in space), will be ordered by the APRN according to mutually agreed upon office evaluation and management practice guidelines. If results are abnormal, the APRN will follow practice guidelines utilizing appropriate consultation, treatment, and/or referral as indicated.
- 3. Medications/Prescriptions**—The distribution or administration of medications by the APRN within the collaborative practice agreement shall comply with current state and federal law. The APRN will initiate pharmacological intervention not addressed by current practice guidelines only after appropriate consultation with the collaborating physician or directly.
- 4. Specialty Consults**—Specialty consultations/referrals will be completed according to practice guidelines. If need falls outside of practice guidelines, consultation with the collaborating physician and /or physician referral is required.
- 5. Hospital Admissions and Privileges**—All patients who need hospital admission will be registered under the collaborating physician. The APRN will collaborate with the physician in continuing to

provide care for the patients admitted by the APRN. The APRN and the collaborating physician will maintain privileges at designated hospitals.

- 6. **Availability of the Collaborating Physician**—the collaborating physician will be available by telephone or direct telecommunications for consultation assistance with medical emergencies, or patient referral.
- 7. **Patient Care Coverage**—The APRN will or will not (please mark applicable box) participate in “on call” activities requiring medical management of patients.
- 8. **Cancellation of Collaborative Arrangement**—Collaborating parties individually retain the right to terminate the collaborative arrangement with written notification of both parties.

By signing below, the APRN and collaborating physician(s) are in agreement with the APRN’s level of prescriptive authority. Make as many copies of this part as needed to list and provide original signatures of all physicians. The APRN must sign each additional page:

APRN:

Signature Date Signed APRN License # DEA #

(Type or print the APRN’s licensed name.)

APRN Specialty: _____

Physician:

Signature Date Signed Medical License # DEA #

(Type or print clearly the collaborating physician’s name.)

Department of _____

CLINIC SET UP & CLOSING

Clinic Set Up

Important Contact Numbers

General RV questions

Thava Mahadevan
Clinical Instructor and Director of Operations
UNC Center for Excellence in Community Mental Health
Department of Psychiatry, CB 7162
200 N. Greensboro St. Suite C-6
Carrboro, NC 27510
Email: thavagunan_mahadevan@med.unc.edu
(919) 445-0205 (wk.) or 919-xxx-xxxx(cell)

UNC MHC Van Coordinator

Marianne Cockroft, PhD, RN
Associate Professor
UNC School of Nursing
The University of North Carolina
Chapel Hill, NC 27599-7460
Email: Cockroft@email.unc.edu
(cell) 919-413-7889 or (hm) 919-363-6454; (wk.)
919-966-5321

The Outreach Site

- The mobile van is permanently parked at Dorcas Ministries, 187 High House Rd, Cary, NC 27511
- Keys may be acquired from Marianne Cockroft
- Before parking the RV, complete exterior assessment of van and complete check-off list (see attached list for reference)

Mobile Health Clinic Van Set Up (Driver):

- Locate the RV in the identified space at Dorcas Ministries
- Start generator using the button panel located to the left corner of the driver seat.
- Press button that reads "Gen Set"
- Activate the RV's stairs by pressing "electric step" on the light control at the wall paneling by the RV's stairs



- Turn on the lights on the switch located on the wall paneling of the RV stairs.
- Extend the living room area at the controls on each side of the bathroom door



Volunteers/Students Prepare the Mobile Unit for Visitors

- Gather supplies from refrigerator inside the Dorcas Ministries pantry
- Set up equipment (BP cuff, BG meter, BMI, Scales, Pulse Oximeter, and Education Materials)
- Complete BG quality controls (Hi & Lo)
- Check expiration dates for emergency items (i.e. juice)
- Check AED battery fully charged, document on verification log

Clinic Closing

- Students gather all items and equipment (BP cuff, BG meter, BMI, Scales, Pulse Oximeter, and Education Materials) and store them in the same places from which they were retrieved
- Place laptops and iPads in their respective bags
- Return refrigerated materials to the refrigerator inside the Dorcas Ministries pantry
- Provide the Clinic Director with a list of items/materials that need to be replaced, restocked or updated
- Empty the trash and hazardous materials
- Reverse expansion of living room area using the controls on each side of the bathroom door
- Turn off the lights using the switch located near the base of the RV stairs
- Press "Store" on the battery disconnect control located near the bottom of the RV stairs
- Return the keys to the Clinical Director
- Driver returns RV to parking spot



UNC SON MOBILE HEALTH CLINIC EQUIPMENT

Exam Equipment

- Adult BP Cuffs (Small, Medium, & Large)
- (2) Stethoscopes
- Omiron Fat Loss Monitor (Model#: HBF-306C)
- AccuMed Pulse Oximeter (Model#: CMSSODL)
- Clarity Plus Blood Glucose Meter
- Scales
- Sharps container
- Welch-Allyn Oral Temperature

Emergency Equipment

- Cardiac Science AED - located in cabinet labeled - monitor battery status of pocket valve mask
 - Additional pads
 - Gloves
 - Razor
- (3) juice boxes - monitor expiration date

Supplies

- Disposable gloves
- Band-aids
- Gauze pads
- Alcohol swabs
- Hand gel
- Lancets
- Alcohol hand wipes
- Education Resources File Box - *refer to education resource index
- "Vial of Life" - *if additional items needed contact Morrisville Fire Dept @ 919-463-6121

If clinical supplies are needed, notify Marianne Cockroft

***UNC SCHOOL OF NURSING MOBILE HEALTH CLINIC
POLICIES***

Job Descriptions Policy

Every staff, student and volunteer will receive a written Job Description for the position they occupy. The Job Description will include the position's title, classification (i.e., exempt/non-exempt), a general description of the position, a list of the position's essential functions, the skills and qualifications required for the position, and the position's supervisor. All Job Descriptions should be signed and dated by the employee. Job Descriptions do not constitute an employment contract.

Accident Reporting Policy

Any accident, incident, or "near miss," involving a visitor, staff, student or volunteer (no matter how slight the injury or damage), must be reported to the Clinical Director immediately for appropriate action.

The Clinical Director is responsible for taking appropriate follow-up action, including getting medical attention for the injured, completing an investigation report and recommending or implementing appropriate corrective actions.

The primary purpose of the accident investigation is to identify the cause(s) of the accident, incident or "near miss" and take action to prevent a similar occurrence in the future.

Accident and near miss accident forms are found in the procedures section of this handbook.

Attendance Policy

All recommendations and timeframes must be in accordance with UNC School of Nursing.

Staff and students are to report to work during the hours they are normally scheduled to work. If the staff or students fails to report to work during normal hours they will be considered absent.

- Defined Absences:

- Excused

- An excused absence is when a staff or student notifies their supervisor of an upcoming absence and receives acknowledgement and approval.

- Unexcused

- An unexcused absence is failure to notify the Clinical Director in advance of a non-emergency absence, failure to call one hour in advance of your shift or no notification is made. Unexcused or excessive absences are subject to corrective action up to and including separation from duties. Students with 3 or more unexcused absences will be dropped from the course.

- Planned absences will be requested with the clinical director, before the planned absence.
- **ALL** unplanned absences will require the staff, student or volunteer to call and/or email the clinical director and give notification and reason for the unplanned absence.

Cell Phone Policy

The cellular phone policy applies to any device that makes or receives phone calls, leaves messages, sends text messages, surfs the Internet, or downloads and allows for the reading of and responding to email whether the device is Clinic-supplied or personally owned.

Cell Phones or Similar Devices at Work

UNC SON MHC is aware that staff and students utilize their personal cellular phones for various purposes. At the same time, cell phones are a distraction in the workplace. To ensure the effectiveness of instruction/hands-on activities, in addition to safety of all; all staff, students, volunteers, and visitors are asked to refrain from using the phone for personal purposes in the working/learning environment. Staff, students, and volunteers are encouraged to use their cellphones to search for information related to a visitor enquiry or request for information that we do not have at hand.

Students who violate this policy will be subject to disciplinary actions.

This policy does not supersede UNC School of Nursing Policy.

Employee Signature

Date

Clinic Property and Return of Property Policy

The Clinic is a publicly supported non-profit agency whose limited financial resources must be used only in the furtherance of its mission. Employees are responsible for all property, materials, or written information issued to them or in their possession or control. Employees must refrain from using the Clinic's property for personal purposes. Unauthorized possession or use of company property of any kind may lead to corrective action up to and including separation from employment.

Staff, students and volunteers are expected to protect and maintain confidentiality regarding the Clinic's property including cash, equipment, records, employee, patient, and client information.

Staff, students and volunteers must return all Clinic property, including but not limited to, keys, iPads, computers, or clinical equipment immediately upon request or upon separation from employment or completion of duties. Where permitted by applicable law, the Clinic may withhold from the employee's final paycheck the cost of any items that are not returned when required. The Clinic may also take action deemed appropriate to recover or protect its property.

Computer and Internet Policy

Voice mail, email, and Internet usage assigned to the staff, student or volunteer computer or telephone are solely for the purpose of conducting Clinical tasks. Only people appropriately authorized, for Clinic purposes, may use the Internet or access additional software.

Internet Usage

Internet use, on UNC SON MHC time, is authorized to conduct Clinic business only. Internet use brings the possibility of breaches to the security of confidential Clinic information. Internet use also creates the possibility of contamination to UNC SON MHC's networking system via viruses or spyware. Spyware allows unauthorized people, outside the Clinic, potential access to Clinic passwords and other confidential information.

Removing such programs from the network requires IT staff to invest time and attention that is better devoted to progress. For this reason, and to assure the use of work time appropriately for work, we ask the Clinic's staff, students and volunteers to limit Internet use.

Additionally, under no circumstances may Clinic computers or other electronic equipment be used to obtain, view, or reach any pornographic, or otherwise immoral, unethical, or non-business-related Internet sites. Doing so can lead to disciplinary action.

Email Usage at Clinic

Clinic confidential information must not be shared outside of the Clinic, without authorization, at any time. Employees are not to conduct personal business using the Clinic's computer or email. Viewing pornography, or sending pornographic jokes or stories via email, is considered [sexual harassment](#) and will be addressed according to the Clinic's sexual harassment policy.

Emails That Discriminate

Any emails that discriminate against employees by virtue of any protected classification including race, gender, nationality, religion, and so forth, will be addressed according to the Clinic's harassment policy. These emails are prohibited at UNC SON MHC.

Staff, Student, or Volunteer Signature

Date

Dress Code Policy

The Clinic's objective in establishing a dress code is to permit employees to work comfortably, but safely within the learning environment. It is the policy of the Clinic that all employees present a clean and professional image while representing the Clinic. All employees should be aware of their attire, grooming and personal hygiene. Clothing choice should be respectful and reflect a business-office atmosphere.

General Guidelines

- Faculty, staff and students are encouraged to wear scrubs or UNC Nursing wear.
- Clothing that reveals too much cleavage, your back, your chest, your feet, your stomach or your underwear is not appropriate for a place of business.
- Even in a casual work environment, clothing should be pressed and never wrinkled.
- Torn, dirty, or frayed clothing is unacceptable.
- No dress code can cover all contingencies; therefore, all staff, students and volunteers must exert a certain amount of judgment in their choice of clothing. If employees experience uncertainty about acceptable or professional business casual attire, they are advised to ask the supervisor for approval.

Shoes and Footwear

- Shoes and Footwear: closed shoes, or any type of shoe where the whole foot is secure, are acceptable
- Flip-flops, slippers, and any shoe with an open toe are **not acceptable** due to safety violations.

Inappropriate Attire

- Inappropriate attire for work includes tank tops, midriff tops, shirts with potentially offensive words, terms, logos, pictures, cartoons, or slogans, halter-tops, tops with bare shoulders, sweatshirts, and t-shirts unless worn under another blouse, shirt, jacket, or dress.

Jewelry, Makeup, Perfume, and Cologne

- Jewelry, makeup, perfume, and cologne should be in good taste. Remember, that some co-workers, customers or visitors may be allergic to the chemicals in perfumes and make-up, so wear these substances with restraint.
- Body piercing should be limited and, in some instances, removed or covered, in order to comply with safety regulations.
- Tattoos should be limited and, in some instances, covered, especially if they may be offensive to co-workers, costumers or visitors.

