



Chore 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 acknowledgement 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. 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 and 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.

Insurance/Liability Coverage

Volunteers are typically covered by client homeowner's insurance. Care Partners holds additional liability coverage.

Chore Program Overview

The Care Partners Chore program assists people 60 years of age and older with short-term projects around the home. Types of assistance include replacing light bulbs, yard and garden work, minor carpentry, organizing, and cleaning. 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 number of hours needed to complete the chore. 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. Chore clients receive a letter at the end of the month calculating their cost share, but no one is refused service for inability or unwillingness to contribute.

Chores We DO NOT Provide

- Any work that requires a building permit
- Financial services/budgeting/writing checks/handling money/forms assistance
- Medication administration
- Personal care of any nature
- Mobility assistance
- Work that involves using lawn chemicals
- Carpentry (fixing holes, drywalling, replacing rotted wood, etc.)
- Electrical (Installing GFIs or new outlets, etc.)
- Chopping /cutting wood
- Plumbing
- Cement /masonry (refurbishing walkways, steps, brickwork, etc.)
- Help with moving a household (except for packing boxes)
- Any chore that requires work on a roof or ladder that is higher than one story

Supplies/Materials for Chore

Clients are responsible for providing any supplies and materials needed to complete a chore. If a client is not sure what is needed, a volunteer may be able to meet with the client and help identify necessary supplies or materials. Care Partners may also be able to assist with pick up or delivery of necessary supplies from a local retailer. If there is another issue with the client being able to provide the supplies or materials, the Senior Services Coordinator will work with the client for a solution.

Equipment for Chore

The client is responsible for providing any equipment needed to complete a chore. However, volunteers often feel safer and more comfortable using their own equipment, and they are welcome to do so. If volunteers use their own equipment, they assume risk and expense related to that equipment.

Safety

Chore volunteers may potentially use machinery or ladders or perform other duties that require extra safety precautions. The following handouts have been included for your review:

- [Ladder Safety](#)
- [Do You Know How to Lift and Carry Safely?](#)
- [Snow Blower and Shoveling Safety](#)
- [Mowing Tips](#)

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. To reduce the risk of illness for clients and for themselves, Care Partners Chore volunteers are asked:

- 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 chore or delivery.
- 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.
- Clean and disinfect any tool that belongs to the client immediately after use.
- If shopping on behalf of a client, disinfect the shopping cart (use disinfecting wipes if available) and if possible, use touchless payment.
- After leaving a store or other public building, use hand sanitizer.
- After the chore or delivery is complete, 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.

Emergency Procedures

There are certain emergency situations that may be encountered while providing chore services for or with a client. The client may:

- Fall and be unable to get up

- Become injured
- Lose consciousness

Once you are aware of an emergency, call 911 immediately. Unless the affected individual can indicate emergency contact information, let emergency personnel know that Care Partners staff will be the main point of contact. As soon as the situation is under control, call Care Partners at 218-387-3788 and speak with any available staff person. We may have relevant information about whom to contact – a social worker, emergency contact person, etc.

If a volunteer or a client is injured or requires emergency assistance while completing a chore, the volunteer must complete a Volunteer Incident/Accident Report and return it to the Care Partners office within 24 hours. **A copy of the report form** is attached.

Care Partners Senior Chore Program volunteers are not licensed medical personnel, so always remember not to move clients, as this might do more harm.

Chore & Delivery Process

Communication of Need & Initial Assessment

Once the Care Partners Senior Services Coordinator becomes aware of a need for assistance, they will work with the client to determine the feasibility and scope of the project. An initial assessment may be made from information and/or photos provided by the client, or Care Partners staff may make an on-site visit. If the project seems within the parameters of the Chore Program, the Coordinator will contact volunteers via phone or email regarding interest and availability for completing the work. After a volunteer is found, the Senior Services Coordinator will arrange a time for the volunteer to meet with the client for assessment and possible work on the chore.

Volunteer Assessment and Project Completion

The volunteer will meet with the client at the agreed-upon time and assess the task. If the volunteer is comfortable with the work, they will complete the project or do as much as possible within the prearranged timeframe (usually 1-2 hours.)

