



Volunteer Handbook

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Welcome to People in Need, Inc. of Delaware County, Ohio (PIN)

PIN assists Delaware County residents with immediate emergency needs which have arisen due to a variety of circumstances: job loss, family break-up, illness or death in the family, or any other number of financial emergencies. It is PIN's belief that our clients' problems are not solved by simply handing out food or paying utility bills. The immediate emergency in nearly all cases is a symptom of, but rarely the underlying problem itself. PIN's role is to help with the immediate need while reviewing the total needs of the family unit. PIN works with the individual or the family to identify appropriate referrals, using all available community resources.

A Few Facts

- PIN began operating in 1981, and in that first year, PIN provided food to 535 people through the food pantry.
- In fiscal year 2022, the Food Pantry provided 418,575 meals (including meals distributed at the Holiday Clearing House), and 222,305 pounds of fresh produce through the Fresh Produce Markets.
- Volunteers donated over 10,000 hours of time last year.
- Volunteers help with food sorting, food pantry preparation and distribution, administration, and special events, and are the lifeblood of PIN.
- The 2022 Holiday Clearing House served nearly 500 families and senior households, providing food, toys, coats, and much more. Over \$130,000 worth of toys were distributed to nearly 1,000 children, as well as 869 winter coats.

Thank YOU to our Volunteers for making it possible!

Mission Statement

Providing relief to our neighbors in their time of need.

About PIN

People in Need, Inc. of Delaware County Ohio (PIN) is a private, not-for-profit 501 (C) (3) social services agency dedicated to providing emergency assistance to Delaware County residents. Delaware County is one of the fastest growing counties in the U.S. – growing from 54,825 in 1981 to over 226,296 in 2022. Financial aid is provided by the United Way of Delaware County and community donations.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs).

How You Help

Volunteers are vital to our ongoing programs. Coming from all walks of life with diverse talents, skills, and a passion to serve, volunteers make our work possible.

Volunteers may:

- Fill food orders and maintain inventory in the Food Pantry.
- Perform light office tasks such as data entry, filing and mail.
- Participate in special projects.
- Distribute fresh produce at the Fresh Produce Markets
- Assist with other administrative tasks for all areas of the operation, including Emergency Services and Marketing and Development

- Assist to distribute fans in the summer and school shoes and supplies in the fall
- Pack weekend backpack foods for the Delaware City Schools
- Participate in the Holiday Clearing House
- Serve on the PIN Board of Directors

Days and Hours of Operation

Monday – Thursday

9:00AM – Noon

1:00PM – 4:30PM

Friday

9:00AM – Noon

1:00PM – 3:00PM

PIN is closed from noon to 1 p.m. daily.

Volunteer Scheduling

Volunteers are scheduled by the Director of Food Insecurity Programs. For scheduling, submit an online application, or call PIN at (740)363-6284, Option 2. Volunteer opportunities are generally:

- Food Distribution: Monday and Wednesday from 9 a.m. until noon, and from 1 p.m. until 4:30 p.m. Friday from 9 a.m. until noon, and from 1 p.m. until 3 p.m.
- Retail Donation Pick-Ups every weekday morning.
- Pantry Restocking: Tuesday and Thursday from 9 a.m. until noon, and 1 p.m. until 4 p.m.
- Weekend Backpack packing Tuesdays during the school year from 1 p.m. to 3 p.m.

Volunteer Agreement and Waiver

All volunteers will review and sign the Volunteer Agreement and Waiver form.

Confidentiality

All volunteers are obliged to keep information regarding program clients and donors confidential. Any information that you learn about a program client or donor during your volunteer work with PIN cannot be shared with anyone outside of PIN. Please see Appendix E for PIN's Volunteer Confidentiality Agreement. All volunteers will review and sign the confidentiality agreement.

As a volunteer, you have the right to have your personal information kept confidential as well. Your personal information can only be accessed by PIN staff members. Your personal information cannot be shared with someone outside of PIN, or with other volunteers without your consent.

