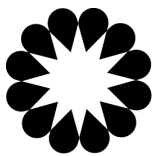


STAFF & VOLUNTEER GUIDE TO
**VOLUNTEER
PROCEDURES**



**VOLUNTEER
SERVICES**

Southern Maine Agency on Aging

(207) 396-6500 • (800) 427-7411

www.smaaa.org • volunteer@smaaa.org

Staff and Volunteer Guide to Volunteer Policies and Procedures

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Introduction

Southern Maine Agency on Aging (SMAA) believes that all employees, volunteers, and clients have a right to work or receive services in an environment free of discrimination. SMAA has volunteer screening standards in compliance with the Administration on Aging's and Corporation for National and Community Service's screening and acceptance policies. An applicant's right to respect, appreciation, confidentiality, and an understanding of the application process, are assured by SMAA and its Volunteer Services Department.

Along with promoting diversity, SMAA also promotes a safe and friendly atmosphere. Our policies and procedures help guide staff and volunteers to find a balance between the volunteer assignment and our obligations to our clients. SMAA/RSVP Volunteer Coordinators inform volunteers of all policies and procedures. It is the volunteer's responsibility to be familiar with these policies and to stay current with any changes.

The Retired and Senior Volunteer Program (RSVP) of Southern Maine, for volunteers age 55 and older, is committed to equal opportunity for all. Opportunities are available to all prospective volunteers, regardless of race, color, sex, national origin (including limited English proficiency), age, political affiliation, sexual

orientation, gender identity or expression, religion, or on the basis of disability, including HIV/AIDS, marital or parental status, military service, past participation in the discrimination complaint process, or any other improper criterion. Disability is defined as a physical or mental impairment that substantially limits one or more of such person's major life activities, such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

Applicants shall not, on the above named grounds, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination in any program or activity of RSVP of Southern Maine.

Non-Discrimination Policy

Any volunteer, service member, client, employee, or beneficiary of a program or project who believes he or she has been subjected to discrimination in violation of nondiscrimination provisions of applicable laws, regulations, or this policy, may file a complaint. Although people are not required to do so, we first try to resolve discrimination claims directly with programs and projects through our grievance system. Procedures for filing a discrimination complaint can be obtained from the office of the Executive Director of Southern Maine Agency on Aging, Sam L. Cohen Center,

30 Barra Rd., Biddeford, Maine, 04005. This information is available in large type for those who require it, and an ASL interpreter will be provided upon request.

Claims also may be filed with the Corporation for National and Community Service (CNCS) Office of Civil Rights and Inclusiveness (OCRI). “Discrimination claims not brought to the attention of the OCRI within 45 days of their occurrence may not be accepted in a formal complaint of discrimination. No one can be required to use a program, project or sponsor dispute resolution procedure before contacting OCRI. If another procedure is used, it does not affect the 45-day time limit.” (*Spencer, Wendy. “Civil Rights/Equal Opportunity Requirements.” Corporation for National & Community Service. 5/2013. www.nationalservice.gov*)

The Corporation’s Office of Civil Rights and Inclusiveness is available to provide further information to any Corporation or grantee official, volunteer, or service member. The OCRI may be reached at (202) 606-7503 (voice), (202) 606-3472 (TTY), eo@cns.gov, or at <http://www.nationalservice.gov>.

Pre–Employment Process

All RSVP and VISTA candidates at Southern Maine Agency on Aging are required to complete the following steps before they begin employment:

1. Candidates must provide a government issued photo ID for verification by the program manager.
2. The candidate for the position must agree that he/she is aware that employment is contingent on the results of National Services Criminal History Check (NSCHC) by signing each copy of his/her employment letter. This is a requirement of CNCS.
3. The candidate must sign a consent form so that SMAA can perform the NSCHC.
4. Southern Maine Agency on Aging uses the following sources for its background testing:
 - The National Sex Offender Public website must be checked before an offer of employment is made.
 - A criminal background check with the State of Maine Repository and LexusNexus for federal checks must be completed for volunteers, when required.
 - A driver record check with the Maine State Police must be completed.
5. All background checks must be completed before the candidate begins her/his assignment.
6. Once all checks have been cleared, the candidate will be considered fully initiated as an employee of SMAA.
7. Any adverse findings will result in the rescinding of the offer of employment and immediate termination.

8. All staff and volunteer candidates have the right to review the findings and have the opportunity to challenge and disprove the findings using the appeals procedures of Southern Maine Agency on Aging.
9. All results of criminal background checks are maintained in confidential, locked files.

Volunteer Recruitment

Volunteers fill a range of roles. Each role must have a job description completed using a SMAA/RSVP Volunteer Position Description (see Appendix A, p. 31), and made available to the volunteer and the supervisor before recruitment begins. Each volunteer will receive a copy of the volunteer's job description.

All volunteers must complete the Volunteer Enrollment Form (see Appendix A, p. 23). Each SMAA department may only recruit volunteers using the SMAA Volunteer Enrollment Form, and recruited volunteers must be directed to the SMAA/RSVP Volunteer Services Coordinator for processing.

