

HOSPITAL (NON-VA)

PREFACE

The Hospital Program of the Disabled American Veterans Auxiliary was designed to give its members the opportunity to fulfill the "Purpose" of our organization by expressing their personal concern for our wounded, injured, or disabled veterans and their families through volunteer service in or for (Non - VA) work.

Non-VA service is activity performed at our general hospitals, nursing homes, rest homes, state hospitals and soldiers' homes to raise the morale of the ill and depressed during times of crisis. Those members should be given recognition for hours, donations, entertainment, etc.

Participation in the Hospital Program justifies our existence as good auxiliary members of the DISABLED AMERICAN VETERANS AUXILIARY.

RESPONSIBILITIES OF:

Unit Commanders, State Department Hospital Chairmen, Unit Hospital Chairmen, and Volunteers.

A. Unit Commanders will:

1. Appoint a hospital chairman.
2. Promote the Hospital Program within the unit.
3. Assist in recruiting volunteers.
4. Encourage participation and donations.

B. State Department Chairmen will:

1. Compile information for a report from annual unit reports submitted which indicate each unit's activity in hospital work within the state.
2. Present these reports at the state convention to be judged for the best

submitted according to membership categories.

3. Serve as the Chairman of the convention committee.
4. Report to the convention body on the information received and the results of the judging.

C. Unit Hospital Chairmen will:

1. Assist to initiate and help to promote projects and various programs.
2. Encourage volunteers within the unit.
3. Coordinate all projects with the health care facility where projects are to take place.
4. Keep an accurate account of all hours, miles traveled, projects, services and donations of the unit and its volunteers.
5. Complete an annual report using the Hospital Report (Non-VA) form sent out to each unit by the state department.

D. A good volunteer should be:

Congenial
Kind
Tactful
Honest
Dependable
Loyal
Able to listen
Tolerant
Proud of their work
Able to work under supervision

E. Duties of a good volunteer:

1. Should receive the Volunteer's Pledge. (See last part of section.)
2. Should become familiar with proper procedures and the nature of assignments.
3. Set the time they are able to give. (hour(s), day(s) or week(s), etc.)

4. Always show identification as a Disabled American Veterans Auxiliary Volunteer by wearing the volunteer pin or badge which is furnished by most hospitals.
5. Keep an accurate record of duties, hours involved, miles traveled, donations given, etc.
6. Report these duties, hours, miles, etc., at each monthly meeting of the Unit and to the Unit Hospital Chairman.

F. Types of Volunteers:

Regular Volunteers-

1. Those who serve in Non-VA Hospitals, nursing homes, rest homes, state hospitals or soldiers' homes.
2. Workers who serve a specified number of hours within a given period – such as four hours a day or one day a week.
3. One who never replaces a paid employee, but does work that would not have been done had it not been performed by a volunteer.

Sponsored Volunteers-

Those who do volunteer work, and do it under the name of the DAVA, but who are not members of any DAVA unit. These volunteers should be identified as "Sponsored by the DAV Auxiliary."

Other Types of Volunteers-

Those who are unable to provide service at or in a health care facility due to distance, health or various reasons, but who do work for them such as sewing lap robes, making kits, collecting books, baking treats, etc., for the patients.

Junior Member Volunteers-

Junior members can volunteer to:

- Feed patients
- Make beds
- Run errands
- Amuse children
- Write letters

- Make table favors
- Wrap gifts
- Sing in groups
- Put on skits
- Fill in wherever needed

REMEMBER: The hours and work contributed by junior members shall not be counted on the Unit Hospital Report. IT MUST BE COUNTED ON THE JUNIOR ACTIVITIES REPORT. Unit recognition is a way of saying "Thank You" for their valued participation in the Hospital Program.

RECOGNITION FOR VOLUNTEERS

Qualification for BADGES:

1. Service must be in Non-VA Hospitals, nursing homes, state hospitals, or soldiers' homes – or by providing entertainment, parties, etc., to patients in same.
2. Must volunteer a minimum of fifty (50) hours in a qualifying health care facility.
3. These hours may be a combined total of time spent in one or more of the qualified health care facilities.

When a member, or members have met the requirements for issuance of a badge, the unit will make a request to National Headquarters for the form "Application for Non-VA Hospital Badges." The form must be filled out in duplicate and signed by the Unit Commander and the Unit Hospital Chairman. One copy is kept by the unit for their file and the other copy is sent to National Headquarters for processing.

These badges are ONLY for volunteers who are members of the Disabled American Veterans Auxiliary, and will be issued without charge.

Certificates of Appreciation may be issued to the following:

1. Members who cannot serve as volunteers in any of the qualifying health care facilities – BUT, who provide fifty (50) hours service on behalf of the patients – PROVIDED this work has been done at the request of the Unit Commander or the Hospital Chairman.
2. “Sponsored Volunteers” meeting the “Hour” requirements of service.
3. Junior volunteers meeting the “Hour” requirements of service.

Certificates of Appreciation may be requested through National Headquarters at no charge.