If more time is needed to complete the project, the volunteer can:

- Stay and finish the chore if this is acceptable to both volunteer and client **OR**
- Schedule another time with the client to complete the project (please inform Care Partners about the additional meeting) **OR**
- Ask Care Partners to find another volunteer to finish the project.

Unexpected or Additional Work

Although rare, it is possible to arrive at a work site and discover that what you are being asked to do is significantly different than what you expected. For example, the task may be more complicated or extensive than originally indicated, or the client may approach you to do work outside the assigned job. If upon assessment you are no longer comfortable with the project, let the client know that Care Partners staff will call them as soon as possible to discuss and possibly reschedule the work, then contact Care Partners immediately.

Contact with Client and Timeliness

When contacting any client, identify yourself clearly and let them know your affiliation with the Senior Chore Program. Also, make a point of contacting clients at a reasonable hour. A call late in the evening can be quite upsetting to some older adults.

Complete the chore or delivery within the agreed-upon time frame. If you must cancel or are going to be late, it is your responsibility to reschedule the appointment with the client and notify them of the change, on the same day. You must also notify the Care Partners Staff of the change. If a client is not home at the scheduled time, continue trying to contact and reschedule the appointment.

Do not provide transportation for a client. If a client needs transportation, they should contact Care Partners Senior Rides.

Form Completion

Report the completion of your assistance and/or delivery within 2 business days by going to the Care Partners website (www.carepartnersofcookcounty.org) and clicking on the "Report a Volunteer Service" button at the bottom of the page. Contact the Senior Services Coordinator or Volunteer Coordinator if you need assistance completing the form.

Reimbursement

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.

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 & Best Practice

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

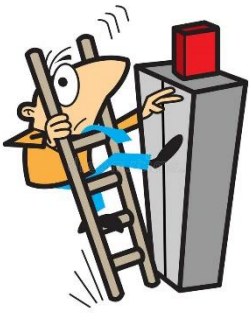
In all instances a client release (in writing) must be obtained prior to using stories, video, or photographs in which the client may be identified.

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.

Ladder Safety



According to the World Health Organization, the United States leads the world in ladder deaths. Each year, there are more than 164,000 emergency room-treated injuries and 300 deaths in the U.S. that are caused by falls from ladders. Most of those deaths are from falls of 10 feet or less. And over the past decade, the number of people who have died from falls from ladders has tripled.

So while you might think that you already know how to use a ladder safely, it's always a good time to review ladder do's and don'ts.

- Always select the correct ladder for the job. That's one that extends at least 3 feet over the roofline or working surface.
- Always place your ladder on level and firm ground. Use leg levelers under the ladder to level uneven or soft ground. Leg levelers are devices that you can buy at a hardware or home improvement store.
- Make sure the ladder can support both your weight and the load you are putting on it by checking the ladder's maximum load rating.
- Make sure your straight and adjustable ladders have both slip-resistant feet.
- Set up straight, single or extension ladders at about a 75-degree angle. To test if you have the correct angle, stand up straight with your toes touching the feet of the ladder as it leans away from you. Extend your arms in front of you. Your palms should touch the top of the rung that's at shoulder level.
- Don't use a metal ladder near power lines or electrical equipment. Stick with wood or fiberglass ladders in these situations and use extra caution. And no ladder should ever touch a live electric wire.
- Check all rung locks and spreader braces on your ladder to make sure they are set.
- Have a helper hold the bottom of the ladder.
- Keep ladders away from a door that can be opened.
- Only allow one person on a ladder at a time.
- Center your body between the rails of the ladder at all times. Leaning too far to one side while working is a no-no and can cause you to fall. If you were to have a belt on, the buckle should never be outside of the right or left rail of the ladder.
- Do not stand on the top three rungs of a straight, single or extension ladder.
- Stay off of the ladder's top step and bucket shelf. Labels on ladders warn you not to stand on them as well. Don't try to climb or stand on the rear section of a stepladder.
- Only use a ladder for its intended purpose. And follow the ladder's instruction labels.
- When you're done with the ladder, put it away immediately. Never leave a raised ladder unattended.

Permission to reprint granted by the National Safety Council.

