

# Volunteer Program Policy Manual

## **Board of Supervisors**

Hilda L. Solis, First District
Mark Ridley-Thomas, Second District
Sheila Kuehl, Third District
Don Knabe, Fourth District
Michael D. Antonovich, Fifth District

Interim Chief Executive Officer
Sachi A. Hamai



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#### I. BASIC PROGRAM ELEMENTS

#### INTRODUCTION

Through the Board of Supervisors' leadership and department administrators' support, the County volunteer program has come to play a vital role in the enrichment of public services. The program promotes volunteerism as an opportunity to improve program efficiency, enhance productivity, and engage community involvement (Appendix 1).

Administration of the County's volunteer program is decentralized. All departments' volunteer programs vary considerably in size, scope, services, complexity and practice. The purpose of this manual is to serve as an overall framework for County departments on the management of a County volunteer program.

The management process is dynamic. Therefore, policies and guidelines are subject to continuous development and change. For this reason, Volunteer Program Coordinators (VPCs) are encouraged to participate in reviews of this policy manual and provide input on areas needing improvement.

Departments may adopt guidelines formulated in this manual or develop their own supplementary handbook. A well-formulated manual will begin with consideration of a department volunteer program's mission, objectives, and goals.

#### **MISSION**

A principal consideration for the development of a mission statement is enhancement of County services as each department carries them out. Therefore, the mission of a department's volunteer program should be consistent with and supportive of the department's overall mission. Volunteers enhance and supplement service delivery, but do not substitute or displace regular staff and their responsibilities. A mission statement should be succinct and general, succinctly encapsulating the purpose of the volunteer program.

#### **OBJECTIVES**

Objectives should be established based on the volunteer program mission statement and the following criteria:

- Measurable;
- · Cost effective and resourceful;
- Supportive of department objectives;
- Achievable and practical; and
- Challenging and rewarding.

#### GOALS

Goals are formulated based on the statement of objectives and constitute an action plan that should be reviewed and revised periodically. The plan should address the following areas: stakeholder responsibilities, orientation, training, supervision, evaluation, recognition, recordkeeping, and program resources. Goals are statements that detail who will do what, when, where, how and at what cost.

#### DEPARTMENT PROGRAM ADMINISTRATION

Departments that implement a volunteer program should select a VPC. VPCs serve as the department's primary liaison with existing and potential volunteers, as well as the Chief Executive Office, Workplace Programs and Marketing (CEO-WPM). They are also responsible for providing quarterly volunteer hour reports and additional information as necessary to CEO-WPM, and should be involved in the organization and execution of the department's volunteer program.

Typical duties of a VPC include, but are not limited to the following:

- Plan, develop and implement volunteer programs;
- Recruit, select, orient, train and evaluate volunteers;
- Establish and maintain department volunteer program policies and procedures;
- Ensure that volunteers comply with rules and regulations;
- Evaluate department's existing volunteer programs;
- Attend staff-meetings, professional meetings and conferences;
- Plan and coordinate volunteer recognition ceremonies;
- Maintain attendance records of volunteers and compile quarterly reports;
- Speak before community groups; and
- Act as liaison between community groups and County personnel.

#### **ROLE OF THE CHIEF EXECUTIVE OFFICE (CEO)**

CEO-WPM provides countywide direction, coordination and support of volunteer programs through the County Volunteer Program Manager (VPM). Functions of the County VPM include, but are not limited to the following:

- Assist with the development and coordination of all Countywide volunteer programs;
- Develop periodic training programs for VPCs;
- Consult with departments on special problems, policy, and new volunteer programs;
- Plan countywide volunteer program activities with the help of ad hoc committees composed of VPCs;
- Conduct countywide surveys and studies of volunteer programs;
- Develop countywide recruitment and promotional campaigns for the strengthening, maintenance and expansion of County volunteer programs;
- Develop and recommend County policies and procedures relating to countywide volunteer programs;
- Represent the CEO at meetings with department heads and outside organizations regarding County volunteer programs;

- Facilitate and coordinate inter-departmental and interagency agreements; and
- Coordinate the annual Volunteer Awards Luncheon.

VPCs are encouraged to refer any questions or concerns regarding volunteer program policies and procedures to the County VPM.

#### RESOURCES FOR PROFESSIONAL DEVELOPMENT

Resources are available that will enable VPCs to pursue their professional development. These resources are within County government and professional organizations.

VPCs are encouraged to explore these resources, support the development and maintenance of professional standards, participate in organizations that enrich their skills, draw upon opportunities to learn from subject matter experts, and share their growing knowledge with colleagues.

#### **COUNTY GOVERNMENT**

CEO-WPM coordinates periodic meetings with all VPCs. At these meetings, information is presented about the latest developments in County policies and program administration resources. Guests are invited to make presentations.

#### PROFESSIONAL ORGANIZATIONS

The local professional organization, Directors of Volunteers in Agencies – Los Angeles (DOVIA-LA) provides education, networking and support opportunities to volunteer management. DOVIA-LA sponsors networking events, provides information on developments in volunteer administration, and hosts presentations by experts in the field. In the past, VPCs have served as officers of DOVIA-LA. DOVIA-LA also sponsors and co-sponsors volunteer management conferences and symposiums.

VPCs are encouraged to look into other professional groups that may be specific to their department functions, such as the National Docent Symposium Council.

#### II. DEFINITION OF A VOLUNTEER

#### **COUNTY VOLUNTEER GUIDELINES**

The following definitions are based upon requirements set forth under the federal Fair Labor Standards Act regarding the performance of volunteer services, and were developed as standard guidelines. In general, they are intended to assist departments in developing their own volunteer programs, practices, policies and procedures (Appendix 1).

#### **COUNTY VOLUNTEER**

A County volunteer is an individual who: (a) performs voluntary service in a County department for civic, charitable, or humanitarian reasons and without promise or expectation or receipt of compensation for services rendered; (b) offers such voluntary service freely and without pressure or coercion, direct or implied, from the County; and (c) is not otherwise employed by the County to perform the "same type of services" as those for which the individual proposes to volunteer.

As used in this section, the phrase "same type of services" means similar or identical services.

- The following is an example in which an individual employed by the County would be performing the "same type of services" as a County volunteer: An individual is employed by a County medical center as a Radiation Therapy Technologist. The individual proposes to volunteer to perform Radiation Therapy Technologist Services at a separate County community health center. In this case, since the individual is a County employee who is already performing radiation therapy technology services at a County medical center, the individual cannot also perform radiation therapy technology services at a County community health center as a County volunteer.
- The following are examples in which individuals employed by the County would not be performing the "same type of services" as County volunteers: A County Deputy Sheriff volunteers as a part-time referee in a basketball league sponsored by the County; a Parks and Recreation Department employee serves as a volunteer firefighter for the County; and an office employee of a County Medical Center volunteers to spend time with disabled and elderly persons in the same institution during off-duty hours as an act of charity.

In marginal cases, VPCs should consult the County VPM for final determination as to whether an individual may perform voluntary service for the County.

Departments may wish to include on enrollment forms, a statement for volunteers to sign, acknowledging that they satisfy each of the above criteria for serving as a County volunteer.

#### YOUTH VOLUNTEER

Individuals between the ages of 14 and 17 may serve as County volunteers. Written consent by a parent or legal guardian is required for such youth volunteers. Based on the volunteer position and/or responsibilities, departments may raise the minimum age requirement as they deem appropriate.

#### COUNTY EMPLOYEES - VOLUNTEER WORK FOR COUNTY PROGRAMS

County employees may volunteer their services to the County as long as the work they perform as a volunteer is outside their scope of duties as County employees. County employees have a long history of volunteering. Departments are encouraged to tap this rich pool of volunteer talent when recruiting volunteers for a County sponsored project.

Time sheets, which must be maintained for County employee volunteers should verify that the hours worked, were outside of the hours during which the employees are regularly employed and specify that the work they performed was voluntary and not paid.

#### **RETIRED COUNTY EMPLOYEES**

Retirees are great assets to the County and can potentially provide invaluable resources as volunteers in County departments. Departments may call upon their retirees or those from other departments to fill their volunteer needs.

Retired County employees can also be recruited through the Retired Employees of Los Angeles County (RELAC), the Los Angeles County Employees Retirement Association (LACERA), and various other professional associations that maintain contact with retired County members.

