



Senior Rides Volunteer Training Manual

Confidentiality

The Health and Insurance Portability and Accountability Act (HIPAA) was established in 1996. This “privacy rule” provides federal protection for personal health information. It is important to keep in mind:

- Since the identity of Care Partners clients and family is confidential information, referring to clients or families by name should only occur among the Care Partners Team.
- If you are already acquainted with your client, be mindful of which ‘hat’ you are wearing. Any information learned while assisting *as a volunteer* is confidential.
- Discussions with team members regarding clients/family must be held in private settings where others cannot overhear, and never in public places.
- When in doubt about confidentiality, contact Care Partners staff for clarification or assistance.

Care Partners of Cook County paid staff and volunteers must read and sign their acknowledgment of the attached **Confidentially & Security Policy Statement** as part of their initial training, and annually thereafter.

Background and Reference Checks

Care Partners is concerned about the safety of its volunteers while on duty (whether on or off premises), the safety of its clients, and the protection of its assets and reputation. To reduce these risks, prospective Care Partner volunteers are required to undergo a background check through the Minnesota Department of Human Services.

Two personal references are also required from each applicant. These references will be contacted by mail or phone by Care Partners staff.

Vulnerable Adults

Care Partners is mandated to report any neglect or physical, emotional, or financial abuse of vulnerable adults. See the **Adult Protection handout** for more information, including types of potential maltreatment and reporting details. If you have any concerns about potential maltreatment of a vulnerable adult, report to Care Partners staff immediately. Reports should be made within 24 hours. If staff are not available, call the MN Adult Abuse Reporting Center at 844-880-1574. You can also call Cook County Public Health & Human Services at 387-3620 for help making the report. If there is immediate danger, call 911.

Expectations

Actions, words, jokes, or comments based on an individual's gender, sexual orientation, race, ethnicity, age, religion, or any other legally protected characteristic will not be tolerated from Care Partners staff or volunteers and will be a basis for dismissal. Volunteer must be free of drugs and alcohol when volunteering and avoid any appearance of sexual harassment or inappropriate contact with the client.

Aging Awareness

Care Partners clients are over the age of 60, and many are 80 to 90 years old. You can take pride in knowing that the service you provide makes a meaningful difference in someone's life as you help our elder friends and neighbors enjoy positive personal connections, maintain their independence, and continue to live in a place they love. Through your Care Partners service, you'll have the opportunity to work with people who have a lifetime of experience, and like most of our volunteers, you may come to deeply appreciate their wisdom, stories, and humor. Understanding the changes that occur with age can help us better assist and communicate with our clients while respecting their independence and dignity. Please see the attached [Aging Awareness & Best Practice handout](#) for more information.

Gifts / Conflict of Interest

Do not, under any circumstances, request or accept a loan or gift of money or material things from the client, sell any material things to the client, buy any material things from the client, or provide any financial assistance or financial advice to the client. Contact Care Partners staff with any questions that may arise related to gifts.

Do not accept any money from clients for the services you have provided. Clients will be asked to contribute a donation or cost-share for their ride based on their income and the mileage you drove.

Friends and Relatives

Do not refer friends, relatives, or colleagues to do work for the client or allow them to accompany you while performing your job. All workers must be screened through our application process before they can be assigned jobs.

Communication Policies

Many people have a social media account such as Facebook, Twitter, or Instagram. These platforms provide a wonderful opportunity to connect with family, friends, and the larger community. They help us share ideas and express opinions about things that are important to us. We hope that your work as a Care Partners volunteer is something that you are proud of, and that you are excited to tell others about the good work that we do in Cook County. Our Communication Policies are designed to help Care Partners staff and volunteers exercise good judgement when using social media to safeguard our program and clients, especially with posts or comments that may be associated with Care Partners. Please review the attached [Communication Policies](#) and contact Care Partners with any questions or concerns.

Distracted Driving Policy

Care Partners employees and/or volunteers may not use handheld or hands-free mobile electronic devices or voice features when operating a motor vehicle on behalf of Care Partners. Global Positioning System (GPS) or navigation devices may be used but must be affixed to or installed in a vehicle and programmed prior to departing.

Failure to follow agency policy and refrain from talking on the phone, texting, or emailing while driving as a Care Partners employee or volunteer will result in a verbal warning, with further infractions resulting in written warnings or dismissal. Please review the attached **Distracted Driving Policy** and let us know if you have any questions.

