


Volunteers
A Time for a Revisit


Hospice Fundamentals Subscriber Webinar
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HOSPICE FUNDAMENTALS
KNOWLEDGE • EXPERTISE • COMMON SENSE


Important Note

- ▶ This presentation is based on the Medicare Conditions of Participation (COPs)
- ▶ There are variations among some state regulations
- ▶ You must always follow the stricter of the two

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Today's Goals

- ▶ Review the Volunteer Condition of Participation
- ▶ Discuss the other Conditions of Participation affecting a volunteer program
- ▶ Maximize the use of volunteers
- ▶ Survey readiness

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Quick History Lesson

- ▶ Original Hospice CoPs (December 1983) incorporated statutory language taken from 1983 – amended version of the Social Security Act
“[The hospice program must] (i) utilize volunteers in its provision of care and services in accordance with standards set by the Secretary, which standards shall ensure a continuing level of effort to utilize such volunteers, and (ii) maintain records on the use of these volunteers, and the cost savings and expansion of care and services achieved through the use of these volunteers.”
- ▶ CMS (then HCFA – Health Care Financing Administration) determined the 5% standard for volunteer efforts

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Volunteer Leaders

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Need skills

- ▶ Commitment to quality and compliance
- ▶ HR management
- ▶ Leadership
- ▶ Fiscal management & resources
- ▶ Organizational skills
- ▶ Customer service focus
- ▶ Accountability




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Medicare CoPs


§418.52	Patient rights
§418.54	Initial and comprehensive assessment
§418.56	Interdisciplinary group, care planning, and coordination of services
§418.58	Quality assessment and performance improvement
§418.78	Volunteers
§418.100	Organization and administration of services
§418.114	Personnel qualifications

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**§418.78
Volunteers**

▶ Standards

- a) Training
- b) Role
- c) Recruiting and retaining
- d) Cost Savings
- e) Level of activity


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**§418.78(a)
Training**

The hospice must maintain, document and provide volunteer orientation and training that is consistent with hospice industry.


▶ Orientation at minimum contains

- ▶ Hospice goals, services & philosophy
- ▶ Person to whom they report
- ▶ Person to contact if need help regarding duties & performance
- ▶ Confidentiality (HIPAA)
- ▶ Patient rights
- ▶ Family dynamics, coping mechanisms & psychological issues surrounding terminal illness, death, and bereavement
- ▶ Specific job responsibilities

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On-Going Training


- ▶ Don't forget volunteers in the annual education requirements of your hospice
 - ▶ HIPAA
 - ▶ Compliance plan
 - ▶ Infection control (for direct patient care volunteers)
- ▶ Related to volunteers duties and responsibilities

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**§418.78(b)
Role**


Volunteers must be used in day-to-day administrative and/or direct patient care roles.

- ▶ Are able to assist hospices in many ways and assume many different roles
- ▶ Any services provided to the patient / family must be part of the plan of care

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Administrative Duties


- ▶ Provide assistance in the hospice's office day-to-day activities
 - ▶ Examples
 - ▶ Answering the phone
 - ▶ Filing
 - ▶ Processing patient and family mailings
 - ▶ Data entry
 - ▶ Putting together admission packets
 - ▶ Bereavement tracking and mailings
 - ▶ Scheduling
 - ▶ Putting away supplies

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Direct Patient Care Activities

- Direct patient care or help patient / families with household chores
- Key – direct contact with patient and family


✓ Telephone contact	✓ Pet therapy for the individual
✓ Vigils	✓ Music therapy for the individual
✓ Companionship	✓ Life review
✓ Shopping	✓ Professional service
✓ Transportation	
✓ Respite	

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Bereavement Support Activities

- ▶ Telephone contact
- ▶ Visits with the bereaved
- ▶ Processing bereavement notes / letters


Administrative hours or patient care hours?

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Travel Time

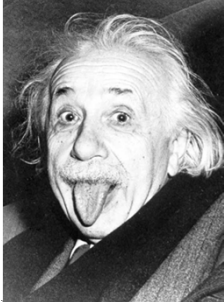
“We understand that traveling, providing care or services, documenting information, and calling patients all consumes volunteer time, and we agree that the time may be used in calculating the level of volunteer activity in a hospice.” - CMS

- ▶ If pay staff for travel time to a patient’s home, can count volunteer time for travel to a patient’s home
- ▶ Cannot count travel time for administrative / office duties
 - ▶ Don’t pay administrative staff for travel time to the office

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▶ Not everything that counts can be counted, and not everything that can be counted counts.