*Volunteers who are minors will need the consent of their parent or guardian and both the minor volunteer and the parent or guardian will review and sign the agreements and waivers.

Volunteer Training

Volunteers should plan to arrive at least 15 minutes prior to the start of their first shift. Volunteer training typically includes a tour of the facility and an introduction to the staff and volunteers with whom you will be working. The Director of Food Insecurity Programs or a Warehouse Associate will also explain procedures and expectations. A staff person will be available to answer questions at all times. Each volunteer receives the volunteer handbook for their review. All volunteers will be informed of materials, equipment and processes they will encounter while performing volunteer work.

The Break Room and all its facilities are available for use by all volunteers. PIN strives to keep the refrigerator stocked with bottled water and other beverages for volunteers to enjoy. Snacks are also made available in the break room. Food items in the Pantry or Warehouse are strictly for distribution to clients. When you enjoy a snack in the break room, please clean up after yourself.

Volunteer Drivers

Volunteers are required to observe all traffic laws. Smoking is not permitted in PIN vehicles. Drivers other than PIN staff and approved volunteers are not permitted to drive PIN vehicles. Volunteer drivers must supply a copy of their valid driver's license to be submitted to the PIN insurance carrier.

In the event of a traffic incident, please fill out the Traffic Incident Report and give to a staff member.

Volunteer Safety

Body Mechanics: Stocking and distributing food requires lots of lifting. Proper body mechanics are important to prevent injuries. Please follow these procedures:

- Size up the load to make sure it is stable and balanced. Test the weight to ensure you can lift it yourself. If not, please ask for help.
- Make sure your path of travel is clear.
- Use a wide balance stance with one foot ahead of the other.
- Bend your knees to get as close to the load as possible—lift with your legs and not your back.
- Get a good grip on the load and make sure you can maintain your hold throughout the lift.
- Lift gradually, using a slow and steady motion.
- Keep the load close while carrying to keep from arching your back.
- Pivot to change direction and move your feet in the direction of the lift.
- Again, if the load is too heavy for you, please ask for help.

The Box Crusher (Harris Vertical Baler):

- All boxes, corrugate and other paper/cardboard materials should be placed in the Harris unit for crushing and baling. Volunteers should not operate the baler without training and/or supervision from a staff member.

Housekeeping:

- Try to keep the pantry area clean and organized.
- Keep aisles and doorways clear of boxes and other tripping hazards.
- Clean up spills immediately.
- Ask for assistance with items that are out of reach.

Hygiene and Attire:

- Wear loose, comfortable clothing. In the colder months, dress warmly or in layers, especially when distributing food outdoors.
- Closed-toe shoes are required for all pantry and warehouse areas.
- Facemasks and/or disposable gloves may be worn for the volunteer's comfort level. Disposable gloves must be worn when bagging or stocking fresh unpackaged produce.
- Hands should be washed frequently during the shift and always between glove changes.
- Hand sanitizer is also available throughout the facility for volunteer use.
- Volunteers who are feeling sick should not report for their shift. As a courtesy, please call to notify PIN if you are unable to report for your shift.

First Aid:

- Any incident that results in physical injury should be reported immediately to a PIN staff member.
- For minor cuts, scrapes, etc., a First Aid kit is located by the copy machine near the break room.
- Depending on the extent of the injury you may be asked to fill out an Accident Report.

Civil Rights Training

All volunteers must receive the following training on an annual basis: Civil Rights Training for Volunteers Who Assist with USDA/TEFAP (The Emergency Food Assistance Program). A PIN staff member will notify volunteers when their annual

training is due and will provide the training. Volunteers will sign a log indicating they received the training.

