I would like to express my sincere thanks to the AHA for asking me to serve as your COV chair for 2010. I am honored to represent all of you and look forward to sharing my thoughts on volunteerism in healthcare as well as summarizing my activities this year.

My involvement as COV chair began with serving as a judge in selecting the finalists for the HAVE awards. Participation this year was outstanding with over 120 entries in the four categories. Selecting the winners and runners-up was not an easy task for the judges, but the process worked well. It was an exciting experience, and it was a privilege to serve on the committee.

The first trip I made was to St. Louis on February 3rd to participate in the planning process for the 2010 AHVRP Conference to be held in that city September 30 - October 3. The theme this year is "Navigating our Future Through a Challenging Frontier." This was my first experience in this process, and I was pleased to have the opportunity to contribute to the planning of this outstanding conference. The planning committee consists of directors of volunteers and volunteers/auxiliars assisted by the capable AHA staff. It was a very interesting process of speaker selection and track determination. In addition, various committee chairs were appointed for the many activities associated with the conference. All in all, a very well-orchestrated meeting.

On March 17th Carol Allen, AHVRP President, and I attended the California Association of Hospitals and Health Systems (CAHHS) conference in Sacramento. This 3-day conference is one of the leading State conferences known for its outstanding speakers and exhibit show. Two thirds of the attendees were volunteers. Besides the California attendees, several other western states were represented.

I have participated in several conference calls including Kristin Welsh’s excellent Washington update, Wendy Birn-Pollard’s audio presentation, AHVRP monthly planning committee conference calls, and COV committee updates.

continued on page 2
I would like to switch gears now and share a Volunteer’s Code which my volunteer group, Seton Medical Center Austin includes in its Orientation booklet. Some of you may have the same or a similar code in your organization. I feel it is timely as we compete for volunteers to shore up our ranks:

- **As you volunteer yourself to be of service, you accept an obligation. Consider these factors as you structure your volunteer life.**

- **BE SURE.** Look into your heart and know you really want to help people and are willing to take the extra step graciously to do so.

- **BE CONVINCED.** Don’t offer to serve continuously unless you believe in the value of what you’re doing and are convinced this is where you want to help.

- **BE LOYAL.** Tactfully offer suggestions if you see a better way of doing something, but realize you may not be aware of all aspects of the situation. Don’t knock your organization, its employees or volunteers to others.

- **ACCEPT THE RULES.** Don’t criticize what you may not understand. Ask for clarification if something does not seem right to you, but be willing to follow whatever rules have been established.

- **BE WILLING TO LEARN.** Training is essential to any job well done.

- **KEEP ON LEARNING.** Know all you can about your job and then learn all about your organization so you can better understand your role.

- **WELCOME SUPERVISION.** You will do a better job and enjoy it more if you know what you are doing and what is expected of you.

- **BE DEPENDABLE.** Be there when you have said and do what you agreed to do.

- **BE A TEAM PLAYER.** Find a place for yourself on the “team”. Take pride in the work that you do and the people you are helping.

- **DO UNTO OTHERS.** No matter what you are doing or who you are serving, put yourself in the place of the other person. Would you want to be helped by you? If so, you’ve probably found a volunteer gem to give your life an extra facet!

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**Facilitators Needed!**

The conference planning committee is looking for members who will be attending the Annual Conference to serve as facilitator.

