Volunteer Guidance: Restrictions and Resuming Volunteer Services

Updated June 7, 2021

What’s Changed: Updated guidance to include guidance for hospice volunteers.

Scope

Please refer to Vaccine Clinic Staffing Guidance for guidance regarding volunteers serving the COVID-19 Vaccine Clinics.

Please refer to Guidelines for Resumption of Worship Services and Sacraments within Care Facilities for all guidance for ministerial volunteers.

Hospice programs have specific Medicare Conditions of Participation requirements related to volunteer services. Please go directly to Hospice Volunteer Services for hospice volunteer guidance.

Background

Volunteers are essential members of MercyOne and their safety is paramount under the current pandemic of COVID-19. Consistent with CDC guidance on physical distancing in relation to COVID-19, on Friday, March 20, 2020, MercyOne and its ministries suspended all volunteer activities, unless qualified as an extraordinary circumstance.

This Guidance was established and based upon best evidence from previous known pathogen transmissions and outbreaks; community transmission thresholds derive from CDC definitions. The original guidance, however, but does not take into account the effect of ongoing vaccination, in addition to previous natural infection-related immunity due to COVID-19.

While it is recommended that you not move to resuming volunteer services until case rates drop below the moderate-high threshold (100 cases per 100k population), it is recognized that based on local transmission patterns, ministries may determine that it is in the best interests of the community to resume volunteer services before the threshold is met.

Resumption of volunteer services must be approved by local or regional Incident Command leadership.

Volunteer Requirements, Regardless of Community Transmission Rate

- Adhere to the vaccination guidelines below
  - Community transmission greater than 50 cases of COVID-19 per 100,000 population: all volunteers must be fully vaccinated at least two weeks before beginning volunteer service
    - There are no exceptions to the vaccine policy.
  - Community transmission less than 50 cases per 100,000: vaccination not required
• Adhere to safety guidelines and must wear face covering properly at all times
  ○ No exceptions for face coverings. Volunteers must be able to cover their face to serve in the facility.

• Adhere to the use of additional PPE where needed and requested
  ○ Ministries must provide and document training in donning and doffing of masks/face covers, hand hygiene, physical distancing etc. **Volunteers must observe and adhere to all requirements while serving in a MercyOne facility.**

• Maintain physical distance (6 feet) at all times

• Not congregate in common public areas (cafeteria, lobby, for example). No groups larger than 5.

• Volunteer privilege will be revoked if any noncompliance noted (see also Guidance-for dealing with persons who refuse to wear required mask or other PPE)

NOTE: If any suspected transmission of COVID-19 within the ministry, the ministry must return to more restrictive volunteer activities until outbreak fully investigated and mitigation steps are taken.

**Thresholds**
Established thresholds are based on CDC definitions of community transmission. **Community Transmission** refers to the prevalence of COVID-19 within the local community and refers to the number of reported cases per 100,000 in county population. Refer to local executive leadership for assistance with identifying the community transmission rate.

**Moderate - High Community Transmission***
Volunteer services may resume prior to a local ministry dropping below the community transmission rate of 100 cases per 100,000 in population.

Community transmission greater than **50 cases of COVID-19 per 100,000 population:** all volunteers must be fully vaccinated at least two weeks before beginning volunteer service
  ○ **There are no exceptions to the vaccine policy.**

Facilities and Volunteers – must exclude access to the following areas for volunteers:

1. COVID/PUI units and clinics
2. ED
3. ICU
4. OB/L&D
5. Pediatrics/NICU
6. Specialty units (i.e. Oncology, Transplant, etc.)

**Moderate or Low Community Transmission***
Community Transmission **less than 50 cases of COVID-19 per 100,000 population:** vaccination not required

Facilities and Volunteers – must exclude access to the following areas for volunteers:

1. COVID/PUI units and clinics
2. ED

*See CDC website for [Community Indicators at the County Level.](https://www.cdc.gov/coronavirus/2019-ncov/community/indicators/index.html)
Hospice Volunteer Services

These guidelines only apply to volunteers of MercyOne hospice program

The Medicare Hospice Conditions of Participation state that volunteers under the jurisdiction of the hospice are defined as employees per 42 CFR 418.3(2)(3).

Volunteers must provide day-to-day administrative and/or direct patient care services in an amount that, at a minimum, equals 5 percent of the total patient care hours of all paid hospice employees and contract staff. 42 CFR 418.78(e)

Volunteers should be encouraged to get vaccinated and can voluntarily disclose vaccination status, but they are not required to be vaccinated in order to provide volunteer services.

Administrative Services

- Where possible, administrative tasks should be performed remotely during the Public Health Emergency.

- Volunteers providing administrative support must adhere to the same COVID-19 guidance as other hospice colleagues providing services in the same setting.

Services in the patient's home, in a nursing facility or provided in a hospital setting

- Volunteers must use the same Personal Protective Equipment (PPE) and follow Infection Prevention measures dependent upon the tasks they are performing. See the PPE Guidebook for specific guidance.

- The hospice must provide and document training in Infection Prevention and Control including donning and doffing of masks/face covers, hand hygiene, physical distancing etc.

- Volunteers must observe and adhere to all requirements of the facility in which services are being provided unless they are less restrictive than MercyOne guidance. In these circumstances, the volunteer will follow the more restrictive guidance of the two.