Driving Record

We value the trust that our clients place in our volunteer drivers and ask our Senior Rides volunteers to demonstrate their commitment to client safety by maintaining a good driving record. You will be asked to obtain a free copy of your driving record by going to the Cook County Law Enforcement Center and indicating that your request is for a Care Partners volunteer application. After we have received a copy of your driving record, you will be asked each year to simply confirm that you have received no more than one ticket or accident in the last three years. Please let us know as soon as possible if you do incur more than one ticket or accident in a three-year period.

Insurance / Liability Coverage

Because Minnesota is a “No Fault” state, your auto insurance will cover any accidents – similar to coverage while giving a friend a ride. We ask that your policy provide at least \$100,000 per occurrence in liability coverage. If that does not cover the costs, a claim would be made with the other involved party. If this did not cover the costs, a claim would be made against Care Partners of Cook County’s insurance.

You will need to provide a copy of your liability coverage which we will keep in your volunteer file. Each year you will be asked to send a copy of your auto insurance declaration page showing that you continue to carry liability coverage of at least \$100,000.

We advise you to contact your insurance company to notify them of your volunteering service and inquire about having adequate coverage.

Senior Rides Program Overview

The Senior Rides program is an assisted transportation service funded by a federal Older Americans Act grant from the Arrowhead Area Agency on Aging. It is a supplement to other ride programs including Arrowhead Transit, family, friends, and other service agencies. Trained volunteers provide rides in Cook County for those 60+ years of age for medical, dental, and eye appointments as well personal appointments, errands, wellness, and social activities. We also provide rides to Duluth for medical and eye appointments. We ask that ride requests be made at least 48-72 hours in advance, although last-minute and emergency rides may be arranged depending on volunteer availability.

There is no charge for the service, but clients are asked to share the cost by making a donation to Care Partners based on their monthly income and miles driven. We will inform them of this when they request a ride and send a letter with this request after the ride, based on the mileage you report. While a good portion of the program cost is covered by our grant, our grantor requires us to request this cost-share to cover part of the expenses. No one is refused service for inability or unwillingness to contribute.

Safety

Volunteer Vehicle

It is advisable that you perform periodic preventative maintenance as outlined in your owner's manual. Prior to any trip, we recommend you conduct the following pre-trip inspection.

- Perform a walk around your vehicle -- check tires and look for any visible sign of leaks.
- Ensure your mirrors, wipers, turn signals, lights, and seatbelts are functional.
- Ensure the interior of your vehicle is clean and free of debris.
- Check fluid levels, i.e., oil, coolant level, windshield fluid, brake fluid, power steering, etc.
- Check brakes to see that they are working properly.

Care Partners will provide you with a basic first aid kit to keep in your vehicle. In cold weather months you are encouraged to also carry a winter survival kit and shovel.

Disinfection and Hygiene

Coronavirus has served to remind us of the key role effective hygiene plays in infection prevention and control. Older adults and people of any age who have serious underlying medical conditions may be at higher risk for serious complications from common viruses and bacterial infections. Care Partners Senior Rides volunteers are asked to follow these protocols to reduce the risk of infection for both client and volunteer:

- If you are experiencing symptoms such as a fever of 100.4 degrees or higher, nausea, body aches or chills, please notify Care Partners before doing the chore or making the delivery so we can find a substitute volunteer or postpone the ride.
- Before and after the ride, use hand sanitizer and wipe down frequently touched surfaces in your vehicle such as steering wheel, door handle and seat belt buckle using disinfectant wipes.
- Wash hands often with soap and water for at least 20 seconds especially after coughing, sneezing or blowing your nose. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of hands and rub them together until they feel dry.
- Avoid touching eyes, nose, and mouth with unwashed hands.
- Use disposable gloves to handle body substances or soiled items with body substances. Clean up any spills with paper towel and dispose of paper towel. Remove gloves after completing the task you put them on for, discard gloves and wash your hands.

We recommend drivers carry paper towels, tissues, latex gloves, hand sanitizer, and a small wastebasket or trash bag in their vehicles. Paper towels, hand sanitizer, disposable gloves, disinfectant wipes, and disposable protective pads are available from Care Partners.

Weather Conditions

In case of threatening / severe weather conditions, you, as the volunteer driver, are responsible for determining if the driving conditions are safe or unsafe. You can call 511, go to www.511mn.org, or download the Minnesota 511 app on your mobile device for road condition information. If either you or the client is uncomfortable with the conditions, do not go. If you decide not to provide the ride, call your scheduled client as well as Care Partners as soon as possible to inform them of your decision. If the client still insists on going to their designated location, inform Care Partners so we can contact the client and / or reschedule the ride. If you feel it is safe to proceed with the ride, please use your radio or cell phone to remain aware of updated travel and weather advisories. If you are enroute and conditions worsen, seek shelter and if possible, wait out the situation until it is once again safe to travel back home or to the scheduled destination. Contact Care Partners if you need to secure overnight accommodations. The bottom line: PLEASE DO NOT TAKE UNNECESSARY RISKS BY DRIVING WHEN CONDITIONS ARE UNSAFE.

