



Meals on Wheels of Hendricks County, Inc.
P.O. Box 409, Danville, IN 46122
317.745.3469 – phone
317.718.2975 – fax
hrhmow@hendricks.org

Volunteer Application

Name _____

Address _____

Phone _____ Cell _____

E-mail address _____

Emergency Contact _____

Emergency Contact Phone _____

Emergency Contact Relation _____

How did you hear about this volunteer opportunity? _____

Do you have car insurance? Yes No

- Please be aware that Meals on Wheels accepts no liability for accidents or personal injuries that might occur while drivers are picking up or delivering meals.

Background Check

Information below the dotted line will be shredded once the background check is complete.

Full Legal Name _____ S.S. _____

Date of Birth _____

Signature _____

Please complete and return to the Meals on Wheels office.

Education Material for Drivers of Meals on Wheels Hendricks County

Health Insurance Portability & Accountability Act (HIPAA)

The HIPAA privacy rule is a federal regulation enacted to ensure personal medical information shared with physicians, hospitals and others who provide and reimburse for healthcare is protected. It also defines patient rights regarding their protected health information.

Who must comply with this law?

- Hendricks Regional Health Hospital
- Meals on Wheels of Hendricks County

How will Meals on Wheels of Hendricks County comply with this law?

- Volunteers must not discuss the Meals on Wheels (MOW) client information with others. We must protect the safety of our clients' personal and health information.
- Drivers need to remove the route sheet from the cooler when they finish driving and shred or destroy the route sheet. Please do not leave the route sheet in the cooler.
- The Meals on Wheels office will shred expired documents that would identify client names and addresses. All current information is secured in the MOW office.
- All protected health information will be used only for the intended purpose of meals delivery.
- Hendricks County Meals on Wheels will not share protected health information with individuals or companies that are not needed for the communication, delivery and billing of our services.
- Protected health information will be protected in whatever form it is received or maintained (electronic or paper forms).
- All associates and volunteers agree to protect client specific and protected health information during the course of doing our work and in our community.
- Our clients have the right to see any protected health information received or maintained by Hendricks County Meals on Wheels. If a client is interested in this information they should call the Meals on Wheels office.
- If a breach involving the unauthorized release of protected health information occurs, the director must be notified immediately. The director will notify the client and the board of the unauthorized breach. The board will determine the appropriate course of action regarding coaching or counseling for the associate or the volunteer. The person could be asked to resign from their position if so directed by the Hendricks County Meals on Wheels board.

Medical Information is also called Protected Health Information (PHI)

What is PHI?

- The Hendricks County Meals on Wheels route sheets contain PHI.
- The Hendricks County Meals on Wheels clients sheets and diet orders contain PHI.
 - Any patient/client or health information used or disclosed by oral or written means
 - Any information containing personal information relating to the patient/client.

Examples include the Meals on Wheels client's name or healthcare status, i.e. if the client is hospitalized.

WHAT WOULD YOU DO?

1. Your sister's close friend just started receiving Meals on Wheels meals. You happen to drive that route and were notified that the client will be temporarily off. You know your sister would want to know if something has happened to her friend, what should you tell her?

Answer: You should not make any inquiries about the client's health or status, and you should not tell your sister. Unless the client told your sister that she is receiving Meals n Wheels, your sister would not know, and would not know to ask.

2. You happen to see that a fellow volunteer is listed in the route sheet for the route you drive. Do you tell other volunteers about this bit of information or keep it to yourself?

Answer: You should keep this information to yourself, and if someone asks you why you didn't tell them about this person, you should tell them that you were only protecting the client's right to privacy, and cannot share any information without violating HIPAA.

MOW Policy for Client Emergency

If a MOW volunteer arrives to deliver a meal and finds the client in any distress, the volunteer will call 911 for assistance and attempt to call the emergency contact or P.O.A. listed on the route sheet. As a volunteer, you may stay with the client until helps arrives. Volunteers are not allowed to provide any medical assistance, which includes moving the client.

I understand and agree with the information presented on HIPAA and Protected Health Information:

Name: _____

Signature: _____

Date: _____