All Southern Maine Agency on Aging volunteers are required to complete an orientation within three months of assignment as a SMAA volunteer. All volunteers, regardless of length of service, are subject to the provisions of all volunteer policies, including new

policies coming into effect during an existing volunteer's tenure. Existing volunteers must meet all new screening standards relevant to the role(s) they hold, with the exception of interviews and reference checks. Existing volunteers are not exempt from the following processes as they apply to the volunteer's role:

- Enrollment Form
- Federal criminal record check
- Background checks
- Driver's license and record checks
- Certificate of ability
- Proof of automobile liability insurance
- Reference checks

Neither SMAA nor any volunteer station receives remuneration for the assignment of an RSVP/SeniorCorps volunteer. A payment or donation is not a precondition for participation in the RSVP/SeniorCorps program, however a donation of \$25 toward the background check fee is appreciated. It is the policy of Southern Maine Agency on Aging to comply with the Administration on Aging's Senior Medicare Patrol (SMP) screening and acceptance processes. Volunteers are required to provide proof of automobile liability insurance and to notify their supervisor should their coverage lapse. Volunteers also may be required to attend specialized training as part of the suitability assessment process.

All pertinent information gathered as part of the screening process is carefully considered in the selection process. Volunteer applicants are informed of the timeline of the screening process and the factors used as selection criteria.

At SMAA, volunteers will not perform professional services for which licensure or certification is required. There is an exception if the work is within the scope of the position description and the volunteer has current licensure or certification to perform such work. A copy of said documentation shall be kept in the volunteer's file. Should the volunteer's professional license lapse, the volunteer should notify his/her supervisor.

As part of SMAA's Department of Health & Human Services contract, we conduct criminal background and driving record checks on prospective volunteers who will have unsupervised contact with clients or will serve under a contract which requires these checks as a condition of engagement.

Once a volunteer has passed the required reference and background checks, a volunteer job opportunity will be extended. An acceptance form signed by the volunteer will be placed in the volunteer's file, which is stored in the SMAA/RSVP Volunteer Services office.

When required, a volunteer criminal and driving record will be rechecked every two years from the volunteer or employee's start date.

Steps for Volunteer Recruitment and Placement

Steps for volunteer recruitment and placement should be followed as outlined. Please see the flowchart on page 11 for guidance.

Step #1

Any SMAA department or RSVP station wishing to have a volunteer or volunteers must design a volunteer job description using the SMAA/RSVP Volunteer Position Description in Appendix A (p. 31) before any recruiting occurs.

Step #2

Any SMAA department can recruit volunteers or request that SMAA Volunteer Services recruit volunteers for their department.

Step #3

Any person interested in becoming a SMAA or RSVP volunteer must complete the Volunteer Enrollment Form (see Appendix A, p. 23). This form must be turned into Volunteer Services for processing.

Step #4

The Volunteer Enrollment Form is received by Volunteer Services:

- Volunteer coordinators interview and screen prospective volunteers based on the volunteer position description requirements.
- Required reference checks may begin.

Step #5

The prospective volunteer is referred to the department/station for final interview and selection or refusal.

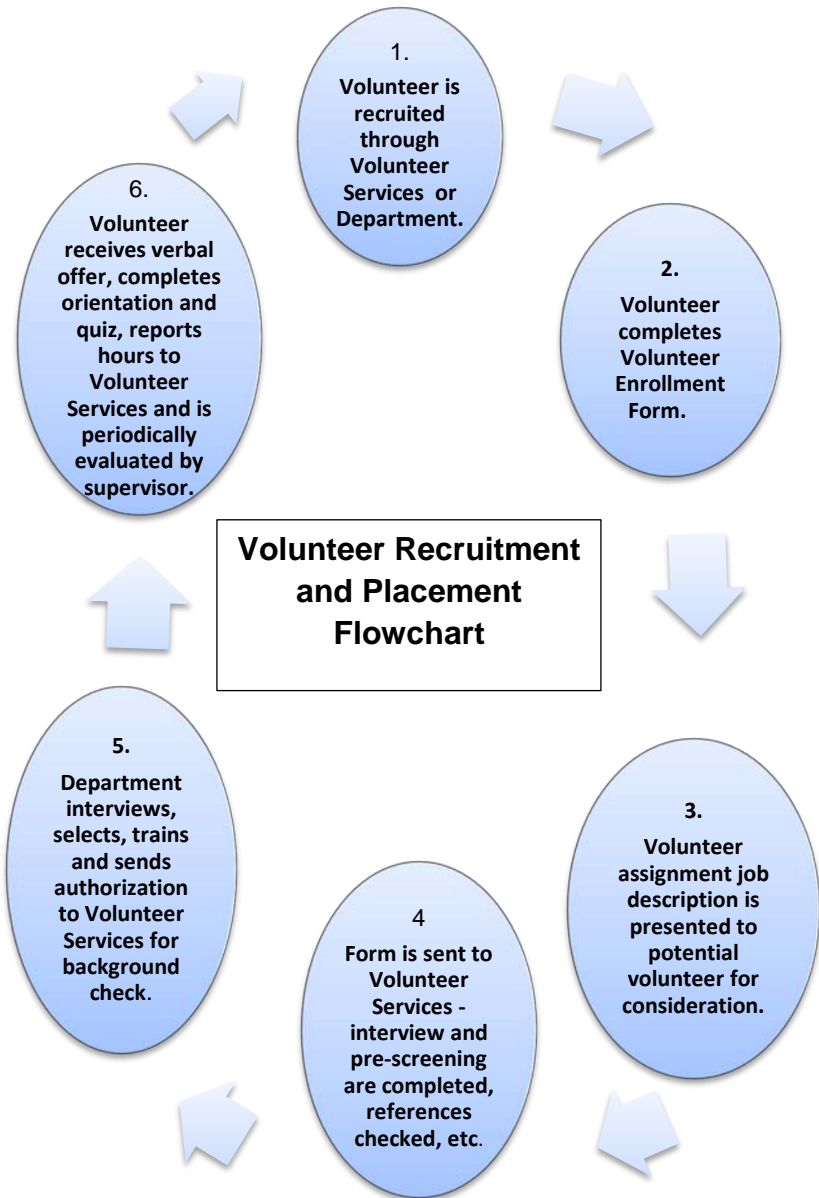
- The department/station informs RSVP/Volunteer Services of the selection decision.
- The department/station provides the required training to the prospective volunteer.
- The department/station notifies RSVP/Volunteer Services when the volunteer completes the required training and is ready to begin the assignment.

