

Free Clinic of Meridian
Non-medical Volunteer Application

Name (Please print) _____ Date of Birth _____

Social Security # _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Employer _____ Employer Phone _____

Experience in working in a clinic environment _____

Do you speak languages other than English? ___yes ___no If yes, please list _____

Are you fluent in sign language? ___yes ___no

Check all tasks that you feel comfortable completing:

___ Phone answering

___ Calling patients

___ Email

___ Texting

___ Computer data entry

___ Computer word processing tasks

___ Assisting patients with paperwork

___ Verifying patient eligibility

___ Filing

___ Faxing

___ Patient counseling

___ Clinic security

Please indicate availability: ___Monday ___Tuesday evening ___Wednesday ___Thursday evening

Have you had HIPPA training? ___Yes ___No

I understand that the Free Clinic of Meridian may request a Background Check through the Lauderdale County Sheriff's Department and/or the Meridian Police Department, and I give my permission for this to occur.

Signature _____ Date _____

Privacy and HIPAA Acknowledgements

As a volunteer at The Free Clinic of Meridian (TFCM), I acknowledge the confidentiality of patient health care information that I may have access to. Patient and volunteer information from any source and in any form, including oral communication, audio recording, and electronic display, is strictly confidential. Violations of HIPAA policy include, but are not limited to:

- Accessing information that is not within the scope of your job;
- Disclosing, misusing without proper authorization, or altering information;

Violations of this policy may constitute grounds for disciplinary action, up to and including termination of contracted personnel status, as well fines and jail time in accordance with federal and state laws. I shall maintain the confidentiality of patient and volunteer information and in doing so shall comply with all applicable state and federal laws and regulations.

I will not:

- (a) divulge any information of any kind which comes to me in carrying out my assigned duties at The Free Clinic of Meridian;**
- (b) discuss any patient or any information pertaining to any patient with anyone (even with my own family);**
- (c) mention any patient's name or admit, directly or indirectly, any person named is a patient except to those authorized to have this information.**

Signature: _____ **Date:** _____

FRONT OFFICE COVID-19 PROCEDURES

SCHEDULING APPOINTMENTS

1. Schedule only 1 patient per time slot per provider (stagger the appointments for example 9:00 and 9:15) to allow adequate time to get the patients from the door into the patient room.
2. Appointments will be scheduled in fifteen-minute intervals
3. Inform patients visitors will be allowed in the building during their appointment and that they **WILL BE REQUIRED** to wear a mask before entering the clinic and keep the mask on for the duration of the visit.

Clinic Days

1. The door handles to the front door, bathroom door (if used), and door to the back **MUST** be cleaned between patients.
2. The patients will come into the clinic and arrive at the front desk. You ask the patients these questions.
 - a. Have you or anyone in your house had a fever over 100.4, a new cough, and/or shortness of breath in the past two weeks?
 - b. In the past two weeks, have you been in close contact with ANYONE with a confirmed or suspected case of COVID-19 or who is waiting for test results?
 - c. Do you feel generally unwell for ANY reason that is not associated with another illnesses? (For example, a new sore throat, GI upset, muscle aches, headaches, or a new loss of taste or smell)

IF THE PATIENT ANSWERS YES TO ANY OF THESE QUESTIONS, SPEAK TO DESIREE.

3. If the patient answers "no" ask them if they have a mask (if they don't, hand them a mask) ask them if their address or phone number has changed, check the patient in, and tell the patient to wait.
4. Take the paper packet to the back and notify the staff that the patient is waiting at the door.
5. After the patient is brought to the exam room, wipe the door handles off.
6. At the end of the appointment, the patient will bring the completed paperwork to the waiting room window and wait for their next appointment to be made and printed out.

Phone Answering Procedures

"Thank you for calling The Free Clinic of Meridian. This is <first name>. How may I help you?"

Medication renewals & refills- log onto the medication refill sheet (tell patient to allow 2 business days for a response. Business days are Monday- Thursday unless it is a holiday.)

Checking up on an application- refer to the yellow folder by front desk that is labeled incomplete applications and tell them what they are missing

Rush lab- report an abnormal lab (Stephanie or Rosie)

Desiree- take message unless it is a patient calling

Stephanie- take message unless it is a lab calling or she has told you she is expecting a call

Calling for medical records-Write the patient's name, DOB, the name of the person who is calling, and their phone number and hand it to Desiree

Common Caller Questions & Answers

- **How to apply?**

- Pick up an application at clinic hours or online at freeclinicofmeridian.com
 - Monday, Wednesday, Thursday 9:00-12:00, 1:00-4:00
 - Tuesday 1:00-4:00, 5:00-8:00
- Tell them the requirements to qualify
 - No insurance, including Medicaid or Medicare
 - Household income no more than 200% of Federal Poverty Level
 - Bring with them Photo ID and proof of income

- **How to volunteer?**

- Ask if they are a non-medical or medical volunteer
- Get their name, cell phone, and email and give medical volunteers to Stephanie and nonmedical to Desiree

- **How to donate?**

- Give them the address to mail: P.O. Box 3724, Meridian, MS 39303
- From Paypal: freeclinicofmeridian@gmail.com
- They can donate supplies also

- **Do we do dental work?**

- No, but Greater Meridian has a sliding scale dentist on staff.

Greater Meridian

Address: 2701 Davis St. Meridian, MS 39301

Phone: 601-693-0118

- **Do we do STD testing?**

- Only if you are a current patient. However, they can call the health department and they will test by appointment only.

Lauderdale County Health Department

5224 Valley St. Meridian, MS 39304

601-693-2451

Monday- Friday

8:00 a.m to 5:00 p.m.