

RSVP Volunteer:

****Keep for your records****



RSVP VOLUNTEER CONDUCT AND CONFIDENTIALITY CONDITIONS

As a member of RSVP, I must adhere to the guidelines for conduct and confidentiality outlined in this document. I understand that CSS/RSVP may change these volunteer policies at any time and that I will be notified of such change.

Volunteer Conduct

1. While working as a volunteer, I will refrain from using alcohol or illegal drugs. Violation of this condition is reason for dismissal.
2. I understand that RSVP does not practice, condone, facilitate, or collaborate with any form of discrimination on the basis of race, color, gender, religion, national origin, citizenship status, mental or physical disability, marital status, or sexual orientation. I agree to refrain from all forms of discrimination prohibited herein.
3. I agree not to act as a spokesperson for RSVP, or to speak to the media on behalf of the organization unless authorized for a specific purpose by RSVP.
4. I agree to bring any problem, which is beyond the scope of my volunteer expectations or ability, to the attention of the volunteer supervisor.

Prohibited Activities

Due to federal grant guidelines, RSVP members cannot perform the following as part of their RSVP service:

1. Give religious instruction, conduct worship services or engage in proselytizing.
2. Assist with electoral activities, voter registration, transportation to the polls, or try to influence legislation.
3. Engage in activities that displace paid workers.
4. Accept money or donation from their service recipient or relatives and friends of service recipients.

Confidentiality

1. I agree not to disclose any information of a personal and confidential nature to any person not also affiliated with RSVP and authorized by RSVP to have such information, without the specific consent of the individual to whom such information pertains and the prior knowledge of RSVP.
2. I understand that any access code, password, etc. assigned by RSVP will be kept confidential.
3. Failure to comply with these terms will result in the release from volunteer service with RSVP.
4. To the extent that a volunteer site requires compliance with an additional confidentiality and conduct agreement, I agree to abide by that also.

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Procedures for RSVP Individual Transportation Reimbursement

When funding is available, RSVP provides partial transportation reimbursement to volunteers. RSVP is not able to provide additional reimbursement for express buses or car service. Please review the reimbursement procedures, as they appear in the RSVP Handbook of Policies & Procedures.

1. RSVP will provide transportation reimbursement to registered, active RSVP volunteers, except volunteers serving at sites where they are members (i.e. senior centers).
2. Transportation reimbursement checks are issued every two months. The first check will be issued approximately two-three months after the volunteer begins their assignment(s).
3. Volunteers who use public transportation, a personal vehicle, or Access-A-Ride are eligible to receive transportation reimbursement at a rate of \$2/day with a maximum of 10 days/month. Example: If a volunteer contributes 12 days in a month, we will record those hours, but the volunteer will only be reimbursed \$20 because of the maximum limit of 10 days per month. RSVP Signature Project volunteers are eligible for \$3/day with a maximum limit of 10 days/month.
4. Your transportation reimbursement is based on the attendance sheets that are submitted to RSVP every month. It is your responsibility to sign in on the days when you volunteer. If your site supervisor submits time sheets after the due date (the 15th of the following month), you will not receive travel reimbursement for that month. Example: If your site supervisor submits an August time sheet on September 16th, you will not be reimbursed for August due to the missed deadline.
5. Reimbursement for transportation expenses is provided only for your travel to and from your volunteer worksite.
6. If you receive full reimbursement for your travel costs from the agency where you volunteer, you are not eligible for transportation reimbursement from RSVP.
7. If you have questions regarding reimbursement, please contact Bobbie Futrell, Volunteer Manager at 212-614-5386 or bfutrell@cssny.org.

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VOLUNTEER INSURANCE COVERAGE FOR ACTIVE RSVP VOLUNTEERS

SUMMARY OF COVERAGES

(Insurance is administered by The CIMA Companies, Inc.)

One of the benefits of volunteering as an RSVP member is that you are provided with supplemental accident medical, personal liability, and automobile insurance. This is not a substitute for any insurance you may now carry, and only applies while you are performing your assignment as a volunteer in the program, or participating in an activity sponsored by RSVP. The coverage becomes effective at the time of your formal enrollment in the volunteer program.

EXCESS ACCIDENT MEDICAL COVERAGE

This coverage is in excess of any other health insurance that you have in place. The excess accident medical coverage will pay up to \$50,000 for medical treatment, hospitalization and licensed nursing care required as the result of a covered accident. The insurance applies while you are traveling directly to and from, and while you are participating in volunteer-related activities.

Initial medical expenses must be incurred within 60 days of the accident. Expenses are then covered for a one-year period following the accident.

Dental care is covered up to \$500 per tooth for accidental injury to teeth and repair of dentures. Maximum benefit for dental care is \$900 per accident.

This coverage also provides up to \$50 for repair or replacement of eyeglass frames and up to \$50 for repair or replacement of eyeglass prescription lenses damaged as a result of a covered accident.

The maximum benefit under the Excess Accident Medical coverage, including dental and eyeglass expenses, is \$50,000.

This insurance does not duplicate benefits payable under any other valid and collectible insurance coverage. Benefits are payable for eligible expenses that are in excess of benefits paid to the volunteer by any other health care plan. In the event no other health insurance exists, benefits will be payable on a primary basis.

Accidental Death and Dismemberment Coverage - In addition to the accident medical coverage, the insurance company will pay the following benefits for death or loss of limb or sight, occurring within one year after a covered accident, when the loss results directly from an accident, and independently of all other causes, while coverage is in effect.

- Loss of life (paid to beneficiary listed on RSVP Volunteer Application) - \$2,500
- Loss of both hands, feet or eyes, or any combination of two thereof (paid to volunteer) - \$2,500
- Loss of either foot or either hand, sight of one eye (paid to volunteer) - \$1,250
- Loss of thumb and index finger of same hand (paid to volunteer) - \$625

Only one amount, the largest to which the volunteer is entitled, is paid for all losses resulting from one accident.

Exclusions to Accident Insurance - These coverages are subject to exclusions and limitations Coverage is provided only for treatment of injuries sustained by Covered Persons during Covered Activities, and excludes injuries resulting from suicide, commission of a felony or assault, riot, war, flying except as a fare-paying passenger, races or speed contests, any sickness or disease, intoxication, or treatment of existing injuries.

This plan provides Accident insurance only. It pays benefits for bodily injury. It does not provide benefits for sickness.

EXCESS VOLUNTEER LIABILITY INSURANCE

All registered volunteers (collectively) of an organization are provided with volunteer Liability insurance at a limit of \$1,000,000 per occurrence subject to an annual aggregate per named organization. This policy provides protection for a personal injury or a property damage liability claim arising out of the performance of the registered volunteer's duties. This coverage is in excess of and non-contributing with any other valid or collectible insurance the volunteer may have.

EXCESS AUTOMOBILE LIABILITY INSURANCE LIABILITY

This coverage protects the registered volunteer driver for bodily injury or property damage claims arising out of the volunteer's operation of his or her own vehicle during their volunteer assignment, not going to or from the assignment. Each accident limit of liability will not exceed \$500,000.

HOW TO FILE A CLAIM

If you have an accident which results in personal injury to yourself, you should notify your contact person at your volunteer station with the date and nature of your accident. They should contact JoAnne Wright at the RSVP Central Office at 212-614-5489. RSVP will mail a claim form to the injured volunteer. Follow the instructions carefully. When the form has been completed, return it to the RSVP Central Office.

In the event of a liability claim, you should immediately contact JoAnne Wright at the RSVP Central Office at 212-614-5489. If possible, send written notice containing the time, place and circumstances thereof, with the names and addresses of witnesses and the injured.