#### COURT REFERRAL COMMUNITY SERVICE PROGRAM

The Court Referral Community Service Program provides the municipal courts with an alternative method of sentencing selected misdemeanor offenders. Participants in this program render community service, in lieu of fines or jail, to non-profit and government agencies and are considered volunteers.

Court referral volunteers should be integrated into a department's volunteer program and included in the statistical volunteer hours report. This group should be provided with orientation, training, supervision and benefits, like other volunteers.

#### **ONE-TIME-ONLY VOLUNTEERS**

A number of volunteer projects call for one-time-only volunteers, and for these projects, it is not practical to formally enroll each volunteer. However, files with these volunteers' names, services, and hours should be kept for department records.

#### SEASONAL CHILDREN VOLUNTEER GROUPS

When a group wishes to volunteer, a formal enrollment for each volunteer is impractical. In these cases, a group enrollment form may be used and a County representative must accompany the group at all times.

When a children's group volunteers (i.e., school choir), the child to adult ratio must be maintained to one (1) adult chaperon per six (6) children (5 years and older). The Los Angeles County representative must accompany the volunteer group, but may not be included as a chaperon.

The CEO discourages child volunteers under 14 years old.

- Volunteers under the age of 14 are not covered under the Insurance Policy.
- Departments shall be responsible for any liabilities incurred because of this provision.

#### **VOLUNTEER WORKER WITHOUT COMPENSATION**

County Code 6.06.010 authorizes department heads to fill as many "without compensation" positions as are authorized for his/her department. The code authority makes it possible to assign volunteer workers to a separate ordinance position, without compensation, when they formally enroll.

VPCs should refer to County Code 6.28.060 for a list of positions without compensation and refer to their department's HR for policies and procedures if there is a need to fill these roles.

In no event, however, shall a County employee be assigned a "without compensation" position, if the County employee already holds a position in which he/she performs the "same type of services."

#### **MUTUAL AID AGREEMENTS**

County employees who provide a specific service to another government agency as part of a mutual aid agreement, may volunteer to perform the "same type of services" for which they are paid by the County.

For example, where the County and a city have entered into a mutual aid agreement related to fire protection, a fire fighter employed by the County may also volunteer as a fire fighter for the city. The fact that services volunteered to the city sometimes took place in the County's geographic jurisdiction does not require that the volunteer's hours be counted as hours of employment with the County.

#### **VOLUNTEER OPPORTUNITIES**

The County has designated a wide variety of services for which persons may volunteer. Examples of County services, performed on a volunteer basis, include:

- Helping at a local neighborhood park or keeping our beaches clean and attractive;
- Providing personal care and services to the sick in medical centers and visiting the elderly and infirm in nursing homes;
- Being a peacemaker between conflicting groups;
- Assisting in a County library or being a literacy tutor;

- Issuing toys to children from a toy loan library;
- Serving as a child advocate for victims of child abuse;
- Tutoring juvenile wards in basic learning skills;
- Being a docent at a museum or arboretum;
- Serving as a judge pro-tem in a court;
- · Assisting with the care of animals in animal shelters;
- Serving as a reserve deputy sheriff or reserve fire fighter;
- Being a member of a youth explorer post;
- Soliciting contributions or participating in civic or charitable benefit and fundraising programs;
- Office clerical duties; or
- Serving as a poll volunteer.

#### III. VOLUNTEER DISASTER SERVICE WORKER

State Government Code Section 3100 and County Code 2.68.220 mandate public agencies' actions and responsibilities during disasters triggered by natural, manmade, or war-caused emergencies. In the event of a catastrophe that poses danger to life, property and resources, public agencies are tasked to provide Disaster Service Workers (DSWs) to remedy the situation.

Per Government Code Section 3101, DSW "includes all public employees and all volunteers in any disaster council or emergency organization accredited by the Office of Emergency Services." Volunteers who wish to register as a DSW must complete the DSW Volunteer Registration Form (Appendix 2) and sign the loyalty oath or affirmation to the Constitution of the United States and California.

#### WORKER'S COMPENSATION

Registered DSWs are eligible for worker's compensation benefits if injured while performing emergency or disaster relief functions for the County of Los Angeles (County Code 2.68.250).

Departments must keep records of time worked by a volunteer during a disaster or state of emergency. Department volunteer time cards may be used.

#### REGISTRATION

Departmental Volunteer Coordinators are responsible for ensuring that all County volunteers who may provide service during a disaster or emergency are registered with the Emergency Management Council, the County's local disaster Council. Registration shall occur before an actual disaster strikes.

#### **MINORS**

Volunteers under 18 years of age are eligible to certify as a Volunteer Disaster Services Workers. Registration must include a letter of parental or guardian consent and emergency medical release.

#### IV. RECRUITMENT

Recruitment is the process of identifying and enrolling candidates who have the skills and desire to volunteer with the County. VPCs may discover that everything they do carries an aspect of recruitment. Volunteer programs can very well dissolve without the enrollment of new volunteers.

Departments are encouraged to develop their recruitment plan based on the needs of their volunteer programs. This may require periodic review of the needs of existing programs as well as that of new projects/initiatives. Departments will benefit more from an organized and consistent recruitment plan rather than a haphazard and erratic one.

#### **ASSESSMENT OF NEED**

A needs assessment can be a valuable tool to help establish a new volunteer program or locate volunteer opportunities that can help enhance current County services. Assessments can be made through interviews, surveys, tests, or advisory committees. Keep in mind that County policy prohibits the replacement of a County employee by a volunteer. Based on the information collected in the needs assessment, departments can develop and change tasks for new or existing description of volunteer services.

#### MASS RECRUITMENT

Mass recruitment may take place in the form of a public service announcement on television/radio or an article in a local newspaper. The message is likely a publication about departments' volunteer programs and departments' call for applicants. The goal of this approach is to outreach to the general public, with hopes of filling vacant volunteer positions.

This approach is most effective when a large number of volunteers are needed, especially for a short period. Some examples include: a weekend project to clean up local beaches; special events; and a food project for homelessness.

#### TARGETED RECRUITMENT

This approach recruits from particular volunteer pools, where candidates are more likely to have the certain knowledge and skill sets needed to fill specific vacancies. In order to develop an effective targeted recruitment plan, departments should:

- Identify volunteer roles that need to be filled;
- Establish eligibility requirements and qualifications for vacant positions;
- Determine where to locate such volunteers (i.e., trade schools, professional organizations, etc.);
- Develop an engaging recruitment message that also details the needs and responsibilities of open positions; and

• Utilize resources that can best reach qualifying volunteers.

Please consider the possibility that an applicant who did not meet the needs of one position may well be interested and capable of serving in another position. Departments are encouraged to keep volunteer applications on file for future consideration.

#### **BROADCAST MEDIA CONNECTIONS**

Departments should consult with their Public Information Office about County policies and procedures before contacting any broadcast media connections.

For reference, the Southern California Broadcasters Association shares a listing of their radio and television member stations on their website (<a href="www.scba.com">www.scba.com</a>). This site provides these stations' addresses, telephone numbers, and web URLs.

#### V. PROCESSING AND PLACEMENT

#### **INTERVIEW PROCESS**

As departments receive applications from prospective volunteers, they should arrange interviews with the candidates to determine whether there is a fit between the needs and expectations of both, the interviewee and the department. An interview with a prospective volunteer should be a pleasant experience and one without stress. It is an opportunity for the applicant to learn more about the volunteer assignment, and the interviewer to assess whether the applicant's interests and qualifications meet the department's requirements. Set aside 20 to 30 minutes of uninterrupted time for the session with the volunteer. Preparation can help assure its success. Select a room or place that is reasonably quiet, private and relatively free from disruptions.

Develop a written interview plan prior to the actual interview. An interview plan may include, but is not limited to the following:

- Introductions:
- Purpose of the interview and procedure to be followed:
- · Reasons for desire to volunteer:
- Volunteer's interests;
- Information on the department's volunteer opportunities;
- Review of volunteer's relevant work and volunteer experience;
- Discussion of department's expectations (hours, commitment, behavior); and
- Agreement on the best assignment for the volunteer.

The atmosphere should be warm, friendly and comfortable but businesslike. Interview questions should be open-ended and designed to encourage free discussion, especially on items of concern for either party. Thank the person for their interest in volunteering with Los Angeles County.