Do You Know How to Lift and Carry Safely?

Lifting and carrying are power jobs that require special care and training to prevent back injuries.

Back injuries accounted for 177,580 of the total 905,690 injuries in the private sector in 2012, according to *Injury Facts 2015*. Back injuries can be difficult to treat and may result in lengthy and expensive rehabilitation.

Whether lifting at home or at work, make an effort to take special care of your back. The National Safety Council has a number of suggestions to prevent lift-and-carry injuries and keep your back strong and healthy.

Power Lifting Tips

- Protect your hands and feet by wearing safety gear
- Size up the load and tip it on its side to see if you can carry it comfortably
- Get help if the load is too big or bulky for one person
- Check for nails, splinters, rough strapping and sharp edges
- Make sure your footing is solid and keep your back straight with no curving or slouching
- Center your body over your feet, get a good grip on the object and pull it close to you
- Pull your stomach in firmly and lift with your legs, not your back
- If you need to turn, move your feet, do not twist your back

Oversized or Tough Lifting Jobs

- Do not try to carry a big load alone; ask for help
- Work as a team by lifting, walking and lowering the load together
- Let one person call the shots and direct the lift
- Use proper mechanical devices for heavy loads
- Use a step stool or sturdy ladder to reach loads above your shoulders, get as close to the load as you can and slide it toward you
- Do all the work with your arms and legs, not your back
- For loads under racks and cabinets, pull the load toward you, try to support it on one knee before lifting, then use your legs to power the lift

Always use your stomach as a low-back support by pulling it in during lifting. Remember, a strong, healthy back helps you enjoy life. Avoid injuries by making it a full-time job to take care of your back.

For more information on the [ergonomics of lifting](#), visit the Occupational Safety & Health Administration website.

Source: <http://www.nsc.org/learn/safety-knowledge/Pages/Lift-and-Carry.aspx>

Safety tips for using snow blowers:

- Stop the engine and use a long stick to unclog wet snow and debris from the machine. Do not use your hands to unclog a snow blower!
- Always keep hands and feet away from all moving parts.
- Never leave the machine running in an enclosed area.
- Add fuel to the tank outdoors before starting the machine; don't add gasoline to a running or hot engine. Always keep the gasoline can capped and store gasoline out of the house and away from ignition sources.
- If you have an electric-powered snow thrower, be aware of where the power cord is at all times.



Consumer Product Safety Commission Publication 5117



To shovel safely:

- Do not shovel after eating or while smoking.
- Take it slow and stretch out before you begin.
- Shovel only fresh, powdery snow; it's lighter
- Push the snow rather than lifting it.
- If you do lift it, use a small shovel or only partially fill the shovel.
- Lift with your legs, not your back.
- Do not work to the point of exhaustion.
- Shoveling can put a big strain on the heart. Don't pick up that shovel without a doctor's permission if you have a history of heart disease. If you feel tightness in the chest or dizziness, stop immediately.



National Safety Council



Mowing tips:

- Wear sturdy footwear with good tread on the sole to ensure good footing while mowing, and to help protect your feet in case they do come in contact with the lawnmower engine housing or blade.
- Protect your eyes and ears—wear shatter-resistant glasses or sunglasses, and ear muffs or plugs while mowing.
- Keep children and pets away from the area you're mowing.
- The American Academy of Pediatrics recommends children should be at least 12 years of age before operating a push lawn mower, and be 16 before using a riding lawn mower.
- Clear the yard of objects—stones, garden tools, etc. that could be thrown by the mower and cause injury. Watch for items like wire or rope that could tangle in the blade and prevent it from turning—efforts to release stuck blades are a common source of lawnmower injuries to the hands.
- Fill the gas tank before mowing; never refuel when the engine is running or hot.
- Adjust the cutting height before you start the engine, never when the blade is in motion.
- Shut off the motor when you need to check the engine or the undercarriage of the mower.
- Never insert hands or feet into the mower to remove grass or debris. Even with the motor turned off, the blade can still be spinning. Use a stick or broom handle instead.
- Always keep guards, shields, switches and safety devices in operation.