Step #6

Volunteer Services completes the background checks and notifies the department/station of pass/fail status and completion of the reference checks.

- Volunteer Services makes the volunteer an offer of assignment.

- The volunteer accepts the offer, completes a mandatory agency orientation, and receives a volunteer welcome packet. The volunteer signs and returns an acknowledgement form, a Prohibition Against Harassment & Retaliation Prevention Agreement, and Confidentiality Agreement (see Appendix A, pp. 27-30).
- The volunteer begins service. SMAA department heads ensure that an ID badge is created for all volunteers.
- The station, SMAA department, or volunteer reports hours served to Volunteer Services.
- The volunteer is periodically evaluated and recognized.



Volunteer Eligibility

After an assessment of suitability, SMAA and its employees have the right to refuse any applicant that they do not think will be a good match for the position the volunteer applicant is seeking. Although a volunteer may pass the background check and reference check, SMAA holds the right to dismiss any volunteer who has not disclosed any pending legal action against them.

Volunteer Ability to Serve

Volunteers who require special accommodations, including but not limited to medical or psychological conditions that may affect the safe and effective performance of their volunteer work, are requested to provide a medical certificate that attests to their ability to perform their assigned duties.

- The volunteer must agree that SMAA has the right to call 911 when it deems there is a health emergency occurring with the volunteer, unless the volunteer has shared a Do Not Resuscitate (DNR) Order with SMAA.
- Failure to inform SMAA of conditions of health may result in termination from volunteer service.

Emergency Contact

Volunteers are required to provide SMAA with an emergency contact so that if any medical or other emergency occurs, the volunteer's designee will be able to be reached when necessary.

Procedures for Emergency Situations

SMAA has emergency contact information for all volunteers. All SMP volunteers have an emergency call number to reach their supervisor without any switchboard delays. This contact number is provided at the time of volunteer orientation.

An accident or injury to or by a volunteer is to be reported immediately to the supervisor. An "incident" may also include, but is not limited to, a health issue, an error in judgment, other misstep or substandard performance, a lost possession, a boundary breach, an offensive remark, a sense of peril or risk while on duty. For example, a colleague may unexpectedly experience a health issue, personal items can be misplaced or left behind at work areas, or a form may be misplaced. In such cases, volunteers are expected to call their supervisor to report the incident, which then will be reported to the Chief Advancement Officer of the Southern Maine Agency on Aging, and if adjudged necessary, to the local emergency services or authorities. Please be aware that the Southern Maine Agency on Aging is not liable for lost or stolen

items while the volunteer is on SMAA property or visiting with clients.

Workplace Safety

It is SMAA's duty to assure a safe and friendly workplace for both volunteers and employees. However, the employee/volunteer has a responsibility to perform their duties in a safe manner.

1. SMAA volunteers should wear a picture ID badge when performing their assignment.
2. To protect the safety of SMAA/RSVP volunteers at SMAA assignments, volunteers will not work alone in the main office, day centers, or meal sites. At least one supervisor or paid SMAA employee must be available in person or by phone.
3. Volunteers must adhere to all SMAA rules and guidelines.
4. SMP/SHIP volunteers must adhere to the following procedures:
 - Volunteers cannot make a home visit alone; two volunteers will make a home visit jointly.
 - Notice must be provided by the volunteer to his or her supervisor prior to the visit along with travel start and projected return times as well as name, address, and phone number of the client to be visited.
 - Volunteers must notify their supervisor immediately upon their return from the visit.

- If the return of the volunteers is overdue by more than 15 minutes, the supervisor will attempt to contact the volunteers, as previously arranged. The supervisor will make two attempts in ten-minute intervals.
- Failing to reach the volunteers after the two attempts, SMAA management will be notified. They will then contact the clients' homes and the volunteers' homes, and make appropriate notification to the authorities.

5. Volunteers who make home visits for other programs should follow that program's rules.

Discipline and Termination

Volunteers are expected to conduct themselves in a responsible, professional, and appropriate manner. When a volunteer engages in improper and/or inappropriate conduct, the volunteer may be reassigned, suspended, or terminated. SMAA reserves the right to take whatever action it deems appropriate and fitting based on the nature and circumstances of the action. Among the actions SMAA may utilize are the following:

1. **Oral Counseling Session:** An oral counseling session may be given following infractions of regulations, unacceptable behavior or actions, or when a volunteer does not meet performance standards. The volunteer's supervisor will place in

the volunteer's file a dated memo stating that the oral warning was administered.