Hats and Head Covering

- Hats are **not appropriate** in an office environment.
- Head covers that are required for religious purposes or to honor cultural tradition are permitted.
- If clothing fails to meet these standards, as determined by the employees and supervisor, the offending individual will be reprimanded in accordance to the disciplinary policies and procedures of the Clinic. If the problem persists, progressive disciplinary action will be applied for each dress code violation.

Drug Free Workplace Policy

The Clinic is committed to a safe and healthy work environment. It is our belief that drug, and alcohol abuse pose a serious risk, not only to the individual, but also to other employees and the patients/clients we serve. As such we are committed to an alcohol and drug free workplace. In addition, as the recipient gifts and funds which require the maintenance of a drug free workplace, we wish to make it known that it is our policy to comply with legislation mandating us to provide a drug-free workplace.

The Clinic strictly prohibits the manufacture, distribution, dispensation, possession or use of, or being under the influence of, any controlled substance, such as but not limited to, illegal drugs, illegal use of prescription drugs, and alcohol, on the Clinic’s premises or while engaged in Clinic sponsored activities. Any employee in violation of this policy will be subject to corrective action up to and including separation from employment.

There are a few exceptions related to board and fundraising events that alcohol may be present at Clinic functions, in these instances the Clinic reserves the right to take corrective action up to and including separation from employment for any conduct that may endanger the safety of others or damage the reputation and work of the Clinic.

Any Staff, students and volunteers whose off-duty use of alcohol or illegal or prescription drugs is the cause of work-related accidents or poor work performance will be subject to corrective action up to and including separation from clinic duties. Staff, students and volunteers convicted of or pleading “guilty” or “no contest” to criminal offenses related to drugs and alcohol committed on Clinic premises or while conducting Clinic business is required to notify the Clinic Director within five (5) working days. Failure to provide required notice will subject the staff, student or volunteer to immediate corrective action up to and including separation from Clinic duties.

Staff, students and volunteers must report to work mentally and physically fit to perform their job duties. Staff, students and volunteers on physician prescribed medication may use legally prescribed medications on the job, but only if such medication does not affect the essential functions of the job, the safety and welfare of others, or endanger the employee or others.

Testing for Drug and Alcohol Usage

In accordance with our commitment to maintaining an alcohol and drug free workplace, employees, whether suspected of violating this policy or not, may be required at the expense of the Clinic, to submit to drug/alcohol screening. Staff, students or volunteers who test positive or fail to submit to a required drug test will be subject to corrective action up to and including separation from Clinic duties.

For detailed information about UNC policies on drug and alcohol, please visit

<https://unc.policystat.com/policy/6993377/latest/> and
<https://unc.policystat.com/policy/5073657/latest/>

I have read and understand the above policy.

Staff, Student, or Volunteer Signature

Date

Ethics Policy

The purpose for this Ethics Policy is to support a culture of openness, trust, and integrity in all of the Clinic's management and business practices. A well-understood Ethics Policy requires the participation and support of every Clinic employee, board member and volunteer. The Clinic is dedicated to working with our employees, volunteers, board and community partners to meet our goal of bringing quality health services to those without or limited access to care. We are committed to conducting all affairs and activities with the highest standards of ethical conduct. Our standards of conduct and our values along with professional codes of conduct provide guidance for decisions and actions during our daily work.

Code of Ethics

The Clinic employees must:

1. Be honest and ethical in all conduct, including ethical handling of actual or apparent conflicts of interest between personal and professional relationships
2. Comply with applicable government laws, rules and regulations
3. Comply with any ethical codes or bylaws that may govern professional conduct
4. Maintain the confidentiality of protected health information under HIPAA regulations
5. Disclosure information only when authorized by the patient and client or otherwise legally obligated to disclose
6. Deal fairly with funders, suppliers, competitors, volunteers, and employees
7. Provide patients and clients, board, constituents, funders, and collaborating partners with information that is accurate, objective, relevant, timely, and understandable
8. Promote ethical behavior as a responsible partner among peers in the work environment
9. Protect and ensure the proper use of company assets
10. Prohibit improper or fraudulent influence over the External Auditor

Health Screenings and Health Fairs: Consent and Documentation Policy

It is the policy of UNCHCS to participate in opportunities for community members to be screened for and obtain information about specific health issues, diseases and various conditions. In doing so, UNCHCS will protect individually identifiable health information (protected health information or PHI) from inappropriate disclosure or use, and will otherwise comply with applicable laws, including the Health Insurance Portability and Accountability Act of 1996 and its accompanying regulations (HIPAA). Accordingly, all participation by UNCHCS in health screenings and health fairs will be conducted pursuant to the [procedures](#) related to this policy.

Open Door Policy

In order to promote an effective team-oriented workplace, Clinic Director and staff is to maintain an “open door” policy that encourages its colleagues, students and volunteers to approach them with any issue that may have an impact on the workplace, their ability to perform their job and on the Clinic’s ability to fulfill its mission. The Clinic Director and staff must respect certain information as confidential and on a “need to know” basis; they must not share confidential information with other staff.

Staff, students and volunteers seeking to discuss any work-related matter with Clinic management must first inform and consult their immediate supervisor. However, there may be occasions when an employee may deem it necessary to bypass their immediate supervisor and approach other members of management directly. For example, the [Policy Against Workplace Harassment and Discrimination](#) specifically provides for an employee to complain to the Clinic Director/Executive Director in the case that a supervisor is the one engaging in sexual harassment against the employee.

There may be other instances in which an employee may inform other management directly of a workplace problem. For that purpose, the Clinical Director shall also maintain an “open door” policy for all staff, students and volunteers. Staff who in good faith make a complaint to the Clinical Director about the misconduct of a supervisor will be free from any form of retaliation in the workplace.

Patient and Client Transportation Policy

Staff, students and volunteers may not provide transportation for clients or patients. In the rare instance of an emergency in a work-related situation, individuals must have authorization from Clinic/Executive Director prior to transporting a patient or client. Every effort should be made to avoid this situation. All other avenues should be exhausted first such as calling 911 for emergency or ambulance services, calling the patient and client's friend or family member, or calling a taxicab, Uber or Lyft.

Policy Against Workplace Harassment and Discrimination

UNC SON MHC is committed to providing a work environment for all employees that is free from sexual harassment and other types of discriminatory harassment. Staff, students and volunteers are expected to conduct themselves in a professional manner and to show respect for their co-workers.

UNC SON MHC's commitment begins with the recognition and acknowledgment that sexual harassment and other types of discriminatory harassment are, of course, unlawful. To reinforce this commitment, UNC SON MHC has developed a policy against harassment and a reporting procedure for employees who have been subjected to or witnessed harassment. This policy applies to all work-related settings and activities, whether inside or outside the workplace.

UNC SON MHC's property (e.g., telephones, copy machines, facsimile machines, computers, and computer applications such as e-mail and Internet access) may not be used to engage in conduct that violates this policy. UNC SON MHC's policy against harassment covers employees and other individuals who have a relationship with UNC SON MHC which enables UNC SON MHC to exercise some control over the individual's conduct in places and activities that relate to UNC SON MHC's work (e.g., directors, officers, students, volunteers, etc.).

Prohibition of Sexual Harassment: UNC SON MHC's policy against sexual harassment prohibits sexual advances or requests for sexual favors or other physical or verbal conduct of a sexual nature, when:

1. submission to such conduct is made an express or implicit condition of employment;
2. submission to or rejection of such conduct is used as a basis for employment decisions affecting the individual who submits to or rejects such conduct; or
3. such conduct has the purpose or effect of unreasonably interfering with a Staff, students and volunteers work performance or creating an intimidating, hostile, humiliating, or offensive working environment.

While it is not possible to list all of the circumstances which would constitute sexual harassment, the following are some examples:

1. unwelcome sexual advances -- whether they involve physical touching or not;
2. requests for sexual favors in exchange for actual or promised job benefits such as favorable reviews, grades, salary increases, promotions, increased benefits, or continued employment; or
3. coerced sexual acts.

Depending on the circumstances, the following conduct may also constitute sexual harassment:

1. use of sexual epithets, jokes, written or oral references to sexual conduct, gossip regarding one's sex life;
2. sexually oriented comment on an individual's body, comment about an individual's sexual activity, deficiencies, or prowess;
3. displaying sexually suggestive objects, pictures, cartoons;
4. unwelcome leering, whistling, deliberate brushing against the body in a suggestive manner;
5. sexual gestures or sexually suggestive comments;
6. inquiries into one's sexual experiences; or discussion of one's sexual activities.

While such behavior, depending on the circumstances, may not be severe or pervasive enough to create a sexually hostile work environment, it can nonetheless make co-workers uncomfortable. Accordingly, such behavior is inappropriate and may result in disciplinary action regardless of whether it is unlawful.

It is also unlawful and expressly against UNC SON MHC policy to retaliate against an employee for filing a complaint of sexual harassment or for cooperating with an investigation of a complaint of sexual harassment.

Prohibition of Other Types of Discriminatory Harassment: It is also against UNC SON MHC's policy to engage in verbal or physical conduct that denigrates or shows hostility or aversion toward an individual because of his or her race, color, gender, religion, sexual orientation, age, national origin, disability, or other protected category (or that of the individual's relatives, friends, or associates) that:

1. has the purpose or effect of creating an intimidating, hostile, humiliating, or offensive working environment;
2. has the purpose or effect of unreasonably interfering with an individual's work performance; or
3. otherwise adversely affects an individual's employment opportunities.

Depending on the circumstances, the following conduct may constitute discriminatory harassment:

1. epithets, slurs, negative stereotyping, jokes, or threatening, intimidating, or hostile acts that relate to race, color, gender, religion, sexual orientation, age, national origin, or disability; and
2. written or graphic material that denigrates or shows hostility toward an individual or group because of race, color, gender, religion, sexual orientation, age, national origin, or disability and that is circulated in the workplace, or placed anywhere in UNC SON MHC's premises such as on an employee's desk or workspace or on UNC SON MHC's equipment or bulletin boards. Other conduct may also constitute discriminatory harassment if it falls within the definition of discriminatory harassment set forth above.

It is also against UNC SON MHC's policy to retaliate against staff, students and volunteers for filing a complaint of discriminatory harassment or for cooperating in an investigation of a complaint of discriminatory harassment.

Reporting of Harassment: If you believe that you have experienced or witnessed sexual harassment or other discriminatory harassment by any employee, report the incident immediately to the Clinical director. Possible harassment by others with whom UNC SON MHC has a business relationship, including customers and vendors, should also be reported as soon as possible so that appropriate action can be taken.

UNC SON MHC will promptly and thoroughly investigate all reports of harassment as discreetly and confidentially as practicable. The investigation would generally include a private interview with the person making a report of harassment. It would also generally be necessary to discuss allegations of harassment with the accused individual and others who may have information relevant to the investigation. UNC SON MHC's goal is to conduct a thorough investigation, to determine whether harassment occurred, and to determine what action to take if it is determined that improper behavior occurred.

If UNC SON MHC determines that a violation of this policy has occurred, it will take appropriate disciplinary action against the offending party, which can include counseling, warnings, suspensions, and termination. Employees who report violations of this policy and employees who cooperate with investigations into alleged violations of this policy will not be subject to retaliation.

Compliance with this policy is a condition of each employee's employment. Employees are encouraged to raise any questions or concerns about this policy or about possible discriminatory harassment with the supervisor.

Public Non-Discrimination Notice

The University of North Carolina School of Nursing Mobile Health Clinic is committed to providing an inclusive and welcoming environment and to ensuring that educational and employment decisions are based on individuals' abilities and qualifications. Consistent with these principles and applicable laws, it is therefore the University's policy not to discriminate on the basis of age, color, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation or veteran status as consistent with the University's Policy on Prohibited Discrimination, Harassment and Related Misconduct.

No person, on the basis of protected status, shall be excluded from participation in, be denied the benefits of, or be subjected to unlawful discrimination, harassment, or retaliation under any University program or activity, including with respect to employment terms and conditions. Such a policy ensures that only relevant factors are considered and that equitable and consistent standards of conduct and performance are applied."