For more information contact Vickie Morgan at (814)231-7126

**SAL Auxiliary Leaders Fall Invitational Meeting**

**St. Louis, MO**

**Thursday, September 30**

**12:30 pm - 4:15 pm**

For more information visit the AHVRP Annual Conference web site visit www todaysvolunteer org
The American Hospital Association (AHA) hosts two meetings a year for State Auxiliary Leaders (SAL’s). The fall meeting will be held in conjunction with the AHVRP Annual Conference in St. Louis, MO and the spring meeting was held in conjunction with the AHA Annual Meeting in Washington, DC. Both meetings provide an excellent opportunity for education and networking. The AHA leaders obtain first quality speakers to provide training relevant for the leadership roles that the SAL’s have assumed. There is time during the meetings (and afterwards) for networking. The information that can be gleaned from face-to-face discussions is priceless – i.e. information on speakers, fundraisers that work, handling difficult situations with board members, how our states differ in their board operations and how they are the same, funding, etc. At the Washington, DC meeting, the SAL’s have an opportunity to meet the HAVE winners for the current year. This is an inspiring program and provides ideas that can be duplicated in one’s own hospital. The education and making and renewing friendships certainly is worth the registration fee. We come to the meeting committed to service and leave with a desire to share with others this commitment and the information that we have obtained. Isn’t that what volunteering is about – sharing ourselves with others? It would be wonderful to have representation from all 50 states! I hope to meet many of you in St. Louis in September and next year in Washington, DC.

Barbara D. Bergin
Auxilian
Huron Valley-Sinai Hospital
Milford, MI
Jordan Hospital Club’s Polar Plunge

Jordan Hospital’s auxiliary, in Plymouth, MA, known as the Jordan Hospital Club, was looking for a new spring fundraiser. Their spring event had been a “tag” sale for years, but interest had dwindled and the amount of work to put it on far exceeded the money raised. In 2002, a club member brought forward the outrageous idea of a “Polar Plunge”. People would get sponsors to donate money to them if they would go swimming in the 40 degree Atlantic Ocean in early March. Needless to say, other club members thought she was crazy.

Thus was born, Jordan’s Polar Plunge. The first Plunge in 2003, there were over 200 plungers and they raised $55,000. Who knew there were so many adventurous people in our service area. Eight years later, the Plunge has turned into a community wide event. This year, there were over 500 plungers who raised over $105,000. The event includes a band, food, costumes, teams, giveaways and trophies at the “after Plunge” party. In eight years, the Club has raised over $700,000 for the Jordan Hospital Club’s Cancer Center.

You would have to be at the beach on a cold March day to experience the energy and excitement that exists as everyone waits for the countdown to the Plunge. The support for the Jordan Hospital Club and for the Cancer Center has spread throughout our service area. Each year the donations increase as everyone wants to be part of this incredible event. This year, donations are still pouring in and the bar has been set for $150,000. Back in 2002, who knew???

Michelle Caruso, CAVS
Director, Volunteer Services
Jordan Hospital
Plymouth, MA

Register to attend the 2010 AHVRP Annual Conference Today!
visit www.todaysvolunteer.org
Compassionate Companioning at the End of Life

This is one of the newest patient services Volunteers are being trained to do. It is a non-faith based companionship program designed to comfort patients at the end of life. The program is committed to providing a Volunteer Companion for dying patients who would otherwise be alone. With the support of doctors, nurses, and the hospital spiritual care staff, these Volunteers are able to provide patients with a caring presence during the time of natural death.

The program was first envisioned by Sandra Clarke, a nurse at the Sacred Heart Medical Center, Eugene, Oregon, who witnessed the lonely death of a patient. She was unable to grant that patient’s request to stay with him, which moved her to conceive of a Volunteer Program for hospital patients who would otherwise die alone. Many hospitals have used this program as a model for their own program.

Why is this important? Dying alone is a fear for most of us and for some a reality. Sometimes, a patient is alone because he or she has outlived friends and loved ones. Others may have family scattered across the country unable to get to the hospital in time. No matter the reason, people in their last hours of life can feel comfort and peace with someone at their side. The knowledge that they are not alone helps them feel valued and safe. The Volunteers who provide this care derive great personal satisfaction in allowing a fellow human being to die with dignity.

“No one should die alone—each human should die with the sight of a loving face” Mother Teresa.