▶ ~Albert Einstein



Volunteer Duties

The sniff test

- ▶ Is the activity providing administrative support for direct patient care or providing direct patient care?
- ▶ Would you (or are you) paying an employee to do this activity?


Hours That Don't Count

- ▶ May use volunteers in non-administrative , non-direct patient care activities, but not included in the 5% calculation
- ▶ Examples
 - ▶ Crafts, sewing, quilting
 - ▶ Board meetings
 - ▶ Education / orientation / In-services
 - ▶ Fundraising
 - ▶ IDG meetings
 - ▶ Baking cakes / preparing other foods in the volunteer's home
 - ▶ Community in-services , unless required by Medicare for the hospice to provide (i.e., advance directives)

§418.78(c)
Recruiting & Retention

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


- ▶ What type of activities are viable and ongoing effective recruiting?
 - ▶ Internet
 - ▶ Newspaper
 - ▶ Community fairs
 - ▶ Churches
 - ▶ ALFs
 - ▶ Word of mouth
 - ▶ Colleges

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Recruiting & Retention

- ▶ Retention activities
 - ▶ Thank you notes
 - ▶ In-services
 - ▶ Emails
 - ▶ Support groups / meetings
 - ▶ Include in staff meetings and events
 - ▶ Phone calls

Remember to document it all!


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§418.78(d)
Cost Savings

The hospice must document the cost savings achieved through the use of volunteers.

Documentation includes


1. The identification of each position
2. Work time spent
3. Estimate dollar costs



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§418.78(e)
Level of Activity

Volunteers must provide day-to-day administrative and/or direct patient care services in an amount that at a minimum, equals 5 percent of the total patient care hours of all paid hospice employees and contract staff. The hospice must maintain records on the use of volunteers for patient care and administrative services, including the types of services and time worked.

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Level of Activity

Calculating Hours


$$\frac{\text{Number of volunteer administrative and patient care hours}}{\text{Total number of patient care hours of all paid employees \& contracted staff}} = 5\%$$

Example

$$\frac{50 \text{ Volunteer Hours}}{1,000 \text{ Staff \& Contract Hours}} = 5\%$$

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Other Conditions of Participation

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§418.52
Patient Rights


The patient has the right to be informed of his or her rights, and the hospice must protect and promote the exercising of these rights. Hospice must protect & promote the exercise of these rights .

- ▶ Standards
 - a) Notice of rights and responsibilities
 - b) Exercise of rights and respect for property and person
 - c) Rights of the patient

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Patient Rights

- ▶ Information to patients include provision of volunteer services
- ▶ Volunteer services should be introduced to patient on admission and periodically
- ▶ Patients decide whether or not they want the services

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§418.54 - Initial and comprehensive assessment of the patient

The hospice must conduct and document in writing a patient-specific comprehensive assessment that identifies the patient's need for hospice care and services, and the patient's need for physical, psychosocial, emotional, and spiritual care. This assessment includes all areas of hospice care related to the palliation and management of the terminal illness and related conditions.

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Initial and Comprehensive Assessment

- ▶ Comprehensive assessment means a thorough evaluation of the patient's physical, psychosocial, emotional and spiritual status related to the terminal illness and related conditions
- ▶ All members of IDG must be involved with completing and updating the comprehensive assessment
- ▶ Need for volunteers included as part of comprehensive assessment

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§418.56 – Interdisciplinary group, care planning and coordination of services

The plan of care must specify the hospice care and services necessary to meet the patient and family-specific needs identified in the comprehensive assessment as such needs relate to the terminal illness and related conditions

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Interdisciplinary group, care planning and coordination of services

- ▶ Volunteer coordinator / volunteer are part of the care planning process
- ▶ Document on the POC for all patients receiving volunteer services
- ▶ Review, revised & document the individualized plan as frequently as patient's condition requires, but no less frequently than every 15 calendar days
 - ▶ Includes scope and frequency
 - ▶ PRN is not a stand alone frequency
 - ▶ Duties of volunteers in direct patient care documented in the POC

