

# *It Can Work: A Volunteer Services Advisory Committee*

by Sharon Warner

Communication is always of major importance in dealing with any management function. With this in mind, the American Hospital Association suggests that Volunteer Services Departments establish a Volunteer Services Advisory Committee as a vehicle for problem solving and communication. In The Volunteer Services Department in a Health Care Institution, the AHA suggests:

Establishment of such a group for the volunteer services department can have many positive effects on the quality as well as the quantity of volunteer services in a health care institution.

As both a planning and evaluative body, the advisory committee is of particular value during the embryonic stage of developing a new department and in the reorganization of a department.

Grandview Hospital in Dayton, Ohio, a 452-bed osteopathic hospital with a separate ambulatory care center, has a professional volunteer structure thanks to a Volunteer Services Advisory Committee developed two years ago. The Committee provides consultation and guidance to the Department of Volunteer Services in order to achieve the most effective use of volunteers in services to patients, visitors, and staff of Grandview Hospital. This includes exploring new areas of service for volunteers, evaluating services currently provided by volunteers, strengthening the relationship between Volunteer Services and other hospital departments, and developing policies and procedures for the department.

## MEMBERSHIP

The Volunteer Services Advisory Committee consists of ten to eleven members. The Committee is well-rounded, with participants having a direct relationship with and concern for the volunteer program. Members were selected and contacted personally by the Volunteer Services Director. The need for their personal participation as Committee members was explained, as well as how their department function impacted on Volunteer Services.

The criteria for selection of participants were those factors having a direct bearing on the volunteer program: (1) the cost-saving features of the volunteer program; (2) the exposure of volunteers to the largest group of professional hospital people (medical and nursing personnel); (3) the public relations image of the volunteer in the hospital and community (4) the need for awareness of

volunteers at the upper management level; (5) the expansion of communications between major volunteer groups within the hospital; and (6) the concerns of the volunteers themselves.

With these factors in mind, the following personnel were chosen to represent the hospital on the committee: the Vice President of Finance; the Assistant Vice President of Nursing Services; the Executive Director of the Dayton District Academy of Osteopathic Medicine; the Director of Public Relations; the Assistant Vice President of Hospital Services; and the Director of Volunteer Services. Note that the department of Volunteer Services reports to the Assistant Vice President of Hospital Services.

The expansion of communications between major volunteer groups meant involving the Grandview Hospital Guild and the Auxiliary to the Dayton District Academy of Osteopathic Medicine. These two groups are fund raisers and also are dedicated to the hospital and its principles. They report directly to the President of the hospital. The Grandview Hospital Guild consists of dedicated men and women who construct Raggedy Ann/Andy dolls and sell baby pictures as fund raising activities. The Auxiliary consists of physicians' wives who operate the Gift Shop at the main hospital as well as the John Belville House Gift Gallery at the Ambulatory Care Center located south of Dayton. Proceeds from these two large gift shops are returned to the hospital for decorating and special projects. Both groups deserved to be represented on the Committee since they are instrumental in meeting some of the hospital's funding needs.

Other volunteers chosen to be Committee participants were those who dealt with visitors, patients and employees. These volunteers, one of whom had been a patient numerous times, provided the committee with different viewpoints. One volunteer selected was a Surgical Host (dealt with visitors who had friends and/or relatives having surgery), one was the "mail" volunteer (dealt with patients), and another volunteer did office work (dealt with employees). The office volunteer took minutes at meetings.

Later a second volunteer program was developed at our Ambulatory Care Center and a representative from the Ambulatory Care Center's personnel staff was asked to participate on the Committee.

The emphasis on the entire group of participants was a representation of all major areas having impact on the Volunteer Services Department. This proved to be one of the most valuable building blocks for the Committee.

## ACTIVITIES

The Volunteer Services Advisory Committee met

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once monthly for one hour and later once quarterly. The Assistant Vice President of Hospital Services said of the Committee: "The Volunteer Services Advisory Committee has served as a valuable forum in bringing together volunteers, the department served by volunteers, and Administration. Using this interdisciplinary approach has assisted the department in setting goals and direction within the framework of the philosophy of the Volunteer Services Department. The Committee is a valuable resource for problem solving and enhances the role of the volunteer in the hospital.

