

CODE OF ETHICS

The following is our code of ethics, which must be signed by each volunteer and placed their file:

By signing a copy of this code of ethics, I as a volunteer of this Hospice affirm that:

I will not discriminate against or refuse professional services to anyone on the basis of race, color, creed, age, sex, religion, sexual preference, disability, or nationality.

I will not use my professional relationship to further my own interests.

I will evidence a genuine interest in all persons served, and do hereby dedicate myself to their best interests and helping them help themselves.

I will respect the privacy of persons served and hold in confidence all information obtained in the course of professional service.

I will maintain confidentiality when storing or disposing of patient records.

I will maintain a professional attitude, which upholds confidentiality towards individuals served, colleagues, applicants, and the Hospice.

I, upon termination, will maintain patient and co-worker confidentiality, and I will hold as confidential any information I obtained concerning the Hospice.

I will respect the rights and views of my colleagues, and treat them with fairness, courtesy and good faith.

I will not exploit the trust of the public or my co-workers. I will make every effort to avoid relationships that could impair my professional judgment.

I will not engage in or condone any form of harassment or discrimination.

I will not permit fellow volunteers to present themselves as competent or perform services beyond their training and/or level of experience.

When I replace a colleague or am replaced, I will act with consideration for the interest, character and reputation of the other professional and Hospice of Marion County, Inc.

I will extend respect and cooperation to colleagues of all professions.

I will not assume professional responsibility for the patients of a colleague without appropriate consultation with that colleague.

If I see the patient of a colleague during a temporary absence or emergency, I will serve that patient with the same consideration afforded any patient.

If I know that a colleague has violated ethical standards, I will bring this to my colleague's attention. If this fails, I will report the activity to my supervisor.

I will accurately represent my education, training, experience and competencies as they relate to my profession.

I will correct, when possible, misleading or inaccurate information and representations made by others concerning my qualifications or services.

If serving as a supervisor, I will make certain that the qualifications of persons I supervise are honestly represented.

I will abide by Hospice policies related to statements to the media or public.

I have total commitment to provide the highest quality of service to those who seek my professional assistance.

I will continually assess my personal strengths, limitations, biases and effectiveness.

I will strive to become and remain proficient in professional practice and the performance of professional functions.

I will act in accordance with standards of professional integrity.

I will not advise on problems outside the bounds of my competence.

I will seek assistance for any problem that impairs my performance or compromises my professional practice.

If I make a mistake or am aware that another volunteer of the agency performed an inappropriate action, I will inform my supervisor immediately so that the patient, family or agency are not compromised and the problem can be corrected.

I have read and understand the above Code of Ethics, and agree by them.

Signature

Date_____

Print Name