Pantry Operations

Food Distribution (M-W-F):

- Volunteer arrives and reviews pantry stock and special instructions for the shift's distribution. For example, overstock items to emphasize, understock items to deemphasize.
- As cars arrive in the parking lot, the volunteer approaches the vehicle with tablet and scanner and requests a current picture ID from the client(s) in the vehicle and verifies their name and current Delaware County address, as well as number of family members.
- Volunteer asks to e-sign/initial for the client and performs the e-signature.
- Another volunteer retrieves a grocery cart labeled according to family size and adds additional items: bakery item and bread item, frozen meat, butter, and other available dairy, refrigerated and ambient fresh produce, and item from the bonus shelf. All items are provided according to family size guidelines on the refrigeration/freezer units and pantry shelving.
- Volunteer takes the grocery cart filled with food to the vehicle and places in the trunk or car, then returns the empty cart to the pantry and restocks it with non-perishable items (per guidelines on pantry shelves) and a bag of toiletries.
- Volunteer proceeds to help the next client, or if there is a break between clients, the volunteer will restock pantry items as needed, or refill carts.
- Commodity Supplemental Food Program (CSFP) for Seniors: During the second week of every month, Delaware County Seniors will pick up their CSFP Commodity boxes. Volunteers should check the CSFP eligibility list in the warehouse so the client's participation in the program can be verified. Once the verification is established, the CSFP box with a supplemental brick of cheese will be provided to the client. The volunteer notifies the Dir. of Food Insecurity Programs of the client's receipt of the box. This will be provided in addition to the regular weekly food distribution. In some cases,

the client just comes for the box. The volunteer or client will add the box as a “secondary service” in PantryTrak and mark signature as “not required” and service status as “served.”

- Note: Clients are required to follow guidelines on all signage, such as “stay in your car,” “no smoking,” “mask required,” etc. Any problems with clients not following protocol, or any other client issues that arise during the distribution should be referred to a PIN staff member.

Food Pantry Restocking (T-Th):

- Volunteer arrives and reviews the pantry shelves and refrigeration/freezer units for low inventory.
- Volunteer restocks shelves and refrigeration/freezer units with needed items and reviews product dates for expiration.
- On many days there will be baskets or boxes of donated items to place on the warehouse or pantry shelves. All donated items must be checked for expiration dates. Any non-perishable product outdated by 6 months or more should be discarded. Expired items within 6 months of expiration may be placed on the Pavilion for clients to shop, depending on the item. Any item in question should be referred to the Director of Food Insecurity Programs.
- All food items for distribution must have a label with product identity and list of ingredients. Any item without appropriate labeling should be labeled or discarded.
- SWAP: The Dir. of Food Insecurity Programs will educate volunteers on the shelf signage for SWAP and review after re-stocking for appropriate product and shelf sign placement.

Appendix A

Staff Directory

Name	Title	Email
Kathy Hoff	Executive Director	khoff@delawarepeopleinneed.org
Anna Fender	Director of Emergency Services	anna@delawarepeopleinneed.org
Kristin Pzedpelski	Director of Food Insecurity Programs	kpzedpelski@delawarepeopleinneed.org
Connie Raabe	Program Support Specialist	craabe@delawarepeopleinneed.org
James Wallace	Warehouse Associate	jwallace@delawarepeopleinneed.org

Appendix B

Board of Directors

Rebecca Dinovo, Chairman
Kelly Wilkin, Vice-Chairwoman
David Green, Treasurer
Amy Bonacuse, Secretary
Kirt Trimble, Past Chairman

Meenu Aggarwal
Matthew Burns
Scott Estep
Carolyn A. Davis
Janell Kuck
Lauren Vermilion
Krys Weibling
Joshua Rockwell

Appendix C

Volunteer Application

Become a Volunteer

Name (required)
First Name: Last Name:

Email (required)

Address (required)
Country:

Address Line 1 (required)

Address Line 2

City (required) **State (required)** **Zip Code (required)**

Phone Number (optional)

How did you learn of PACT (optional)

Previous volunteer experience (optional)

Special skills (optional)
Please list any special skills you have or would like to learn.

Availability (optional)
 Every day
 Every 2nd
 Every 3rd
 Every 4th
 Every 5th
 Every 6th
 Every 7th
 Every 8th
 Every 9th
 Every 10th

Areas of Interest (optional)
Check all that apply:
 Food Bank
 Street Food Program
 Holiday Cleanups
 Walkways
 Parks/Trails
 Special Projects

Emergency Contact Information (optional)
Please add emergency contact, contact information, address, and phone.