2. **Trial Period/Suspension:** SMAA may reassign a volunteer for a trial period in order to find a better fit for the volunteer or may suspend the volunteer from duty.
3. **Termination:** SMAA may terminate a volunteer or the volunteer may terminate his/her service at any time. All volunteers are required to return their SMAA ID upon the end of their service and are requested to complete an exit interview form upon ending their service.

RSVP Procedures

1. All volunteer jobs must have an assigned focus area code.
2. Every volunteer station must have a signed Memorandum of Understanding (MOU) on file with the project.
 - The MOU must be updated every three years.
 - The station must certify its accessibility.
 - The station must certify that it enjoys non-profit status or is a proprietary health care facility.
3. All volunteer stations must have or do the following:
 - Designate volunteer supervisors;
 - Letters of Agreement from each of their in-home clients to be served;

- Report and certify the hours RSVP volunteers serve their clientele;
 - Proof of public/private non-profit status or proof of designation of proprietary health care agency status;
 - Complete and submit an annual safety check form to RSVP of Southern Maine.
4. All volunteers and volunteer stations must report hours of service to RSVP of Southern Maine each month.
- Hours must be documented by a designated volunteer supervisor.
 - Volunteer hours may be submitted by regular mail, e-mail, or online.
 - Time records for each RSVP volunteer must be signed as hard copy individual or group time sheets, hard copy of sent email or web-based system, and kept on file by the volunteer station for four years.
 - All web-based, electronic, and email time records must be retrievable and be recognized as signed by the volunteer supervisor.
 - All hours for RSVP and SMAA volunteers are recorded in Volunteer Reporter software.

- Hours may be submitted monthly by fax, regular mail, in person, by email, or electronically using the Web Assistant tool.
 - The repository of all data pertaining to RSVP volunteers is Southern Maine Agency on Aging's RSVP of Southern Maine offices
5. All employees assigned to work in the RSVP or VISTA Programs, including new hires and transfers, are required to undergo a background check as required by CNCS policy as a condition of employment and prior to their first day of work, as follows:
- All RSVP and VISTA staff serve vulnerable populations and are required to complete all parts of the Criminal History Check. The parts of the NSCHC are:
 - National Sex Offender Background Check
 - State Background Check
 - FBI Fingerprint Check
 - National Criminal Background Check
 - State Driver Background Check
 - Southern Maine Agency on Aging uses the following sources for its background testing on department employees:

- A check on the National Sex Offender Public Website must be completed before offer of employment is made.
- Criminal background checks must be made with the State of Maine Repository and FBI fingerprints for paid staff.
- A Driver Record Check is completed with Maine State Police.
- All candidates must sign the Maine VECHS Waiver agreeing to the required background checks and confirming that employment is conditional on passing the background checks.
- All background checks must be initiated before the candidate begins her/his assignment.
- Accompaniment is required for any staff person interfacing with vulnerable populations (people age 60 and older) before results are received. State or federal background checks must be completed and documented by the date initiated and the dated result received before candidate begins independent employment.
- Once all checks have been cleared, the candidate will be considered fully initiated as an employee of SMAA.
- Any adverse findings will result in the rescinding of the offer of employment and immediate termination.

- All candidates and incumbents have the right to review the findings and have the opportunity to challenge and disprove the findings using the appeals procedures of Southern Maine Agency on Aging.

6. The data collection system used by RSVP of Southern Maine includes the use of the Harmony data collection system for the collection and retrieval of outcome information for clients served by RSVP volunteers and the Volunteer Reporter software for the collection and retrieval of volunteer output (hours) time in service.

- As stated in the item under RSVP Staff Procedures on page 17, volunteers' hours are reported by station supervisors on a monthly basis to RSVP of Southern Maine.
- It is the responsibility of the Volunteer Services Coordinator (VSC) to ascertain that all hours are recorded in Volunteer Reporter.
- The process includes receipt of volunteer hours by the VSC via fax, mail, e-mail, or Web Assistant.
- The VSC files all time sheets in the appropriate filing cabinet and keeps them for four years before they are destroyed.

- All RSVP volunteer files shall contain the following information, which also shall be entered into Volunteer Reporter:
 - A signed Volunteer Enrollment Form;
 - Certification of the volunteer's age;
 - A signed photo release when necessary;
 - A signed Confidentiality Agreement;
 - A signed prohibition against harassment form;
 - A Volunteer Position Description.
- The RSVP Director or designated staff person will create a new record in the database and store the file in the office central file along with copies of any additional correspondence.

7. All RSVP volunteer placements will be surveyed for volunteer satisfaction and program effectiveness in both output and outcome, where applicable, on a regular basis.
- Survey tools will measure the output and outcome in the focus areas designated in the RSVP grant.
 - Volunteer satisfaction will be measured annually using a survey evaluation method.
 - One third of volunteer stations will be surveyed using an evaluation or survey that includes the following:

- Clear community need statement;
- Service description;
- Frequency and duration of intervention; and
- Name of instrument to be used.
- RSVP staff will be trained annually on data collection.
- A schedule of data collection will be updated yearly.
 - All performance measures with outcomes will be surveyed annually.
 - All other performance measures will be surveyed biennially.
- All data collected will be compiled, reported, and stored using the Volunteer Reporter and Web Assistant software and stored in the central office files.