Senior Rides Process

Communication of Need

Once Care Partners becomes aware of a need for service, they will start contacting volunteers via phone or email regarding availability to complete the ride. The volunteer who takes the assignment will be informed of client's address, phone number and ride information.

Pre-Ride Client Communication

Care Partners staff will phone the client to let them know you will be covering the ride and what time you will arrive. We typically give the client your phone number so they can contact you directly if there is a last-minute change. Please let us know if you have a preference as to which phone number we provide, or if you would prefer that we not share your number. **It is your responsibility to phone the client the day before the appointment** to provide a reminder and reassurance, and to double-check ride details with them. If the client reports any changes, please inform Care Partners.

Passenger Assistance & Care

Arrive at the client's home on time or a little early. When you arrive at the pickup location, it is advisable to meet the passenger at the door. Helping the passenger to and from the car by offering an arm and guiding them is a service that helps prevent accidents and promotes safety. The client must be able to get into your vehicle without use of stepping stool or bench. Assist the client with their seatbelt if necessary. It is also advisable to ensure the passenger enters the drop off establishment before driving away.

You are not allowed to lift clients in and out of your vehicle. This is for your safety and that of the client. Clients in wheelchairs must be able to bear weight. If a client is brought to the door using a wheelchair following a medical procedure that staff person, and not you, should assist them out of the chair. For more information about passenger wheelchair assistance, see the attached

[Wheelchair Basics handout](#).

As you transport your passenger:

- Treat each passenger with respect and dignity in the same fashion that you would like to be treated.
- Be a good listener, enjoy the conversation and participate if you feel so inclined, but if asked to provide advice on family or personal matters, please refrain from giving such advice.
- Information about your passenger is confidential.

Never underestimate your role as a volunteer driver. In many cases, you may be the only individual who sees a specific passenger on a regular basis. Understanding this should give you a sense of fulfillment because you made someone's day special by showing up just for him or her. **On occasion, you may observe a change in a passenger's behavior or condition. If the change in the passenger's behavior or condition concerns you, please notify Care Partners staff.**

Parking, Parking Fees and Meals

Care Partners has a limited number of disability parking placards which can be used by volunteer drivers for client rides as needed. Placards can be checked out through the Senior Services Coordinator. Unless prior arrangements have been made with Care Partners staff, please return the placard to Care Partners as soon as possible following the ride. The placard is to be displayed on the rearview mirror only when parked. Driving with the parking certificate hanging from the mirror is illegal and dangerous.

The client is expected to pay for any parking fees. If the ride is over several hours (i.e. a medical ride to Duluth) you may stop for a meal. The client should pay for their own meal and may purchase yours if they would like. Otherwise, Senior Rides will reimburse your meal at \$10 for breakfast, \$12 for lunch and \$15 for supper. Please email, text, or send a copy of your receipt to the Senior Service Coordinator and include the ride date and client initials.

Personal Errands

If you drop off a client for an extended period, you may run errands while the client is occupied. Please confirm the pick-up time with the client before leaving and provide the client with your Care Partners business card so they can contact you if there is an unexpected change in plans.

Mileage Tracking

You are asked to track the mileage from your home to the client's home and back, as well as the number of miles driven with the client. You will be reimbursed for the total ride, but the client will be asked to make a donation only for mileage incurred while they were in the vehicle. Do not include miles driven for any personal errands you may run while the client is at an appointment. If the ride is cancelled, but the passenger does not notify you and you attempt to pick up the passenger, note "no-show," in your volunteer service report and you will be paid for mileage you incurred.

On all service reports we will ask for number of miles only - odometer readings will not need to be reported.

Volunteer Service Report

It is your responsibility to submit a volunteer service report within 48 hours of providing a ride. Service reports are typically submitted online and can be accessed through our website

(www.carepartnersofcookcounty.org.) If you need to use a paper report form, please contact Care Partners. You will be asked for:

- client initials
- service date
- total number of miles driven while the client was in the vehicle
- additional number of miles driven from your home base to the client and back
- total number of miles in the entire ride
- mileage reimbursement total (the total number of miles multiplied by the mileage reimbursement rate.)
- meal reimbursement request (if any)
- amount of time you spent on the trip
- general comments about the trip, including concerns, suggestions, or just a note about how the trip went

You will also be given the opportunity to donate all or part of your reimbursement to Care Partners if you choose. To ensure confidentiality, please use the client's initials only in all reports and emails.