For further information, contact:

Marianne Cockroft, PhD, RN
UNC School of Nursing
Carrington Hall, S Columbia St
Chapel Hill, NC 27599
919-966-5321

The University of North Carolina School of Nursing Mobile Health Clinic committed to equality of educational opportunity. The University does not discriminate in offering access to its educational programs and activities on the basis of age, color, disability, gender, gender expression, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, or veteran status.

The Equal Opportunity and Compliance Office has been designated to handle inquiries regarding the University's non-discrimination policies.

For discrimination in employment or educational programs and activities, contact:

Equal Opportunity & Compliance
EOC Director
University EO/Disability Coordinator
214 W. Cameron Ave.
Chapel Hill, NC 27599
919-966-3576

For detailed information on the UNC Policy Statement on Non Discrimination, visit

<https://unc.policystat.com/policy/4467906/latest/>

Tobacco-Free Workplace Policy

It is the Clinic's responsibility, as a healthcare provider, to address known hazards to our employees, patients and the public and to create a healthful, safe and comfortable environment. To help us accomplish this and in keeping with UNC policy regarding no smoking inside buildings and facilities, the Clinic is a tobacco-free environment.

The use of tobacco products of any type is prohibited on the entire Clinic's owned and/ or leased property. This applies to staff, patients, clients, students, volunteers and visitors to our facilities. Any violation to this policy will lead to immediate corrective action.

Smoking shall not be permitted in the Clinic's RV or in the area immediately surrounding it. Copies of this policy shall be distributed to all staff, students and volunteers.

Signature of Supervisor/Instructor

Signature of Employee/Student/Volunteer

UNC School of Nursing Social Media Policy

While social media allows the University to reach many audiences including faculty, staff and students, use of social media by School of Nursing faculty, staff and students presents special concerns for privacy and confidentiality. The general use of social media by SON faculty, staff and students is not affected by the following policy;¹ its use related to confidential information about the School (including the faculty, staff and students), patients or SON-clinical affiliates (agencies with which the SON has entered a contractual relationship to provide clinical experience opportunities for students) is notably restricted.

Social media are defined as, but not limited, to web-based or mobile technologies used for interactive communication. Examples of social media include but are not limited to collaborative projects (e.g., Wikipedia), blogs and microblogs (e.g., Twitter), content communities (e.g., YouTube), social networking sites (e.g., Facebook), virtual game worlds (e.g., World of Warcraft), and virtual social worlds (e.g., Second Life). Regardless of how these forms of media are used, employees and students are responsible for the content they post or promote. Content contributed on these platforms is immediately searchable and shareable, regardless of whether that is the intention of the contributor. Once posted online, the content leaves the contributing individual's control forever and may be traced back to the individual in perpetuity.

Communication

Official SON electronic communication regarding academic classes or academic schedules will occur through School-sanctioned channels, e.g., UNC- Chapel Hill email, listservs, Blackboard, Sakai, and UNC-CH websites. Electronic communications outside these channels are not endorsed for academic courses.

Social Media

SON students and employees are prohibited from disclosing through social media the following:

- Protected Health Information, as defined by the Health Insurance Portability and Accountability Act (HIPAA) – For example, individuals may not disclose patient names or otherwise refer to patients in any way that identifies them individually, including by their initials or by their location (e.g., hospital name or unit).
- Education Record Information, as defined by the Family Educational Rights and Privacy Act (FERPA) – Employees may not disclose FERPA- protected information regarding students.
- Confidential Personnel Information, as defined by the State Personnel Act – Employees may not disclose confidential personnel information regarding other employees.
- Confidential, non-public or proprietary information about
 - families, clinical facility staff or clinical institutions;

- the School, its employees and students;
- Copyrighted or intellectual property belonging to the University.
- Comments that express or imply sponsorship or endorsement by the School or the University, unless you are officially authorized to act in this capacity for this purpose on behalf of the University or the School.

Accordingly, the use of social media for clinical discussions that include any identifiable information related to patients or SON-affiliated clinical facilities is prohibited.

If a faculty member or student identifies themselves as such online (e.g., list affiliation with the School in their Facebook profile), a disclaimer should be added that any opinions or views expressed do not represent the opinions of the School of Nursing or the University of North Carolina at Chapel Hill.

Students in violation of this policy may be considered as having violated the UNC-CH Honor Code. However, like faculty and staff who violate this policy, students may face disciplinary action up to and including termination.

Related references

- UNC-CH Honor Code - <http://honor.unc.edu/>
- UNC HCS Social Media <https://www.med.unc.edu/medicine/qi/faculty-staff-website/files/2019/04/social-media-policy.pdf>
- UNC-CH ITS policies - http://its.unc.edu/ITS/about_its/its_policies/index.htm
- HIPAA - <http://www.hhs.gov/ocr/privacy/hipaa/understanding/index.html>
- FERPA - <http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>
- PCI - <http://www.informationshield.com/papers/PCI-Security-Policies-Using-ISPME.pdf>
- ANA - <http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social-Networking-Principles-Toolkit/Tip-Card-for-Nurses-Using-Social-Media.pdf>
- NCSBN White Paper - https://www.ncsbn.org/Social_Media.pdf

Name

Signature

Date

PID

¹Other than any issues related to HIPAA, FERPA and other sensitive information as noted at <http://help.unc.edu/6475>, all of which remain prohibited disclosures, even in personal (social media or otherwise) communications.

Approved by SON Faculty: 040912

Unpaid Volunteers, Interns and Visiting Scholars Policy

The UNC SON MHC adheres to UNC-Chapel Hill policies pertaining to staff, students, and volunteers.

UNC-Chapel Hill recognizes the significant benefits that derive from the use of unpaid volunteers, interns, and visiting scholars in support of the University's mission of teaching, research, and public service as well as the importance of safely and appropriately engaging these individuals.

This policy outlines specific procedures and requirements that govern individuals who will serve in these capacities including: to whom this policy is applicable, guidelines on what these individuals may or may not do in the course of their assignment, a process by which these unpaid assignments must be requested and approved through the Office of Human Resources, and a requirement for background checks for unpaid assignments which are in excess of ten calendar days in duration and/or which involve unsupervised access to sensitive populations or sensitive facilities.

Volunteers are individuals who offer their services without cost to the University for civic reasons and which are not typically performed by permanent University employees. Examples include serving as a docent at a University museum or educational facility, serving as an usher at a University special event, or otherwise performing duties that are of benefit to the University's teaching, research, and/or public service mission.

Unpaid Interns are individuals who meet one of the following circumstances:

- Are currently enrolled at UNC-Chapel Hill or other accredited colleges, universities, community colleges or high schools and who are engaged in experiential learning in the workplace in return for academic or course credit.
- Are obtaining work experience that is required for professional licensure or certification under the supervision of a licensed or certified professional (e.g., Social Workers, Engineers, Nurses, and Accountants) for a period not to exceed 18 months in duration.
- Are engaging in experiential learning in a profession under the supervision of an appropriate University supervisor or manager for a period not to exceed 18 months in duration.

Unpaid Visiting Scholars are individuals who hold appointments at other academic or research institutions and are visiting to work with a particular faculty member or principal investigator on a research project but do not receive a paid appointment at UNC-Chapel Hill.

Sensitive populations are individuals under 18 years of age, patients receiving care in any clinical setting, or other individuals deemed to require enhanced supervision or protection based on University practice or State or Federal law.

Exclusions

The following circumstances are excluded from the provisions of this policy as noted:

Students Currently Enrolled

Students currently enrolled at UNC-Chapel Hill, if the volunteer or intern assignment does not involve any unsupervised access to sensitive populations or sensitive facilities and the individual is not otherwise a non-student employee of the University. A Volunteer Request Form must still be completed, but a background check is not needed if the unpaid activity otherwise conforms to the above provisions. As indicated in the Request and Approval Procedures, a [Release for Unpaid Interns and Volunteers form](#) must be filled out.

Release for Unpaid interns and Volunteers

Individuals who will perform volunteer services not to exceed ten (10) calendar days in duration without any continuing volunteer relationship, if the assignment does not involve any unsupervised access to sensitive populations or sensitive facilities and if the individual is not otherwise an employee of the University. Note: This exclusion includes individuals who are invited to deliver a talk or presentation at the University without pay or only for nominal benefits related to their services.

Interns or Visiting Scholars

Interns or visiting scholars who will be compensated by the University for their services. Such individuals are engaged as temporary employees under the applicable employment procedures for SHRA or EHRA employees.

Unpaid adjunct faculty

Unpaid adjunct faculty whose appointment and the requirement for a pre-appointment background check are covered separately by procedures established by the Faculty Personnel Office.

Other

An individual from outside of the University community who is appointed to a Board of Visitors or other University advisory body by authority of the Chancellor, the Provost, a Vice Chancellor, or a Dean. An individual who is under the age of 18 (a minor), or who is still in high school. A Volunteer Request Form must still be completed, but a background check is not performed.

The Vice Chancellor for Workforce Strategy, Equity and Engagement or their designee may approve other exclusions to this policy in whole or part which are deemed to be in the University's best interests and/or to address essential circumstances when no unreasonable risks are identified after consultation with the appropriate University offices. Departments that will engage volunteers or interns who are otherwise excluded from this policy as noted above, but where the individuals will serve in laboratory settings must still ensure that all University safety requirements are met in accord with policies set forth by the University's Department of Environment, Health, and Safety (EHS).

Limitations

Generally, no individual engaged under the provisions of this policy will be under 16 years of age and any individual who has not yet attained 18 years of age must receive parental permission to participate in the specific University activity or experience proposed. In situations where a Department Head can demonstrate that specific educational and/or community service interests of the University are served and also that no unacceptable risks are present, exceptions may be considered for individuals less than 16 years of age to serve in a volunteer capacity. The latter circumstances are subject to specific approval by the Vice Chancellor for Workforce Strategy, Equity and Engagement or their designee in consultation with the relevant University offices.

An unpaid volunteer, intern, or visiting scholar may not:

- Be engaged and/or directly supervised by a relative or other individual who would be considered inappropriate under the University's policy on nepotism.
- Receive compensation except as expressly permitted in this policy nor be eligible to receive employment-related benefits available to regular employees such as workers' compensation, health benefits, or the ability to file for unemployment compensation.
- Be offered any future promise of University employment that is contrary to the University's or State's equal employment opportunity or employment policies.
- Be coerced or pressured to perform their duties in any fashion.
- Perform unpaid work if the individual is otherwise employed by the University in any capacity to perform the same or similar type of duties and responsibilities.
- Operate State-owned motor vehicles, boats, aircraft, or other heavy equipment unless specific exceptions have been requested and approved by the appropriate University office and are not contrary to State fleet management or University risk management policies.
- Request and Approval Procedures
- Any proposed engagement of an unpaid volunteer, intern, or visiting scholar must have the advance approval of the sponsoring Department and the Office of Human Resources (OHR) using the Unpaid Volunteer, Intern and Visiting Scholar Form. Completed forms are submitted to the appointing departments assigned Employment and Staffing Consultant in OHR.

Background Checks

A fully completed background check must be completed prior to submission of the Request form noted above. The normal criminal convictions checking fees are the responsibility of the appointing department. In those instances when a volunteer, intern or visiting scholar has no Social Security Number due to citizenship status, OHR will make a good faith effort, based on name alone, to confirm that no residential history or criminal convictions have been recorded for this individual.

Note: The background check requirement is automatically waived for any individual younger than 18 years of age. Background checks are also not required for UNC-Chapel Hill student volunteer with the provisos listed in "Exclusions" above. See Background Check FAQs for more information.

Depending on the location, potential environmental exposures and the type of activities performed by the volunteer, intern, or visiting scholar, OHR may also require review by the Office of University Counsel and/or the Department of Environment, Health and Safety (EHS). For further guidance on laboratory safety issues related to these types of appointments, refer to the EHS web site or contact EHS directly for assistance.

If the proposed volunteer, intern, or visiting scholar arrangement satisfies all of the requirements of this policy and the background check results are acceptable, then OHR will grant approval for the proposed arrangement to the requesting department in writing or by electronic mail.

Any approved volunteer, intern, or visiting scholar must fully complete and sign a Release of Liability Form prior to starting their assignment. For volunteers and unpaid interns, the Release for Unpaid Interns and Volunteers form should be used; for unpaid visiting scholars, the Release for Unpaid Visiting Scholars form should be used. The requesting department should fill out the top section of the release, making sure that the description of the activity performed matches that provided on the Unpaid Volunteer, Intern and Visiting Scholar Request Form. The signed release must be maintained on file in

the appointing department for no less than three years following completion of the volunteer, intern, or visiting scholar arrangement and subject to audit by OHR on request.