It is always important to get back to the volunteer with the results of the interview. Long processing times will mean the probable loss of the prospective volunteer. If there is a delay in placement, maintain contact with the interviewee, and keep the individual informed of the status of the placement process.

#### **ENROLLMENT**

When departments decide to place a volunteer in an assignment, VPCs should ensure that the volunteers submitted a volunteer enrollment form (Appendix 4) and completed all parts of the department's registration process before beginning service. The volunteer enrollment forms may vary between departments, but all should at least include following information:

• Name of the volunteer;

- · Address of residence:
- Date of birth;
- Social security number;
- Assignment;
- Driver's license number and driver's insurance carrier;
- Person to notify in case of emergency;
- List of machinery and/or heavy equipment to be operated; and
- Professional or technical licenses.

#### **ASSIGNMENT AGREEMENT**

Once a decision has been made to place a volunteer, an assignment agreement between the volunteer and the department must be completed, preferably in writing (Appendix 5).

The agreement should cover items that are necessary to assure a clear understanding of expectations, roles and responsibilities for both, the volunteer and the department. The following is a sample list of points that should gain consensus from both parties.

The volunteer agrees to:

- Accept job responsibilities and participate in training;
- Follow supervisor direction;
- Work a specific number of hours;
- Abide by all rules, regulations and policies; and
- Notify supervisor of absences and incidents of injury.

The department agrees to:

- Provide orientation and training;
- Provide supervision;
- · Hold to an agreed work schedule;
- Fully inform the volunteer of medical and liability coverage; and
- Keep documentation of all incidents of injuries or possible claims.

#### LIVE SCAN

Under the 2009, Board of Supervisors Resolution Live Scan is required on all potential volunteers.

Live Scan is exempt for:

- Volunteers who work less than three days for each event or period of service and:
- At the discretion of the appointing power, minors 14 years of age and older who work under constant supervision of a permanent County employee.

Volunteer applicant must sign a consent statement authorizing the County to conduct a criminal background investigation prior to the Live Scan (Appendix 6). If Live Scan is required for a youth volunteer, the minor's parent or legal guardian must be present during the process.

#### **HEALTH CLEARANCE**

This process may include x-rays, TB Tests, laboratory tests, and/or immunizations.

#### **VOLUNTEER IDENTIFICATION CARD/NAME TAG**

Once volunteers have gone through registration and orientation with the department, the department's HR should issue each volunteer an ID card. For safety and security reasons, volunteers should wear their ID badge during their volunteer service at all times. Please check with your HR Department for procedures (Appendix 7).

#### **VOLUNTEER UNIFORMS**

Some departments will require volunteers to wear uniforms while providing volunteer services or representing the County in other capacities. Fees, policies, and procedures are at the discretion of the department.

#### TIME CARDS

All volunteers must have a volunteer timecard (Appendix 8). Volunteers must log their time and initial the timecard each day they report for duty. VPCs may create their own time card to capture all information they find necessary.

#### STATISTICAL REPORT

Departments using volunteers must keep records of their service hours. VPCs are responsible for providing the CEO-WPM with a Statistical Report on a quarterly basis (Appendix 9). This information is used to provide reports to the Board of Supervisors and is required by CEO Risk Management for volunteer insurance related purposes.

Quarterly statistical reports are due by the following dates for each calendar year: April 30; July 31; October 31; and January 31.

Please include all persons who meet the definition of volunteer as stated in this manual.

Exclude the following categories:

- Work Furlough Participants
- General Relief Work Project Participants

#### **VOLUNTEER FILES**

#### Volunteers who did not complete the process

All forms, documents, and reports received during volunteers' application process should be kept on file for a one-year period. Live-scan results and health clearance reports are usually valid for one year.

#### Active Volunteers

Volunteers' files should be kept for the duration of each volunteer's active service, and should be readily accessible to VPCs or authorized department staff. For confidentiality purposes, volunteer files should be kept in a filing cabinet for safekeeping.

#### Inactive Volunteers

CEO-WPM recommends that all inactive volunteer files be kept in the possession of the department for a minimum of five (5) years. Last two years' files should be stored in a location that is accessible to VPCs or authorized department staff. Storage of the volunteer files is at the discretion the department. Files older than three (3) years can be stored in the department's archive storage unit.

#### RECORD KEEPING

#### The following information should be included in the volunteer's file:

- Application;
- Live-Scan form (clearance from department's HR required);
- Health Clearance (if required by department);
- Forms signed at orientation;
- Signed Acknowledgement of County Policy on Equity form;
- Copy of volunteer photo ID;
- Volunteer uniform deposit or paid receipts (if required by department);
- Emergency contact form;
- Volunteer agreement;

#### **DEPARTMENT OF HUMAN RESOURCES**

The County VPM will notify VPCs when the Department of Human Resources requires mandatory training on new or updated policies and procedures that will affect the volunteer program. Materials and instructions will be distributed accordingly.

#### Los Angeles County Policy on Equity

At a minimum, the applicable host departments need to ensure that:

(1) Volunteers receive a copy of the policy;

- (2) Host department (e.g., from Human Resources, a supervisor or manager) reviews the policy with volunteers;
- (3) Volunteers sign an acknowledgement form indicating that they have received, reviewed and will adhere to the policy (Appendix 10).

Please contact, Robert Valdez, Sr. Deputy Compliance Officer, at 213-738-2374, if you would like to schedule instructor-led CPOE classes for the volunteers, or if you have any questions.

#### VI. ORIENTATION AND TRAINING

#### **ORIENTATION**

Orientation provides volunteers with background and general information about the department. This allows volunteers to have a better understanding of how their positions fit in with the department's overall operations. The volunteers will be better able to understand how their work contributes to the mission of the department and its services to the public.

An orientation session may include, but is not limited to the following topics:

- Overview of the County government;
- Role of the Board of Supervisors;
- Department's mission, programs and structure;
- Volunteer program policies, procedures, objectives, and services;
- Volunteer Assignment Agreement;
- Tour of the Facility;
- Demonstration of how to use applicable equipment; and
- Introduction of key staff members.

The content of the orientation will vary from department to department, and will depend on the special situations unique to each department. The goal of the orientation is to help volunteers become more familiar with the department so that they feel like a member of the team.

Include key department staff and instructors when possible. Allow volunteers time to ask questions and sharing their thoughts or concerns.

#### **TRAINING**

All volunteers must receive necessary training to prepare them for their volunteer assignments. Training may take place in a group setting or as personal instruction. The training should focus on the content of the assignment, and take into consideration individual needs, knowledge, abilities and skills.

Volunteer training should be specific and practical. By the end of the training, volunteers should know what they are expected to do, how to do it, and where they can go to get help.

Additional training secured from adult and continuing education courses, college courses, conferences, community centers, high schools, County-sponsored training programs and staff meetings. The volunteer's supervisor should suggest these developmental opportunities, when appropriate.

#### VII. PAYMENT OF EXPENSES, BENEFITS, OR FEES

Under the Fair Labor Standards Act (FLSA), volunteers may be paid expenses, reasonable benefits, a nominal fee, or any combination thereof without losing their status as volunteers. Specifically, the applicable federal regulations state as follows:

- (a) Volunteers may be paid expenses, reasonable benefits, a nominal fee, or any combination thereof, for their service without losing their status as volunteers.
- (b) An individual who performs hours of service as a volunteer for a public agency may receive payment for expenses without being deemed an employee for purposes of the FLSA. A school guard does not become an employee because he or she receives a uniform allowance, or reimbursement for reasonable cleaning expenses or for wear and tear on personal clothing worn while performing hours of volunteer service. (A uniform allowance must be reasonably limited to relieving the volunteer of the cost of providing or maintaining a required uniform from personal resources.) Such individuals would not lose their volunteer status because they are reimbursed for the approximate out-of-pocket expenses incurred incidental to providing volunteer services, for example, payment for the cost of meals and transportation expenses.
- (c) Individuals do not lose their status as volunteers because they are reimbursed for tuition, transportation and meal costs involved in their attending classes intended to teach them to perform efficiently the services they provide or will provide as volunteers. Likewise, the volunteer status of such individuals is not lost if they are provided books, supplies, or other materials essential to their volunteer training or reimbursement for the cost thereof.
- (d) Individuals do not lose their volunteer status if they are provided reasonable benefits by a public agency for whom they perform volunteer services. Benefits would be considered reasonable, for example, when they involve inclusion of individual volunteers in group insurance plans (such as liability, health, life, disability, workers' compensation) or pension plans or "length of service" awards, commonly or traditionally provided to volunteers of State and local government agencies, which meet the additional test in paragraph (f) of this section.
- (e) Individuals do not lose their volunteer status if they receive a nominal fee from a public agency. A nominal fee is not a substitute for compensation and must not be tied to productivity. However, this does not preclude the payment of a nominal amount on a "per call" or similar basis to volunteer firefighters. The following factors will be among those examined in determining whether a given amount is nominal: The distance traveled and the time and effort expended by the volunteer; whether the volunteer has agreed to be available around-the-clock or only during certain specified time periods; and whether the volunteer provides services as needed or throughout the year. An individual who volunteers to provide periodic services on a year-round basis may receive a nominal monthly or annual stipend or fee without losing volunteer status.
- (f) Whether the furnishing of expenses, benefits, or fees would result in individuals' losing their status as volunteers under the FLSA can only be determined by examining the total amount of payments made (expenses, benefits, fees) in the context of the economic realities of the particular situation.

