

TITLE: Clinical Greeter Volunteer
Location(s): Various Locations
Host Name: Clinic Operations Manager/ Clinical Nurse Manager

SUMMARY OF VOLUNTEER POSITION:

The Greeter is responsible for welcoming all patients, families, and visitors who enter the clinic. The Greeter will assist with guest inquiries, directions, and initial questions regarding the facility or services. The position may perform other tasks as appropriate and may require travel between different locations.

ESSENTIAL FUNCTIONS:

- Greet patients and visitors and provide a positive first impression of NEMS.
- Help guide patients to the appointment location(s) within the building.
- Provide non-medical translation services for patients.
- Answer questions or refer patients/visitors to appropriate resources within the clinic.
- Maintain the visitor log as appropriate.
- Help with promoting awareness of certain NEMS initiatives.
- Keep the front entrance clear and unobstructed for patient and visitor drop off and pick up.
- Help obtain wheelchairs for patients and visitors who may have mobility constraints.
- Monitors the entrance and lobby for any safety and/or sanitary concerns, and promptly reports any issues to the appropriate person at each clinic location.
- Assist in clerical and/or administrative duties as appropriate.
- Uphold HIPAA guidelines and maintain confidentiality in all interactions.

PREFERRED QUALIFICATIONS:

- Experience serving customers and patients, preferably in the healthcare industry.
- Excellent interpersonal communication skills (verbal, written and listening).
- Experience in using computers, telephones, and office equipment.

LANGUAGE:

- Fluent reading, writing, and speaking in English is required.
- Basic Mandarin is preferred.
- Ability to speak another Chinese dialect, Vietnamese, Spanish or another language is an asset.

This is a volunteer position. I, the undersigned, acknowledge that I have read, understood, and accepted this position description and am able to perform these essential job functions without restrictions. I also understand that it may be modified from time to time.

_____	_____	_____
Volunteer Print Name	Volunteer Signature	Date

If the volunteer is under 18 years of age, please also have your parent/guardian sign below:

_____	_____	_____
Parent/Guardian Name	Parent/Guardian Signature	Date

_____	_____	_____
Volunteer Coordinator Name	Volunteer Coordinator Signature	Date

_____	_____
NEMS Host Name	NEMS Host Title

_____	_____
NEMS Host Signature	Date