Expense Reimbursement & Other Benefits

Individuals may be reimbursed for their expenses in carrying out their assigned duties in accord with applicable University accounting policies and federal nonimmigrant visa regulations. Such expenses must be authorized in advance by their Department supervisor. They may also be provided nominal benefits related to their activities such as admission to a University event or other incidental gifts in recognition of their unpaid service, unless an individual is in a nonimmigrant visa status which restricts such benefits.

Weapon-Free Workplace Policy

The purpose of this policy is to ensure that UNC SON MHC maintains a workplace safe and free of violence for all employees, the Clinic prohibits the possession or use of perilous weapons on Clinic property. A license to carry the weapon on Clinic property does not supersede Clinic policy.

Any employee in violation of this policy will be subject to prompt disciplinary action, up to and including termination or expulsion. All clinic staff, students and volunteers are subject to this provision, including contract and temporary employees, visitors and visitors on Clinic space/property.

“Clinic space/property” is defined as the space in the RV. This policy applies to all leased vehicles and all vehicles where the Clinic operates.

“Dangerous weapons” include, but are not limited to, firearms, explosives, knives and other weapons that might be considered dangerous or that could cause harm. Clinic staff, students and volunteers are responsible for making sure that any item possessed by the employee is not prohibited by this policy. UNC SON MHC reserves the right at any time and at its discretion to search all clinic-leased vehicles and all packages, containers, briefcases, purses, enclosures and persons entering the RV, for the purpose of determining whether any weapon has been brought onto its property or premises in violation of this policy.

Employees who fail or refuse to promptly permit a search under this policy will be subject to discipline up to and including a termination.

This policy is administered and enforced by the Clinical Director and UNC Administration.

Staff, Student, or Volunteer Signature

Date

Work Site Assignments Policy

Most students and volunteers will be assigned to a primary site where they will routinely report for work activities. However, from time to time, students and volunteers may be assigned to a site other than their primary work site according to the Clinic's overall staffing needs. Work site assignments are determined by the immediate supervisor with the approval of the Clinical Director and are subject to change. It should be noted that visiting a patient's or client's home may be requested of some students and volunteers working at the Clinic. Neither volunteers nor students whose curriculum responsibilities requires them to make home visits must consider any individual patient or client home to be their primary work site.

It is recognized that work site assignments may give rise to safety concerns. Students and volunteers are encouraged to voice those concerns to their immediate supervisor or Clinical Director. Supervisors must take those concerns seriously and, together with the student and any other appropriate personnel, implement reasonable measures to increase the student and volunteer's level of confidence or assess what may be appropriate and the safety of the environment. However, a student's blanket refusal to accept any assignment to a work site or a patient or client home will not be permitted. Any such blanket refusals may subject to corrective action, up to and including separation from duties.

Workplace Safety Policies

Workplace safety is about preventing injury and illness to faculty, staff, students and volunteers at the Clinic.

Addressing Safety and Health Hazards in the Workplace

To make the workplace safer, the Clinic has to acknowledge which potential health and safety hazards are present. Or determine *where* and *what* and *how* a worker is likely to become injured or ill. It starts with analyzing individual workstations and program areas for hazards — the potential for harm — be it a frayed electrical cord, repetitive motion, toxic chemicals, mold, lead paint or lifting heavy objects.

Safety Program

Any policy, procedure or training used by the Clinic to further the safety of staff, students and volunteers is considered part of a workplace safety program. Workplace safety programs to reduce work-related injury and illness are concerned with:

- promoting and rewarding safe practices at the RV
- reducing injuries and illnesses at the RV

Injury and Illness Prevention

According to OSHA, work-related injury and illness prevention falls into three categories in order of priority: engineering controls, administrative controls, and personal protective equipment controls.

- written procedures and safe work practices
- exposure time limitations (temperature and ergonomic hazards)
- monitor use of hazardous materials
- alarms, signs and warnings
- buddy system
- training

Safety initiatives can be as simple as:

- closing and locking the front door
- replacing burned out lights inside and out
- closing drawers before walking away from the work area
- knowing and using proper lifting techniques
- providing adjustable workstations to accommodate differences in people's stature and weight to eliminate repetitive motion, back, neck and shoulder injury
- using the proper tool for the job in an appropriate fashion

***UNC SCHOOL OF NURSING MOBILE HEALTH CLINIC
PROCEDURES***

Orientation Procedure

The Clinic Director is responsible for introducing the new staff, students and volunteers the rest of the Clinic staff and for conducting a tour of the Clinic's facilities. During orientation a new employee will not be expected to have full responsibility for the duties listed in their Job Description. Instead, new staff, students and volunteers will be assigned to follow and observe the customary activities of other staff members from throughout the Clinic.

Staff, students and volunteers in orientation should avoid making work-related decisions without first consulting their immediate supervisor and/ or a senior staff member with whom they are assigned to work.

Time should be set-aside during orientation for individuals to read Clinic manuals and other pertinent or assigned literature. Any questions raised by reading the materials should be addressed to the immediate supervisor and/or other appropriate staff. Staff, students and volunteers will receive written and verbal information on the topics such as the Clinic's history, vision, mission, core values, programs, organizational chart, benefits, safety and other materials pertinent to Clinic operations and employment.

Blood Pressure and Pulse Oximeter Competence Validation Procedure

UNC SON Student/Volunteer: _____

UNC SON Preceptor Name/Title _____

Blood Pressure	By/Date
Deflate the bladder of the cuff and place it around the upper arm so it fits snugly	
Put the head of the stethoscope just under the edge of the cuff, a little above the crease of the person's elbow	
Inflate the cuff with brisk squeezes of the bulb	
At ~180, slightly open the valve on the air pump	
After determining both systolic and diastolic pressures, open the air valve completely to release any remaining pressure	
In adults, hypertension is defined as Systolic BP readings > 140mmHG or Diastolic BP > 90mmHG	
Refer to HTN Protocol for action steps	

Pulse Oximeter	By/Date
PULSE OXIMETRY determines the percentage of hemoglobin saturated by oxygen (Spot) via a sensor placed over a translucent area of arterial pulsation, such as a finger, toe, or earlobe.	
Ensure sufficient battery charge by turning it on before using	
Place the probe onto the client's finger	
The oxygen saturation level and pulse rate are displayed in seconds on a lighted display screen. A range of 96% to 100% is generally considered normal. Anything below 90% should be assessed further & action taken as appropriate.	

UNC SON Student/Volunteer Signature _____ Date _____

UNC SON Preceptor Signature _____ Date _____

Competence Validation Criteria: GlucoCARD Expression Procedure

UNC SON Nursing Student/Volunteer: _____

UNC SON Preceptor Name/Title: _____

When performing the procedure, it is expected the operator will be able to:

- Locate and review the GlucoCard Expression User’s Manual, and the UNC Mobile Clinic Glucose Screening Guidelines
- Perform any necessary patient teaching related to blood glucose monitoring & test results

ASSESSMENT OF LEARNER OUTCOMES	Performs Independently (Date/Initials)
Performs Quality Control Tests	
<ul style="list-style-type: none"> • States when to perform QC tests (required daily when the medical van is in operation, and <u>with each new box of test strips</u>) • Verbalizes proper way to label newly opened control solutions – identify opening date; discard 90 days after opening or if after expiration date) • Checks reagents for expiration date (QC solutions) • Performs QC test (low control only): currently in Mobile Clinic we only require level 1 solution <ul style="list-style-type: none"> ↳ Insert test strip into meter ↳ Press “>” on the glucometer until the screen reads “L1” for the Level 1 solution or “L2” for the Level 2 Solution. ↳ “ctl” icon will appear next to the test strip icon and “L1” or “L2” will appear on the screen ↳ Shake control solution (low or high) bottle ↳ Discard 1st drop, wipe dispenser tip, squeeze a drop onto a clean, dry non-absorbent surface ↳ Touch tip of test strip to drop of solution, beep indicates enough solution & results will display after 6 seconds ↳ Result will display on the meter; compare result to range on test strip vial; troubleshoot as necessary ↳ Remove strip and discard ↳ Document results on control verification log • Verbalizes actions for failed QC (check test strip expiration date; repeat QC test) • Verbalizes follow-up actions for 2nd failed QC (open new bottle of test strips) <ul style="list-style-type: none"> ↳ If repeat also fails, contact ARKRAY Customer Service at 1-800-566-8558 (USA and Canada) 	

<p style="text-align: center;">ASSESSMENT OF LEARNER OUTCOMES <i>Continued</i></p>	<p style="text-align: center;">Performs Independently (Date/Initials)</p>
<p>Perform Patient Blood Glucose Test</p>	
<ul style="list-style-type: none"> • Performs blood glucose test: <ul style="list-style-type: none"> ↳ Performs hand hygiene and dons' gloves ↳ Verify expiration date on test strips ↳ Insert test strip into meter to turn meter on ↳ Flashing blood drop and arrow icon will appear ↳ Before testing, wipe finger with alcohol swab; dry completely; using lancet device, prick fingertip ↳ Wipe first drop of blood with dry gauze; touch the blood drop to the edge of the test strip ↳ Beep sound indicates sufficient sample (results in 6 seconds) ↳ Remove test strip ↳ Discard alcohol pad, gauze, and test strip in trash can ↳ Discard lancet into sharps container ↳ Refer to Glucose Screening Guidelines to assess result ↳ Review test result with client 	
<p>Follow up on Alerts, Critical Limits & Error Messages</p>	
<ul style="list-style-type: none"> • Follow-up on Alerts, Critical Limits & Error Messages <ul style="list-style-type: none"> ↳ States Alert Values (<70mg/dl & >350mg/dl) ↳ Verbalizes actions for alert values (refer to diabetes protocol; hypoglycemia: treat with 15 gms CHO; ↳ Repeat BS in 15 min. Hyperglycemia: refer client for follow up ↳ Verbalizes actions for "LO," "HI" or error result ↳ "Hi" value - >600mg/dl; "Lo" value <20mg/dl. Repeat test to confirm accuracy 	
<p>Verbalizes routine cleaning procedure for meter</p>	
<ul style="list-style-type: none"> • Verbalizes routine cleaning procedure for meter: wipe outside of meter w/ CaviWipes or DISPATCH wipes, then use a second wipe to allow meter to have a total wet time of 2 minutes between patients. • Verbalizes routine cleaning procedure for meter <ul style="list-style-type: none"> <input type="checkbox"/> Wear gloves when cleaning meter <input type="checkbox"/> Wipe outside of meter with CaviWipes (Disinfectant wipe EPA # 46781-8), or with DISPATCH hospital cleaner disinfectant towels with bleach (EPA #56392-8) <input type="checkbox"/> Wipe surface until completely wet and allow to remain wet for one minute <input type="checkbox"/> In order to disinfect meter, wipe with second wipe for another minute, for a total wet time of 2 minutes. 	