VPCs should consult VPM on any questions surrounding the payment of expenses, benefits, or fees to County Volunteers and whether such payment is consistent with their volunteer status.

#### VIII. INSURANCE

CEO-WPM and Risk Management conduct an annual Volunteer Insurance training at the Kenneth Hahn Hall of Administration. Departmental Volunteer Coordinators/ Directors and Risk Managers invited to attend the meeting.

The County's commercial insurance policy reimburses Volunteers for those medical injury expenses not paid by any other insurance immediately associated with an accidental injury incurred while performing their Volunteer work assignments.

# **Volunteer Program Insurance policy will cover the following:** Medical Expense, Accidental Death and Dismemberment

**CEO discourages Volunteers from driving County vehicles.** Should a volunteer be involved in an automobile accident while driving a County vehicle, the employee policy and procedure would apply as if the volunteer was a County employee.

#### **ELIGIBILITY**

To qualify for coverage, a County volunteer formally be enrolled in a program or activity sponsored by the County and adheres to established volunteer work assignment guidelines. The County Department to which the volunteer assigned will advise the work duties and will keep an enrollment record to document participation as a volunteer.

It is important to note that the CEO discourages volunteers under the age of 14. Departments will be responsible for any liabilities incurred because of this provision.

**Detailed information and Insurance forms** (Appendix 11).

#### IX. SECURITY

#### PLACEMENT OF VOLUNTEERS WITH CRIMINAL RECORDS

The County shall consider the placement of a volunteer with a criminal background, provided the background does not pose a significant risk in terms of the volunteer's assigned duties.

A criminal background investigation shall be completed on all volunteers applying for or assigned to a sensitive position.

When an ex-offender applies for a volunteer assignment or transfers to a sensitive position, VPCs will request and evaluate the criminal record information on only those offenses related to the work of the sensitive position.

Background investigations shall not be conducted for the sole purpose of excluding ex-offenders from County volunteer work. Such investigations will be used to aid in placing ex-offenders in volunteer positions.

All criminal background information on volunteer applicants is strictly confidential. Criminal records information must be kept secured at all times. No unauthorized person may view these records. Information may be disclosed in confidence to other County authorities on a need-to-know basis.

Reports of a volunteer's arrest after placement are not retained on file unless the arrest results in a conviction. Ordinarily the volunteer is retained in the position unless the volunteer is found guilty of a crime that is incompatible with the duties of his/her position. Departments may, however, dismiss or transfer any volunteer if it is determined that the volunteer has demonstrated behavior that is incompatible with the duties of his/her position or the mission of the department.

#### **EVALUATION CRITERIA**

In evaluating whether a volunteer applicant should be rejected for work placement or transfered to a sensitive position, the operating department shall consider the following criteria:

- The nature and seriousness of the offense(s), and the circumstances under which the offense(s) occurred:
- The age of the person at the time the offense(s) was committed;
- The current status of the offense(s);
- The number of convictions;
- The relationship of the offense(s) to the sensitive position for which application is made;
- Evidence of rehabilitation and maturation, including the volunteer's employment record with respect to job responsibility, duration, and other volunteer efforts;

- Truthfulness in admitting previous record;
- Applicant attitude; and
- Other factors relevant to the volunteer's suitability for the job (i.e., maturity, attitude, honesty, and responsibility level).

#### CRIMINAL BACKGROUND CHECKS

All criminal background checks must be in accordance with the then existing Board of Supervisors policy and applicable laws.

Department Volunteer Coordinators should refer to their department's HR office for direction on volunteer criminal background checks.

#### CONSENT

A consent statement authorizing the County to conduct a criminal background investigation must be signed by the volunteer applicant prior to initiation of the background check (Appendix 6). The following is an example of a consent statement:

I hereby certify that all statements made in connection with this application for volunteer work are true to the best of my knowledge.

I hereby authorize the County of Los Angeles, (name of department), to obtain a record of my criminal convictions from the California Department of Justice or any other agency that collects records of criminal convictions.

Signature:	Date:

#### **GUIDELINES FOR IDENTIFYING SENSITIVE POSITIONS**

Each department has the authority to determine which volunteer assignments constitute sensitive positions. A background check should be carefully assessed for criminal convictions before assigning a volunteer to a sensitive position.

Sensitive positions include, but are not limited to the following:

- Having access to or custody of cash, equipment, drugs, or confidential information:
- Rendering of one-on-one services to children, adults or senior citizens; and
- Dispensing County benefits to the public.

#### POTENTIALLY DISQUALIFYING JOB RELATED OFFENSES

The following is a list of offenses, which, under certain conditions, may be incompatible with specific functions associated with volunteer work assignments. However, this list is intended only as a guide and is not comprehensive:

#### Function - Access to Funds or Negotiable Instruments

Bribery

Embezzlement

Forgery

Fraud

Receiving Stolen Property

Robbery

Theft

**Identity Theft** 

#### Function - Access to Confidential or Classified Materials

Extortion

Forgery

Fraud

Periury

Receiving Stolen Property

Robbery

Theft

Identity

#### Function - Access to or charge of County Property

Embezzlement

Robbery

Receiving Stolen Property

Theft

**Identity Theft** 

#### <u>Function</u> – Protection of Persons or Property Assault (Law Enforcement)

**Drug or Narcotics Offenses** 

Child Molestation/Abuse

Embezzlement

Forgery

Fraud

Homicide

Intoxication

Kidnapping

Robbery

Sex Offences

Theft

**Identity Theft** 

#### Function - Access to or Charge of Drugs or Narcotics

**Narcotics Offenses** 

Embezzlement

Forgery

Receiving Stolen Property Robbery Theft

#### Function – Individual Contact with Care or Supervision of Minors

Assault

Child Molestation/Abuse

Alcoholism, Drug or Narcotics Offenses

Homicide

Kidnapping

Manslaughter

Sexual Offenses to a minor

Rape

Robbery

Theft

#### Function – Individual Charge, Care or Supervision of the Elderly

Assault

Child Molestation/Abuse Drug or Narcotics

Offenses Embezzlement

Forgery

Fraud

Homicide

Intoxication

Kidnapping

Manslaughter

Rape

Receiving Stolen Property

Robbery

Sex

Offenses

Theft

Violation of any certification or licensing provisions relating to duties of the position in question may also be the basis for disqualification.

#### **CONTROL OF SENSITIVE POSITIONS**

Departments should have a control file that lists all sensitive positions, and include the following information:

- Title of the volunteer position;
- Description of volunteer duties;
- Incompatible criminal offenses;
- Specific reason(s) the criminal offense(s) is/are incompatible with the volunteer duties;
- Name(s) of volunteer(s) assigned to the position;
- Date volunteer started service; and
- Name of County employee who is responsible for maintenance of the control file.

Placement counseling should be provided for applicants with criminal backgrounds. All applicants' backgrounds, rehabilitations, qualifications and interests must be reviewed when considering placement. Counseling sessions must be documented and maintained for future reference.

All criminal background data are strictly confidential and shall be kept secured at all times. The data shall be disclosed for official inquiries only.

