

Volunteer Driver Program Policies and Procedures (sample only)

Any Volunteer Driver Program Policy Manual includes all policies and procedures adopted by the organization, providing a framework that defines and supports the involvement of volunteers. It includes all standards of practice that complies with the Canadian Code of Volunteer Involvement including:

1. **Mission based approach:** Mission of the organization and how the volunteer program contributes to the mission.
2. **Human Resources:** How volunteers can expect to be treated by the organization and what the processes are for volunteer engagement, supervision, evaluation, recognition and exit.
3. **Policies:** Policies and procedures adopted by the organization that provide a framework that defines and supports the involvement of volunteers.
4. **Program accountability:** Lines of reporting for the volunteers
5. **Recruitment:** Volunteer recruitment incorporates internal and external messages to reach out and involve a diverse volunteer base. Sharing messages with volunteers empowers them to help with recruitment.
6. **Screening:** A clearly communicated volunteer screening process is adopted and consistently applied. Volunteers are aware of process and rationale and can help screen prospects.
7. **Orientation and Training:** Each volunteer is provided with an orientation to the organization, its policies and practices, including the rights and responsibilities of volunteers. Each volunteer receives training customized to the volunteer role and the individual needs of the volunteer.
8. **Supervision:** Volunteers receive a level of supervision appropriate to the task and are provided regular opportunities to give and receive feedback.
9. **Recognition:** The contributions of volunteers are consistently acknowledged with formal and informal methods of recognition.
10. **Record management:** Standardized documentation and records management practices are followed in line with the relevant legislation. Volunteers know where their responsibilities lie for reporting.
11. **Evaluation:** The impact and contribution of volunteers and the volunteer program are continually evaluated to ensure the needs of the organization are being met

Organization:

infulfilling its mandate. Documentation of processes, tools for evaluation and reporting is maintained to analyze progress and impact.

12. A **Volunteer Program Manual** becomes part of an orientation for volunteers, a resource for personnel, and an evaluation tool for the volunteer program. If at any time there are challenges to the program, they act as the standard of care of the organization.

Check list of Volunteer Driver Program policy and procedures:

- ➔ **Recruitment**
- ➔ **Screening**
 - Application
 - Interview
 - References
 - Background checks
- ➔ **Records management and storage**
- ➔ **Orientation**
- ➔ **Training requirements**
- ➔ **Policy related to the position requirements:**
 - Contracted commitment
 - Insurance coverage
 - Trip definitions
 - Trip reimbursement
 - Rider eligibility
 - Service area
 - Scheduling and dispatch
 - Turn downs, late cancels and no shows
- ➔ **Supervision**
- ➔ **Evaluation**
- ➔ **Recognition**
- ➔ **Re-assignment / Exit**
 - Driving record check
 - Criminal record check
 - Interview
 - Qualification documents
 - Use of phone, internet
 - Incident and accident reporting
 - Gift acceptance
 - Harassment policy
 - Human rights policy
 - Privacy policy
 - Criminal record check appeal

Notification to Insurance Company of Volunteer Activities

This letter is to inform you that I am undertaking occasional driving as a volunteer for

This non-profit organization exists to provide low-cost, door-to-door, accessible transportation options to residents who would most benefit from this service. Specifically this includes those with medical, mobility, or economic challenges.

My role will be to use my own vehicle to pick up riders at their homes and drive them to and from their destinations (such as grocery stores, medical appointments, etc.) as directed by company dispatch.

While I may be reimbursed for out of pocket driving expenses such as fuel, vehicle wear and tear, meals and parking, I will not be paid as a driver.

My volunteering will vary based on demand and my own availability.

Please certify below that the information contained below is true, and that my insurance as specified will cover me while doing volunteer driving.

This section to be completed by the volunteer.

Name of Insured/Volunteer:

Address:

Name of Insurance Company:

Policy Number:

Amount of Insurance Coverage:

Expiration Date:

This section to be completed by the insurance representative.

I have been duly notified of the occasional volunteer driving activity of the volunteer named above, and certify that the insurance information provided is correct.

Based on the terms of this policy and the minimum requirement of a two million dollar liability limit, the volunteer's insurance policy is sufficient to cover the type of volunteer driving described in this letter.

Name of Insurer or Insurance broker:

Address:

Name of Insurance Agent:

Title:

Signature:

Date:

A copy of this completed form must be filed with the volunteer's application form and supporting documents.