Appendix A



Volunteer Enrollment Form

(Please circle one)

Miss/Mrs/Ms/Mr: _____

DOB: _____

Address: _____

Mailing Address (if different):

Phone: (home) _____ (cell) _____

E-mail Address: _____

Emergency Contact: Name _____ Relationship _____

Phone _____ Address _____

At what times are you available and interested in volunteering? (Check all that apply)

<input type="checkbox"/> Monday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening	<input type="checkbox"/> Tuesday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening	<input type="checkbox"/> Wednesday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening	<input type="checkbox"/> Thursday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening	<input type="checkbox"/> Friday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening	<input type="checkbox"/> Weekends <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening
---	--	--	---	---	---

Please list volunteer roles you are interested in:

Geographic preference as to where you would like to volunteer:

Are there times or seasons when you *cannot* do volunteer work?

Yes No

If yes, please

specify: _____

Education (Please check highest level completed):

Some High School High School Graduate

Some College or Vocational School College Graduate

Some Graduate School Graduate School

Current/Former Employer: _____

Address: _____

Does your employer/former employer have an employee volunteer match program? Yes No

Please tell us about your current employment/past work history and/or volunteer experiences:

Have you ever served, or are you serving in the U.S. Military?

Yes No

If yes, are you interested in participating in Vet to Vet: Veterans Helping Veterans? Yes No

Do you speak more than one language? ____ Yes ____ No

If yes, what language (s)?

Do you need special accommodation in order to do volunteer work? (Example: Allergies, Health Conditions, Mobility Issues, etc.)

____ Yes ____ No

If yes, please explain:

Are you required to do community service for any reason?

____ Yes ____ No

If yes, explain:

Do you drive? ____ Yes ____ No

Do you hold current auto liability insurance? ____ Yes ____ No

Name of Auto Insurance Company:

May we print your name as a new volunteer in our publication, *Senior News*?

____ Yes ____ No

How did you hear about us?

____ A Speech ____ Radio ____ Another Volunteer ____ Senior News

____ Other paper ____ TV ____ Word of Mouth ____ SMAA Website

____ Other website ____ Staff Person

Other: _____

I understand that I am a volunteer and not an employee of SMAA/ RSVP.

Signature of Volunteer

Date

Additional Comments:

PLEASE RETURN TO:

Southern Maine Agency on Aging

Sam L. Cohen Center

30 Barra Rd.

Biddeford, ME 04005

FAX: (207) 517-6240



Confidentiality Agreement for Staff and Volunteers

In the course of providing services and support to the community, staff and volunteers at Southern Maine Agency on Aging (SMAA) are privy to confidential information about the agency, the workstations where volunteers are assigned, and clients and their families. We at Southern Maine Agency on Aging respect and honor the trust that others have placed in us when they share such confidential matters. We therefore understand the necessity of keeping this information in strict confidence and not divulging to anyone any part of the information unless we have specific instructions and releases from those involved. All SMAA staff and volunteers do therefore pledge to receive and hold confidential all information concerning any aspect of the agency's business, including but not limited to its clients, its employees, and its services, and agree not to divulge or disclose such information to any person not employed at the agency, including other organizations, government agencies, and legal entities, without proper release and approval from SMAA's executive director to release such information. **The release of information in violation of this policy is grounds for discipline up to and including immediate termination of employment or volunteer opportunity.**

By signing this, I agree to adhere to the SMAA Confidentiality Agreement and will not at any time disclose or use either during or subsequent to my employment or volunteer opportunity any confidential information, knowledge, or data which I receive or develop during my employment or volunteer opportunity at SMAA. I acknowledge that my supervisor, or his or her designee, has explained the policy to me. Examples of information that must be kept confidential include but are not limited to:

- Client and/or family information; employee information
- Organization mailing lists or business plans
- Training materials

By signing this agreement, I also acknowledge the following:

- **The release of information in violation of this policy is grounds for discipline up to and including immediate termination of employment or volunteer opportunity.**
- If I am unsure whether the release of information is authorized, I should check with my supervisor or his or her designee.
- The unauthorized disclosure of confidential information may also result in civil or criminal penalties.

Employee/Volunteer Signature

Date

Print Name

Send form to volunteer@smaaa.org or mail to: Volunteer Services, Southern Maine Agency on Aging, Sam L. Cohen Center, 30 Barra Rd., Biddeford, ME 04005



Prohibition Against Harassment & Retaliation Prevention Agreement

This document summarizes the Maine Human Rights Act, laws enforced by the Federal Equal Employment Opportunity Commission, and policies of Southern Maine Agency on Aging that prohibit sexual and other forms of harassment in the workplace. The Agency will not tolerate bullying, and workplace violence or harassment based on gender identity, sexual orientation, transgender status, genetic information, marital status, amnesty or status as a covered veteran, race, color, religion, national origin, age or disability. An employee/volunteer will be subject to disciplinary action, including dismissal, for violation of these laws and policy. To view these laws and policy, see www.smaaa.org/volunteer

The policy's protections apply two ways:

1. You have a right not to be harassed by any volunteer, staff member, or client of the Agency.
2. Volunteers, staff members, and clients of the Agency have a right not to be harassed by you.

What kinds of conduct are prohibited?

1. Display of suggestive objects or pictures, and requests to see suggestive pictures of another person.
2. Jokes of a sexual nature; suggestive or lewd remarks.
3. Pressure to date a supervisor or other staff, unwelcome flirtation or sexual advances, and requests for sexual favors.
4. Unwelcome hugging, kissing, or touching. Contact should be kept to a handshake.
5. Degrading or suggestive comments about appearance, clothing, anatomy, gender identity, sexual orientation, transgender status, genetic information, marital status, amnesty or status as a covered veteran, race, color, religion, national origin, age or disability.
6. Retaliation against one who has made a complaint of harassment.