#### X. RECOGNITION AND AWARDS

It is good policy to recognize volunteers for their contributions on both, an informal and formal basis.

#### INFORMAL RECOGNITION

Informal recognition should be ongoing. The appropriate and frequent use of informal recognition motivates volunteers. Forms of informal recognition may include:

- Giving praise for a job well done;
- Thanking a volunteer for his/her efforts;
- Recognizing a volunteer for his/her potential;
- Expanding a volunteer's job responsibilities;
- Allowing a volunteer to make decisions when appropriate;
- · Providing a volunteer with opportunities to upgrade skills; or
- Recognizing top volunteers at staff meeting during National Volunteer Week.

#### FORMAL RECOGNITION

On an annual basis, the Board of Supervisors, through <u>CEO-WPM</u>, sponsors a Volunteer of the Year Awards Luncheon at the Dorothy Chandler Pavilion. During this event, members of the Board of Supervisors, department heads, VPCs, and special guests publicly recognize department honorees and acknowledge the outstanding contributions of all County volunteers.

#### HONOREE REQUIREMENTS

VPCs will facilitate the selection process where their department selects two nominees to recognize as the department's Honoree. Requirements volunteers must meet in order to be considered include:

- Minimum of 100 hours or 3 months of active volunteer service;
- Registered as a County volunteer with the department that the volunteer is providing service to;
- Must not have been selected as an honoree in the same department the prior year;
- Youth volunteer must be at least 14 years of age;

Departments select one youth volunteer and one adult volunteer. If departments do not offer volunteer service to youths, the department may select two adult honoree volunteers.

If a department selects a group as their honoree, one person will receive the award on behalf of the group.

At the conclusion of each department's selection process, VPCs are responsible for submitting the names of their department's two honorees to CEO-WPM.

#### RECONCILING AND DEPOSITING PAYMENTS

When handling payments for the Volunteer of the Year Awards Luncheon, departments are required to follow rules and policies set forth in the Los Angeles County Fiscal Manual.

Payments should be submitted with reservation forms to CEO-WPM by said deadline. Checks are made payable to LAC Volunteer Fund, and receipts are provided after payments are recorded. VPCs are responsible for tracking all money transactions. Funds should be kept in a safe or locked in a secured location at all times.

# **APPENDIX 1**





Policy #:	Title:	Effective Date:
9.100	Volunteer Program Policy	07/30/81

#### **PURPOSE**

Establishes a County Volunteer Program that encourages <u>community members</u>, <u>citizens</u>, County employees, and County retirees to volunteer their time and talents to public service programs.

Encourages <u>eC</u>ounty departments to support and promote voluntarism and volunteer projects as a creative partnership targeting program <u>enhancement</u> <u>efficiency</u>, productivity enhancement, and <u>community involvement</u>.

Supports and advocates enabling legislation that promotes volunteer programs in the public sector and supports the creation of volunteer incentives and recognition.

Provides a central policy and standardized policy and procedures on volunteer program reporting, insurance, recruitment and recognition.

<u>Establishes the Volunteer Program Policy Manual to serve as a framework for County departments on the management of a County Volunteer Program.</u>

#### REFERENCE

\_\_\_\_\_\_

July 30, 1981 Board Order, Synopsis 22

September 29, 1981 Board Order, Synopsis 10

October 21, 1981 Chief Administrative Office memo, "Status Report - Board Orders of July 30, 1981 and September 1981 Regarding Employment of County Retirees"

December 2, 1981 Chief Administrative Office memo, "County Volunteer Programs and the Use of Retired County Employees on a Volunteer or Paid Basis"

January 27, 1982 Chief Administrative Office memo, "Status Report: The Use of Retired County Employees on a Volunteer Basis and current/Projected Vacancies in County Volunteer Programs"

April 14, 1982 Chief Administrative Office memo, "Status Report: The Use of Retired County Employees on a Volunteer Basis and Current/Projected Vacancies in County Volunteer Programs"

January 29, 2013, Board Order, No. 16

July 17, 2013 County of Los Angeles Volunteer Program Policy Manual

August 2015 County of Los Angeles Volunteer Program Policy Manual

#### **POLICY**

\_\_\_\_\_\_

The County Board of Supervisors has approved the establishment of a <u>Countywide</u> Volunteer Program. Department Heads, and Volunteer Program <u>Coordinators</u> <u>Directors</u> are directed to actively recruit <u>community members</u>, County employees, <u>and County</u> retirees, <u>and citizens</u>, <u>including youth</u>, <u>to serve</u> as volunteers in departmental volunteer programs or special volunteer projects.

A County volunteer is an individual who: (a) performs voluntary service in a County department for civic, charitable, or humanitarian reasons and without promise or expectation or receipt of compensation for services rendered; (b) offers such voluntary service freely and without pressure or coercion, direct or implied, from the County; and (c) is not otherwise employed by the County to perform the "same type of services" as those for which the individual proposes to volunteer. Under the Fair Labor Standards Act, volunteers may be paid expenses, reasonable benefits, a nominal fee, or any combination thereof, without losing their status as volunteers.

A volunteer is defined as an individual who performs hours of voluntary service in a County department for civic, charitable, humanitarian, recreational, health, public safety or general welfare reasons, without promise, expectation or receipt of compensation for service rendered, except for reimbursement of expenses, reasonable benefits, nominal fees or a combination thereof.

Individuals shall be considered volunteers only when their services are offered freely and without pressure of coercion, direct or implied, from the County. Volunteers do not supplant County employees. Volunteers are to assist paid staff in providing service enhancements and/or new services. Volunteers over the age of 14 and those who volunteer more than three days for each event or period of service will be subject to the County's background check process.

Departments should advocate legislation that supports the purpose of County Volunteer

Program, voluntarism, public-private volunteer partnerships and volunteer recognition.

#### RESPONSIBLE DEPARTMENT

#### Chief Executive Office

#### **DATE ISSUED/SUNSET DATE**

\_\_\_\_\_

Issue Date: October 2, 1997

Review Date: October 18, 2001

Review Date: October 20, 2005

Review Date: October 20, 2005

Sunset Review Date: October 2, 2010

Review Date: October 20, 2010

Sunset Review Date: October 2, 2015

Sunset Review Date: October 2, 2020

Sunset Review Date: October 2, 2020



# **APPENDIX 2**

### DISASTER SERVICE WORKER VOLUNTEER REGISTRATION

#### LOCAL AND STATE INFORMATION

Loyalty Oath under Code of Civil Procedure §2015.5 & Title 19, Div.2, Chap.2, Sub-Chap.3, §2573.1

## TYPE OR PRINT IN INK (SHADED AREAS REQUIRED BY PROGRAM REGULATIONS)

TIPE OK PKINT IN I	NK (SHADED A)	REAS REQUI	YED DI LYOGN	AM KEGUI	LATIONS)	
		This block completed ONLY by Accredited Disaster Council, designated government agency or jurisdiction.  CLASSIFICATION: SPECIALTY:				
ATTACH PHOTOGRAPH	SIGNATURE OF AUTH	ORIZED PERSON:		TITLE:		
HERE	REGISTRATION DATE:	REGISTRATION DATE:		RENEWAL DATES:		
	EXPIRATION DATE:*_	EXPIRATION DATE:*		DSW CARD ISSUED?: NO? YES? #:		
	PROCESSED BY:	PROCESSED BY:		DATE: TO CENTRAL FILES:		
NAME: LAST	FIRST	MI		SSN:		
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ADDRESS:		CITY:		STATE	ZIP:	
COUNTY:		HOME PHONE:		WORK PHON	WORK PHONE:	
PAGER:		E-MAIL:		DATE OF BIF	RTH: (optional)	
DRIVER LICENSE NUMBE	DRIVER LICENSE NUMBER: (if applicable)  DRIVER LICENSE CLASSIFICATION: A? B? C?  OTHER DRIVING PRIVILEGES:		LICENSE EX	CENSE EXPIRATION DATE:		
PROFESSIONAL LICENSE:	(if applicable)				EPIRATION DATE:	
IN CASE OF EMERGENCY,	, CONTACT:	I		EMERGENCY	Y PHONE:	
PHYSICAL IDENTIFICATION:	HAIR:	EYES:	HEIGHT:	WEIGHT: (optional)	BLOOD TYPE: (optional)	
COMMENTS:	<u> </u>					
Government Code §3108-3109:  Every person who, while taking and subscribing to the oath or affirmation required by this chapter, states as true any material matter which he or she knows to be false, is guilty of perjury, and is punishable by imprisonment in the state prison for two, three, or four years. Every person having taken and subscribed to the oath or affirmation required by this chapter, who, while in the employ of, or service with, the state or any county, city, city and county, state agency, public district, or disaster council or emergency organization advocates or becomes a member of any party or organization, political or otherwise, that advocates the overthrow of the government of the United States by force or violence or other unlawful means, is guilty of a felony, and is punishable by imprisonment in the state prison.						
LOYALTY OATH OR A	AFFIRMATION (GOVERNI	MENT CODE §3102)				
I,, do solemnly swear (or affirm) that I will support and defend the PRINT NAME						
Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to						
the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservations or purpose of evasion; that I will well and faithfully discharge the duties upon which I am about to enter. I certify under penalty of perjury that the foregoing is true and correct.						
DATE S	SIGNATURE		IF UNDER 18	YEARS OLD, SIGNAT	URE OF PARENT/GUARDIAN	
				,		