Peggy Russo
Auxilian
The Villages Regional Hospital
The Villages, FL

Got Questions? ASK THE SAL LISTSERV®

Make contributions to topics via the SAL LISTSERV®, your instant connection to your healthcare volunteer management peers!

Send a Message
To send a message to your peers send your email to salcovlist@ahals.aha.org. Make sure to include an appropriate subject line.

Responding to a Message
To reply to messages you receive from the LISTSERV®, be sure that the send-to address appears as “salcovlist@ahals.aha.org”. Make sure to remove any unnecessary words from the subject line. This is very helpful for archiving messages under proper topics. Messages that contain these words in the subject line will not be approved.

To reply directly to a member of the list, forward the e-mail and copy and paste his/her e-mail address into the “To” line. Visit www.todaysvolunteer.org and go to Auxiliaries & Volunteers tab and select SAL LISTSERV® for more information on any of the LISTSERV® features.

Stay Connected Today!
Hospital Awards for Volunteer Excellence (HAVE) Winners

The Hospital Awards for Volunteer Excellence (HAVE) program was established by the American Hospital Association Board of Trustees to help hospitals attract and retain volunteers by recognizing outstanding contributions of organized volunteer programs.

In addition to acknowledging the value of volunteerism to individual lives and institutions, the awards program is designed to:

- Encourage service that greatly exceeds expectations as a result of innovation, creativity and leadership
- Promote visibility and goodwill toward the hospital or healthcare system
- Increase allegiance and collegiality among volunteers
- Promote collaboration among provider organizations and community service organizations that addresses the issues of managed collaboration and instructs volunteers on how to improve the quality of life in the community they serve.

Community Service Programs

Adaptive Sports and Adventures Program
Carolinas Rehabilitation
Charlotte, NC

The goal of Adaptive Sports and Adventures Program (ASAP) of Carolinas Rehabilitation is to provide competitive and recreational adaptive sport opportunities for individuals with physical disabilities and to support and promote the achievements of personal goals of adaptive athletes. ASAP provides ongoing adaptive sport and leisure programming which includes snow skiing, waterskiing, kayaking, cycling, tennis, rugby, basketball, golf, fishing and swimming.

ASAP has three licensed recreational therapists on staff but relies heavily on volunteerism to deliver its programs to increase and maintain the healthy lifestyles of people with disabilities. ASAP’s water ski program requires 8-10 volunteers to assist only one skier. The weekly program is four hours each night which totals over 640 volunteer hours for just one of their many programs. ASAP’s Cycle to the Sea is their annual fundraising event in which cyclists with disabilities ride from Charlotte, NC to North Myrtle Beach, SC. Over the course of three days, volunteers on motorcycles and regular bikes flank the cyclist on all sides providing a safety barrier around them.

ASAP demonstrates the dynamic power of volunteers and how they enable people to be successful and most importantly healthy after a life altering injury.

In-Service Hospital Volunteer Programs

No One Dies Alone - Comfort Companions
St. Joseph Mercy Oakland Hospital
Pontiac, MI

Studies shows that approximately 50% of all people in the United States will die in a hospital and 25% of people will die in a nursing home. At St. Joseph Mercy Oakland Hospital (§ MO), 15% of those dying patients will be alone at the time of death. Another study show close to 40% of all patients have severe pain prior to death. If no one is at their side to call the nurse, the pain will persist or even worsen with no relief.

In 2004, § MO did a survey of nursing staff that care for patients who died. One of the key findings was the suffering of nursing staff when they were caring for a dying patient who was all alone. The demands of the nurse’s regular rotation of patients and that of a dying patient were extremely stressful.

In 2005, the Volunteer Comfort Companion program, “No One Dies Alone”, was created. With 30 trained volunteers on hand, a member of the palliative care team would identify a patient who was all alone and at the end of life and would place a volunteer at their side. The training is unique and combines the development of self-awareness of personal feelings regarding death and dying with gentle ways to assist these special patients. Volunteers are also educated on what typically happens physically, emotionally and spiritually at end of life.

