



MEALS ON WHEELS VOLUNTEER CONTRACT

Statement of Agreement

I, _____, agree to perform the volunteer duties, as specified on job description (see reverse side), to the best of my ability and in a professional manner. I will appreciate constructive feedback. If problems arise, such as scheduling, I will notify my nutrition volunteer coordinator as soon as possible.

I agree to deliver Meals on Wheels for the Mountainland Aging & Family Services Department.

I understand Meals on Wheels are **not** delivered on New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, Independence Day, Pioneer Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving & Day After, and Christmas Day.

Confidentiality

I agree to maintain strict confidentiality regarding services and personal information and circumstances of clients being served.

Release

In consideration of the following insurance protection, a volunteer (unpaid worker), authorized by the Aging and Family Services Department Director, shall be deemed an employee of Mountainland Association of Governments, only for the purpose of:

- A. Medical benefits under Workers' Compensation for any injury sustained by a volunteer while engaged in the performance of their prescribed duties. Injury reporting requirements must be strictly followed to receive this benefit.
- B. Liability protection normally afforded to salaried employees.

The undersigned volunteer hereby releases Mountainland Association of Governments, its agents and employees, from any other liability or obligation arising from or in connection with, the undersigned's volunteer activities with Mountainland Aging and Family Services Department.

Signature of Volunteer

Date

Signature of Supervisor

Date

VOLUNTEER JOB DESCRIPTION

RESPONSIBILITIES:

1. Deliver meals to homebound or convalescing individuals Monday thru Friday, excluding holidays.
2. Act as a liaison between Mountainland and the homebound. Remember to check on the client and say a few kind words.
3. Give extra meals to other clients on your route.
4. Notify the office at **801-229-3802** under the following circumstances:
 - a. The Meals on Wheels recipient does not need a meal the following day
 - b. Anyone on your route does not answer the door or if you have other concerns
 - c. You may leave a message if there is no answer. We check our messages multiple times a day.
5. If there is an emergency, call 911 and then call the office, stay with the client until help arrives.
6. Volunteers never accept gifts or money from clients.
7. Be able and capable of picking up and delivering the meals in all types of weather conditions.
8. Deliver donation letters to clients. These are provided monthly.

DUTIES:

1. Pick up the meals and review route sheets for updates/changes.
2. Deliver meals to the designated people. If anyone does not answer the door, leave a notice on the door but **do not leave the meal** (unless you have received other specific instructions, for example a meal may be left in a plugged-in refrigerator).
3. Volunteers should be respectful of clients and their homes and only enter areas of the home as explicitly authorized by the client.
4. Return food carriers to your starting location. Route sheets are confidential and must be shredded after meal delivery.

Any services performed outside the duties and responsibilities listed above need the prior approval of your supervisor.

Jeremy Pehrson, Nutrition Manager, Meals on Wheels 801-229-3803

Jimmy Golding, Nutrition Volunteer Coordinator, Meals on Wheels 801-229-3821

Wanda Marquez, Nutrition Coordinator, Meals on Wheels 801-229-3802

Mauryn Grande, Nutrition Assistant, Meals on Wheels 801-229-3853