



NCC Solutions, Inc.

Volunteer Handbook

Issue Date:

03/06/2014

Revision Date:

11/14/14 3:34 PM

NCC Solutions, Inc., doing business as NCC Solutions, Inc.

NCC SOLUTIONS, INC.

VOLUNTEER HANDBOOK

WELCOME!

FOR OUR NEW VOLUNTEERS

NCC Solutions, Inc., dba NCC Solutions, Inc. (NCC) welcomes you as a new volunteer! We are pleased to present you with this volunteer handbook to assist you with information pertinent to your new position. We believe that each volunteer contributes directly to NCC's growth and success, and we hope you will take pride in being a member of our team.

Mission -- At NCC Solutions, Inc. we devote our resources to enabling individuals with intellectual disabilities to reach their full potential. Our person-centered approach recognizes challenges and promotes strengths to ensure a comprehensive and individualized method of program development. We are an agency committed to creating opportunities while growing together in a caring community.

Vision -- Building lives without limitations by:

- Valuing the ambitions and individuality of clients by treating them with dignity and respect.
- Encouraging and empowering our clients to make and achieve personal goals.
- Giving our clients a role in the community.
- Teaching skills that promote independence.
- Developing and retaining employees who provide excellent care.
- Evaluating the services we offer on a consistent basis.
- Giving a voice to people who cannot speak for themselves and providing a platform for those who can.

Motto: Limitless. Opportunity. Together.

Our volunteers are more than just caregivers and companions; they are role models.

This volunteer handbook was developed to describe the expectations of our volunteers and to outline the policies, programs of NCC Solutions, Inc.. You should familiarize yourself with this volunteer handbook as soon as possible, for it will answer many questions about your time with NCC.

We hope that your experience here will be enjoyable, challenging, and rewarding. Again, welcome!

Sincerely,



Jesse Malave
Executive Director

NCC SOLUTIONS, INC.

VOLUNTEER HANDBOOK

A. Volunteer Conduct

1. Standard of Conduct - The lasting impression that volunteers make on those they serve and work with reflects directly on all staff, volunteers and board members of NCC Solutions, Inc.. All words and deeds should help build our volunteer program and its reputation for quality
2. Absenteeism - Volunteers should do their best to be present and on time for each event or activity for which they are scheduled. If you know that you will be late or absent, please contact the person in charge of the event or your supervisor at least 24 hours before you are expected to come or as soon as possible so that alternate plans can be made
3. Grievance Procedure - Volunteers and staff are expected to act professionally and in accordance with their position descriptions. Should a volunteer have a grievance concerning their work environment, they should report it promptly to the Volunteer Coordinator or the Executive Director. Every effort will be made to achieve speedy and effective resolution, and all complaints will be treated confidentially (Confidentially may not be guaranteed for complaints involving sexual harassment or child abuse)
4. Discontinuation of Volunteer Service - If you wish to leave your volunteer service for any reason, please contact the Volunteer Coordinator so that appropriate arrangements can be made. As a volunteer, you have the right to terminate your volunteer service for any reason. NCC Solutions, Inc. reserves the same right
5. Media Conduct - Volunteers will not represent themselves as a spokesperson or representative for the organization under any circumstances without prior approval. Only the board president and executive director serve as spokes people for NCC Solutions, Inc.
6. Alcohol/Drugs - When participating in NCC Solutions, Inc. NCC Solutions, Inc. activities, volunteers are prohibited from purchasing, transferring, using or possessing illicit drugs, alcohol, or prescription drugs in any way that is illegal. Implementing this policy provides a drug and alcohol free work place in order to ensure a safe, healthy, and productive environment for all volunteers and employees. If caught or suspected of breaking this policy, disciplinary actions up to and including termination will result.
7. Harassment Policy - Volunteering should be an enjoyable experience. Harassment is not only illegal, but it also creates uncomfortable conditions and unpleasant experience for everyone involved. Any volunteer who feels harassed should speak to his/her volunteer supervisor or the executive director in attempt to reach a solution.
8. Dress Code - When volunteers are working on behalf of NCC Solutions, Inc. must comply with the company dress code (policy: 16-030 Dress Code)
9. Confidentiality -As a volunteer at NCC Solutions, Inc., you may have access to confidential information. Volunteers must ensure that the agency's official board approved confidentiality policy is followed. Volunteers are required to sign the confidentiality policy receipt form prior to beginning their volunteer service
10. Partisanship - While working on behalf of NCC Solutions, Inc., volunteers must never present partisan information (supporting or endorsing political parties or candidates for office) in accordance with our organization's 501(c)(3) status
11. Proselytizing - NCC's program participants, staff and volunteers hold a variety of political,