Issues discussed during the past two years of the Committee's existence included: the purpose and structure of the committee; philosophy and guidelines for the Volunteer Services Department; evaluation of assignments presently in existence (with some being eliminated); relationships between the hospital and volunteer groups within and outside the hospital; development of criteria for designing and evaluating new volunteer assignments; definitions of the techniques and strategies to be used for recruitment; and reasons for volunteer turnover.

The Committee's most valuable project was establishing guidelines for the Volunteer Services Department, detailing the philosophy of the Department as it relates to the hospital's personnel, patients, and volunteers (also taking into consideration the legal aspects of all concerned). Nine months of intensive work went into these guidelines.

The first task was interpretation of the American Hospital Association's philosophy of a Volunteer Services Department:

...to assist the institution in the delivery of comprehensive health care to the community by obtaining and retaining an adequate number of competent and satisfied volunteers to augment the services of the institution.

This philosophy was interpreted from the standpoint of legal issues, employment rights, patients' rights, and the important role of the hospital in the community. These interpretations were arrived at by analyzing the twelve Grandview Hospital volunteer assignments being performed; by defining "volunteer" as stated by the American Red Cross, Retired Senior Volunteer Program, Voluntary Action Center and the American Hospital Association; and by reviewing results of an in-house survey on volunteers taken six months previously. The research involved personal contacts with these outside organizations, researching professional volunteer journals, reports and policies, and designing transparencies which would project these points in a clear, concise manner for discussion. Discussion then centered around finding a happy medium between patients' rights, professional medical assistance, and the volunteer's helping attitude.

The result was an interpretation of the American Hospital Association guidelines to mean: (1) obtaining and retaining an adequate number of volunteers who would adhere to the hospital's rules and regulations (quality over quantity concept); and (2) meeting the needs of the community with regard to establishing volunteer assignments for the handicapped, career seekers, the homebound, students and senior citizens.

These guidelines also incorporated the rights of volunteers by assuring them of a good experience. This was defined as providing responsible work whereby results can be seen and usefulness felt, creative learning experiences, respect as hospital contributors, and establishment of policies and procedures for safety, infection control, accident prevention, etc. With regard to legality, we incorporated adherence to local, state, and federal laws, and the recruitment and placement of volunteers in accordance with the hospital's equal opportunity, affirmative action and labor relations policies.

In concern for the rights of patients, volunteers were not to be regularly assigned to perform services indispensable to the operation of the institution. Employees' rights were considered by not assigning a volunteer to permanently perform major assignments alongside an employee working in a comparable position.

These guidelines alone justified the work of the Committee and its continued existence. The Advisory Committee's representative from the Auxiliary stated: "From my perspective, these meetings have given us all the necessity for sorting out priorities. It is necessary to deal with reality when you have a limited number of volunteers. We have gotten to know each other and have a greater sense of cooperation and respect."

Pre-meeting arrangements were carefully handled in detail. Most importantly, the motivation of the participants was maintained by proper utilization of their time, organization of the meetings, and an atmosphere of professionalism. All this contributed to the success of the Committee. Allowing for socialization during the meeting and knowing in which direction the Committee would be heading on an issue were also of prime importance.

## CONCLUSIONS

As a result of the Grandview Hospital experience with a Volunteer Services Advisory Committee, certain spin-offs may be anticipated by others attempting this route. These include: credibility of the Director of Volunteers as a professional manager and of the Volunteer Services Department as a whole; recognition of volunteers and the Volunteer Services Department by all concerned; improvement of communication among hospital departments; alleviation of major volunteer-related problems; and responsibility being shared. These are the major justifications for establishing an Advisory Committee.

The impact on day-to-day managing included giving the Volunteer Services Director a stronger rapport with "important people" influencing the department, after only six months of being in that position. Recognition as a professional manager, awareness of where the communication problems existed, and guidelines to be used as a working tool were also of importance in the day-to-day managing of the volunteer program.

Since all volunteers were advised of the Committee's existence and progress, a feeling of "concern for them" increased and resulted in an improved feeling of closeness and cooperation. We were now working as a team!