Appendix D

Volunteer Agreement and Waiver

Volunteer Agreement and Waiver

Name of Volunteer _____

I have read and agree to uphold the mission and operational rules and regulations of PIN.

In return, PIN will:

1. Ensure you have the training and tools to do your work.
2. Honor and recognize your service and commitment.
3. Encourage open and honest feedback.
4. Ensure a safe, clean and volunteer-friendly environment.

As a volunteer of PIN, I hereby agree to hold harmless and waive any and all claims or causes of action against PIN arising out of any cause whatsoever, including but not limited to claims arising out of negligence or intention conduct of its volunteers or agents.

I attest that I am physically fit and prepared to perform the tasks assigned to me as a PIN volunteer.

I further agree to use my personal insurance as the primary provider in the event of injury due to my work as a volunteer for PIN.

I shall not operate a personal vehicle for volunteer activities unless I have a valid driver's license and current proof of insurance.

PIN is not responsible for loss or damage to any volunteer's personal property.

I grant PIN full permission to use photographs of me for publicity and promotional purposes.

I have read, understand and agree to the above PIN agreement and waiver.

Volunteer Sign and Print Name

Date

Parent or Legal Guardian Signature and Print Name

Date

Appendix E

Volunteer Confidentiality Agreement

Volunteer Confidentiality Agreement

Names and information about program clients and donors that you learn during your volunteer work at PIN must be kept in confidence.

- The program clients and donors you will be working with deserve the respect and dignity of a welcoming environment and the knowledge that their personal affairs and private information will be kept confidential.
- As you spend time volunteering, there may be feelings and experiences shared with you by program clients. Maintaining their trust is an important element of the program/client relationship. However, you do have the responsibility to report and discuss with a PIN staff member any situation you encounter that endangers the health, safety, or welfare of any individual.
- Please remember that you should not disclose any information to those not directly involved with the client, such as your family, friends, co-volunteers, or others.
- Our network of people and partnerships assists program clients to remain in their homes, receive food and nourishment, and a number of other program services, but at a cost: the loss of control over once-private matters. As a volunteer and advocate, you can help them maintain some control over their lives by respecting their right to privacy.

I have reviewed this policy and agree to perform my volunteer responsibilities in compliance with the policy. I understand that my volunteer duties may be terminated if I do not observe the terms of this confidentiality agreement.

Volunteer Sign and Print Name

Date

Parent or Legal Guardian Signature and Print Name

Date

Appendix F

Pantry Accident Report

Pantry Accident Report

Complete and Submit to PIN Staff Member

Name of Injured _____

Male/Female _____ Age _____

Address _____

Phone/Cell _____

Work Status of Injured (Volunteer, Client, Guest) _____

Incident Date _____ Time _____

Location of Incident _____

Nature of Injury _____

Describe How the Incident Occurred _____

Witness Name _____ Phone _____

Address _____

Statement _____

Was First Aid Administered? Yes/No _____

By Whom _____ Phone _____

Was 911 Called? Yes/No _____ By Whom? _____

Professional Medical Treatment Given? Yes/No _____

Name of Medical Provider _____

Appendix G

Traffic Incident Report

Traffic Incident Report

Alert PIN Immediately at (740)363-6284
Complete and Submit to PIN Staff Member

Incident Date _____ Time _____

Location of Incident _____

If another vehicle was involved:

Other Driver's Name _____

Address _____

Phone Number _____

Insurance Provider _____

Provider's Phone Number _____

Car Make _____ License Plate # _____

Damage Noted _____

Injuries Noted _____

Describe the Incident _____

Witness Name _____ Phone _____

Address _____

Statement _____

Was First Aid Administered? Yes/No _____

By Whom _____ Phone _____

Was 911 Called? Yes/No _____ By Whom? _____

Professional Medical Treatment Given? Yes/No _____

Name of Medical Provider _____

Your Contact Information:

Name _____

Address _____

Phone _____