The volunteers ensure comfort and peace and eliminate two of the most common fears of people and terminal illness – dying in pain and dying alone.
have award winners continued...

Fundraising Programs

Text for 10
Monmouth Medical Center
Long Branch, NJ

"Text for 10" is an exceptional example of recruiting teens to become involved in hospital volunteerism. The volunteer along with the assistance of a 14-year-old teen co-chair, who had lost her father to brain cancer, successfully recruited children, adults, families, businesses and corporations, musicians and physicians to participate in a fund raising project for the David S. Zocchi Brain Tumor Center as well as for Monmouth Medical Center.

The co-chairs created “Text for 10” which was comprised of teams of ten, from five different locations throughout the Monmouth and Ocean counties. Each team member used their cell phones to simultaneously send text messages to ten friends and family members asking for a $10 donation. The event raised $50,000 for the Brain Tumor Center in a matter of minutes and is now an annual event!

Community Outreach and/or Collaboration
Knapp Auxiliary Diabetes Food Chart Community Outreach Program
Knapp Medical Center Auxiliary
Weslaco, TX

When the auxilians at Knapp Medical Center became aware that diabetes deaths ranked fourth in the central portion for the Lower Rio Grande Valley of Texas, compared to seventh nationally, they recognized the seriousness of this statistic and applied for a $10,000 grant to create Diabetes and Renal Food Charts. The educational food charts in use were out of print and not sensitive to the cultural background/literacy of the patients they served.

In collaboration with the hospital’s Public Information and Nutrition Services Departments, two user-friendly, bilingual, four-color food charts were developed. This effective teaching tool was appealing to patients and helped them learn how to understand food choices to better manage and regulate their disease.

Once the charts were developed, the Knapp dietitians suggested that the charts be made available for sale to area facilities. The Auxiliary turned the project into a community outreach project and took on the responsibility of production and distribution. After receiving an overwhelming response locally, it naturally expanded the project to include the entire state of Texas. In addition, The Texas Hospital Association partnered with the Auxiliary and they began to advertise the availability of the charts nationally in the ADA Journal of the American Dietetic Association. Orders from hospitals and clinics lead the way, but educators have requested them for prison populations, for use on Indian reservations and for indigent Eskimos in Alaska.

While fund raising was not the goal of the project, the Auxiliary has generated enough money to recoup the initial $10,000 grant and offset the additional printing. The project received the Texas Hospital Association’s 2000 Excellence in Community Service Award and the American Society of Directors of Volunteer Service’s Extraordinary Award.

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Has Your Information Changed?

Submit your changes to Noemi Escutia by sending an email to nescutia@aha.org or fax your information to (312) 278-0884
Embracing the Trend of Episodic Volunteers

Episodic Volunteer ... what does that mean, really? One could describe it as a volunteer who would work only on occasional special projects or on an as-needed basis. Another description could be someone who wants to volunteer one time for just a few hours, perhaps to satisfy a school requirement. We've all heard about them, talked about them and even wished we had them! But wait ... what about TB screening? What about background checks? What about HIPAA? What about orientation? What about our ‘minimum hours/months worked’ policy? There seem to be too many obstacles, so we just continue to wish we had someone to do those occasional boring projects.

Most of us turn down offers to volunteer 20 hours or 50 hours to satisfy a high school requirement. It’s just not worth the time and money spent on the orientation process into our programs, yet we understand how important it is for our young people to test the waters of volunteer service. Quite by accident, I found a way to accomplish this and avoid the dreaded obstacles.

I received a call one day from a high school girl who was president of their honor society. Their group had pledged to do a volunteer project and they were only available on Saturdays. I was prepared to turn her down and then I asked her if I could think about it and call her back. We did have a particular project that needed to be done for our maternity unit, assembling the take-home bags for the new mothers. It was a big job and needed to be done in a space where all the materials could be spread out in an assembly line fashion. This is not something we can ask our other volunteers to do at the information desk or a waiting room desk as we sometimes do with labeling projects.