UNITS CAN GIVE RECOGNITION TO THEIR VOLUNTEERS BY:

1. Seeing that volunteers receive the badges or certificates they have so justly earned.
2. Presenting the badges and certificates of appreciation at ceremonies and dinners.

Remember: Everyone wants to be recognized for their efforts; therefore, honor those who have honored our units by serving. This could encourage others to participate.

THINGS TO REMEMBER

1. Activities at the hospitals must conform with advice received from the hospital management.
2. A list of comfort items and gifts may be obtained from hospital personnel.
3. Careful planning is needed in feeding patients. We must do our utmost to see that no infraction of feeding rules occurs.
4. NEVER furnish items that come under medication, such as ointments, medicated skin lotions, medicated shaving creams, etc., unless permission

has been obtained from the proper hospital authorities to do so.

5. Do NOT discuss religion, politics, treatments or the nature of the patient’s illness.
6. Lengthy conversations and long visitations are very tiring to the ill. Guide yourself accordingly.
7. Remember, a SMILE can be one of your greatest assets in service to others. Carry one with you and share it with those who would love to see it.

ANNUAL REPORTS

1. Each unit, if the state department so determines, is required to submit an annual Hospital report.
2. You will receive the report form in ample time to permit careful preparation of the report and mailing of same prior to the deadline specified on the report.
3. Unit Commanders and Hospital Chairmen should read over the report and consult the Manual before making any entries.
4. Entries should be legible. TYPE OR PRINT THE INFORMATION IF POSSIBLE.
5. If in doubt regarding any portion of the report form, request a clarification from the State Hospital Chairman or the National Non-VA Hospital Chairman.
6. Please fill out the top of the form completely and see that the report is signed by the Unit Commander and/or Hospital Chairman. PLEASE NOTE: If the total value of your unit’s Hospital Program exceeds one thousand dollars (\$1,000), then an ITEMIZED STATEMENT MUST be attached/included with the report.

NON-VA TABLE OF VALUES

A. Medical and Professional Services:

1. Medical, dental, optical, and therapy clinicsA/C*
2. Legal aid service A/C

B. Personal Services:

1. Nursing sick children, chronically ill, blind veteran or members of veterans families H/O**
2. Comfort items A/C
3. Aid and comfort (hair grooming, reading to invalids, letter writing, etc.) H/O

C. General Services:

1. New clothing, bedding, furniture A/C
2. Donations to blind veterans, nursing homes, etc. A/C

D. Entertainment:

1. Parties A/C
2. New toys, books, magazines, etc. A/C
3. Used toys, books, etc. 1/2 A/C

*A/C - Actual cost

** H/O – Hours only

E. Transportation:

Total mileage (all hospital work, shut-in work, transporting patients to and from church, parties, etc.) Miles only

F. Miscellaneous:

1. Value for articles and/or entertainment received as a donation to your Unit will be shown at the same rate your Unit would have had to pay if purchased.
2. Be fair when estimating value. Take full credit, but DO NOT over-estimate.
3. Keep a detailed record monthly of each activity such as: type of service, hours, and miles involved, and total cost involved.
4. DO NOT COUNT mileage, hours, or cost for family or immediate family. You should be assisting them without the thought of “where do I report it?”

APPLICATION FOR NON-VA BADGES

Disabled American Veterans Auxiliary
National Headquarters
3725 Alexandria Pike
Cold Spring, KY 41076

Name and Number of Unit _____

City and State _____

BADGE: Award of the badge is made to volunteer workers who have served a minimum of fifty (50) hours. It is not required that the entire fifty hours be served in one hospital. It may be a combined total of fifty hours in one or more hospitals.

Name of Volunteer	Hospital	Hours
1.		
2.		
3.		
4.		
5.		
6.		
7.		

(Signature of Unit Hospital Chairman)

(Address of Unit Hospital Chairman)

(Date) _____

PLEASE FILL OUT IN DUPLICATE: Keep one copy for your Unit file and send the other copy to the address above.

Categories for Identification Badges

OVER
50 hours
250 hours
500 hours

OVER
750 hours
1,000 hours
1,750 hours

OVER
2,500 hours
3,750 hours
5,000 hours

OVER
7,500 hours
10,000 hours
15,000 hours

THE VOLUNTEER'S PLEDGE

I hereby assume the role of volunteer for the Disabled American Veterans Auxiliary in all facets of the Hospital Program.

I will be loyal to the ethics, requirements, and to my assignments.

I will be punctual and conscientious in the fulfillment of my duties and accept supervision graciously.

I will conduct myself with dignity, courtesy and consideration.

I will observe the hospital rules and instructions given by those in charge (hospital staff).

I will never seek information in regard to a patient nor ask for any personal medical information or advice.

I will consider as confidential all information which I may hear, directly or indirectly, concerning patients or any member of the hospital staff.

I shall endeavor to encourage non-affiliated acquaintances to become volunteers (Sponsored) within our Hospital Program.

I will always endeavor to make my work of the highest quality and represent the Disabled American Veterans Auxiliary with pride and loyalty.