UNC SON Student/Volunteer Signature _____

Date_____

UNC SON Preceptor Signature _____
(10-29-19)

Date_____

Clarity Plus Blood Glucose Meter Competence Validation Criteria Procedure

UNC SON Nursing Student/Volunteer: _____

NC SON Preceptor Name/Title: _____

When performing the procedure, it is expected the operator will be able to:

- Locate and review the Nursing Medical Van Diabetes Protocol, and Meter User’s Manual
- Perform any necessary patient teaching related to blood glucose monitoring & test results

ASSESSMENT OF LEARNER OUTCOMES	Performs Independently (Date/Initials)
Coding or Coding Chip Assessment	
<p>The operator will be able to verbalize that the Clarity BG 1000 <u>does not</u> require coding or a code chip:</p> <ul style="list-style-type: none"> • Insert the test strip to code the meter. • Confirm the code number that appears on the meter; this must match the code number printed on the test strip vial label. 	
Performs Quality Control Tests	
<ul style="list-style-type: none"> • States when to perform Level 1&2 QC tests (required daily when the medical van is in operation, and <u>with each new box of test strips</u>) • Verbalizes proper way to label newly opened control solutions – identify opening date; Discard 3 months after opening. • Checks reagents for expiration date (QC solutions) • Performs QC test (both high & low controls): <ul style="list-style-type: none"> <input type="checkbox"/> Insert test strip into meter <input type="checkbox"/> Verify code number matches test strip vial code <input type="checkbox"/> Shake control solution (low) bottle; discard 1st drop, wipe dispenser tip, squeeze a drop onto a clean, dry non-absorbent surface, touch tip of test strip to drop of solution beep indicates enough solution & results will display after 5 seconds <input type="checkbox"/> Result will display on the meter; compare result to range on test strip vial <input type="checkbox"/> Mark all control solution tests as control (p 21 user’s manual, while result is displayed, press the C button until control vial icon shows, then remove test strip) <input type="checkbox"/> Remove strip and discard <input type="checkbox"/> Repeat steps listed above with high control solution <input type="checkbox"/> Document results on control verification log • Verbalizes actions for failed QC (verify code; check test strip expiration date; repeat QC test) • Verbalizes follow-up actions for 2nd failed QC (open new bottle of test strips) 	

<p style="text-align: center;">ASSESSMENT OF LEARNER OUTCOMES <i>Continued</i></p>	<p style="text-align: center;">Performs Independently (Date/Initials)</p>
<p>Perform Patient Blood Glucose Test</p>	
<p>Performs blood glucose test:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Insert test strip into meter (turns meter on) <input type="checkbox"/> Verify code number on meter matches test strip vial; when flashing blood symbol appears, meter is ready for blood testing <input type="checkbox"/> Before testing, wipe finger with alcohol swab; dry completely; using lancet device, prick fingertip <input type="checkbox"/> Wipe first drop of blood with dry gauze; touch the blood drop to the edge of the test strip <input type="checkbox"/> Beep sound indicates sufficient sample (results in 5 seconds) <input type="checkbox"/> Review test result with client. 	
<p>Follow-up on Alerts, Critical Limits & Error Messages</p>	
<p>Follow-up on Alerts, Critical Limits & Error Messages</p> <ul style="list-style-type: none"> <input type="checkbox"/> States Alert Values (<70mg/dl & >350mg/dl) <input type="checkbox"/> Verbalizes actions for alert values (refer to diabetes protocol; hypoglycemia: treat with 15 gms CHO; Repeat BS in 15 min. Hyperglycemia: refer client for follow up) <input type="checkbox"/> Verbalizes actions for “LO,” “HI” or error result “Hi” value - >600mg/dl; “Lo” value <20mg/dl. Repeat test to confirm accuracy Error values – refer to meter handbook for reference (Best at temp of 50-104 F x20 minutes) 	
<p>Verbalizes Routine Cleaning Procedure</p>	
<p>Verbalizes routine cleaning procedure for meter (wipe outside of meter w/ caviwipes or other approved Disinfectant wipe EPA #46781-8, use second wipe and allow meter 2 minutes wet time between patients)</p>	

UNC SON Student/Volunteer Signature _____ Date_____

UNC SON Preceptor Signature _____ Date_____

(1-25-18)

Clinical Pathway for Hypertension Screening Procedure

1. Using appropriate technique, take the patient’s sitting blood pressure (BP).
2. If BP is elevated, wait one (1) minute and repeat. If the patient is 70 years of age or older take the second blood pressure in the standing position.
3. Inform the patient of their blood pressure.
4. Follow the pathway below based on their lowest BP reading.

Adult Blood Pressure Categories (AHA, 2019) and Actions

CATEGORY	Systolic BP		Diastolic BP	Action
Low	99 or less			SBP 99 or less with symptoms of dizziness or light headedness, refer to Primary care provider (PCP) today.
Normal	<120	and	<80	Direct the patient to follow-up with another BP check in 6 months. Release patient.
Elevated	120-129	and	<80	Counsel on lifestyle changes (see below). Repeat blood pressure in 3 months.
Stage 1 hypertension (HTN)	130-139	or	80-89	Counsel on lifestyle changes (see below). Repeat blood pressure in 3 months.
Stage 2 HTN	140 or higher	or	90 or higher	Counsel on lifestyle changes (see below). Ensure patient is referred to PCP for follow-up within 1-2 weeks.
Hypertensive Crisis	>180	and/or	>120	Refer to emergency department (ED) for evaluation. IF symptoms of chest pain, shortness of breath or severe HA – call 911 or emergency medical systems (EMS)

Proper Blood Pressure Measurement Technique

1. Perform hand hygiene
2. Take blood pressure (BP) while patient is sitting in an upright position in a chair.
3. Place entire arm at patient’s heart level. (Placing the arm above or below the heart level will affect the accuracy of the reading)
4. Take BP while patient is silent. Talking can increase the BP.
5. Take on bare arm; wrap appropriate size cuff smoothly and evenly around the arm 1-2 inches above the antecubital space, with feet flat on the floor. **Do not place cuff over clothing.**

6. Palpate the brachial artery on the ulnar side of the antecubital space with the second and third finger tips of one hand. With the same hand hold the bell of the stethoscope. Close the control valve clockwise with the other hand and inflate the compression cuff as rapidly as possible by pumping the inflation bulb. Continue until the pulse you are palpating can no longer be felt.
7. Inflate the cuff for an additional 30 mmHg.
8. Position the bell of the stethoscope over the brachial artery.
9. Release the valve turning it counterclockwise. Do not deflate too slowly or you will obtain a falsely elevated pressure due to the venous congestion. Do not deflate too quickly or you will get an erroneous reading.
10. Read the manometer at eye level.
11. Document findings.

LIFESTYLE CHANGES FOR HIGH BLOOD PRESSURE
If overweight, advise weight loss of 10 pounds.
<ul style="list-style-type: none"> ▪ Men less than 40 inches ▪ Women less than 35 inches
Exercise at least 30 minutes most days of the week.
Advise diet changes
<ul style="list-style-type: none"> ▪ Eat a diet rich in whole grains, fruits, and vegetables. ▪ Minimize meat and dairy products. ▪ Consider DASH diet approach ▪ Keep a food diary
Reduce sodium in your diet
<ul style="list-style-type: none"> ○ Read food labels for added salt ○ Avoid added salt ○ Reduce processed food
Limit alcohol consumption
Quit smoking
Cut back on caffeine
<ul style="list-style-type: none"> ▪ No more than 1 cup of caffeinated drink a day
Implement stress management tools
Monitor blood pressure at home and see your primary care provider regularly
Recommend support of family and friends for implementing changes.

American Heart Association <https://www.heart.org/en/health-topics/high-blood-pressure>

Revised 9-5-19

Glucose Screening Procedure

Guidelines

- Perform Blood Glucose Controls per manufacturer instructions.
- Clean Blood glucose monitor equipment per manufacturer instructions between each patient test.
- Screen asymptomatic adults ages 40yo and older, with a body mass index ≥ 25 kg/m², and one or more additional risk factors:
 - A1C > 5.7%, impaired glucose tolerance, or impaired fasting glucose on previous testing
 - Acanthosis nigricans
 - Cardiovascular disease
 - First-degree relative with type 2 diabetes
 - HDL cholesterol level < 35 mg per dL and/or a triglyceride level > 250 mg per dL
 - High-risk ethnicity: black, Native American/Alaska Native, Hispanic/Latino, Asian American, and Native Hawaiian/Pacific Islander
 - Hypertension (blood pressure > 140/90 mm Hg or taking medication for hypertension)
 - Physical inactivity
 - Polycystic ovary syndrome

Blood Sugar Chart

Fasting

Normal for person without diabetes	70–99 mg/dl (3.9–5.5 mmol/L)
Official ADA recommendation for someone with diabetes	80–130 mg/dl (4.4–7.2 mmol/L)

1 to 2 hours after meals

Normal for person without diabetes	Less than 140 mg/dl (7.8 mmol/L)
Official ADA recommendation for someone with diabetes	Less than 180 mg/dl (10.0 mmol/L)

HbA1c

Normal for person without diabetes	Less than 5.7%
Official ADA recommendation for someone with diabetes	Less than 7.0%

Source: [American Diabetes Association](#)

Hypoglycemia Results Procedure

HYPOGLYCEMIA		
<p>If blood glucose <72 mg/dl</p> <p>Assess and document symptoms</p> <p>Is the patient experiencing mild, moderate or severe symptoms?</p>		
CATEGORY	SYMPTOMS	ACTION
Mild	Autonomic symptoms shaking/tremors, pounding heart, nervousness, sweating, tingling.	<ol style="list-style-type: none"> 1. Give patient 15g carbohydrate 2. Recheck Blood Glucose after 20 min 3. If BG remains <72 mg/dL, repeat 15g carbohydrate and retest in 20 minutes 4. If BG resolved and no previous history of hypoglycemia, advise patient to be seen by PCP within 2 weeks
Moderate	Autonomic and neuroglycopenic symptoms - shaking/tremors, pounding heart, nervousness, sweating, tingling AND warmth, confusion, drowsiness.	<ol style="list-style-type: none"> 1. Give patient 15g carbohydrate 2. Recheck Blood Glucose after 20 min 3. If BG remains <72 mg/dL, repeat 15g carbohydrate and retest in 20 minutes 4. If BG resolved and no previous history of hypoglycemia, advise patient to be seen by PCP within 2 weeks
Severe	Individual requires assistance of another person. Unconsciousness may occur.	<ol style="list-style-type: none"> 1. Call EMS/911 2. Counsel on lifestyle changes (see below). 3. Repeat blood pressure in 3 months.

Examples of 15 g carbohydrate for treatment of mild to moderate hypoglycemia:

- 15 g glucose in the form of glucose tablets
- 3 packets of table sugar dissolved in water
- 175 mL (3/4 cup) of juice or regular soft drink
- 6 LifeSavers (1 ¼ 2.5 g carbohydrate)
- 15 mL (1 tablespoon) of honey

Hyperglycemia Results Procedure

HYPERGLYCEMIA			
FASTING BG	ACTION		
>72mg/dL-99mg-dL <i>(normal)</i>	Educate about minimizing risk factors Repeat testing in 3 years		
100-125 mg/dL <i>(prediabetes)</i>	Educate about lifestyle changes: exercise, nutrition Advise patient to return for recheck of blood glucose in 3 months (fasting preferred)		
>126mg/dL	Perform A1C	If A1C >6.5 mmol per L, refer to PCP for diabetes workup	<ul style="list-style-type: none"> ▪ If A1C <6.5 mmol per L, educate about lifestyle changes: exercise, nutrition ▪ Return for recheck of A1C in 3 months
RANDOM BG	ACTION		
>200mg/dL	Perform A1C	If A1C >6.5 mmol per L, refer to PCP for diabetes workup	<ul style="list-style-type: none"> ▪ If A1C <6.5 mmol per L, educate about lifestyle changes: exercise, nutrition ▪ Return for recheck of A1C in 3 months
RANDOM/FASTING BLOOD GLUCOSE	ACTION		
300-600mg/dL Asymptomatic		Refer to PCP with appointment within 2 weeks	<ul style="list-style-type: none"> ▪ Provide patient education: basic information about diabetes, importance of follow-up with PCP, complications of DM, basic dietary management of DM
300-600mg/dL and Symptomatic	Call EMS/911	Signs of hypovolemia/dehydration/low BP, excessive thirst, increased urination, fever, drowsiness, confusion, hallucinations, vision loss, convulsions, coma	
>600 mg/dL	Call EMS/911	Monitor Blood Pressure, Pulse, Respiration Rate until EMS arrives If unconscious, follow Basic Life Support (BLS) training standards until help arrives	