Thinking outside the box, as we all try to do, I came up with a plan for this particular group and it paved the way for other individuals and groups to work for us without taking them through our orientation process or joining our auxiliary. Yes, I know we want to bring in ‘regular’ volunteers and keep them forever, but let’s face it ... there are times when we can use the help from those who want to serve but don’t want or need to join our groups. It just takes some planning.

continued on page 9
embracing the trend continued...

The following is a breakdown of the obstacles and how we avoided them without violating any Joint Commission Standards or hospital policies:

- **Background check and TB screening** – Reserve a conference room or use another space that is within one of public areas of your facility rather than patient care areas. Outside groups come in for meetings and classes without such screening... so can volunteers.

- **HIPAA** – Select only projects that do not involve any patient information such as assembling packets or hospitality bags, labeling, collating, stuffing, etc.

- **Safety and Emergencies** – As in the first bullet, outside groups using public rooms are not oriented to emergencies.

- **Uniforms and I.D. badges** – There is no need for special identification if they are in a designated public area and supervised. You can inform them in advance that their clothing should be modest and appropriate for a business environment.

- **Oversight** – Ensure that there is a contact person who will meet them, take them to the location, explain the project and call if help is needed. In this case, the unit coordinator enlisted the help of a staff member on weekends to be their contact person for the Saturday project.

- **Documentation of Hours** – You can make arrangements to document their hours with a letter, certificate, etc. if necessary and one that meets their needs.

The high school honor society group came into our facility on two different Saturdays and met a predetermined staff person who took them to the designated location where all their materials were ready for them. I had made arrangements for them to get tickets for a meal while they were there and they did a tremendous amount of work in those two sessions. It was a win-win situation for sure!

Since that time, we have acquired a small work room adjacent to our office that has been great to use for this purpose. There is no need to schedule a conference room and we can personally look in on them as they work. One man, the husband of one of our ‘regular’ volunteers, began coming in to help assemble admission packets on a temporary basis. We put him to work in our little room and after a few weeks he decided he wanted to join the Auxiliary and is now a ‘regular’ volunteer. He still assembles packets, but that’s what he loves to do! added to the list.

So now, when individuals call and just want to satisfy hours for school, we explain this opportunity for their consideration. It’s not exactly exciting work, but if they want the hours, it’s an option. They can take it or leave it. If we don’t have any projects pending at that time, we keep a list of people to call when projects come up and ask them if they would like to be added to the list.

It is also interesting to note that all my communication with the president of the high school group was done by phone and email, as was the planning with the staff person from the maternity unit. I never met the high school honor society volunteers on that project. Easiest service development I’ve ever done!

**Julia Hunt, CAVS**
Director, Volunteers Services
Integris Southwest Medical Center
Oklahoma City, OK
Diagnostic Stand-Alone Facility

Sarasota Memorial healthcare system opened a stand alone emergency care/diagnostic center four months ago in response to the needs of residents in south Sarasota County. The facility is, in essence, a hospital without inpatient capacity. The request for volunteer support came early on in the project, allowing us to lay the groundwork for a well planned implementation.

I was very grateful to Judy Peacock and Jennifer Wood of Munroe Regional Health Care System for so very generously sharing their position descriptions and lots of support! Gosh, what we would be without the support of such wonderful peers?!?!!? Thanks to Judy, Jennifer, and the wonderful volunteers at Munroe, we were able to realize needs that were not readily identifiable, and build into our program.

We provided an all day, on-site training, involving the leadership and staff of the facility, as well as key members of the Auxiliary. The result was ownership on the part of the facility staff, certainly a really important factor for the success of any program, but especially for one so new in development and unique in operational procedures.

