

Section Name: Employee Relations

Effective Date: March 5, 2013

Section Number: 400

Policy Number: 451

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Subject: Volunteer Recruiting, Selection and Retention

1. Purpose: The purpose of this policy is to provide guidance and compliance to establish appropriate guidelines and procedures for the recruitment of individuals to serve the County as volunteers. Further, to establish protocols and procedures used to select individuals who will serve as volunteers including mandatory background checks prior to becoming volunteers of the County.

Volunteers who serve the County of Monroe and its user offices do so knowing they serve at the direction and under the supervision of the management of the user office(s). Volunteer duties, tasks, services and projects shall be determined exclusively by the County and under no circumstances shall volunteers undertake any duty, task, service or project unless directed and approved by a County employee with authority to direct the volunteer's effort.

2. Statement of Policy:

2.1 The policy shall guide the County in ensuring only those individuals who have been properly recruited, screened and determined to be a qualified volunteer will be allowed to join the County and provide services as a volunteer.

2.2 Prior to any person becoming a volunteer of the County, a Volunteer Application Form (attached) shall be filled out and submitted by the interested person. The application shall be submitted to the user department for the initial review to ensure all information is complete. The Volunteer Application shall include minimum information including but not limited to name, date of birth, social security number, driver's license number, permanent address, past work or volunteer experience, education/credentials, any physical limitations, three (3) references and contact information.

2.3 The General County Volunteer Application Form shall be used for all applicants unless a office, court or department has developed a customized volunteer application form for the unique volunteer staffing needs of the respective operation. Any customized volunteer application form developed shall be submitted to the Human Resources Director and approved prior to use for recruiting and selecting volunteers (Attached). The customized volunteer application form shall contain at a minimum the information included in the General County Volunteer Application Form.

- a. Each Volunteer Application shall be accompanied by a Disclosure Statement (Attached) from the County to be acknowledged by the prospective volunteer

that the County may obtain a consumer report and other information about the volunteer as part of the County's background check/investigation.

- b. Prior to offering a prospective volunteer an opportunity to provide services, the user office shall conduct a background check of the person using the ICHAT System or LEIN System.
- c. For those user offices who do not have access to the LEIN System, they must coordinate the request for background information with an authorized user department or agency of the County.
- d. Any individual convicted of any felony crime will not be approved for volunteer services. Any person convicted of misdemeanor theft, larceny, forgery or other similar offenses will not be approved for volunteer services. Any individual with any sexual criminal convictions or charges will not be approved for volunteer services.
- e. Volunteers shall have background checks updated every six (6) months after becoming volunteers for the County. The user office shall be responsible for establishing a schedule to have the updated background checks completed under this requirement.
- f. Once approved as a volunteer, the person shall execute the Volunteer Agreement for Services along with the user office department head. (Attached)
- g. A liability waiver shall be executed by the person volunteering services to the County. If any volunteer services include the use of persons under the age of 18, the waiver must be executed by the person's parent/guardian. (Attached)
- h. Records for all volunteers shall be kept secured, and maintained by the user office including the Application Form, Disclosure Statement, Agreement, Waiver, and all reports concerning the volunteer's background screening. Those records that are exempt from public disclosure including social security numbers shall be kept confidential to prevent unauthorized release. All records shall be retained for two (2) years after the date of termination of the volunteer's services.

- 2.4 Before any volunteer is retained and begins providing services, the user office shall establish the volunteer job description, determine the risk associated with the duties to the volunteer and the County and take steps to mitigate the risks. In addition, the user office shall provide basic training to the volunteer including operations and safety pre-cautions, develop a structure to supervise the volunteer and provide on-going evaluation of the volunteer's services provided on behalf of the County.

### 3. Liability for Volunteer Program

- 3.1 The Volunteer Protection Act [42 U. S. C. S14503 (a)] establishes immunity for volunteers serving nonprofits or governmental agencies for harm caused by their acts or omissions provided:
  - a. The volunteer was acting within the scope of his or her responsibilities at the time of the act/omission.
  - b. Appropriate or required, the volunteer was properly licensed, certified or authorized to act.

c. The harm was not caused by willful, criminal or reckless misconduct, gross negligence or a conscious, flagrant indifference to the rights or safety of the individual harmed.

d. The harm was not caused by the volunteer operating a motor vehicle, vessel or aircraft where the state requires an operator's license or insurance.

3.2 The County will defend the volunteer against a claim brought against the volunteer while he or she was performing volunteer services for the County provided that a, b, c and d above were met during the occurrence.

3.3 The County will provide a medical coverage benefit for its volunteer program of \$25,000 per occurrence for bodily injury to a volunteer for medical payments only if the volunteer is injured while acting within the scope of his or her official volunteer duties. This is the limit of medical coverage for volunteers.

4. Definitions:

4.1 Volunteer: a person who gives his services without any express or implied promise of remuneration.

4.2 Employee: a person who is employed by the County and who is paid for services rendered.

4.3 User Office: the County department, office or Court that will be utilizing volunteer services under this policy.

5. Application: This policy shall apply to all offices, departments, courts of the County and their respective employees who are covered by the County's general liability insurance coverage program.

6. Responsibility: The Monroe County Board of Commissioners, through the County Administrator/Chief Financial Officer shall be responsible for this policy.

7. Administrative Procedure: All user offices of the County shall follow this policy and retain all applicable records, applications and background checks on file while the volunteer is serving and for two (2) years after services have ended.

8. Legislative History of Authority for Creation or Revision:

Adopted pursuant to action of the Monroe County Board of Commissioners, dated March 5, 2013.

**COUNTY OF MONROE, MICHIGAN**

**VOLUNTEER SERVICES**

**APPLICATION**

VOLUNTEER POSITION APPLIED FOR \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ Cell Phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_

Email: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_

Social Security Number: \_\_\_\_-\_\_\_\_-\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

List any previous Names: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_

Past Volunteer Experience(s): \_\_\_\_\_

Current Employer (if Applicable): \_\_\_\_\_

Time available for volunteering (check all that apply):

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9:00 a.m.-noon		Noon-4:00 p.m.		4:00 p.m. - 9:00 p.m.		

Hobbies/Interests/Skills: \_\_\_\_\_

Education/Credentials: \_\_\_\_\_

Indicate any physical accommodation required, or physical limitations related to the duties of the volunteer position for which you are applying \_\_\_\_\_

**References:** (Please list 3 non-family members) and Include Name, Address, Phone & Email

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**COUNTY OF MONROE, MICHIGAN**

**VOLUNTEER SERVICES**

**DISCLOSURE STATEMENT**

By this document, THE COUNTY OF MONROE, MICHIGAN discloses to you that a consumer report may be obtained for volunteer program purposes as apart of a background investigation, if applicable, for the volunteer position for which you are applying.

Please sign below to signify receipt of this disclosure.

Volunteer Name: \_\_\_\_\_  
(Print)

Volunteer Signature\_\_\_\_\_

Date\_\_\_\_\_

**COUNTY OF MONROE, MICHIGAN**

**VOLUNTEER SERVICES**

**WAIVER FOR VOLUNTEER SERVICES**

By signing below, I hereby waive and release THE COUNTY OF MONROE, MICHIGAN together with all of its agents, directors, employees, contractors, and volunteers from any liability in the event I should be injured while volunteering for THE COUNTY OF MONROE, MICHIGAN.

I further agree and authorize THE COUNTY OF MONROE, MICHIGAN to obtain a consumer report and/or obtain reference checks, as may be required, as a part of the program activity for which I am volunteering.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Volunteer's Name \_\_\_\_\_

*If you are under 18, this must be signed by a parent/guardian*