Mileage Reimbursement

Current reimbursement rate is .60 per mile. Reimbursement checks are typically mailed out during the second week of each month for the previous month's work. If a single month's reimbursement amount is quite small - for example, less than \$5 - we may wait for additional reimbursement requests from you before issuing a check. If you have any questions or concerns, please let us know.

Emergency Procedures

Passenger Conduct or Illness

The intent of Care Partners Senior Rides Program is to ensure a safe environment for both you and the passenger. While we make every effort to screen clients before they are assigned, there may be instances where client behavior might be difficult or endangering, or they may have health issues that arise that you are not equipped (or permitted) to deal with. If you have an indication of this when you pick up the client, please cancel the trip and inform Care Partners immediately. If you are mid-trip and the situation occurs, pull over and contact Care Partners. If you cannot contact Care Partners immediately, or if the situation is a health emergency, **call 911**. Complete a Volunteer Incident/Accident Report (see the attached sample) and return it within 24 hours to the Care Partners office.

Vehicle Breakdown

If you experience a vehicle breakdown, try to maneuver your vehicle to the side of the road out of the lane of traffic, and turn on your hazard lights. Please try to keep the passenger(s) calm by informing them of the situation. If you have a cell phone, contact Care Partners to see if another driver can assist with transportation. Call to get appropriate roadside assistance. If you do not have a cell phone or if your phone is not operational, open the hood of your car. This will signify to local and state law enforcement officials that you need assistance. Once a law enforcement officer stops to render

assistance, inform him or her that you are a volunteer driver taking a passenger to their designated destination and ask them to contact Care Partners as well as help you get appropriate roadside assistance. Remember to stay with your passenger(s) until another driver arrives. Complete a Volunteer Incident/Accident Report and return it within 24 hours to the Care Partners office.

Incidents/Accidents

Do not leave the scene if involved in an incident/accident. Remain calm, try to ensure the safety of all involved, and **call 911** or have someone else make the call. Do not move an injured individual until emergency personnel arrive unless further injury is possible. Render first aid as necessary. Exchange insurance information with any other drivers involved, but do not discuss liability. Take pictures if possible. Obtain the name of the police official and accident report number if applicable.

Contact Care Partners and inform staff if you are still able to proceed with your transportation. If not, they will arrange a follow-up transportation for the client(s). Complete a Volunteer Incident/Accident Report and return it within 24 hours to the Care Partners office. **A copy of the report form is attached.**

Care Partners of Cook County

CONFIDENTIALITY AND SECURITY POLICY

No personal information obtained from an individual in conjunction with the project shall be disclosed in a form, which identifies an individual without the written, and informed consent of the individual concerned. Care Partners of Cook County paid staff and volunteers must read and sign their acknowledgement of the following statement.

The protection of Care Partner's confidential information including the privacy and integrity of the information listed below is vital to the continued success of our organization. This information includes but is not limited to the following examples:

- Patient information or personal affairs.
- All information seen or heard regarding patients, directly or indirectly.
- The physical security of our office
- The security of all technology that may hold client information

Paid staff and volunteers of Care Partners shall be accountable to the following:

- Avoid accessing all information for which you do not have a need to know. Access only information as it relates to the essential functions of your job.
- Avoid discussing client information or sensitive business matters outside the circle of Care Partner's meetings even with family or other employees or volunteers who are not involved with the client's care.
- Keep any written documentation concerning patients secure.

Failure to recognize the importance of confidentiality is a breach of Care Partner's ethics and may be grounds for disciplinary action, including possible dismissal, but may also involve you in unwanted legal proceedings.

VOLUNTEER/STAFF ACKNOWLEDGMENT

I have read the above information and understand the importance of organizational security and confidentiality. I agree not to disclose or use the information I am entrusted with inappropriately.

VOLUNTEER/STAFF SIGNATURE

DATE

NAME (PRINTED)

Adult Protection

1. **Contact a Care Partners staff person** to report suspected abuse or neglect - Marnie at 387-3787, Kay or Christie at 387-3788
2. **MN Adult Abuse Reporting Center (MAARC) -- 844-880-1574**
Cook County Public Health and Human Services Office -- 387-3620 is also willing to help you make the report (ask for the intake worker).
3. **If the situation is life endangering, call 911.**

According to the Minnesota Elder Justice Center, "in general, elder abuse is any knowing, intentional, or negligent act by a caregiver or any other person that causes harm or a risk of harm to an older adult." Although abuse may be perpetrated by a stranger, there is usually an ongoing relationship, with an expectation of trust.