Driver File Check List

Organization: _____

Completed application yes no

References yes no

Emergency contact sheet yes no

Criminal record check yes no

Vulnerable sector check yes no

Copy of drivers license (both sides) yes no

Up-to-date drivers abstract yes no

Notice to Insurance company sheet yes no

Company policy review sign off sheet yes no

Vehicle emergency equipment sign off sheet yes no

Operating expenses and reimbursement sheet yes no

Vehicle inspection (completed by a Supervisor) yes no

Start Date:

Review Date:

A copy of this completed form must be filed with the volunteer's application form and supporting documents.

Overview Screening Form

Organization: _____

CANDIDATE: _____

	YES	NO	COMMENTS
Have we conducted the necessary criminal background checks, especially for a position that includes contact with children, the elderly, and/or vulnerable members of the community?	<input type="radio"/>	<input type="radio"/>	
Have we received multiple forms of identification and verified their authenticity?	<input type="radio"/>	<input type="radio"/>	
Have we used both local and national resources for our background checks?	<input type="radio"/>	<input type="radio"/>	
Have we checked Department of Motor Vehicle records, sex offender registries, and child abuse case logs for this candidate who will be driving or have contact with children?	<input type="radio"/>	<input type="radio"/>	
Have we received proof of proper insurance from this driver?	<input type="radio"/>	<input type="radio"/>	
Has the candidate supplied a Driver Abstract? (This is a copy of a persons driving record from the Department of Motor Vehicles. It will show any Motor Vehicle Act convictions, any accidents, as well as departmental postings and processes.	<input type="radio"/>	<input type="radio"/>	
Have we checked the supplied references?	<input type="radio"/>	<input type="radio"/>	
Have we conducted an in-person interview?	<input type="radio"/>	<input type="radio"/>	

Date: _____

Review Conducted By: _____

A copy of this completed form must be filed with the volunteer's application form and supporting documents.

Volunteer Risk Screening Form

Organization: _____

CANDIDATE: _____

	YES	NO	COMMENTS
Does the person pose a risk of harm to the community members that the organization serves?	<input type="radio"/>	<input type="radio"/>	
Does the person pose a risk of harm to staff members, supervisors or members of the Board of Directors at the organization?	<input type="radio"/>	<input type="radio"/>	
Does the position pose a risk to the person applying?	<input type="radio"/>	<input type="radio"/>	
Does the person understand the responsibilities involved in the position and the expectations of the organization?	<input type="radio"/>	<input type="radio"/>	

Date: _____

Review Conducted By: _____

Volunteer Driver Daily Trip Inspection Checklist

Driver's name (printed):

Odometer (start of week):

Odometer (end of week):

Organization:

Week of

(day/mo/yr)

to

Date:

Drivers signature:

OUTSIDE INSPECTION

Are the Following Functional?

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Headlights and Turn Signal Lights							
Parking and Clearance Lights							
Windshield, Wipers, Washers							
Engine Fluids, Wiring, Belts and Hoses, Leaks							
Exposed Wheel Nuts, Lugs and Studs							
Exhaust System Leaks							
Stop, Tail and Hazard Lights							
Rear Windows Unobstructed							
Body Condition (Rust perforation, sharp edges, accident damage, etc)							
Fuel System (Check for Leaks)							

INSIDE INSPECTION

Have you checked the following?

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Steering Wheel (Too much play)							
Brake Pedal Reserve and Fade							
Turn Indicator and Hazard Lights Switch							
Interior Lights							
Mirrors (Adjustment and Condition)							
Defroster and Heater							
Horn							
Seat Belts							
Parking Brake Check							
Emergency Equipment							
Valid safety inspection, registration and insurance card							
Coupling and Security							
Tires, Wheels and Hubs							
Electrical Hook Up							
Lights and Reflectors							
Safety Devices							

Hazards Identified:

Reported to:

Repairs Completed by:

A copy of this completed form must be filed with the volunteer's application form and supporting documents.

Travel Expense Claims Agreement

Organization: _____

Volunteer Name:

Organization:

The volunteer agrees that all purchases, insurance and licensing, operating, maintenance and repair costs associated with volunteer use of a personal vehicle are the responsibility of the volunteer/vehicle owner.

The volunteer agrees to the Travel Expense Claims rates listed below and agrees to submit expense claims consistent with the organization's Travel Expense Claim Procedure.

Organization:

will reimburse the vehicle owner for work-related use at a rate of _____ per km for normal highway use, and _____ per km for off-road use circumstances.

Organization:

will reimburse the owner for parking costs associated with work-related vehicle use.

I have read and understand the terms and conditions of this policy and agree to comply with them.

Volunteer signature

Date

Supervisor or manager signature

Date

on behalf of

A copy of this completed form must be filed with the volunteer's application form and supporting documents.