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social, religious, and personal beliefs. Volunteers must be respectful of the views and opinions of held by others with whom they come in contact while volunteering with the organization. Unless instructed to do so as part of the organization's mission and program, volunteers must refrain from advocating or proselytizing for the specific political, social, and/or religious beliefs in these situations

12. Reimbursement of Expenses -In certain situations, volunteers may be eligible for reimbursement of actual out of pocket expenses. Such expenses must be pre-approved by the volunteer's supervisor or the Volunteer Coordinator
13. Safety and Liability -Safety - Although we do our best to provide safe conditions for our volunteers, we count on volunteers to be the best protector of their own personal safety. Volunteers should always be aware of where they are and what they are doing. Volunteers should pay particular attention to safety instructions and proper equipment use. Volunteers should speak up if they have a safety concern and report any injuries to the person in charge as soon as possible
14. Legal Liability - Volunteers are concerned about their personal liability arising from their service for the agency. When a volunteer acts as a representative of the agency, acting on the agency's behalf and with its authority and within the scope of the volunteer's duties, the agency may be held vicariously liable for the actions of the volunteer. However, liability is based upon the personal acts of a person so the volunteer may also be liable for his or her actions
15. Waiver - Volunteers are required to sign a waiver and release of liability before serving the agency. By signing the waiver, volunteers agree to assume the risk of any accident or injury to person or property, which may sustain in connection with your participation with the NCC Solutions, Inc.. In addition, volunteers agree to release and discharge (name of organization) and any of its directors, officers, employees, partners, affiliates and successors from any and all liability or responsibility for any such accident or injury.
16. It is the responsibility of all volunteers to be familiar with the provisions of policy 16-032 Volunteer Program available through your supervisor or the Human Resources department.

Volunteer's Signature: _____ Date: _____

Volunteer's Name (printed): _____

Attachment: 16-023-25 Safety Policy Statement

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SAFETY POLICY STATEMENT


The management team at NCC Solutions, Inc. is firmly committed to providing a safe and healthy work environment for our employees & volunteers, our individuals, and their families. Injuries and illnesses result in personal suffering, and could cause financial hardships for the employees and their families. They can also affect staffing, which puts additional burdens on fellow employees and has the potential to affect the quality of care we provide to our individuals. Hence, we must all make a concerted effort to reduce the potential for injuries and illnesses to an absolute minimum.

In order to accomplish our goal of providing the safest possible working conditions at NCC Solutions, Inc., the safety performance of every manager, supervisor, and employee will be monitored and appraised on a regular basis.

Employee involvement and communication are also essential to the success of this process; therefore, we expect every employee to promptly report any conditions or behaviors that might create a hazard to you, your fellow employees, or the individuals of this facility. Other opportunities for communicating safety and health concerns and suggestions will be made available through on-going safety and health training and in-services, periodic employee surveys, contact with safety committee members, and use of the employee suggestion system.

If an injury or incident should occur, it must be reported immediately so we can ensure that proper medical attention is provided. Our management staff will then work with you and your health care provider to develop a care plan that will allow you to return to work at the earliest possible opportunity.

A safe environment is vital to the well-being of our staff and allows us to provide consistent, high-quality care to our individuals. I am confident that, if we all work together and enthusiastically participate in this process, we can truly have a positive impact on the safety and health of everyone associated with NCC Solutions, Inc.!