TITLE

SIGNATURE OF OFFICIAL AUTHORIZED TO ADMINISTER LOYALTY OATH

<sup>\*</sup>Registration for the active DSW Volunteer is effective for the period the person remains a member with that organization; for a volunteer registering for an intermittent or a single event, the expiration date is set at the discretion of the Accredited Disaster Council but not to exceed one year. (See Govt. Code §3102)

### COUNTY OF LOS ANGELES VOLUNTEER SERVICE APPLICATION

Thank you for considering Los Angeles County as an opportunity for your volunteer activity. Please provide the following information:

□ <i>M</i> □ <i>F</i>						Youth (14-17)	) □Adult
Last N	lame		First nan		ate of Birth	/_	
				Te	elephone: (	)	
Street Addre	ess			_	ell Phone: (	١	
City		State	e Zip Co	ode			
E-mail:					ocial Security:		
In Case of E	mergency, No	otify:					
		•				Re	lationship
Home Phone	e: ( )		Cell Phone	: ( )	Oth	er: ( )	
Medical Refe	erence:	Name of Do	octor	Te	elephone: (	)	
Academic B	ackground:						
Name of Sch	nool:			Cit	у	State	e
Special area	of interest in v	olunteering: _					
Clerical Skills	S:						
Communicat	ion Skills (forei	gn language, ph	notography, gr	aphic arts, journa	alism, etc)		
Additional Sk	kills/Comments	·					
Are there any	y work activitie	s or conditions	s that you mu	ust avoid?			
Have you ev	er been arresto	ed or convicted	d for a misde	meanor or felo	ny?	If "Yes", expl	ain
When, where	e and disposition	on of case					
PI				you currentl	<del>-</del>	ī	1
Morning	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Afternoon							
Evening							
The Volunteer offered.	•	J	•	le a placement n	, ,	•	•
Signature				Da	ate		
Signature of	Parent	-17) are required to	have a signature	Da	ate		<del></del>

### COUNTY OF LOS ANGELES VOLUNTEER ENROLLMENT

Please provide the following information:				
□M □F	□Youth (14-17) □Adult			
Name:(Last)	(First)			
Street Address:	, ,			
City:				
Telephone Number: ( )	Check one: ○Home ○Cell			
Social Security Number:				
What is the name and telephone number of the pers emergency:	on who should be contacted in case of an			
Name:				
Telephone Number: ( )	Relationship:			
If your volunteer assignment will include driving following information:	or operating a vehicle, please provide the			
Your Driver's License:	Expiration Date:			
Auto Company Insurance Company:				
The following information will be complete	d by the Volunteer Program Coordinator.			
Assignment:				
Position:				
Location:				
Supervisor:	<del></del>			
Starting and Ending Dates				
Starting Date:	Ending Date:			
Background Check Required?  OYes ONo	Date Completed:			
Vehicle Required ○Yes ○No	Type:			

Rev: 7/12

### COUNTY OF LOS ANGELES VOLUNTEER ASSIGNMENT AGREEMENT

VOLUNTEER	DATE ASSIGNED
ADDRESS	PHONE NUMBER
OFFICE LIAISON OR VOLUNTEER COORDINATOR	
ADDRESS	PHONE NUMBER
VOLUNTEER AGREES TO PROVIDE THE FOLLOWING SERVICES:	

#### **VOLUNTEER RESPONSIBILITIES AND LIMITATIONS**

- 1. Keep confidential all information as required.
- 2. Refrain from publishing any data gathered during the volunteer assignment or disseminating commercial advertisements, press releases, opinions or feature articles without prior written consent of the Volunteer and Special Programs Director.
- 3. Refrain from any type of solicitation or charging, requesting or accepting any fee, gift, reward or payment of any kind from individuals or staff for any services rendered as a volunteer.
- 4. Refrain from offering medical and/or legal advice and referral to individuals, even though you may be asked for such.
- 5. If you drive your car as part of your volunteer assignment, you must maintain a current driver's license and automobile liability insurance.
- Report immediately any known or suspected incident of abuse to children, dependent adults, or elders, to a child protective services agency or local law enforcement agency as well as to the Volunteer Coordinator.
- 7. Refrain from performing duties other than those listed above. If you want to provide new or additional services, a new agreement must be completed.
- 8. Refrain from handling personal resources such as bank accounts, cash, checks, notes, mortgages, trust deeds, sales contracts, stocks, bonds, certificates or other liquid assets of individuals with whom you are working as a volunteer.
- 9. If your assignment is with a child, always carry your "Field Trip Authorization" form with you during activities.
- 10. Complete a report of your volunteer's hours each month.
- 11. Always carry or wear your "Volunteer Photo Identification Card" when engaged in activities as a volunteer for this program.
- 12. Contact the individual with whom you are working as a volunteer, Office Liaison or Volunteer Coordinator whenever you cannot follow through with prearranged plan.
- 13. Contact the Office Liaison or Volunteer Coordinator immediately when any problems arise, e.g., when you are unable to contact the individual, or when you feel that changes need to be made in your assignment.
- 14. Contact the Office Liaison or Volunteer Coordinator immediately if you are injured in the course of your volunteer assignment.

Volunteers may be covered under the "Volunteer Accidental Medical and Expense Insurance Program."

I HAVE READ AND UNDERSTAND THE RESPONSIBILITIES AND LIMITATIONS AS	STATED ABOVE AND I AGREE TO
ABIDE BY THEM IN CARRYING OUT MY DUTIES.	
VOLUNTEER'S SIGNATURE	DATE

Retention:

Distribution:

3 yrs. after Volunteer is inactive ORIGINAL: Program Section Personnel Folder

FIRST COPY: Volunteer

SECOND COPY: Volunteer's Office Personnel Folder, if applicable

### COUNTY OF LOS ANGELES Volunteer Program

### Authorization to Obtain Criminal Records

l,	, hereby certify that all statements
made in connection with this application for v	olunteer work are true to the best of my
knowledge.	
I hereby authorize the County of Los Angeles,	
of my criminal convictions from the California D	Department of Justice or any other agency
that collects records of criminal convictions.	
Signature:	Date:

### **Chief Executive Office** IDENTIFICATION CARD INFORMATION

☐ New ID Bad	lge 🔲 Update l	_ •	Replace Lost/Stolen/Damaged ID Badge		
[ ] Perma	nent []Temp	orary []Em	nergency Services [ ] Contractor		
Name:			Employee #:		
Name.	3				
Title:		V			
Height:	Eye Color:		Hair Color:		
Date of Birth:		Blood Type:	Type:		
			Date		
Employee Signature:			Received:		
	P		0 v s		
Branch/Section:			Telephone #		
brancingeodor.			***************		
****	************** <u>FOR P</u>	********** ERSONNEL O	**************************************		
.RD NO:	ISSUE DAT	īE:	EXPIRATION DATE:		
			Submitted SIR (if applicable)		
ENTERED/PRINTED BY:					

A Board Motion became effective on September 25, 2001 that all employees while inside the County facilities must wear and display their County Identification Cards.