Cook County aims to help vulnerable adults live safely. To accomplish this, the County investigates reports of maltreatment and self-neglect. The County will also arrange services for vulnerable adults that help assure their safety.

Who is a Vulnerable Adult?

Persons living in Cook County who sometimes need adult protection services are 18 years or older and:

- Depend on institutional services (such as a nursing home, group home, foster care, or home health care.)
- OR
- Have a mental or physical infirmity or disability that impairs their ability to care for and protect themselves.

Types of Maltreatment

Abuse

- Physical or emotional: conduct, intended or not, that produces physical or emotional injury or pain.
- Verbal: words or gestures that threaten, harass, degrade or humiliate.
- Sexual: criminal sexual conduct, violation of prostitution statutes, or sexual activity between a staff person and a client or resident of a facility.
- Personal exploitation: forcing a vulnerable adult to perform services for the advantage of another.

Neglect

- Failure of a caregiver to provide necessary food, clothing, shelter, health care or supervision.

Self-Neglect

- Absence of necessary food, clothing, shelter, health care, or supervision.

Financial Exploitation

- A person with legal authority making unauthorized use of the vulnerable adult's resources, resulting in a detriment to the vulnerable adult.
- A person without authority using the financial resources of a vulnerable adult, regardless of detriment.

Maltreatment and Self-Neglect

Examples of abuse, neglect, and exploitation which may lead to intervention include:

- An elderly person with Alzheimer's disease is about to have their electricity shut off because they forgot to pay the bill.
- A confused and physically disabled person refuses critical medical care despite urging from friends and relatives.
- Children "borrow" money from an elderly parent, who then lives in a cold house to save money.
- A caregiver steals an elderly person's medications to feed his or her own addiction.

How to Report

1. If the situation is life threatening, call 911.
2. **If not, contact Care Partners staff first to discuss your concerns.** If they are unavailable, leave a message.
3. Reports should be made within 24 hours. If you do not hear back from Care Partners within that time, call the MN Adult Abuse Reporting Center (MAARC) **844-880-1574**.
4. Questions you may be asked when calling in a report:
 - What happened or is happening?
 - To whom did it happen?
 - When did it happen?
 - Where did it happen?
 - Who is responsible for the abuse, exploitation, or neglect?

If You Aren't Sure

When making a report, you don't have to be certain that someone is a vulnerable adult, or that maltreatment has legally occurred. If in doubt, report. You are responsible only for sharing your observations and concerns. Reports are sent to county Public Health & Human Services, and *they* will determine how best to use the reported information to protect and support the older adult. **Care Partners staff** or any of the following agencies can help you work through the decision to report:

- Cook County Public Health and Human Services: 218-387-3620
- Minnesota Elder Justice Center: 651-440-9312
- Violence Prevention Center: 218-387-1262

The Minnesota Vulnerable Adults Act provides immunity from civil and criminal liability when a report is submitted in good faith. Remember, the identity of the reporter is **always** kept confidential.

AGING AWARENESS

Our clients are all over the age of 60 and many are 80-90 years old. Understanding the changes that occur with age can help us better assist and communicate with the older members of our community.

VISION IMPAIRMENTS

We will not know if a client is bothered by common age-related vision problems. Assume that our clients have had to adapt to some sort of vision changes.

Pupil reaction time. As we age the muscles of the iris lose strength. The pupils become smaller and their reaction to light and dark becomes slower. Example—going from indoors to sunny outdoors.

Cataracts. Symptoms include blurry vision, faded colors, double vision, and difficulty seeing at night. According to the Mayo Clinic, about half of all 65-year-old Americans have some degree of cataract formation in their eyes.

Macular degeneration. Macular degeneration symptoms include a gradual loss of central vision needed to perform everyday tasks like driving or reading, and a reduced ability to see small visual details like fine print or patterns. Macular degeneration can make it very difficult to read or recognize faces, but peripheral vision remains unharmed.

When Assisting Clients

In Person:

- Always ask.
- If the client asks for your assistance let them know exactly how you will assist. (i.e., “I am going to take your right arm with my left arm.”)
- Never grab the person or move something without announcing what you are doing.
- Remember, a vision-impaired person has sight problems, not a hearing loss.
- Speak directly to the vision-impaired person and address him/her by name. Do not hesitate to use such words as see or look; persons with vision impairments use these terms.
- When walking with a visually impaired person, allow him/her to take your arm just above the elbow. Walk at a normal manner and pace.
- If you are writing something, use a dark marker with large print.