Jesse M. Malave, MED
Executive Director

Employee Signature

Date

NCC SOLUTIONS, INC.

VOLUNTEER APPLICATION

Personal Information

Name (Typed or Printed): _____ Social Security: _____

Address (Street, City, ST & Zip): _____

Phone: _____ Email Address: _____

Years of School Completed: _____

Trainings or Certifications: _____

Previous Occupation(s): _____

Language(s) Spoken: _____

Physical Condition: Excellent Good Fair Poor

Please Explain: _____

Do you have any criminal convictions (Other than parking violations and juvenile offenses)? Yes No

If yes, please describe: _____

Do you consent to Northeast Care Center performing, or arranging for a criminal history check? Yes

No

Explain why you want to be a Volunteer: _____

Are you hoping to learn new skills by volunteering for us? Please specify: _____

List Memberships in Clubs And Organizations: _____

List Hobbies and Special Skills: _____

What skills would you like to teach?

List your volunteer experience:

Organization	Location	Dates volunteered
Responsibilities:		
Reason for leaving:		
Organization	Location	Dates volunteered
Responsibilities:		
Reason for leaving:		
Organization	Location	Dates volunteered
Responsibilities:		

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VOLUNTEER APPLICATION

Reason for leaving:

Emergency Contact:

Name:

Phone:

Relationship:

Availability

Willing To Serve: Mornings Afternoons Evenings Weekends

Days Available: Any Day MON TUE WED THU FRI SAT SUN

How often? 1-Time Special Events Regular schedule

Do you have your own means of transportation? YES NO

If not, what kind of transportation do you plan to use?

References and Acknowledgements

Please list two character references (not relatives)

Name:

Address

City

State/Zip

Phone

Name:

Address

City

State/Zip

Phone

By signing this application, I certify that answers given here are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision.

This application shall be considered active for a period of 6 months, but not to exceed 1 year. Any applicant wishing to be considered for volunteering beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any volunteer relationship with this organization is of an "at will" nature, which means that the volunteer may resign at any time and the employer may discharge the volunteer at any time with or without cause. It is further understood that this "at will" relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of acceptance as a volunteer, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all policies and rules of the employer.

Applicant's Signature

Date

NCC SOLUTIONS, INC.

VOLUNTEER RELEASE AND WAIVER OF LIABILITY

Volunteer Name (print): _____ Date: _____

This Release and Waiver of Liability ("Release") is in favor of NCC Solutions, Inc., , a corporation not-for-profit, and its directors, officers, employees, agents, representatives, successors, and assigns (together with NCC, the "Released Parties").

I desire to volunteer my services to NCC without any expectation of being compensated. I understand that my volunteer services may include activities for which I am not initially intending to provide services, such as various clerical and administrative tasks, cooking, cleaning, answering phones, and interacting with NCC's individuals.

I hereby freely, voluntarily, and without duress agree to this Release under the following terms:

- 1. Release and Waiver:** I understand that NCC will not compensate me for the services I will provide and the Released Parties do not have any obligation to provide me with any financial or other assistance, including but not limited to medical, health, or disability payments or insurance, in the event of my getting injured or contracting any illness or disease in connection with my providing services to NCC.
- 2. Medical Treatment:** I hereby release and forever discharge the Released Parties from any liability, charges, causes of action, claims, demands and other matters of any kind or nature, either in law or in equity, which may arise from or be on account of any first aid, treatment, or services rendered to me in connection with my providing services to NCC.
- 3. Assumption of the Risk:** I understand that my volunteer services to NCC may include tasks that may be hazardous to me. I hereby expressly and specifically assume the risk of injury or harm in all of the volunteer services that I will be providing to NCC and release and forever discharge and hold harmless the Released Parties from all liability for all matters, including but not limited to bodily injury, personal injury, illness, death, loss, expenses, charges, or property damage that may result from my providing volunteer services to NCC, even if those services will be dangerous.
- 4. Insurance:** I understand that, except as NCC may otherwise agree in writing, NCC does not carry or maintain any health, medical, or disability insurance coverage for any of its volunteers. I also understand that each volunteer providing services to NCC is expected and encouraged to obtain his or her own medical or health insurance coverage.
- 5. Volunteer Nature of Services:** I understand that NCC is a not-for-profit organization and that my services will be used to further NCC's charitable and humanitarian purposes. I acknowledge that I am providing my services to NCC without any expectation or promise of receiving any compensation. I also acknowledge that I am providing services to NCC freely and have not been pressured or coerced by NCC or others to provide my services to NCC on a volunteer basis.
- 6. Photographic Release:** I hereby grant and convey unto NCC all right, title, and interest in any and all photographic images, video, and audio recordings made by NCC during the time that I am providing volunteer services to NCC, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs, videos or audio recordings.
- 7. Background Check Release:** I confirm that I have not been convicted of any crime involving the abuse of a child or an elderly or disabled person, unlawful sexual conduct, theft, drug possession or use, or any felony. I authorize NCC to order my background report from a background report provider now and throughout the time that I am providing volunteer services to NCC. I authorize all agencies and entities to disclose to the background report provider or NCC all information about or

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concerning me, including law enforcement and all other federal, state, and local agencies; federal, state, and local courts, the military, motor vehicle records agencies, and all other private and public sector repositories of information. The information that can be disclosed includes, but is not limited to, information concerning my motor vehicle history, criminal history, military service, and professional licenses, credentials, and certifications.

8. **Other:** I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Ohio. I agree that in the event that any provision of this Release is held to be invalid by any court of competent jurisdiction, the invalidity of such provision shall not otherwise affect the remaining provisions of this Release.

BY SIGNING MY NAME BELOW, I ACKNOWLEDGE AND AGREE THAT I HAVE CAREFULLY READ THIS RELEASE AND WAIVER AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY AND THAT I AM WAIVING ANY RIGHT THAT I MAY HAVE TO BRING A LEGAL ACTION OR TO ASSERT ANY CLAIM AGAINST NCC SOLUTIONS, INC. OR ANY OF ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, REPRESENTATIVES, SUCCESSORS, OR ASSIGNS IN CONNECTION WITH MY PROVIDING VOLUNTEER SERVICES TO NCC SOLUTIONS, INC. I ALSO ACKNOWLEDGE THAT I INTEND TO PROVIDE MY SERVICES TO NCC SOLUTIONS, INC. ON A VOLUNTEER BASIS AND HAVE NO EXPECTATION OF RECEIVING ANY COMPENSATION FOR MY SERVICES. I AGREE THAT A FACSIMILE, PHOTOCOPY, OR ELECTRONIC COPY OF THIS RELEASE IS AS VALID AS THE ORIGINAL.

Employee's Name (Signature)

Date

Address: _____

Phone: _____

Email: _____

NCC SOLUTIONS, INC.

VOLUNTEER POSITION DESCRIPTION

Volunteer Position Description Worksheet

Use this worksheet to outline responsibilities, support, and benefits of specific volunteer opportunities. Remember to be as detailed as possible and use clear language – no jargon or acronyms that new volunteers may not understand.

Title: _____

Purpose/objective: _____

Location: _____

Key responsibilities: _____

Qualifications: _____

Time commitment: _____

Training/support provided: _____

Benefits: _____

Phone: e- mail: _____

Volunteer's Signature: _____ Date: _____

Volunteer's Name (printed): _____

Volunteer supervisor: _____

Supervisor's Signature: _____

NCC SOLUTIONS, INC.

VOLUNTEER CONFIDENTIALITY AGREEMENT

Important: Each volunteer must sign the "Volunteer Confidentiality Agreement" before working at a NCC Solutions, Inc. site. Please complete this form and bring it with you before you begin work. *Read this waiver very carefully before you sign.*

I, the undersigned, in consideration of my participation as a volunteer with NCC Solutions, Inc. hereby agree to the following Confidentiality Agreement.