When we did our first month review with the volunteers to identify positive aspects, possible problematic problems, and answer questions, it was incredible to hear the stories of how the volunteer touched the lives of so many we served!

Stacy Scott Berteau, MHE, CAVS, CDVS
Director, Volunteers Services
Sarasota Memorial Hospital
Sarasota, FL

Volunteers Placed in Inpatient Nursing Units Proves Beneficial

In the late summer of 2009, one year after moving into our new hospital, we (finally) implemented placing volunteers in our inpatient nursing units in an effort to help nursing improve our patient satisfaction scores. Other than tasks such as stocking supplies, collating patient education materials, tidying patient rooms and transporting patients to their cars after discharge, volunteers help staff with Purposeful Patient Rounds (PPR), a nursing care model developed by a multidisciplinary team, providing an opportunity to improve care through standardized practices using anticipatory planning. A team member checks on the patient every hour with a specific purpose practices (using the “5 Ps” - pain/nausea, potty, position, presentation and personal needs), making it safer for our patients and reducing the number of calls to the nurses’ desks.

Results following the first month’s implementation on one floor alone indicated a 65% decrease in the number of patient calls for pain medication. Calls for assistance to and from the bathroom have decreased by 32%.

Besides providing good metrics, our predominately pre-med or pre-nursing students who were placed in these volunteer roles love what they do, as do our patients and staff. Good teamwork!

Joyce White, RN, DVS
Director, Volunteers Services
Mayo Clinic Florida
Jacksonville, FL
bring you greetings from the conference planning committee, whose members are hard at work preparing for the forthcoming conference. In February, we met on site in St. Louis at the Union Station Marriott and toured the facility, chose presenters, and worked on the schedule. All of us are excited about the location. We also reviewed your comments regarding last year’s conference and want you to know that - you spoke and we listened! There will be some changes you will be certain to notice and approve of. We are confident this will be one of the best conferences ever. Beginning with Sister Mary Roch leading our opening prayer, this conference promises to have current information and relevant sessions for you, mixed with plenty of time to network with others. We hope to see all of you in St. Louis – Navigating our future – through a changing frontier.

Stephanie Spradling, CAVS
Co-Chair Conference Committee Planning

AHVRP Staff
Audrey Harris
Executive Director
Chicago, IL

Kwani Cooper
Project Specialist - Education
Chicago, IL

Kourtney Sproat
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Reston Hospital Center
Reston, VA

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Auxilian
Heartland Regional Medical Center
Joseph, MO

Shirley Gould
Auxilian
Tucson Medical Center
Tucson, AZ

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Outreach Coordinator, Volunteer Department
Children’s Mercy South Overland Park, KS

John Kuhn
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Newman Regional Hospital
Emporia, KS

Kylie Latham
Navigator/Volunteer Program Specialist
Skemion Cancer Center
St. Louis, MO

Ulani Levy, CAVS
Volunteer Service Specialist
Dept of VA, SVHCS (135)
San Antonio, TX

Paula Moore, CAVS
Director of Volunteer Services
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Vickie A. Morgan, CAVS
Director of Volunteer Services
Mount Nittany Medical Center
State College, PA

Valerie Weber, MHSA
Director of Volunteer Services
Capital Region Med. Center
Jefferson City, MO