If you use a walk-behind mower:

- Avoid mowing on wet grass, when your feet can slip under the mower and get caught in the blade.
- Push the mower forward, never pull it backward.
- If mowing on slopes, mow across the slopes, not up and downhill.

If you use a riding mower or tractor:

- Never allow children to sit anywhere on the mower or on your lap while the machine is on, and make sure they are away from the mowing area when you are mowing.
- Avoid sudden turns; slow and wide turns reduce the chance of a tip-over.
- If the machine stops when you are moving uphill, shut off the blade first, then back straight down the hill slowly. Before backing up, look down and behind the machine.
- Drive up and down slopes, not across (which is the opposite of what is safest with a walk-behind mower).



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.

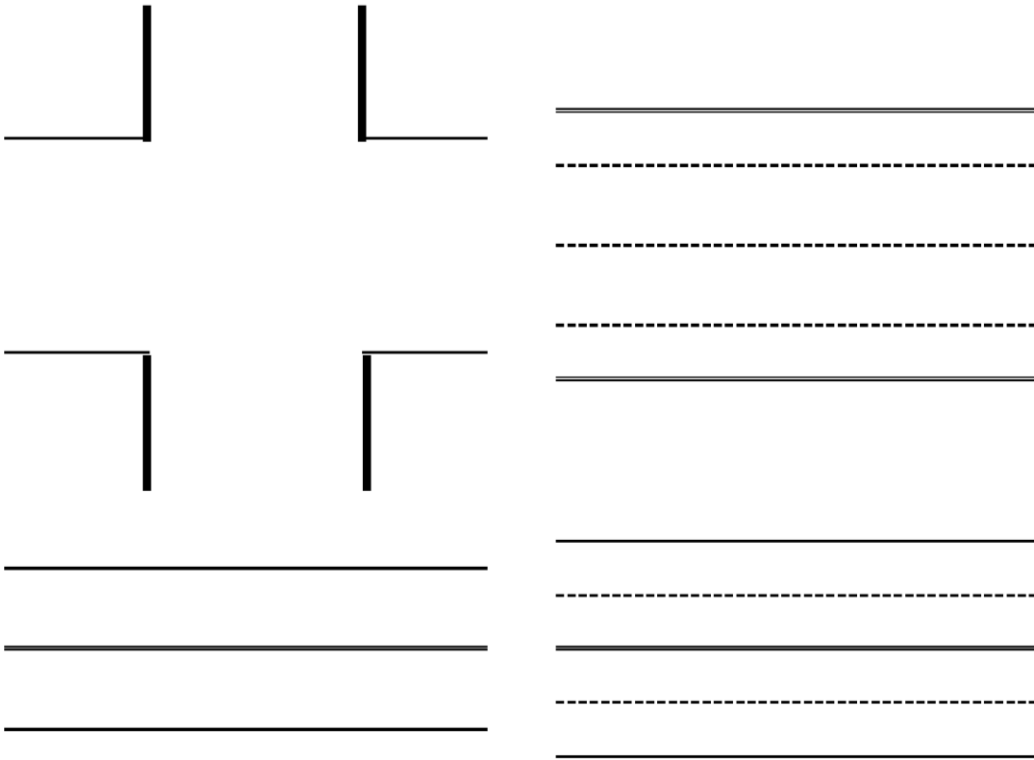
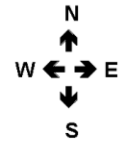
Volunteer Signature _____ Date _____

For incidents involving a vehicle

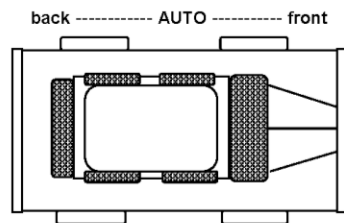
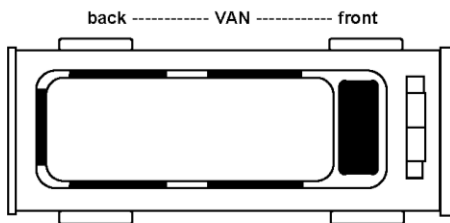
On the diagrams below, please draw the accident.
 (Be sure to include any stop signs or traffic signals.)

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 _____