I understand that I may be given access to confidential and/or proprietary information to the extent necessary in order to perform my duties as a volunteer with NCC Solutions, Inc. I shall not, at any time either during or subsequent to this participation with NCC Solutions, Inc., make unauthorized disclosures or unauthorized use of any information that is considered to be proprietary or confidential by NCC Solutions, Inc. Proprietary information includes, but is not limited to, all information, data, reports, analyses, processes, know-how, designs, plans, marketing data, business plans and strategies, negotiations and contracts, research, and volunteer, donor or vendor lists, compilations, trade secrets, and confidential information, whether in written, oral or electronic form. Confidential information includes, but is not limited to, any personal information of any NCC Solutions, Inc. employee, volunteer, agency partner, or donor, whether in written, oral or electronic form.

All employer records and information relating to NCC Solutions, Inc. or its individuals, volunteers, agency partners, and donors are confidential and I will treat all matters accordingly. This includes any information protected under any applicable state or federal privacy law. No NCC Solutions, Inc.- related information, including without limitation, documents, notes, files, records, oral information, computer files or similar materials (except in the ordinary course of performing duties on behalf of NCC Solutions, Inc.) may be removed from NCC Solutions, Inc. premises without permission from NCC Solutions, Inc. staff. Additionally, the contents of NCC Solutions, Inc.'s records or information otherwise obtained in regard to business may not be disclosed to anyone, except where required for an authorized business purpose and/or required by law. I will not disclose any confidential information, purposefully or inadvertently (through casual conversation), to any unauthorized person inside or outside NCC Solutions, Inc. If I am unsure about the confidential nature of specific information, or whether specific information may be protected under state or federal law, I will ask the NCC Solutions, Inc. staff member supervising my actions for clarification before disclosing the information.

Proprietary information and trade secrets are created at substantial cost and expense to NCC Solutions, Inc.. Unauthorized use or disclosure of confidential or proprietary information would cause irreparable injury to NCC Solutions, Inc.. I agree that monetary damages would not be a sufficient remedy for any breach of this agreement by me, and that, in addition to all other remedies, NCC Solutions, Inc. shall be entitled to seek (a) specific performance and (b) injunctive or other equitable relief as a remedy for any such breach, and I further agree to waive any requirement for any bond in connection with such remedy.

When I cease my participation as a volunteer with NCC Solutions, Inc., I will return all NCC Solutions, Inc.-related information and property that I have in my possession, including without limitation documents, files, records, manuals, information stored on a personal computer, personal data assistant or computer disk, supplies, and equipment or office supplies.

Executed this ___ day of _____, 20__

Volunteer's Signature: _____

Volunteer's Name (printed): _____

Volunteer's Address, CSZ _____

NCC SOLUTIONS, INC.

PARENT OR LEGAL GUARDIAN VOLUNTEER RELEASE AND WAIVER OF LIABILITY

Volunteer Child's Name (print): _____ Date: _____

This Release and Waiver of Liability ("Release") is in favor of NCC Solutions, Inc., a corporation not-for-profit, and its directors, officers, employees, agents, representatives, successors, and assigns (together with NCC, the "Released Parties").

My child, whose name is printed above, desires to volunteer his or her services to NCC without any expectation of being compensated. I understand that my child's volunteer services may include activities for which he or she is not initially intending to provide, such as various clerical and administrative tasks, cooking, cleaning, answering phones, and interacting with NCC's individuals.

