

Volunteer Position Description

Position Title:	Radiology – Patient Survey Processor
Position Type:	Non-patient Care or Service Personnel
Facility:	Radiology - Hebron Office
Position Summary:	
Radiology surveys are to be scanned into the survey database. Monitoring of the scanning process is required to be sure no jams occur and to verify markings.	
Qualifications:	
<ul style="list-style-type: none"> • Maintain confidentiality • Need keyboard/typing skills 	
Duties & Responsibilities:	
<ul style="list-style-type: none"> • Make copies • Use computer/keyboard • Use electronic scanner 	
Key Accountabilities:	
<ul style="list-style-type: none"> • Standard measurements include: • Maintains patient confidentiality • Maintains regular weekly schedule 	
Time Commitment:	
<ul style="list-style-type: none"> • Four hours per month – between the hours of 8am – 2pm 	
Uniform:	
<ul style="list-style-type: none"> • Traditional volunteer uniform with solid color dress or casual pants • Business casual consistent with St. Elizabeth associate dress code • Type of shoe (flat or heel for women OK – no flip flops or sandals) 	
Date Originated:	9/9/10
Date Revised:	2/1/12
Depart Contact & Phone #:	Rhonda Haywood , 859-814-0019
Volunteer Supervisor:	Rhonda Haywood

Volunteer Position Requirements

(ADA Checklist)

Requirement Codes

FREQUENCY CODES

Defined as the percentage of time this particular activity is required in the performance of the job. Use one of the following letters as defined below.

- N** = Not Required (0% of time)
- O** = Occasional (5-20% of time)
- M** = Moderate (21-50% of time)
- E** = Extensive (51% and greater of time)

INTENSITY LEVEL

Defined as the level of importance of this particular requirement. Used more often in lifting, carrying or moving and in the "Physical Requirements" section.

- N** = Not Required
- L** = Light
- M** = Moderate
- S** = Significant

INTENSITY LEVEL FOR LIFTING AND CARRYING

- N** = Not Required
- L** = Light (2 - 7 lbs)
- M** = Moderate (8 - 24 lbs)
- S** = Significant (25 - 49 lbs)
- H** = Heavy (50+ lbs)

Physical Requirements

Sitting
Standing with little movement
Walking
Hearing
Talking
Lifting objects up to waist
Lifting objects overhead
Carrying objects
Pushing/pulling objects
Filing
Finger dexterity/handling/feeling
Typing/keying data
Eye-hand coordination
Near vision
Color vision
Far vision
Night vision
Driving
Reaching
Ascending/descending stairs
Climbing/balancing
Bending/stooping
Kneeling/crouching/crawling
Other, please list

<u>Frequency</u>	<u>Intensity</u>
<u>Code</u>	<u>Code</u>

E	
O	
O	
O	
O	
O	Light (2 - 7 lbs)
N	<u>Not Required</u>
N	<u>Not Required</u>
N	<u>Not Required</u>
O	
M	
M	
L	
N	
N	
N	
N	
N	
N	
N	
N	
N	
N	

[Click here to enter text.](#)

Volunteer Position Requirements (Cont.)

Mental Requirements

	<u>Frequency Code</u>	<u>Intensity Code</u>
Writing	O	
Spelling	O	
Reading	M	
Remembering	M	
Recognition/identification		M
Understanding instructions, information and/or concepts	E	S
Math Skills	N	N
Analysis of information	M	M
Problem solving	O	L
Communication instructions, information and/or concepts		N
Decision making		L
Learning new tasks		N
Drawing	N	N
Originality/creativity	N	N
Others, please list		
Click here to enter text.		

Working Condition (Environment)

Please check these apply to the position

Normal office environment	<input checked="" type="checkbox"/>
Patient care areas	<input checked="" type="checkbox"/>
Medical (non-patient) area	<input checked="" type="checkbox"/>
Alone in department or shift	<input type="checkbox"/>
Low lighting	<input type="checkbox"/>
Low ventilation	<input type="checkbox"/>
Tight work space	<input type="checkbox"/>
Potential exposure to disease	<input type="checkbox"/>
Potential exposure to chemicals	<input type="checkbox"/>
High noise levels	<input type="checkbox"/>
Potential electrical hazards	<input type="checkbox"/>
Potential mechanical hazards	<input type="checkbox"/>
Potentially dangerous equipment	<input type="checkbox"/>
Wet environment	<input type="checkbox"/>
Heights	<input type="checkbox"/>
Outdoors	<input type="checkbox"/>
Potential exposure to dust/dirt	<input type="checkbox"/>
Other possible safety risks please list: Click here to enter text.	

Work Schedule

Please place an (X) if these apply to the position

Varying shifts	<input type="checkbox"/>
Overtime work	<input type="checkbox"/>
Weekend work	<input type="checkbox"/>
On-Call work	<input type="checkbox"/>
Travel	<input type="checkbox"/>
Other, please list: Click here to enter text.	

Working Demands

- Handles highly confidential data
- Productivity demands (identified)
- Accuracy demands (identified)
- Extended visual concentration
- Other, please list: MR Safety Training

Tools, equipment used

Please list:

[Click here to enter text.](#)

PROTECTED HEALTH INFORMATION: ROLE BASED ACCESS FORM

Department: Radiology
 Position Title: Patient Survey Processor
 Date: 2/1/12

Does access need to be restricted by location? Yes No

TYPE OF ACCESS

Enter one of the following for each box below:

- R** = Required
- I** = Incidental
- N** = Not Applicable

	Demographic	Insurance	Financial	Clinical	Codified	All
<u>Create</u>	N	N	N	N	N	N
<u>Modify</u>	N	N	N	N	N	N
<u>Use</u>	N	N	N	N	N	N
<u>View</u>	N	N	N	N	N	N
<u>Disclose</u>	N	N	N	N	N	N
<u>Transport</u>	N	N	N	N	N	N
<u>Maintain</u>	N	N	N	N	N	N
<u>Destroy</u>	N	N	N	N	N	N

Legend

Type of access:

- Create:** Primary source documentation. (Dictated reports, nurses notes, notations on the MAR)
- Modify:** Change incorrect data (According to policy)
- Use:** Read and view the information to make decisions appropriate for your position.
- View:** Employee may view certain information, but not expected to make decisions based on what they know.
- Disclose:** Conveyance of the information to persons or entities outside SEMC.
- Transport:** Moving information from one place to another. (Should not view)
- Maintain:** To retain documents/files within office/department.
- Destroy:** Final legal disposition of our business records.

What Information:

Demographic: Information to identify a person (name, address, race, marital status, religion)

Insurance: Information used to identify payers and insured.

Financial/Claims: Payments rates, account balances, payer analysis, etc.

Codified: Clinical information that is in (alpha) numeric format (ICD-9CM, CPT, Rev. Codes)

Clinical: Information that describes a patient's health status.

All: All of the above.