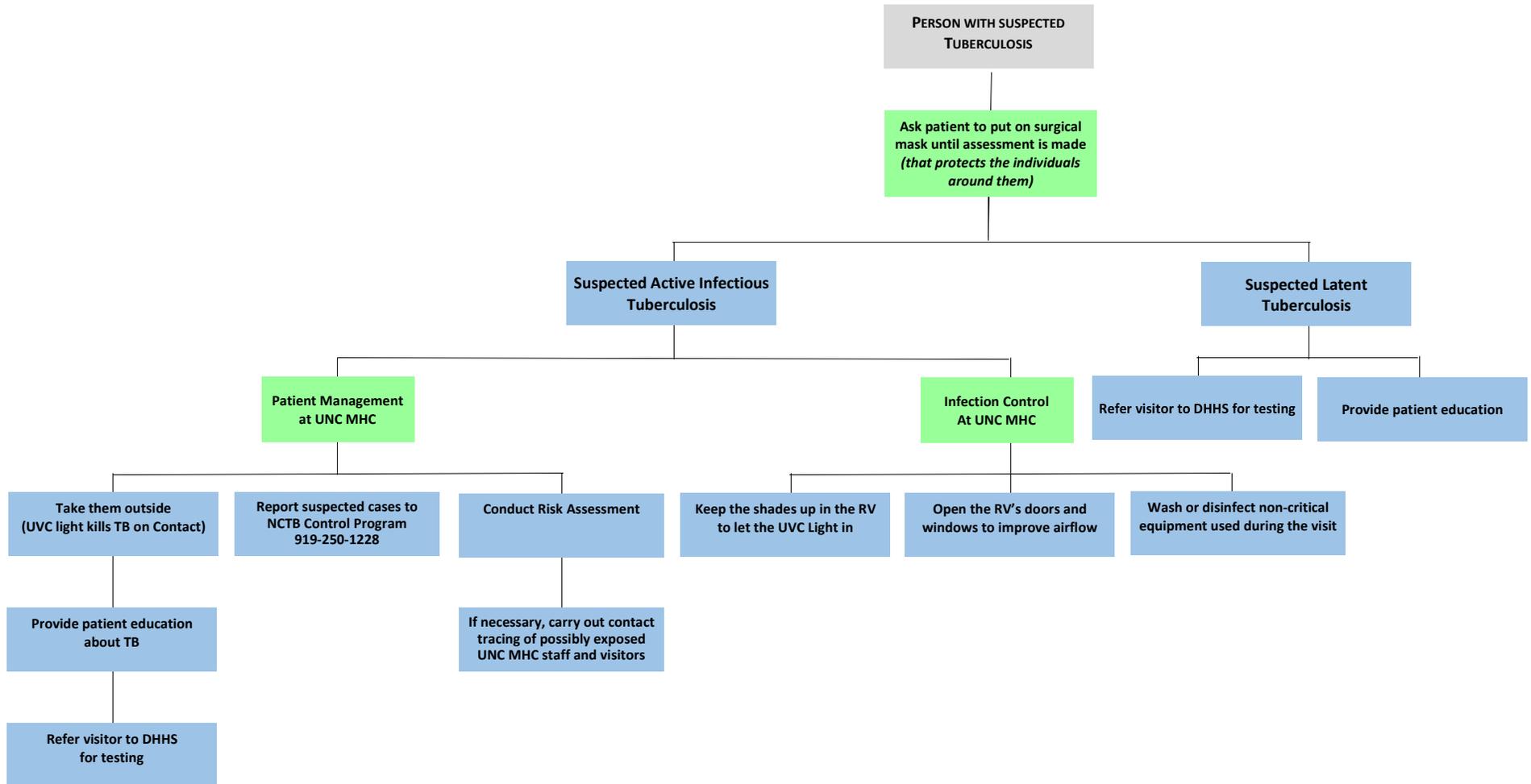
Sources:

American Diabetes Association. (2015). Classification and diagnosis of diabetes. *Diabetes Care*. 38:S9-S10.

American Association of Diabetes Educators. (2014). Recommendations for community-based screening for prediabetes and diabetes.

Clayton, D., Woo, V., & Yale, J. (2013). Hypoglycemia. *Canadian Journal of Diabetes*. 37:S69-S71

UNC MHC Tuberculosis Management Pathway Procedures



Pathway created by Johanne Laboy specifically for the UNC MHC after interviews with Lynn T. Kearney 919-810-2978 TB nurse contact at the NC DHHS, and research conducted on the NICE, SPICE, and NC DHHS websites.

Frequently Asked Questions about TB Skin Testing and Reporting



Wake County Human Services TB Control Program
10 Sunnybrook Road, P.O. Box 14049
Raleigh, NC 27620-4048
919-250-1228 or 919-212-9508

Does my office need to report positive PPDs (skin tests) to Wake County?

No, you do not need to report a positive PPD (skin test) to Wake County, unless you need help evaluating the result of the test or if the chest x-ray is abnormal suggesting active TB.

Does my office need to report confirmed or suspected cases of active TB disease to Wake County?

Any confirmed or suspected case of active TB disease is required by law to be reported within one working day to the TB Control program by telephone at 919-250-1228 or by fax at 919-250-3961. DO NOT wait for laboratory results to confirm the diagnosis prior to reporting. A suspected case of TB is anyone who has symptoms of active TB disease (see below) OR who has an abnormal chest X- ray after a positive PPD (skin test).

In accordance with North Carolina law, all cases of active TB disease must be treated by the local health department.

All patients with active TB disease being discharged from the hospital or transferred to another healthcare facility require prior approval by Wake County's TB Control program.

What services does the Wake County TB Control program offer to patients?

The Wake County Human Services TB Control program provides:

- Consultation
- Directly observed therapy,
- Case management and
- Clinical services for patients with TB infection and/or disease

Every person with active TB disease is investigated to find out who might have been exposed, provide testing and follow-up for contacts, assess sites of potential transmission and promote patient adherence.

When should I suspect TB?

Think tuberculosis (TB) in patients with:

- Chronic cough (\geq 3 weeks)
- Unexplained weight loss
- Fever, chills or night sweats
- Coughing up blood
- Fatigue

(Continued on next page)

Remember: Active TB rates are highest among:

- Foreign-born persons from areas with a high prevalence of TB
- Homeless and marginally housed persons
- Residents of long-term care facilities (including correctional facilities)

The risk of developing TB disease increases when the patient has other medical conditions such as diabetes, HIV or other medical conditions that weaken the immune system.

Whenever TB symptoms are present, TB disease should always be ruled out with a chest X-ray, sputum smears and culture, and careful clinical evaluation. Suspected cases of TB should be referred to the Wake County TB Control program. If symptoms are absent and active TB is ruled out, preventive treatment should be prioritized for these individuals.

What if a patient has a positive TB skin test and a negative chest X-ray?

Unless TB disease is suspected, providers do not need to report positive TB skin tests with negative chest X-rays.

The Wake County TB Control program is available to assist providers with preventive treatment for their patients with latent tuberculosis infection (LTBI). Alternatively, patients can be referred to the Wake County TB Control Program for LTBI management, provided at no charge to the patient.

Please call 919-250-1228 or 919-212-9508 for more information or assistance.

Should my office place a TB skin test if my patient was vaccinated with BCG (Bacille Calmette-Guérin)?

Yes, TB skin tests can be placed even though the patient was previously vaccinated with BCG. TB skin tests may be interpreted using the current guidelines for interpretation of TB skin tests.

What should my office do if we are unsure of how to interpret a TB skin test?

Please call 919-250-1228 to schedule an appointment for your patient to visit our office to read their TB skin test.

Revised January 30, 2015

CHECKLISTS, LOGS AND FORMS

Harassment and Discrimination Complaint Procedure

The Clinic seeks to ensure that any complaints are addressed and resolved in an orderly and effective manner. If you believe that you are being harassed or discriminated against due to your race, color, sex (same or opposite sex), gender, transgender, pregnancy, religion, national origin, age, physical or mental disability, veteran status, sexual orientation, the incident should be immediately reported to your supervisory staff, or to Human Resources. This reporting procedure should be used to report all complaints of harassment and discrimination involving any person(s) dealt with in the workplace, including but not limited to, supervisory employees, fellow employees, vendors, volunteers, or patients/clients.

It is the responsibility of every employee to report incidents of harassment and discrimination and cooperate with any investigation. You are urged to promptly report all circumstances that may constitute harassment of yourself or another employee so the Clinic will be aware of the situation and may make an investigation and take appropriate corrective action.

Your complaint will be kept as confidential as possible and you will not be penalized or retaliated against in any way for reporting such conduct, as long as your report is made in good faith. In addition, there will be no retaliation against any persons who aid, assist or give information in support of such a complaint.

Any complaint of retaliation should also be brought to the attention of the next level of supervision or Human Resources. Please do not assume that the Clinic is aware of a problem. It is your responsibility to bring complaints and concerns to our attention so that we may resolve them.

For more detailed information on this procedure, please visit <https://eoc.unc.edu/our-policies/ppdhrm/>

Violence in the Workplace Reporting Procedure

Consistent with and in addition to the Clinic's commitment to a healthy and safe work environment, violence in the workplace whether directed toward, but not limited to, fellow employees, patients, clients, volunteers, vendors, or any other persons on Clinic property, or attending Clinic functions, or anyone that employees may be in contact with during the course of Clinic business will not be tolerated. Any such conduct, including but not limited to, either explicit behavior such as hitting, biting, pinching, pushing, slapping, or carrying a firearm, or implicit behavior such as direct or implied threats, verbal accosting, intimidation, or other similar behavior, will lead to immediate corrective action up to and including termination of duties at the Clinic.

It is the responsibility of every employee to report any suspected violent, threatening, or otherwise inappropriate behavior to their immediate supervisor, the next level of supervision or Human Resources.

Please follow the complaint procedure as outline in the Prohibition of Harassment and Discrimination Section of this handbook. Your complaint will be kept as confidential as possible and you will not be retaliated against in any way for reporting such conduct, assuming that your report is in good faith. It is also the responsibility of each employee to cooperate in any investigation. There will be no retaliation against any persons who aid, assist or give information in support of such complaint.

UNC HCS Health Screenings and Health Fairs: Consent and Documentation Procedures

All participation in health screenings or health fairs by any staff members or departments of UNCHCS will be coordinated by the participating department and the UNCHCS Communications, Marketing and External Affairs Department, which will ensure that proper documentation is provided to participants in accordance with this policy.

If the participation of UNCHCS in a particular health screening or health fair will NOT involve either

1. an invasive test (such as blood draws (**other than finger prick**) or internal examination),
2. retention of written documentation regarding the screening
3. follow-up regarding the results of the screening, then
 - no sign-in sheet will be maintained for participants
 - no Notice of Privacy Practices needs to be given to participants in the screening, and
 - no General Consent for Health Screening needs to be obtained from participants.

If the participation of UNCHCS in a particular health screening or health fair WILL involve either

1. an invasive test (such as blood draws (other than finger prick) or internal examination)
2. retention of written documentation regarding the screening, or
3. follow-up regarding the results of the screening, then the following procedures must be followed:
 - Participants in the screening will be given a copy of the UNCHCS Notice of Privacy Practices.
 - An information sheet will be prepared and provided to each participant in the health screening and will include information regarding the type of screening that is being provided, the manner in which results from the screening will be provided to participants, and any follow up care required along with a statement that the participant is responsible for obtaining follow up care from a provider of his or her choice.
 - The approved [General Consent for Health Screening](#) form linked to this policy will be obtained from each participant.

All documentation obtained from participants and screening results will be securely retained by the department organizing the health screening or health fair. Paper documentation may be either:

1. scanned to PDF files and stored as password-protected or encrypted electronic files, at which time the paper documents may be destroyed in accordance with applicable HIPAA policy and procedure on destruction of PHI; or
2. stored in a locked cabinet. Paper and electronic documentation will be maintained by the department in accordance with applicable UNCHCS record retention policies.

Documentation obtained from participants is not considered a medical record or part of a legal health record.

Unpaid Volunteers, Interns and Visiting Scholars Requests and Approvals Procedures

Any proposed engagement of an unpaid volunteer, intern, or visiting scholar must have the advance approval of the sponsoring Department and the Office of Human Resources (OHR) using the [Unpaid Volunteer, Intern and Visiting Scholar form](#). Completed forms are submitted to the appointing departments assigned Employment and Staffing Consultant in OHR.

A fully completed background check must be completed prior to submission of the Request form noted above. The normal criminal convictions checking fees are the responsibility of the appointing department. In those instances when a volunteer, intern or visiting scholar has no Social Security Number due to citizenship status, OHR will make a good faith effort, based on name alone, to confirm that no residential history or criminal convictions have been recorded for this individual.