Joanne Webster, CDVS
Manatee Memorial Hospital
Bradenton, FL

Rebecca Williams
Volunteer Manager
Feather River Hospital
Paradise, CA

AHA COV
Leading America’s Healthcare Volunteers
www.todaysvolunteer.org

American Hospital Association Committee on Volunteers | www.todaysvolunteer.org

Insights
Spring 2010
## 2010 AHVRP Annual Conference at a Glance

### Wednesday, September 29
- 10:00a - 6:00p  
  Registration/Hospitality  
  Book Store & Cyber Café

### Thursday, September 30
- 7:00a - 7:30a  
  Registration/Hospitality  
  Book Store & Cyber Café
- 8:00a - 12:00p  
  Intensive Session & Lunch*  
  Retail Operations Intensive Session & Lunch*  
  Principles Session & Lunch*
- 8:00a - 10:00a  
  TNT Networking Breakfast*
- 12:30p - 4:15p  
  State Auxiliary Leaders Fall Invitational Meeting
- 1:00p - 4:00p  
  Certification Examination
- 1:00p - 4:15p  
  Affiliated Groups and VISN Leaders Invitational Meeting
- 4:30p - 5:15p  
  First-Time Attendees Meetings
- 5:30p - 7:00p  
  Opening Ceremony/Keynote Address
- 7:15p - 9:15p  
  Trade Show Opening and Reception/Silent Auction/50-50 Raffle

### Friday, October 1
- 7:00a - 5:00p  
  Registration/Hospitality/50-50 Raffle
- 7:00a - 8:30a  
  Principles Module II: Legal Awareness of Volunteer Administrators
- 8:00a - 6:00p  
  Book Store & Cyber Café
- 8:45a - 10:00a  
  General Leadership Session
- 10:15a - 2:15p  
  Trade Show/Silent Auction/50-50 Raffle
- 12:00p - 2:00p  
  Exhibit Hall Lunch
- 2:30p - 4:00p  
  Concurrent Sessions I
- 4:15p - 5:45p  
  Concurrent Sessions II

### Saturday, October 2
- 7:00a - 5:00p  
  Registration/Hospitality/50-50 Raffle
- 7:30a - 9:00a  
  Networking Table Topics
- 8:00a - 6:00p  
  Book Store & Cyber Café

### Sunday, October 3
- 7:00a - 12:00p  
  Registration/Hospitality
- 7:30a - 9:00a  
  AHVRP Annual Business Meeting & Breakfast

### Optional, separate pricing/pre-register.

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### Donate to the AHVRP Silent Auction

**Suggested Auction Items include, but are not limited to:**
- Gift Baskets, Software, Wine, Gift Certificates, Weekend Getaways, Airfare, House ware, Jewelry, Artwork, Time Share

For more information visit the AHVRP Annual Conference web site  
visit [www.todaysvolunteer.org](http://www.todaysvolunteer.org)
### AHVRP Annual Conference Sessions

including Principles and Retail Operations Tracks

(As of 04/09/10 – subject to change)

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<th>DOMAIN AREA</th>
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| **SIX CERTIFICATION DOMAIN AREAS*** | **Certification Domain Areas** | **Retail Operations** | **Principles of Volunteer** | **Resource Management** |