By Phone:

- Don't be surprised if the client has trouble reading print that you are able to see quite clearly
- Do your best to describe things that the client cannot clearly see

HEARING IMPAIRMENTS

There is no known single cause of age-related hearing loss. Most commonly, it is caused by changes in the inner ear that occur as we grow older. Our genes and past exposure to loud noise (such as from rock concerts or music headphones) may play a large role.

Hearing impairment is a broad term that refers to hearing losses of varying degrees from hard-of-hearing to total deafness. Hearing-impaired persons vary widely in their communication skills.

When Assisting Clients

In Person:

- You may not be aware that a client is hearing-impaired or deaf. Note if they are wearing a hearing aid, if you have to repeat yourself, or if you must speak louder than normal.
- Hearing impaired/deaf clients need to be able to see your face when you are speaking, so that they may read your lips. They also will be reading your expressions.
- Smile; this a warm and welcoming expression to clients.
- It is often more helpful to speak calmly, slowly, and clearly, than to raise your voice.
- If you are not certain how to assist your client, “just ask.”

By Phone:

- Always introduce yourself
- Speak slowly and clearly
- If in doubt, ask if the client is able to hear you well
- Try not to shout – consider making adjustments to phone placement or volume first

MUSCULAR AND SKELETAL CHANGES

Skeletal After the age of 30 our bones gradually deteriorate. The first few years after menopause, bone loss is especially rapid. Bone density decreases and bones become thinner and more fragile. Bones lose calcium and other minerals. Posture can become progressively hunched over as the spinal vertebrae and the discs between them become thinner and compressed due to loss of minerals and moisture. Joints may become inflamed and less flexible as fluid in joints decreases and cartilage erodes. This is especially common in knee and hip joints. Joints can become stiff due to mineral deposits (bone calcification), common in the shoulders. Movement slows down and may become limited and unstable. Risk of injury increases due to a combination of instability and brittle bones.

MUSCULAR AND SKELETAL CHANGES (cont.)

Muscles Our skeletal muscles lose about 20% of their mass by age 50 and by age 80 they can shrink by about 50%. Loss of muscle results in loss of mobility, agility, and flexibility, resulting in such problems as:

- General weakness
- Tendency to move at a slower pace
- Movement becomes stiffer and less flexible
- Hand grip strength decreases, making it harder to turn handles, open jars, or hold a rail
- Increased chance of losing balance
- More prone to developing arthritis
- Increased risk of injuries

Aging Skin The rate at which our skin ages, is determined both genetically and by external factors. Signs of aging are:

- Thin and transparent skin
- Loss of underlying fat, leading to hollowed cheeks and eye sockets
- Dry skin
- Uneven skin tone
- Insufficient sweating to cool the skin

When Assisting Clients

In Person:

- Communicate what you are doing, and move slowly
- Offer the bend in your elbow to lift and support clients, rather than grab their hands, wrists, or arms
- Spread your stance – feet shoulder width apart, knees slightly bent
- Have clients bear their own weight
- If applicable, make sure clients use their assistive devices, such as walkers or canes
- Avoid bumping clients' skin
- Pay attention to air temperature and client's comfort level —offer a blanket or fan

By Phone:

- Do not be in a hurry – let the client set the pace
- Be considerate of the extra time it may take for them to answer a question or do something (such as answer the phone.)

COGNITIVE IMPAIRMENTS

Although dementia and mild cognitive impairment are more common in older adults, even those who do not experience these conditions may experience subtle cognitive changes associated with aging. Because conceptual reasoning, memory, and processing speed decline gradually over time, clients may experience some reduced ability to process information or articulate their thoughts.

When Assisting Clients

- Always introduce yourself
- Give them plenty of time to respond to your questions and think things through.
- If you find they are struggling for words you can ask them if they would like you to help them with words.
- It also helps to be very concrete in descriptions, use simple sentences and address decisions one at a time.

STRESS/ANXIETY

Natural stress response has an effect on almost every organ and system in the body. Stress responses: our pupils dilate, sweat glands accelerate, heart beat accelerates, breathing becomes rapid, and adrenalin is released to give us energy. It is no wonder as we age we may not be able to handle as much stress, as actually our bodies are aging in that area also.

When Assisting Clients

- Move and speak calmly
- Do not hurry – let the client set the pace
- Be considerate of the extra time it may take clients to answer a question or do something
- Smile (a smile can even be heard over the phone!)
- Affirm and reassure
- Just ask, “How can I assist you?”

*Respect their independence and dignity
Don't presume anything
No matter what their difficulties, treat them as intelligent, wise people*

Care Partners Communication Policies

Volunteers should bear in mind that in many instances their actions and activities will reflect on CPCC and the work of CPCC.