Per County Code Ordinance 7753, Section 5.64.330, the loss or theft of a County Identification Card must be immediately reported to the law enforcement agency having jurisdiction where the loss or theft occurred. If lost at the HOA, report it to the Sheriff's station on the 2<sup>nd</sup> floor mall exit. The affected employee must also report the loss or theft to the Office of Security Management (Room 785) via a Security Incident Report (SIR) within 24 hours. A copy of the police report must also be attached indicating the employee's name, County Department, the police agency contacted, and the police report number. To request another ID card, a copy of your SIR must be submitted to Personnel Services.

You can find the SIR in: - CEO Central

- under Quick links bottom right > CEO Internet
- under Countywide Programs > Security Management
- Forms/Reports
- SIR Report

You must return your Identification Card to CEO Human Resources Section upon the termination of your aployment or other status upon which your right to retain such Identification Card is based. You will pay for e replacement of the Identification Card if not returned or so lost, damaged or destroyed.

c: Employee Personnel Folder

## COUNTY OF LOS ANGELES VOLUNTEER TIME CARD

DEPARTMENT	
------------	--

Volu	nteer Nan	ne									
Ouarter:											
Month:			N	onth:				Month:	Month:		
Month: DATE IN	OUT	INITIAL	DATE	IN	OUT	INITIAL	DATE		OUT	INITIAL	
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2			2				2				
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31			31				31				



### **COUNTY OF LOS ANGELES**

### VOLUNTEER PROGRAM STATISTICAL REPORT

Name of Department, Court or Health Facility	Check Reporting Period	ng	Year	
	Jan - Mar		Jul - Sept	
	Apr - Jun		Oct - Dec	

Volunteer Program	Number of Volunteers	Number of Hours
Total:		

Signature:	Date:	
Print Name:	Tel. No:	
Title:		
E-mail		

Send the completed report to:
June Tai, Countywide Volunteer Program Coordinator
<a href="mailto:jtai@ceo.lacounty.gov">jtai@ceo.lacounty.gov</a>
CEO. Workplace Programs & Marketing

<u>itai@ceo.lacounty.gov</u>CEO - Workplace Programs & Marketing500 West Temple Street, B-1, Los Angeles, CA. 90012



# VOLUNTEER ACKNOWLEDGEMENT AND RECEIPT OF COUNTY POLICY OF EQUITY

Ι,	:	
Volunteer 1	Name	Payroll Title
	that I am expected to of Equity and have r	read, understand and adhere to the eceived a copy.
DATE: _		
DEPT:		
VOLUNTEER S	SIGNATURE:	
VOLUNTEER :	NUMBER:	
<u>Distribution:</u>		
	to Official Personnel Fin Countywide Learning	ile Management System (LMS)



Health Special Risk, Inc.

HSR Plaza II 4100 Medical Parkway Carrollton, Texas 75007 Phone: (972) 512-5600 Fax: (972) 512-5820

	Policy Number:									
	School Name (if applicable):									
Lo	catio	on #								
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ant 🗌	Staf	f Member [		Guest 🗌 Volunteer						
		or to Accide ☐ Capp		☐ Artificial						
ıry Res	ult ir	Death?	]YI	ES □NO						
ent										
	YES YES YES YES YES	□NO □NO								
ervisor										
State, Z	Zip)									
epresei	ntativ	re		22. Date						
verage	thround a di	nt member o ugh your emp vorce decree	oloy	Health Maintenance er or other source on <b>YES NO</b>						
Policy	#									
	_									
ION OF BENEFITS along with your claim.  SPECIAL RISK, INC., or the insurance										
o. Lonz Mor, mo., or the insurance										

1. PLEASE FULLY COMPLETE THIS FORM 2. ATTACH ITEMIZED BILLS 3. MAIL TO HSR Pho	4100 Medical Parkway Carrollton, Texas 75007 Phone: (972) 512-5600 Fax: (972) 512-5820									
F-mail - ACEClaims@hsri.com										
Underwritten By ACE American Insurance Company										
FOR HSR USE ONLY: Claim Company #	PI	an #	Location #							
PART I – POLICYHOLDER'S REPORT										
1. Claimant's Name (Injured Person) 2. S	Social Security Number	I Security Number 3. Gender		4. Birthday 5. E-Mail						
6. Address of Injured Person and Best Contact Phone Number (Include Area Code)										
7. If Applicable, Parent's Name, Address, and Best Contact Phone Number (Include Area Code)										
8. Date and Time of Accident 9. Place where Accident	Occurred	10. The injured person was a:  ☐ Participant ☐ Staff Member ☐ Guest ☐ Volunteer								
Dental 11. Indicate which Teeth were Involved in the Accident Claims 12. Describe Condition of Injured Teeth Prior to Accident: ☐ Whole, Sound, and Natural ☐ Filled ☐ Capped ☐ Artificial										
13. Type of Injury (Indicate Part of Body Injured – e.g. broken arm, sprained ankle, etc.)  Did Injury Result in Death?   YES   NO										
14. Describe How Accident Occurred – Give All Possible Details – Must be a Bodily Injury Due to Accident										
15. Did Accident Occur (Check Yes or No for Each of the Following):  A. During a policyholder programmed, sponsored & supervised, or sanctioned activity?  B. On activity premises?  C. While on the job (if applicable)?  D. While traveling directly and uninterruptedly to or from home and policyholder premises?  E. During intercollegiate/scholastic athletic practice?   YES NO  YES NO										
16. Name of Event or Activity 17. Name and Title of Supervisor										
18. Name of Policyholder	19. Address of Policyh	older (Address	, City, State, Zip)							
20. Signature of Policyholder Representative	21. T	21. Title of Policyholder Representative 22.			22. Date					
PART II	– OTHER INSURAN	CE STATEM	ENT							
Do you/spouse/parent have medical/health care or is the Claimant enrolled as an individual, employee or dependent member of a Health Maintenance Organization (HMO) or similar prepaid health care plan, or any other type of accident/health/sickness plan coverage through your employer or other source on you or does your son/daughter have health care coverage as a dependent from your previous marriage as mandated in a divorce decree?										
If Yes, name of insurance company		Policy #								
Name of insurance company		Policy #								
Claimant's primary employer name, address, and phone number										
Mother's primary employer name, address, and phone number										
Father's primary employer name, address, and phone number										
IF OTHER INSURANCE OR HEALTH CARE PLANS EXIST, PLEASE SUBMIT COPIES of their EXPLANATION OF BENEFITS along with your claim. IF NO OTHER INSURANCE or HEALTH PLAN EXISTS, PLEASE READ & SIGN BELOW.  I agree that should it be determined at a later date there is insurance (or similar), to reimburse HEALTH SPECIAL RISK, INC., or the insurance company to the extent of any amount collectible.										
SIGNATURE OF PARTICIPANT OR PARENT	WITNESS	WITNESS			E					
PART III – AUTHORIZATION TO PAY BENEFITS TO PROVIDER										
I authorize medical payments to physician or supplier for services described on any attached statements enclosed.										
SIGNATURE		DATE								
I hereby authorize any insurance company, hospital, physician or other person who has attended or examined the claimant to disclose when requested to do so, all information with respect to any injury, policy coverage, medical history, consultation, prescription or treatment, and copies of all hospital or medical records. A photo static copy of this authorization shall be considered as effective and valid as the original.										
SIGNATURE			DATE							

#### FRAUD STATEMENTS

General: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

Alaska: A person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim containing false, incomplete, or misleading information may be prosecuted under state law.

Arizona: For your protection Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

Arkansas, Louisiana, Maryland, West Virginia: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

<u>California</u>: For your protection California law requires the following to appear on this form: Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

<u>Colorado</u>: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

<u>Connecticut</u>: This form must be completed in its entirety. Any person who intentionally misrepresents or intentionally fails to disclose any material fact related to a claimed injury may be guilty of a felony.

<u>Delaware, Idaho, Indiana</u>: Any person who knowingly, and with intent to injure, defraud, or deceive any insurer, files a statement of claim containing any false, incomplete or misleading information is guilty of a felony.

<u>District of Columbia</u>: Warning: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

<u>Florida</u>: Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or an application containing any false, incomplete or misleading information is guilty of a felony of the third degree.

<u>Hawaii</u>: For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.

<u>Kentucky</u>: Any person who knowingly and with intent to defraud any insurance company or other person files a statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

<u>Maine</u>: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or a denial of insurance benefits.