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<th><strong>Planning &amp; Program Development</strong></th>
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<td><strong>CONCURRENT I</strong> Fri. 10/01 2:30-4:00p</td>
<td><strong>Creating Pilot Ventures for Volunteer Engagement Innovation</strong> Jill Friedman Fixler A-DVS</td>
<td><strong>Climbing the Volunteer Ladder: Engaging, Recognizing and Retaining Your Volunteers</strong> (Part 1 of 2) Deborah Cooke, MS I-DVS/AUX/VOL</td>
<td><strong>Impact! How does Volunteer Services affect the Bottom Line?</strong> Sharon Croteau I-ALL</td>
<td><strong>Change Agent Strategies</strong> Mary Kay Hood, MSM I-ALL</td>
<td><strong>Recruiting Male Volunteers for Healthcare Programs: Get the Admiral on Board!</strong> Ken Culp, III PHD I-ALL</td>
<td><strong>Principles of Naturals Leadership</strong> Lynn Carter I-ALL</td>
<td><strong>A Thrift Shop for the Generations Lynda Whalen I-ROP</strong></td>
<td><strong>Watch for updates on this session by George Whalin I-ROP</strong></td>
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<tr>
<td><strong>CONCURRENT II</strong> Fri. 10/01 4:15-5:45p</td>
<td><strong>Creating Pilot Ventures for Volunteer Engagement Innovation</strong> Jill Friedman Fixler I-AUX/VOL</td>
<td><strong>Climbing the Volunteer Ladder: Engaging, Recognizing and Retaining Your Volunteers</strong> (Part 2 of 2) Deborah Cooke, MS I-DVS/AUX/VOL</td>
<td><strong>Technology and Economy: The use of Technology in Volunteer Management</strong> Tammy Behnke I-ALL</td>
<td><strong>Change in the Volunteer Workplace</strong> Sandra Levine I-ALL</td>
<td></td>
<td><strong>Worth Every Minute: It's Time to Earn Your CAVS!</strong> Mary McCormack I-DVS</td>
<td><strong>Gift Shop Panel of Experts I-ROP</strong></td>
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<tr>
<td><strong>CONCURRENT III</strong> Sat. 10/02 2:30 – 4:00p</td>
<td><strong>Volunteer Nurse Program: A Panel of Experts Discussing Successful Implementations</strong> Sally Rundquist A-DVS</td>
<td><strong>Retention…the Other Half of Recruitment (Repeats)</strong> Kathy Hoff I-DVS/AUX/VOL</td>
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<td><strong>Change-Ready or Change-Resistant?</strong> Cathy Newton I-ALL</td>
<td><strong>Retail Revival Kathy Moe Susan Dalley I-ROP</strong></td>
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<td><strong>CONCURRENT IV</strong> Sat. 10/02 4:15 – 5:45p</td>
<td><strong>Back to the Future: Palliative Care in the 21st Century</strong> Kathy Head I-DVS/AUX/VOL</td>
<td><strong>Leveraging Generational Differences</strong> Becky Frederick I-ALL</td>
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<td><strong>META-Leadership for Volunteer Leader Professionals</strong> Michelle Heckle I-DVS</td>
<td><strong>Watch for updates on the Market Showcase I-ROP</strong></td>
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<tr>
<td><strong>CONCURRENT V</strong> Sun. 10/03 9:15 – 10:45a</td>
<td><strong>Enhancing Volunteer Experiences Utilizing a Volunteer and Family Advisory Committee</strong> Julie Hudtloff I-DVS/AUX/VOL</td>
<td><strong>Chasing Porcupines: How to Work with Prickly People</strong> Steven Iwersen I-ALL</td>
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<td><strong>The Sound of Collaboration Sabrina Coleman Clark I-DVS/AUX/VOL</strong></td>
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### Conference Program

**AHVRP**

Leading America’s Healthcare Volunteers

www.todaysvolunteer.org
## Committee on Volunteers

<table>
<thead>
<tr>
<th>Name</th>
<th>State Hospital</th>
<th>Contact</th>
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</thead>
<tbody>
<tr>
<td><strong>Chair-Officer</strong></td>
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<td>Name</td>
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<td>Hospital/Locality</td>
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<td>Kay B. Weir</td>
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<td>Sunnyside Community Hospital Sunnyside, WA</td>
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<td>Joyce Buckner</td>
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<td>Baptist Hospital West and Baptist Hospital for Women Knoxville, TN</td>
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<td>Daria Martin</td>
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<td>Baptist Medical Center Jacksonville, FL</td>
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<td>Barbara D. Bergin</td>
<td>Auxilian</td>
<td>Huron Valley-Sinai Hospital</td>
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<tr>
<td>Jennifer Carter</td>
<td>Director of Trustee and Auxiliary Initiatives Healthcare Association of New York State Rensselaer, NY</td>
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<tr>
<td>Michelle Caruso, CAVS</td>
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<td>Shirley Gould</td>
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<td>Tucson Medical Center Tucson, AZ</td>
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<td>John Kuhn</td>
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<td>Newman Regional Hospital Emporia, KS</td>
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September 30 - October 3, 2010

Navigating Our Future Through a Changing Frontier

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