Media Policy

In all instances a client release (in writing) must be obtained prior to using stories, video, or photographs in which the client may be identified.

Social Media Policy

Social media includes personal blogs and other websites, including Facebook, LinkedIn, Twitter, YouTube or others. These guidelines apply whether employees, volunteers, or Board members are posting to their own sites or commenting on other sites:

- Confidential or proprietary information about CPCC may not be shared and client privacy must be maintained.
- Write in the first person and where a connection to CPCC is apparent, make it clear that you are speaking for yourself and not on behalf of CPCC. In those circumstances, include this disclaimer: "The views expressed on this [blog; website] are my own and do not reflect the views of CPCC." Consider adding this language in an "About me" section of your blog or social media profile.
- If you identify your affiliation to CPCC, your social media activities should be consistent with CPCC's standards of professional conduct.
- If you communicate in the public internet about CPCC or CPCC related matters, you must disclose your connection and your role with CPCC.
- Be professional, use good judgment and be accurate and honest in your communications; errors, omissions or unprofessional language or behavior reflect poorly on CPCC, and may result in liability for you or CPCC. Be respectful and professional to fellow employees and clients.
- CPCC strongly discourages "friending" of clients on social media websites, except in unusual circumstances such as the situation where an in-person friendship pre-dates the client relationship.
- CPCC does not endorse people, products, services or organizations.
- Unless approved by CPCC, your social media name, handle and URL should not include CPCC's name or logo.

Care Partners Distracted Driving Policy

Care Partners is committed to keeping our clients and volunteers safe and holding our employees to the highest standard of safety. Therefore:

- Care Partners employees and volunteers may not use handheld or hands-free mobile electronic devices or voice features when operating a motor vehicle on behalf of Care Partners.
- Global Positioning System (GPS) or navigation devices must be affixed to or installed in a vehicle and programmed prior to departing. If adjustments are needed while driving, pull over to a safe place and put the vehicle in "Park" to make the appropriate adjustment.
- Consider turning off or silencing wireless phones or other devices before starting the vehicle.
- Pull over to a safe place and put the vehicle in "Park" if a call must be made or received while on the road.

Failure to follow this policy by using handheld or hands-free mobile electronic devices or voice features while driving as a Care Partners employee or volunteer will result in a verbal warning, with further infractions resulting in written warnings or dismissal.

I have read and fully understand the terms of this policy and agree to abide by them.

Employee/volunteer signature

Date

Printed name of employee/volunteer

[Return to Manual](#)

Wheelchair Basics



Care Partners can provide rides for persons who use a wheelchair, but they must be able to do their own transfers. Drivers may provide gentle help for balance, but they are not responsible to provide weight-bearing assistance.

Care Partners has a wheelchair stored in our office which can be used for a client's comfort and ease of transport from the vehicle to the appointment. Drivers will be informed about the need for wheelchair use during the initial ride request, so they can make an informed decision about accepting or passing on the assignment.

You may need to be able to fold up and load a manual wheelchair into your car. Remember to ensure that the chair's breaks are on before the client transfers to the wheelchair.

If a client is unable to do their own transfers, a trained escort is required to ride along to provide the assistance.

If you are asked to push a wheelchair:

- Watch the surface ahead in order to avoid or compensate for cracks, holes, small objects, or a change in surface texture or grade.
- When pushing, stay close to the wheelchair. Push with your entire body weight.
- When pushing, keep your arms near your body and your elbows bent.
- To ascend a curb
 - Position the wheelchair to face the curb.
 - Carefully tip the wheelchair back.
 - Maintain the tilt while slowly rolling the wheelchair forward until the front wheels can rest well over the curb.
 - Roll the rear wheels up the curb while gently lifting the handles. The wheelchair user can assist by pushing forward on the push rims.
 - Slowly lower the wheelchair to the ground.
- To descend a curb
 - Position the wheelchair backwards so the back wheels are at the edge of the curb.
 - Step down off the curb while maintaining hold on the handles.
 - Slowly control the descent of the rear wheels down along the curb.
 - Tip the wheelchair back slightly and roll it backward to ensure clearance of the front wheels and footplates. The wheelchair user can assist by leaning their trunk forward.
 - Slowly lower the wheelchair to the ground.
- Don't let the wheelchair run out of control. Consider taking slopes backwards so you can hold back the wheelchair. Always check FIRST!
- If your passenger says stop, STOP immediately.
- If someone speaks to you when they should speak to your client, tell them so.