Michigan, North Dakota, South Dakota: Any person who knowingly and with intent to defraud any insurance company or another person files a statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and subjects the person to criminal and civil penalties.

Minnesota; A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

<u>Nevada:</u> Any person who knowingly files a statement of claim containing any misrepresentation or any false, incomplete or misleading information may be guilty of a criminal act punishable under state or federal law, or both, and may be subject to civil penalties.

<u>New Hampshire</u>: Any person who, with a purpose to injure, defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud as provided in section 638:20.

New Jersey: Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.

<u>New Mexico</u>: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim foe each such violation.

Ohio: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

<u>Oklahoma</u>: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Oregon: Any person who makes an intentional misstatement that is material to the risk may be found guilty of insurance fraud by a court of law.

<u>Pennsylvania</u>: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

<u>Tennessee</u>, <u>Virginia</u>, <u>Washington</u>: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purposes of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

<u>Texas</u>: Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

## COUNTY OF LOS ANGELES (COUNTY) VOLUNTEER WORKERS: INDEMNIFICATION & INSURANCE PROGRAM DESCRIPTION AND GUIDE

#### A. Why am I receiving this Guide?

This Guide was developed to provide you, the volunteer, with a brief description of County insurance programs which may be available to you.

#### B. How do I qualify for these insurance programs?

To qualify for coverage, you must be formally enrolled as a volunteer in a program or activity sponsored by the County and adhere to your volunteer work assignment guidelines. The County Department to which you are assigned will advise you of your work duties and will maintain an enrollment record to document your participation as a volunteer.

### C. Am I eligible for any benefits if I am injured while performing my volunteer duties?

The County will reimburse you as a qualified volunteer (see section B of this guide) for medical expenses associated with the immediate treatment in case you are injured while performing your assigned volunteer duties, and if you are <u>not</u> covered by your own medical insurance including personal, group, blanket, employee, trustee, or union insurance plans.

#### 1. What Benefits Will I Receive?

Volunteers receive medical expense reimbursement and accidental death and dismemberment coverage through a commercial insurance policy purchased by the County. This policy, which is presently written by Ace American Insurance Company (Ace), provides benefits of:

- (a) Up to \$10,000 for accidental medical expenses. An emergency evacuation benefit may be available if the volunteer is severely injured while traveling 100 miles or more away from his home to perform assigned volunteer duties for the County.
- (b) Up to \$500 for accidental dental expenses.
- (c) Up to \$5,000 for accidental death and dismemberment.

Ace will make the final determination to approve or deny your claim in accordance with the terms of the insurance policy.

#### 2. Where Do I Go to Obtain Medical Treatment if I am injured?

You may obtain medical treatment from your private physician or other facility of your choice. However, you, the volunteer, are responsible for the initial payment of all medical bills – you must file a claim under the Volunteer Insurance Policy to receive reimbursement from the insurance company for any costs not paid under your own medical insurance.

Volunteers assigned to certain County facilities (such as hospitals) may be able to receive initial treatment at no cost from the County facility in which they work. Your supervisor or volunteer coordinator will advise you of your department's policy regarding provision of initial treatment to volunteers. However, if further medical treatment is deemed necessary, you will be referred to your own private physician and you must file a claim under the Volunteer Insurance Policy to receive reimbursement for your physician's charges.

#### 3. How Do I Report an Injury, File a Claim and Obtain Reimbursement?

If you are injured, you must notify your supervisor as soon as possible and assist with the completion of a claim form. In general, instructions for completion of the form require that:

- The volunteer's department supervisor (representative) signs the claim form.
- The volunteer provides certain information including complete name, address, SSN, date of birth, contact information and a description of the injury. The volunteer is also responsible for ensuring that their treating physician or the treating facility completes the physician's or facility's section of the claim form.
- The volunteer attaches copies of medical bills to the claim form. If medical billings are not readily available, they should be sent to Health Special Risk Inc. (HSR) as soon as possible.
- The signed claim form and medical bills should be faxed (preferred option) OR mailed without delay to HSR:

<u>Fax line:</u> 972-512-5820

-OR-

Mailing Address: Health Special Risk, Inc. (HSR)

4100 Medical Parkway Carrollton, Texas 75007

-OR-

Email: ACEClaims@hsri.com

- You also may initiate a claim by calling HSR Customer Intake Representative who will take your initial information over the phone at 866-345-0959.
- The claim is assigned to a designated Accident Claims Specialist who may contact you if additional information is needed. If necessary, the Claim Specialist will generate an acknowledgement package to send to you or your beneficiary. You or

### COUNTY OF LOS ANGELES (COUNTY) VOLUNTEER WORKERS: INDEMNIFICATION & INSURANCE PROGRAM DESCRIPTION

your beneficiary will complete your portion of the claim form and send it back.

#### 4. How Can I Check the Status of My Claim with Ace?

Questions concerning the claim form or the status of your claim may be directed to HSR at 1-866-345-0959. Call between 5 am and 5 pm Pacific Time and select option 4. If you call outside this time frame, leave a voicemail message and a Ace representative will respond the next business day.

PLEASE NOTE: This brief description of benefits is provided for general informational purposes only, and is not intended to provide all coverage details; the terms, exclusions and conditions concerning the medical benefits are governed by the insurance policy. Should there be any conflict or inconsistency between the information provided in this guide and the insurance policy, the insurance policy provisions shall prevail. The County reserves the right to amend or terminate the Volunteer Insurance Policy at any time without notice.

### D. <u>Will I be protected against liability if I should accidentally cause harm to</u> someone while performing my assigned volunteer duties?

You are defended and indemnified by the County for professional, auto and general liability (also known as "third party liability), which may arise from your activities as a volunteer within the course of your volunteer assignment, unless your actions are fraudulent, malicious, or criminal. Volunteers are <u>not</u> indemnified for punitive damages. Therefore, it is very important that you have a clear understanding of your work assignment and authority.

**Reporting requirements:** You must report any incident you witnessed or you were involved in while performing your assigned volunteer duties within 24 hours to your supervisor, even if the incident did not result in any immediate injury or damage to anyone. <u>Fatalities or serious injuries must be reported immediately</u>. The completed incident report will be forwarded by your supervisor to the County's claim administrators.

#### 1. Will I Be Protected If I Provide Professional Services As a Volunteer?

In the event of any occurrence involving possible injury or death to a County patient or client, you will be required to assist your supervisor in the completion of your department's incident report form. This form may be obtained from your supervisor (see the reporting requirements noted above).

### 2. Will I Be Protected If I am Involved in Motor Vehicle Accident While Driving in the Course of My Volunteer Assignment?

Volunteers who are designated and authorized by the County to operate vehicles in the course and scope of their assignments are defended and indemnified for bodily injury or property damage, suffered by other parties, which may be caused by the

### COUNTY OF LOS ANGELES (COUNTY) VOLUNTEER WORKERS: INDEMNIFICATION & INSURANCE PROGRAM DESCRIPTION

volunteer. Such volunteers must possess a valid California driver's license and comply with all California State laws, including laws relating to financial responsibility (automobile liability insurance), seat belts and use of cellular telephones.

In addition to the reporting requirements noted above, you will be required to assist your supervisor in completing the attached "County of Los Angeles Report of Vehicle Collision or Incident" if the accident caused injury or damage to others. Please note that damage to Volunteer-owned vehicles or loss of personal items is <u>not covered</u> by the County. No coverage is provided for injury due to a "personal deviation" while traveling (for example, if you are injured when driving during your lunch break). County encourages you to avoid driving as much as possible while performing your volunteer assignment.

#### 3. If There Is an Incident not Involving Professional or Auto Liability:

In addition to the reporting requirements noted above, you will be required to assist your supervisor in completing the attached "County of Los Angeles Non-Employee Injury Report" if you witness other types of accidents (such as slips and falls) or if you are injured while performing your duties.

Please note: Should there be any conflict or inconsistency between the information provided in this handout concerning County defense and indemnification of volunteers and County Code provisions or applicable state law, the County Code and state law shall prevail.

Any questions you may have regarding your volunteer service or this guide may be directed to your supervisor or your department Volunteer Coordinator. The Volunteer Coordinator's name and telephone number may be obtained from your supervisor.

Prepared By: County of Los Angeles Chief Executive Office Risk Management Branch 3333 Wilshire Blvd., Suite 820 Los Angeles, CA 90010

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