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§418.58 – Quality Assessment & Performance Improvement

The hospice must develop, implement, and maintain an effective, ongoing, hospice-wide data-driven quality assessment & performance improvement program

- ▶ Patient-focused and outcome (or results) oriented
- ▶ Goal
 - ▶ To monitor quality/performance
 - ▶ Find opportunities for improvement
 - ▶ To improve care

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QAPI

- ▶ Quality of volunteer program & compliance to 5% should be part of QAPI program

▶ Examples of quality measures for Volunteer Programs

- ▶ Compliance to the 5% regulatory requirement monthly
- ▶ Meeting % of patient / family requests for volunteer services
- ▶ Maintaining volunteer satisfaction of _____
- ▶ % of all volunteer hours are direct patient care volunteer hours
- ▶ Retention of active volunteers

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§418.100 – Organization and administration of services


The hospice must organize, manage, and administer its resources to provide the hospice care and services to the patient, caregivers, and families necessary for the palliation and management of the terminal illness and related conditions.

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Organization and administration of services

- ▶ Volunteer training & orientation closely aligned with staff
- ▶ In-service activities
- ▶ Competency program
 - ▶ Must assess skills and competencies of individuals furnishing services – includes volunteers
 - ▶ Must have written policies and procedures describing methods of assessment of competency and maintain written description of in-services provided previous 12 months

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§418.114
Personnel Qualifications

- ▶ General qualification requirements
- ▶ Personnel qualifications for certain disciplines
- ▶ Personnel qualifications when no State licensing, certification, or registration requirements exist
- ▶ Criminal background checks

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Personnel qualifications

- ▶ Criminal background checks for volunteers
 - ▶ Follow same guidelines as do for staff
- ▶ Do not need an I-9
 - ▶ I-9 needs to be completed for “an individual who provides services or labor for an employer for wages or other remuneration...”
- ▶ Use of volunteers to provide professional services
 - ▶ Must meet all requirements associated with specialty area, including licensing / registrations / OIG exclusions, etc.

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Content of Volunteer files

- ▶ Evidence of initial orientation
- ▶ Evidence of orientation to tasks expected to perform
- ▶ Assessment of skills and competencies
- ▶ In-service / on-going education
- ▶ Evaluations
- ▶ Proof of current professional licenses / certification (if applicable)
- ▶ Criminal background check
- ▶ Evidence of participation in QAPI for licensed professionals
- ▶ Proof of HIPAA training (confidentiality)
- ▶ TB screening for those with patient contact
- ▶ Monthly OIG exclusion checks

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Survey Readiness

- ▶ How organized are your materials to demonstrate compliance in the following
 - ▶ Training & competencies
 - ▶ Recruitment and retention
 - ▶ Demonstrating cost savings
 - ▶ Utilization of volunteers
 - ▶ Infection control practices for patient care volunteers
 - ▶ HIPAA / confidentiality

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Survey Issues

- ▶ Not meeting 5% and no action plan
- ▶ Volunteer files
 - ▶ Lack of annual evaluations
 - ▶ Lack of competencies after orientation and annually
- ▶ Poorly organized or lack of documentation of recruitment and retention activities


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FAQs

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What happens if a hospice does not have a volunteer to fill the identified need?

The needs of the patient still must be meet. Consider including the identified need as part of the hospice aide assignment.

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Do I get extra credit of more than 5%?


There is no extra credit or points for exceeding 5%. The key is to ensure the hours counted toward the 5% support the hospice in administrative or direct patient care activities.

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Can a student's time count as volunteer time?


If the student is "shadowing" a staff member, then no those hours do not count. However, if a student is seeing the patient independently (i.e. chaplain, SW) with oversight and supervision by the respective discipline after the visit, then those hours could count as volunteer hours.

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Perennial Challenges

- ▶ Boundary Issues
- ▶ Confidentiality
- ▶ Documentation issues
- ▶ Limited (or shrinking)resources
- ▶ Challenges in billing and regulatory requirements affecting volunteer programs
- ▶ Future volunteers – different from today



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Resources

NHPCO
▶ <http://www.nhpso.org>

Point of Light Institute
▶ <http://www.pointsoflight.org>

Independent Sector
▶ <http://www.independentsector.org>

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