I, on behalf of my child, hereby freely, voluntarily, and without duress agree to this Release under the following terms:

- Release and Waiver:** I, on behalf of my child, understand that NCC will not compensate my child for the services he or she will provide and the Released Parties do not have any obligation to provide my child with any financial or other assistance, including but not limited to medical, health, or disability payments or insurance, in the event of my child's getting injured or contracting any illness or disease in connection with his or her providing services to NCC.
- Medical Treatment:** I, on behalf of my child, hereby release and forever discharge the Released Parties from any liability, charges, causes of action, claims, demands, and other matters of any kind or nature, either in law or in equity, which may arise from or be on account of any first aid, treatment, or services rendered to my child in connection with his or her providing services to NCC.
- Assumption of the Risk:** I, on behalf of my child, understand that my child's volunteer services to NCC may include tasks that may be hazardous. I, on behalf of my child, hereby expressly and specifically assume the risk of injury or harm in all of the volunteer services that my child will be providing to NCC and release and forever discharge and hold harmless the Released Parties from all liability for all matters, including but not limited to bodily injury, personal injury, illness, death, loss, expenses, charges, or property damage that may result from my child's providing volunteer services to NCC, even if those services will be dangerous.
- Insurance:** I, on behalf of my child, understand that, except as NCC may otherwise agree in writing, NCC does not carry or maintain any health, medical, or disability insurance coverage for its volunteers. I also understand that volunteers providing services to NCC are expected and encouraged to obtain their own medical or health insurance coverage.
- Volunteer Nature of Services:** I, on behalf of my child, understand that NCC is a not-for-profit organization and that my child's services will be used to further NCC's charitable and humanitarian purposes. I, on behalf of my child, acknowledge that my child will be providing services to NCC without any expectation or promise of receiving any compensation. I, on behalf of my child, also acknowledge that my child will be providing services to NCC freely and that my child has not been pressured or coerced by NCC or others to provide his or her services to NCC on a volunteer basis.
- Photographic Release:** I, on behalf of my child, hereby grant and convey unto NCC all right, title, and interest in any and all photographic images, video, and audio recordings made by NCC during the time that my child will be providing volunteer services to NCC, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs, videos or audio recordings.
- Background Check Release:** I, on behalf of my child, confirm that my child has not been convicted of any crime involving the abuse of a child or an elderly or disabled person, unlawful sexual conduct,

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PARENT OR LEGAL GUARDIAN VOLUNTEER RELEASE AND WAIVER OF LIABILITY

theft, drug possession or use, or any felony. I, on behalf of my child, authorize NCC to order my child's background report from a background report provider now throughout the time that my child provides volunteer services to NCC. I, on behalf of my child, authorize all agencies and entities to disclose to the background report provider or NCC all information about or concerning my child, including law enforcement and all other federal, state, and local agencies; federal, state, and local courts, motor vehicle records agencies, and all other private and public sector repositories of information. The information that can be disclosed includes, but is not limited to, information concerning my child's motor vehicle and criminal histories.

8. **Other:** I, on behalf of my child,, expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Ohio. I, on behalf of my child,, agree that in the event that any provision of this Release is held to be invalid by any court of competent jurisdiction, the invalidity of such provision shall not otherwise affect the remaining provisions of this Release.

BY SIGNING MY NAME BELOW, I ACKNOWLEDGE AND AGREE THAT I HAVE CAREFULLY READ THIS RELEASE AND WAIVER AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY AND THAT I AM WAIVING ANY RIGHT THAT MY CHILD MAY HAVE TO BRING A LEGAL ACTION OR TO ASSERT ANY CLAIM AGAINST NCC SOLUTIONS, INC. OR ANY OF Its directors, officers, employees, agents, representatives, successors, OR assigns IN CONNECTION WITH MY CHILD'S PROVIDING VOLUNTEER SERVICES TO J NCC SOLUTIONS, INC. I ALSO ACKNOWLEDGE THAT MY CHILD INTENDS TO PROVIDE HIS OR HER SERVICES TO NCC SOLUTIONS, INC. ON A VOLUNTEER BASIS AND HAS NO EXPECTATION OF RECEIVING ANY COMPENSATION FOR THOSE SERVICES. I AGREE THAT A FACSIMILE, PHOTOCOPY, OR ELECTRONIC COPY OF THIS RELEASE IS AS VALID AS THE ORIGINAL.

Employee's Name (Signature)

Date

Address: _____

Phone: _____

Email: _____