It is considered sexual harassment when:

- An employee or volunteer is forced to submit to such conduct (described above) either explicitly or implicitly as a term or condition of his or her employment/volunteer opportunity;
- Employment decisions/volunteer placements are made on the basis of whether an employee/volunteer submits or rejects such conduct;
- Such conduct interferes with an employee’s work or a volunteer’s job performance or it creates an intimidating, hostile, or offensive environment.

Even if someone is joking, comments of a personal or sexual nature *may* bother another person, in which case such comments may be considered harassment. When in doubt, ask yourself: “Would I want my spouse, partner, child, sibling, or parent to be subjected to this behavior or comment?”

If you believe you have been harassed in any way, contact your volunteer program coordinator or the department supervisor.

By signing this Agreement, I acknowledge the following:

- **I have read a description of the Maine Human Rights Act, laws enforced by the Federal Equal Employment Opportunity Commission, and the SMAA Policy that prohibit sexual and other forms of harassment (above) and agree to abide by their terms.**
- **I will contact my supervisor or his or her designee if I have questions concerning the information in this notice.**

Employee/Volunteer Signature

Date

Send form to volunteer@smaa.org or mail to: Volunteer Services, Southern Maine Agency on Aging, Sam L. Cohen Center, 30 Barra Rd., Biddeford, ME 04005

SMAA/RSVP VOLUNTEER POSITION DESCRIPTION

Volunteer position title:

Agency/Organization:

Address:

Organization's mission:

What specific tasks will the volunteer(s) perform?

Qualities, experience & skills needed by the volunteers:

Number of volunteers needed:

Where will the volunteer(s) work?

When will the volunteer(s) work?

What length of commitment is expected of the volunteer(s)?

Is this assignment: ongoing or short-term?

When and where will volunteer training/orientation take place?

Who will provide the training, and how long will it take?

Who will be responsible for volunteer timesheets?

Who will supervise the volunteer(s)?

Telephone:

E-mail:

Appendix B



MEVECHS Program Waiver Agreement and Statement

(Maine Volunteer and Employee Criminal History Service)
Maine State Police, State Bureau of Identification

Pursuant to the National Child Protection Act, as amended by the Volunteers for Children Act (NCPA/VCA), this form must be completed and signed by every current or prospective applicant for whom fingerprint-based criminal history records are requested by a Qualified Entity (QE).

I, the undersigned, hereby authorize Southern Maine Agency on Aging/RSVP Program to submit a set of my fingerprints to the Maine State Police-State Bureau of Identification (MSP-SBI) and Federal Bureau of Investigation (FBI) for the purpose of accessing and reviewing state and national criminal history records that may pertain to me. I understand that I would be able to receive any Maine record from the MSP-SBI, and any national criminal history record from the FBI pursuant to 28 CFR Sections 16.30–34, and that I could then freely disclose any such information to whomever I chose. By signing this Waiver Agreement and Statement, it is my intent to authorize the dissemination of any Maine and national criminal history record that may pertain to me to Southern Maine Agency on Aging.

I understand that, until the criminal history background check is completed, the QE may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities. I further understand that, upon request, the QE may provide me a copy of the criminal history background report, if any, received on me and that I

am entitled to challenge the accuracy and completeness of any information contained in any such report. I may obtain a prompt determination as to the validity of my challenge before a final decision is made based on Maine Statute Title 16 §709 and Code of Federal Regulations (CFR) Title 28 § 16.30-34.

I have ____ OR have not ____ been convicted of a crime.

If convicted, please describe the crime(s), date and location of the crime(s) and the name of the convicting court:

I understand that my employment is contingent upon successful passage of the SBI-FBI/ background clearance.

I hereby declare that I am the person described below, and understand that any falsification of this statement can result in the termination of my participation.

Signature

Date

Printed Name

Date of Birth

Residential Address

City

State

Zip

This document must be retained by the Southern Maine Agency on Aging and is subject to audit by the MSP-SBI and FBI.

Appendix C

National Service Criminal History Check (NSCHC) Documentation Checklist

1.	Name of individual in covered position	
2.	Recurring access to vulnerable populations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Start Date	

4. Verification of identity

Photocopy/scan of government-issued ID (driver's license or passport) attached

-----or

ID type:

ID number: _____ Expiration: _____

5. Written Consent

Scanned or attached consent from candidate agreeing to undergo checks and confirming that the candidate understands selection is contingent upon the outcomes of the checks.

6. National Sex Offender Public Website (www.nsopw.gov)

Date Completed: _____

Screenshots or printout of results from National Sex Offender Public Website (NSOPW) that clear your candidate.

If the NSOPW search returns any results, include documentation that shows that your candidate is not one of those listed.

If any registries were not reporting at the time of your search, documentation that you either searched the non-reporting registry directly or conducted a second NSOPW search when the registry was present.

7. Records Checked

State of Service:	Source:
Initiation Process: <i>(a) State Checks</i>	
Date Initiated:	Date Completed:
State of Residence:	Source:
Initiation Process:	
Date Initiated:	Date Completed:

-----and/or

(b) FBI Checks

Date Initiated:	Date Completed:
Initiation Process:	

8. Accompaniment

- Attach documentation of each instance of accompaniment during service or work with vulnerable populations when required. Record the date, time, location, and name of person who provided accompaniment.
- Ensure person who provided accompaniment has been cleared in their position.