Volunteer Incident/Accident Report

If there is any sort of incident involving injury to yourself or your client, or an incident involving your vehicle or the client while you are transporting them, contact Senior Services Coordinator or Care Partners Program Director immediately at 387-3788.

Please fill out the form below and return it to Care Partners office within 24 hours.

Volunteer name _____

Date of incident _____ Time of incident _____

Location of incident (address, mile marker, cross-streets) _____

Name of client (if involved) _____

Name of injured party (if any) _____

Description (nature and extent) of injury _____

Witnesses to incident:

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Were police or emergency services called? Yes No

If yes, name of the police official or emergency responder _____

Accident report number (if applicable) _____

Describe the incident in your own words with as much detail as possible. (Use separate sheet of paper if necessary.)

If the incident involved a vehicle, complete the other side of form.

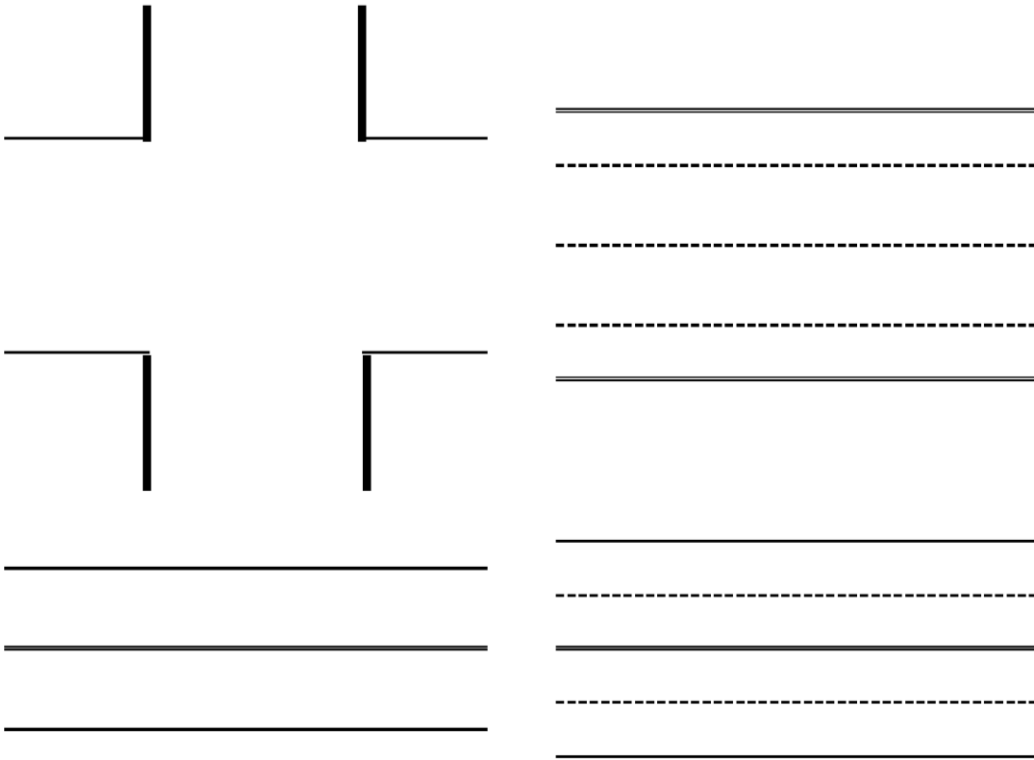
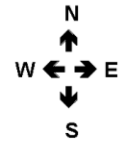
Volunteer Signature _____ Date _____

For incidents involving a vehicle

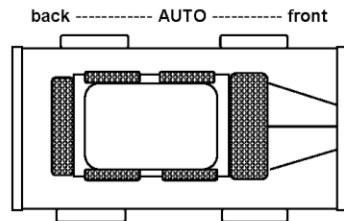
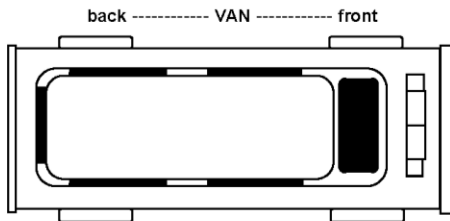
On the diagrams below, please draw the accident.
 (Be sure to include any stop signs or traffic signals.)

Legend:

- V 1 ▶ Your Vehicle
- V 2 ▶ Other Vehicle (if any)
- V 3 ▶ Other Vehicle (if any)



On the overhead diagrams below, please indicate the location of damage to *your* vehicle, if any.



If another vehicle was involved:

Name of other driver _____

Driver's address _____

Driver's phone _____

Driver's insurance company _____

Policy number _____

Damage to other vehicle _____