Depending on the location, potential environmental exposures and the type of activities performed by the volunteer, intern, or visiting scholar, OHR may also require review by the Office of University Counsel and/or the Department of Environment, Health and Safety (EHS). For further guidance on laboratory safety issues related to these types of appointments, refer to the [EHS](#) web site or contact EHS directly for assistance.

If the proposed volunteer, intern, or visiting scholar arrangement satisfies all of the requirements of this policy and the background check results are acceptable, then OHR will grant approval for the proposed arrangement to the requesting department in writing or by electronic mail.

Any approved volunteer, intern, or visiting scholar must fully complete and sign a Release of Liability Form **prior** to the start of their assignment. For volunteers and unpaid interns, the [Release of Liability for Unpaid Interns and Volunteers form](#) should be used; for unpaid visiting scholars, the [Release for Unpaid Visiting Scholars form](#) should be used. The requesting department should fill out the top section of the release, making sure that the description of the activity performed matches that provided on the Unpaid Volunteer, Intern and Visiting Scholar Request Form. The signed release must be maintained on file in the appointing department for no less than three years following completion of the volunteer, intern, or visiting scholar arrangement and subject to audit by OHR on request.

Note: The background check requirement is automatically waived for any individual younger than 18 years of age. Background checks are also not required for UNC-Chapel Hill student volunteer with the provisos listed in “Exclusions” above. See Background Check FAQs for more information.

This procedure is in accordance with UNC Chapel Hill requirements

Reporting Near Miss Procedure

A Near Miss is an event that does not result in an injury or damage. It is important to record and investigate near-misses to identify weaknesses in the Clinic's process that could possibly lead to an injury or damage. If a visitor slips on the stairs or falls on the van, that needs to be reported.

Date _____

Name of the employee _____

Name of supervisor _____

Nature of incident _____

Why the incident is was considered a "near miss? _____

Action Taken _____

One copy to:

- File
- Clinical Director
- Clinic Manager

Safety Reporting Procedure

Program

Date

Name of affected individual

Name of the supervisor

Nature of incident

Consequences of incident

Did staff, students or volunteers present take immediate action?

Why or why not?

Remedial activities or training recommended

What type of training?

One copy to:

- File
- Clinical Director
- Clinic Manager

Safety Culture Checklist

Characteristics of a Safety Culture	YES	NO
Safety and safety terms are part of the language of your Clinic.		
Workplace safety practices are part of everyone's job description.		
Safe and unsafe behaviors are specified and enforced.		
Employees are rewarded for promoting safety.		
Safety concerns are evident in the interaction among employees and in their interaction with clients, co-workers, and visitors.		
New employees are briefed on safety procedures and are briefed on the consequences for ignoring safety practice or engaging in unsafe behavior.		
The consequences for ignoring safety practices are consistently enforced.		
Employees observe and follow correct hazardous protocols.		
Employees always wear and follow guidelines pertaining to protective gear and equipment.		
There is an active safety committee and meetings are well attended and documented.		

Safety Checklist- General

Site: _____ Date: _____ Inspected by: _____

INSPECTION ITEM	YES	NO	N/A	COMMENTS/CORRECTIONS
GENERAL				
Job safety and health poster, and communications and emergency numbers posted				
Records of recent inspections and safety meetings available				
Adequate provisions for first aid and/or medical attention				
HOUSEKEEPING AND FACILITIES				
Are aisles and access ways kept clear?				
Are trash containers provided and emptied on a regular basis?				
Are materials stored properly?				
Are spills cleaned up immediately?				
Are walkways to the facility clear of ice and snow and illuminated?				
PERSONAL PROTECTIVE EQUIPMENT				
Surgical masks used to prevent spread of viruses				
Gloves are being used when needed				
Proper clothing is being worn, including foot protection				
EQUIPMENT HANDLING				
Is all clinical equipment functioning properly?				
Is the glucometer checked for quality control?				
Is the expiration date checked on emergency items?				
Are the AED batteries fully charged?				
FIRE PROTECTION				
Is there at least on fire extinguisher on the RV?				
Is there a working smoke detector on the RV?				
Has an escape route been chosen?				
Are the RV's 12 Volt connections checked frequently?				
Is the RV checked for leaking fluids?				
Are staff, students, and volunteers aware of emergency exit?				
Do staff, students and volunteers know how to open the front door, hatches and emergency exits?				
Are doors/ passages unobstructed?				

CHEMICAL HAZARD COMMUNICATON				
Does the facility have a hazard communication program?				
Does the facility have a complete list of MSDS sheets available?				
Are chemicals properly labeled and do they have appropriate warning labels?				
Have employees received hazard communication training?				
ELECTRICAL				
Are electrical panels/circuits labeled and free of storage in front of panels?				
Are electrical extension cords in good repair, grounded and not used as permanent wiring?				
Are energized electrical parts protected from contact with other hazards?				

Other comments or recommendations:

UNPAID VOLUNTEER, INTERN AND VISITING SCHOLAR REQUEST FORM

Approval by OHR required prior to start of Volunteer/Unpaid Intern/Unpaid Visiting Scholar activities

INDIVIDUAL TO PERFORM ACTIVITY				
Name		Birth Date		
Appointing/Supervising University Official is "Closely Related" (per Nepotism Policy):		<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, explain:	
Student or Educational Professional Status	Student	Home Institution (non-UNC)?		Name of Home Institution (if applicable)
	<input type="checkbox"/> UNC-CH Student <input type="checkbox"/> Other Student	<input type="checkbox"/> Yes <input type="checkbox"/> N/A		

PROPOSED ACTIVITY			
Dept. is Requesting (Check One): <input type="checkbox"/> Volunteer <input type="checkbox"/> Unpaid Intern <input type="checkbox"/> Unpaid Visiting Scholar			
Dept. Name		Dept. Number	
Dept. Contact		Telephone Number	
Describe Activities and Specify Environment Setting			
Describe any risks in the setting in which this assignment will occur (For example, exposures such as: thermal, chemical, or electrical hazards, lab animals, etc.)			
Involves Unsupervised Activities with Either of the Following: (if either are involved, include specifics in description below)			
Sensitive populations	<input type="checkbox"/> Yes <input type="checkbox"/> No	Sensitive facilities	<input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Sensitive Populations/Facilities (if applicable)		(Example: students, patients, study participants, biosafety level 3 facilities (BSL-3) etc.)	

DURATION AND SUPERVISION			
Beginning Date	Ending Date	<input type="checkbox"/> or Ongoing (volunteers only – please see page 2)	
Supervisor Name		Phone Number	

APPROVAL CERTIFICATION

Name and Title of Authorized Department Official	Name of Human Resources Representative
Signature of Authorized Department Official	Signature of Human Resources Representative
Date	Date

OFFICE OF HUMAN RESOURCES USE ONLY				
Date Received	Date Approved	OHR Approver		
Approved as <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern <input type="checkbox"/> Visiting Scholar	Approved as Exception <input type="checkbox"/> (include in justification below)			
Comments		Background Check Submitted		<input type="checkbox"/> Yes <input type="checkbox"/> NA
Background Check Submitted to OHR		Date	Result	

UNPAID VOLUNTEER, INTERN AND VISITING SCHOLAR REQUEST FORM**Approval by OHR required prior to start of Volunteer/Unpaid Intern/Unpaid Visiting Scholar activities****DEFINITIONS AND ADDITIONAL INFORMATION**

Volunteers are individuals who offer their services without cost to the university for civic reasons and which are not typically performed by permanent university employees. Examples include serving as a docent at a university museum or educational facility, serving as an usher at a university special event, or otherwise performing duties that are of benefit to the university's teaching, research, and/or public service mission.

Ongoing duration is only available for Unpaid Volunteers that meet the following standards:

- Will be performing the same duties each instance of service.
- The service(s) is provided intermittently for short durations of time (i.e. 10 days twice a year).
- The service(s) will be performed over multiple consecutive years.
- The service(s) must be performed at the same time(s) of year.

Unpaid interns are individuals who meet one of the following circumstances:

- Are currently enrolled at UNC-Chapel Hill or other accredited colleges, universities, community colleges or high schools and who are engaged in experiential learning in the workplace in return for academic or course credit.
- Are obtaining work experience that is required for professional licensure or certification under the supervision of a licensed or certified professional (e.g., Social Workers, Engineers, Nurses, and Accountants) for a period not to exceed 18 months in duration.
- Are engaging in experiential learning in a profession under the supervision of an appropriate University supervisor or manager for a period not to exceed 18 months in duration.

Unpaid visiting scholars are individuals who hold appointments at other academic or research institutions and are visiting to work with a particular faculty member or principal investigator on a research project but do not receive a paid appointment at UNC-Chapel Hill.

Exclusions: UNC-Chapel Hill Students currently enrolled at UNC-Chapel Hill, if the volunteer or intern assignment does not involve any unsupervised access to sensitive populations or sensitive facilities and the individual is not otherwise a non-student employee of the University. A Volunteer Request Form must still be completed, but a background check is not needed if the unpaid activity otherwise conforms to the above provisions.

Individuals who will perform volunteer services not to exceed seven calendar days in duration without any continuing volunteer relationship, if the assignment does not involve any unsupervised access to sensitive populations or sensitive facilities and if the individual is not otherwise an employee of the University. Note: This exclusion includes individuals who are invited to deliver a talk or presentation at the University without pay or only for nominal benefits related to their services.

Sensitive populations are those including individuals under 18 years of age, patients receiving care in any clinical setting, or other individuals deemed to require enhanced supervision or protection based on university practice or state or federal law.

Sensitive facilities are university facilities that require special clearance or background checks for access or that permit unsupervised access to records that are confidential or otherwise have special protections under state or federal law.

Background checks are required for all volunteers, unpaid interns and unpaid visiting scholars with the following exceptions:

- Permanent employees and UNC-Chapel Hill Students who do not have unsupervised activity with sensitive populations or sensitive facilities
- High school students
- Those under 18 years of age

All others must have a Background Check completed.

Nepotism: For the nepotism policy relating to SHRA permanent employment, see the following page:

<http://hr.unc.edu/policies-procedures-guidelines/spa-employee-policies/recruitment-and-selection/NEPOTISM>

For the nepotism policy relating to EHRA employment, see the following page:

http://hr.unc.edu/ccm/groups/public/@hr/@facultypl/documents/policy/ccm1_017543.pdf

Affiliate Registration Process: If the Volunteer/Unpaid Intern/Unpaid Visiting Scholar will need a One Card, PID or Onyen to perform the activity for which they are engaged, information on this can be found on the UNC PID Office website at the following link:<http://www.pid.unc.edu/Home/CreateReactivatePID/OtherAffiliates.aspx>

RELEASE OF LIABILITY FOR VOLUNTEERS AND UNPAID INTERNS

THIS SECTION: APPOINTING DEPARTMENT USE ONLY

Volunteer/Intern Name	Proposed Activity: <input type="checkbox"/> Volunteer <input type="checkbox"/> Unpaid Intern		
Department Name			
Department Number	Is Volunteer/Intern under the age of 18? (If yes, parent or guardian must sign below.)		<input type="checkbox"/> YES <input type="checkbox"/> NO
Description of Volunteer's/ Intern's Activity or Service	(THIS DESCRIPTION MUST MATCH THAT ON THE VOLUNTEER REQUEST FORM)		

THIS SECTION: VOLUNTEER/UNPAID INTERN USE ONLY

INSTRUCTIONS: UNC-CH's mission involves a variety of teaching, research, and public service activities. As an unpaid volunteer or unpaid intern, you play an important role in supporting our mission while at the same time gaining experience which will be personally rewarding. For insurance and risk management purposes, UNC-CH requires that you carefully read and agree to the following terms. The term "UNC-CH" means The University of North Carolina at Chapel Hill (along with its directors, officers, employees and agents acting within the course and scope of their duties). "I", "Volunteer/Intern" or "me" means you, the intended unpaid volunteer or unpaid intern. We appreciate your interest in serving The University of North Carolina at Chapel Hill and welcome you as a member of our community!