9. Alternative Search Procedures (ASP) or Exemptions

- This individual was cleared using an ASP or exemption. Briefly describe how the approved process differs from the standard required NSCHC process below. Include the ASP or exemption reference number. (For example, "ASP-2016-001".)

10. Consideration of results

- I have reviewed and considered the results of these checks and certify that this individual is eligible for work or service.

Signature of Selecting Official

Date

Name and Title of Selecting Official

Guidance and Supporting Documentation

Field-by-Field Guidance	Documentation
<p>1. Name of Individual: Enter the name of the individual in a covered position. This name should match exactly what is on his/her government-issued identification.</p>	<p>See “Verification of Identity Below.”</p>
<p>2. Recurring Access to Vulnerable Populations: “Recurring” access is the ability on more than one occasion to approach, observe, or communicate with a person, through physical proximity or other means, including but not limited to, electronic or telephonic communication. Recurring access is typically a regular, scheduled, and anticipated component of a person’s service activities. Essentially, if you know access is going to occur, it is recurring access, even if it is relatively infrequent.</p>	<p>This should be documented in the individual’s Position Description.</p>
<p>3. Start Date: This is the date an individual in a covered position will begin accumulating hours to be charged to a CNCS-funded</p>	<p>A sign-in log or transaction record of the first instance where an individual begins accumulating hours for a salary, stipend, living</p>

<p>grant. It may include orientations, trainings, or other activities that might be considered “pre-service” from a programmatic perspective.</p>	<p>allowance or education award from a CNCS-funded program (including federal share and match).</p>
<p>4. Verification of Identity</p>	<p>EITHER a photocopy of a government-issued ID, with their name and ID number legible OR the key information noted on the Documentation Checklist (ID type, ID number and expiration). You should also verify that the name in (1) above is exactly as it appears on this ID.</p>
<p>5. Written Consent</p>	<p>A completed consent form including a signed statement from the candidate agreeing to undergo checks and that the candidate understands that selection is contingent on results.</p>
<p>6. National Sex Offender Public Website</p>	<ol style="list-style-type: none"> 1. The full, dated results of a nationwide search using the name on the individual’s government-issued ID. 2. Verification that you have confirmed any results are not your candidate. 3. Any additional results needed due to registries that were not reporting at the time of the search.
<p>7. Records Checked As of April 21, 2011, individuals with recurring</p>	<p>For each state and FBI check:</p>

<p>access to vulnerable populations require both state checks and FBI checks. Those with episodic or no access to vulnerable populations require EITHER state checks OR an FBI check. For earlier requirements, see “Effective Dates” on the Knowledge Network.</p> <p>7(a) State Checks</p> <p>State checks consist of 1) a search of the official criminal history repository in the state in which an individual will serve (“state of service”) and 2) a search of the official criminal history repository in the state in which someone physically resides at their time of his or her application to begin work or service on a CNCS-funded grant (“state of residence”). A list of official repositories and approved alternatives is available on the Knowledge Network. You must choose a process that you will consider initiation and document that process in your policies and procedures. You must document that initiation</p>	<ul style="list-style-type: none"> • Documentation of the initiation date of the checks. • Documentation of the source of the checks. • The results of each check and documentation that you considered the results (such as a notation directly on the results). <p>For the state of residence check (if applicable):</p> <ul style="list-style-type: none"> • Documentation of the state in which an individual physically resides at the time of application to begin work or service on a CNCS-funded program.
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<p>has occurred no later than the first day of work or service.</p> <p>7(b) FBI Checks</p> <p>FBI Checks are fingerprint-based searches of the FBI's national criminal history database. In most cases, organizations will receive these from their state repositories, the same bodies discussed in 7(a) above. If you cannot successfully obtain an FBI check from your state repository, you may use Fieldprint, a contractor secured for this purpose by CNCS. All other routes for obtaining FBI checks require an alternative search procedure. See "FBI Check" on the Knowledge Network for more information. You must choose a process that you will consider initiation and document that process in your policies and procedures. You must document that initiation has occurred no later than the first day of work or service. See CNCS's Guidance on State and FBI checks for more</p>	<p>If you use a vendor for any component of these checks:</p> <ul style="list-style-type: none">• Documentation of the compliance of those vendor checks. See "Vendor Guidance" on the Knowledge Network for more information.
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<p>information on initiation, including examples.</p> <p><i>A Special Note on the Use of Vendors:</i></p> <p>Vendors may be able to help your organization obtain certain kinds of checks quickly and easily. However, many vendors are not able to comply with the NSCHC requirements fully, due to regulatory restrictions in certain states. As a result, you must thoroughly vet and document a vendor’s ability to comply with the NSCHC requirements and conduct any components that a vendor cannot conduct compliantly yourself.</p>	
<p>8. Accompaniment</p> <p>An individual whose state and FBI checks are pending cannot be in the presence of vulnerable populations without being in the physical presence of someone who has been cleared for such access. This could include both individuals cleared through the NSCHC process and others cleared by the nature of their employment.</p>	<p>A log of the dates, times and person doing the accompaniment for each instance when an individual was in the presence of vulnerable populations before either an FBI check or the state checks clear.</p> <p>You may retain documentation of the qualifications of the person providing accompaniment elsewhere. For example, if one person or category of persons provides</p>

Accompaniment can cease when either an FBI check or the state checks (including both state of residence and state of service checks, when applicable) clear.	accompaniment to all volunteers, you may maintain this in one place for the whole program.
9. ASPs or Exemptions	Include a copy of the approval letter for any ASP or exemption applicable to this file. Follow all documentation requirements stated in the approval, including if you are using a pre-approved ASP.
10. Consideration of Results	Complete this section of the form at the end of the NSCHC process to certify that an individual is eligible for work or service.