I, Volunteer/Intern, hereby freely, voluntarily and without duress, execute this Release of Liability under the following terms:

- I am providing service to UNC-CH voluntarily, without pressure of coercion, for educational, civic, charitable or humanitarian reasons and without expectation of payment, reimbursement, or future paid employment of any kind.
- I understand that UNC-CH will not cover me by any insurance including, but not limited to, medical, property, health, liability insurance or workers' compensation benefits, nor will any financial or other assistance be provided in the event of injury or illness.
- I agree that my service may be terminated at any time and for any reason by UNC-CH or by me.
- In consideration of the opportunity to provide unpaid service to UNC-CH, I do hereby release and forever discharge and hold harmless UNC-CH from any and all liability, claims, and demands of whatever kind or nature which arise or may hereafter arise from my service. I understand that this Release discharges UNC-CH from any liability or claim that I may have against it with respect to any bodily injury, personal injury, illness, death, property loss or property damage that may result from my service.
- I understand and acknowledge that potential risks to my health and personal property may be associated with my service to UNC-CH and I voluntarily assume those risks. I release and forever discharge UNC-CH from any claim whatsoever that arises or may hereafter arise on account of any first aid, treatment or service I receive in connection with my service to UNC-CH.
- I have consulted with my health care provider regarding my pre-existing health conditions (such as insect, food or medication allergies) and will provide myself with any appropriate medication to treat these health problems. I hereby release and forever discharge UNC-CH from any claim whatsoever arising from any complication or exacerbation of any such health condition.
- I agree to comply with all UNC-CH policies (e.g., the Reporting of Criminal Convictions Policy) while using UNC-CH facilities or resources, and I acknowledge that all UNC-CH policies apply to my activities at and service to UNC-CH. Copies of these policies can be located here: <http://policies.unc.edu/policy-category/university/>.
- This Release of Liability shall be binding and enforceable against me and my successors, assignees, heirs, guardians and legal representatives. I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina and that this Release shall be governed by and interpreted in accordance with the laws of the State of North Carolina. I agree that, in the event that any clause or provision of this Release shall be held to be invalid, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

I have carefully read this Release. I understand that in signing this document, I am giving up significant legal rights in exchange for being able to serve UNC-CH as an Unpaid Volunteer or Unpaid Intern.

_____ Name of Volunteer/Intern	_____ Signature of Volunteer/Intern	_____ Date
_____ Name of Parent or Guardian (If Volunteer/Intern is under age of 18)	_____ Signature of Parent or Guardian (If Volunteer/Intern is under age of 18)	_____ Date
_____ Name of Volunteer's/Intern's Supervisor	_____ Signature of Volunteer's/Intern's Supervisor	_____ Date

THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL
SCHOOL OF NURSING

VIDEO/PHOTOGRAPH RELEASE FORM

I hereby grant The University of North Carolina at Chapel Hill (the "University") the irrevocable right and permission to use photographs and/or video recordings of me on University and other websites and in publications, promotional flyers, educational materials, derivative works, or for any other similar purpose without compensation to me.

I understand and agree that such photographs and/or video recordings of me may be placed on the Internet. I also understand and agree that I may be identified by name and/or title in printed, Internet or broadcast information that might accompany the photographs and/or video recordings of me. I waive the right to approve the final product. I agree that all such portraits, pictures, photographs, video and audio recordings, and any reproductions thereof, and all plates, negatives, recording tape and digital files are and shall remain the property of the University.

I hereby release, acquit and forever discharge the State of North Carolina, the University, its current and former trustees, agents, officers and employees of the above-named entities from any and all claims, demands, rights, promises, damages and liabilities arising out of or in connection with the use or distribution of said photographs and/or video recordings, including but not limited to any claims for invasion of privacy, appropriation of likeness or defamation.

I hereby warrant that I am eighteen (18) years old or more and competent to contract in my own name or, if I am less than eighteen years old, that my parent or guardian has signed this release form below. This release is binding on me and my heirs, assigns and personal representatives.

Signature of Individual Photographed/Recorded Date

Printed Name of Individual Photographed/Recorded: _____

Signature of Witness Date

If individual photographed/recorded is under eighteen (18) years old, the following section must be completed: I have read and I understand this document. I understand and agree that it is binding on me, my child (named above), our heirs, assigns and personal representatives. I acknowledge that I am eighteen (18) years old or more and that I am the parent or guardian of the child named above.

Signature of Parent/Guardian of Individual Photographed/Recorded Date

Printed Name of Parent/Guardian: _____

Signature of Witness Date



Wellness Screening Results Pocket Card

DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI
DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI
DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI
DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI

DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI
DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI
DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI
DATE	BP	BG	PULSE	O ₂ SAT	TEMP	Weight	BMI



Participant (Patient) Name Here

GENERAL CONSENT FOR HEALTH SCREENINGS

Acknowledgement of Notice of Privacy Practices

The Notice of Privacy Practices is a complete description of the privacy rights of patients of affiliates of the University of North Carolina Health Care System ("UNC Health Care"). By signing below, I am stating I have received the Notice of Privacy Practices of UNC Health Care.

PATIENT SIGNATURE: (or authorized representative)

Consent for Health Screenings

I consent to participate in the health screenings listed on the attached form which are conducted by UNC Health Care affiliates and by their physicians and health care providers, including those who are not employees or agents of UNC Health Care affiliates but are authorized by UNC Health Care affiliates to provide health screenings to me. I am aware that the practice of medicine is not an exact science, and no one has made any guarantees to me about the results of my health screenings or any follow-up care or treatment that I may obtain. I have read the attached form containing information about the health screenings, and I understand and agree to its terms.

Consent for Use and Release of Information

I give permission to UNC Health Care affiliates – including its treating and referring providers and other staff members – to release any information about me, my health, the health services provided to me, or payment for my health services, that may be necessary: (1) for my treatment (to health care providers or facilities that need the information for my continued care); (2) for any purposes related to payment by me or a third party for services (to determine eligibility, to process an insurance claim, for utilization and quality review, or for billing or collection purposes, as necessary to obtain payment); or (3) for the health care operations of the UNC Health Care affiliate or another health care provider that has had a relationship with me (quality assessment, training programs, planning, and fundraising). For more detailed information about the way my information may be used or released, I can read UNC Health Care's Notice of Privacy Practices.

I give permission to UNC Health Care affiliates and their employees, agents, and contractors to take photographs or make videos or drawings of me for permissible treatment, payment, or health care operations purposes (which may include quality assessment, education, and training), as long as consistent with policies and laws that protect my rights.

Financial Responsibility

I acknowledge that I am responsible for payment of all charges associated with this screening. If I have overpaid any of my accounts with a particular UNC Health Care affiliate, I agree that the overpayment may be applied to pay any outstanding charges on any of my accounts with other UNC Health Care affiliates.

Medicare/Medicaid/Insurance Certification, Assignment & Payment Request

I have been informed that Medicare will only pay for services that it determines to be reasonable and necessary under section 1862(a)(1) of the Medicare Law. I certify that the information given by me or by my authorized representative in applying for payment for my health care under the Medicare or Medicaid programs is correct. I request that payment of authorized benefits be made to the appropriate UNC Health Care affiliate on my behalf. I authorize UNC Health Care affiliates to bill directly and assign the right to all health and liability insurance benefits otherwise payable to me, and I authorize direct payment to the appropriate UNC Health Care affiliate.

I UNDERSTAND THAT I MAY WITHDRAW THIS CONSENT IN WRITING. MY WITHDRAWAL WILL NOT BE EFFECTIVE FOR ACTIONS ALREADY TAKEN BY, OR IN PROGRESS AT, ANY UNC HEALTH CARE AFFILIATE.

I AUTHORIZE UNC HEALTH CARE AFFILIATES TO RELEASE ALL RECORDS REQUIRED TO ACT ON THESE REQUESTS. I HAVE READ AND UNDERSTAND THIS FORM, I HAVE RECEIVED A COPY, AND I AM THE PATIENT OR I AM AUTHORIZED TO ACT ON BEHALF OF THE PATIENT TO SIGN THIS FORM.

PATIENT SIGNATURE (or Authorized Representative) DATE: TIME:

PRINTED NAME RELATIONSHIP, if not patient:

UNC MHC Health Screening Consent and Voluntary Release Form

I voluntarily agree to take part in health screenings offered by the UNC School of Nursing Mobile Health Clinic. I acknowledge that certain screenings may require obtaining a blood specimen for the purpose of conducting a laboratory tests on the specimen. I understand that if blood is obtained from a finger stick, I may experience slight pain or a bruise at the puncture site. I hereby authorize the Mobile Health Clinic, its employees, nurses, student nurses, technicians, and any other practitioner performing services to obtain a blood specimen and conduct any necessary tests.

I, the undersigned, hereby consent to the collection of the assessments that I have chosen below:

- Blood pressure
- Blood sample for the purpose of measuring my cholesterol levels.
- Blood sample for the purpose of measuring my glucose levels.
- Blood sample for the purpose of measuring my A1c.

I hereby release the UNC School of Nursing Mobile Health Clinic and any other organization (s) associated with this screening and/or health fair, their affiliates, directors, officers, employees, successors and assigns, from any liability arising from or in any way connected with my participation in any of these tests.

I understand that:

- _____ The data derived from the test(s) are considered to be preliminary; they are screening assessments only. They do not constitute a diagnosis of hypertension, pre-hypertension, obesity, hypercholesterolemia, pre-diabetes or diabetes.
- _____ The responsibility for initiating a follow-up examination to confirm the results of this screening and obtain professional medical assistance is mine alone, and not that of any organization(s) associated with this screening or health fair. The chemical analyzer used to determine plasma glucose and serum lipid levels may yield results that are at variance from those produced by standard reference laboratory analyzers.

PATIENT SIGNATURE (or Authorized Representative)

DATE: _____ TIME: _____

PRINTED NAME

This handbook assembled entirely with copy, templates and materials from the following sources:

(Marianne, I will properly format this resource list later. Right now, I'm just trying to keep track of the location of the materials.)

Legal and Operational Guide for Free Medical Clinics Co-published with the American Medical Association Foundation

<https://www.ama-assn.org/corp/media-browser/public/ama-foundation>

West Virginia Department of Education Simulated Workplace's Policy and Procedure Manual Template

<https://wvde.state.wv.us/files/policy-and-procedure-manual-template>

UNC Chapel Hill

<https://www.unc.edu/social/social-media-guidelines/>

UNC Medical Center

<https://www.med.unc.edu/patientprivacy/files/2019/03/Health-Screenings-and-Health-Fairs-Consent-and-Documentation.pdf>

UNC School of Nursing

<https://sonportal.unc.edu/files/2017/06/Social-Media-Policy.pdf>

<https://sonportal.unc.edu/communications/school-resources-and-downloads/>

UNC School of Medicine

<https://www.med.unc.edu/medicine/qi/faculty-staff-website/files/2019/04/social-media-policy.pdf>

<https://www.med.unc.edu/medicine/qi/faculty-staff-website/files/2019/04/social-media-policy.pdf>

Onsite Health Solutions Biometric Screening

[file:///C:/Users/johan/OneDrive/Downloads/Health-Solutions-Consent%20\(1\).pdf](file:///C:/Users/johan/OneDrive/Downloads/Health-Solutions-Consent%20(1).pdf)

UNC Human Resources

<https://hr.unc.edu/employees/policies/other/unpaid-volunteers-interns-visiting-scholars/>

<https://pathways.nice.org.uk/pathways/tuberculosis#path=view%3A/pathways/tuberculosis/managing-active-tuberculosis.xml&content=view-index>

[CDC Disinfecting equipment](#)

<https://wonder.cdc.gov/wonder/prevquid/m0035909/m0035909.asp#head0090000000000000>

Osha House keeping/cleaning

<https://www.osha.gov/SLTC/etools/hospital/hazards/tb/tb.html>

NC DHHS

Tuberculosis Reporting

<http://www.wakegov.com/humanservices/publichealth/providers/Documents/Frequently%20Asked%20Questions%20about%20TB%20Skin%20Testing%20and%20Reporting.pdf>

(SPICE) Statewide Program for infection Control and Epidemiology

<https://spice.unc.edu/?s=tuberculosis>

<https://epi.dph.ncdhhs.gov/cd/diseases/tb.html>

(NICE) National Institute for Health and Care Excellence
<https://pathways.nice.org.uk/pathways/tuberculosis>

UNC No Smoking Policy
<https://unc.policystat.com/policy/5884957/latest/#autoid-m6wdd>

UNC Policy on Discrimination and Harassment
https://unc.policystat.com/policy/7019871/latest/#_bookmark18