Recommended File Structure:

See above for more information on what documentation should be included for each component.

- A. NSCHC Documentation Checklist
- B. Documentation of Start Date
- C. Verification of Identity
- D. Documentation of Consent
- E. National Sex Offender Public Website Results, including the dates conducted, documentation that results were reviewed and the results of any additional searches conducted
- F. State of Service Check, including documentation of dates initiated, source, results, and consideration of results
- G. (If applicable) State of Residence Check, including documentation of dates initiated, source, results, and consideration of results

- H. (If applicable) FBI Check, including documentation of dates initiated, source, results, and consideration of results
- I. Accompaniment
- J. ASPs/Exemption

Appendix D:

Accompaniment Diary

(Name of Candidate/Employee) (Staff person accompanying)

Date	Time	Location of Accompaniment

Appendix E

(For Volunteers to self-report hours)

How to log your SMAA/RSVP volunteer hours at the end of each month:

- Open this link:
www.smaaa.org/volunteer/currentvolunteers.html or go to SMAA's Homepage at <http://www.smaaa.org> then click on "Volunteer Services" and then click on "Current Volunteers".
- Navigate to the left side of page and find a yellow box underneath the photo, where it says "Helpful Links." Click on "Log Your Volunteer Hours."
- Your username is your first and last name with no spaces, like this example: marysmith.
- Your password the first time you log in is: volunteer (the password is case sensitive).
- When you get to the next page, it will ask you to change your password. You do not need to change your username, only your password. To easily remember a new password, use one that is familiar to you. There are no security concerns associated with logging your volunteer hours.
- The first time you log on, you will need to exit the next page and go back to the yellow SMAA volunteer page. You will only have to do this once. After you log back in with your new password, you will be taken

directly to the “enter your volunteer hours” page every time.

- Below the box where your volunteer position is highlighted, click “OK.”
- Enter hours. Please round up to the next half-hour; no minutes are needed. Please include the time you have driven to and from the volunteer worksite. In other words, track “door to door” time.

Please include time for any training and any meetings with SMAA in the hours you report.

Please call 207-396-6595 or email volunteer@smaaa.org if you have any problems logging in or if you forget your password.

Appendix F

(For Supervisors of Volunteers)

How to log SMAA/RSVP volunteer hours for all your volunteers at the end of each month:

- Open this link:
www.smaaa.org/volunteer/currentvolunteers.html or go to SMAA's Homepage at <http://www.smaaa.org> then click on "Volunteer Services" and then click on "Current Volunteers".
- Navigate to the left side of page and find a yellow box underneath the photo, where it says "Helpful Links." Click on "Log Your Volunteer Hours."
- The Username is the name of your agency with no spaces, like this example: americancancersociety.
- The Password the first time you log in is: RSVP (the password is case sensitive).
- When you get to the next page, it will ask you to change your password. You do not need to change your username, only the password. To easily remember a new password, use one that is familiar to you. There are no security concerns associated with logging your volunteers' hours.
- The first time you log on, you will need to exit the next page and go back to the yellow SMAA volunteer page. You will only have to do this once. After you log back in with your new password, you will be taken directly to the "enter your volunteer hours" page every time. A list of all the volunteers associated with SMAA/RSVP will drop down and you will be able to

highlight each person who worked that month and enter their hours.

- Click OK to finish with each individual volunteer.
- Enter hours - round up to the next half-hour please include the travel time driven to and from the volunteer worksite. In other words, track “door to door” time.

Please include time for training in the hours reported and any meetings going forward.

Please call 207-396-6595 or email volunteer@smaa.org if you have any problems logging in or you forget your password.

Glossary

1. CNCS – Corporation for National and Community Service – A federal agency overseeing National Service programs and grants
2. DNR – Do Not Resuscitate – A medical order prohibiting lifesaving intervention signed by a person and her/his physician
3. FBI – Federal Bureau of Investigation – A national policing agency
4. MOU – Memorandum of Understanding – A signed agreement between two agencies outlining the conditions of volunteer service
5. NSCHC – National Service Criminal History Check – A police agency repository to check the criminal histories of staff and volunteers
6. OCRI – Office of Civil Rights and Inclusiveness – A branch of the federal government that investigates discrimination complaints
7. RSVP – Retired and Senior Volunteer Program – A national volunteer program for people 55 years old or older; locally, a part of Southern Maine Agency on Aging

8. SeniorCorps – Part of the Corporation for National and Community Service for people 55 and older; includes Foster Grandparent Program, RSVP and Senior Companion
9. SHIP – State Health Insurance Program
10. SMAA – Southern Maine Agency on Aging – the Area Agency on Aging for York and Cumberland counties.
11. SMP – Senior Medicare Patrol
12. VISTA – Volunteers in Service to America – known as the domestic Peace Corps
13. Volunteer Station – Any nonprofit agency or municipality where volunteers are assigned.
14. VSC – Volunteer Services Coordinator – Staff member of Southern Maine Agency on Aging/RSVP Volunteer Services staff