Volunteering with The Food Depot: COVID-19 Disaster Response

Thank you so much for your interest in supporting The Food Depot’s hunger relief work during this time of crisis. The Food Depot has been rapidly adapting to continually serve as a disaster relief organization in response to the novel coronavirus (COVID-19). The health and safety of our community are a top priority—and that includes providing access to food while protecting the well-being of all people involved. To help keep Northern New Mexico healthy and safe, please carefully review the information and follow the instructions within this packet.

Making the Decision to Volunteer

Carefully review the following to determine whether you are able or should volunteer:

**SYMPTOMS:** All individuals who are sick and/or showing flu-like symptoms, **you may not volunteer for food and personal safety reasons.** Please stay home and get well.

- If you have common symptoms of COVID-19 (fever, dry cough, shortness of breath, and muscle pain or fatigue), you may not volunteer until you have gone 3 days without a fever AND respiratory symptoms have improved AND it has been 10 days since your first symptoms appeared, according to the CDC’s “When You Can Be Around Others” Guide: [https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html)

- If you have a less common symptom (such as a sore throat, headache, productive cough or GI symptoms), monitor your symptoms and do not volunteer for five days. If your symptoms have stopped after five days and you would like to volunteer, please alert staff. For an updated list of symptoms (common and less common), please check the Johns Hopkins Coronavirus COVID-19 Guide: [https://www.hopkinsguides.com/hopkins/view/Johns_Hopkins_ABX_Guide/540747/all/Coronavirus_COVID_19__SARS_CoV_2__](https://www.hopkinsguides.com/hopkins/view/Johns_Hopkins_ABX_Guide/540747/all/Coronavirus_COVID_19__SARS_CoV_2__)

- If you have been in regular direct contact or share a household with someone who has a confirmed or suspected case of COVID-19, **you may not volunteer** for two weeks after exposure. For more information, refer to the CDC’s “When You Can Be Around Others” Guide: [https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html)

**TRAVEL/EXPOSURE:** If you have traveled or been in regular direct contact or share a household with anybody who has traveled out-of-state in the past 14 days, **you may not volunteer for two weeks upon return** (as per the New Mexico Department of Health’s travel recommendations: [https://cv.nmhealth.org/travel-recommendations/](https://cv.nmhealth.org/travel-recommendations/)).
HIGH RISK POPULATIONS: If you are at high risk of contracting the virus, (such as older individuals and/or those with underlying health conditions), we strongly encourage you to NOT volunteer. For a complete list of updated risk factors, please check the Center for Disease Control and Prevention’s List: https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html

AGE REQUIREMENTS: Due to the risks and risk management measures being taken at this time, all minors under the age of 16 may not volunteer without a supervising adult, and all minors under the age of 14 may not volunteer at this time.

CONTINUAL ASSESSMENT: Please assess whether it is safe for you to volunteer on a continual basis. Although The Food Depot is employing significant measures to increase sanitization and social distancing in all volunteer and staff activities, being around others (while volunteering) carries inherent risk in terms of contracting COVID-19.

Whether you decide to not volunteer or are able and willing to join the team, thank you so much for helping us keep our community healthy and safe!

Safety Measures

Measures The Food Depot is taking to protect staff and volunteers include (but are not limited to):

- Volunteer communications facilitate informed consent (based on the CDC’s and NM Department of Health’s recommendations), and encourage volunteers to stop volunteering at any time, for any reason.
- All volunteers, community service workers and visitors are screened using an adapted NM Department of Health’s Facility Screening Questionnaire and will have their temperatures taken using a non-contact infrared body thermometer before each shift. Anybody with a temperature above 100.4°F will not be allowed to work and must follow the “Symptom” instructions on page 1.
- Staff cleans and sanitizes volunteer spaces before and after each volunteer shift, and sanitizes high-touch surfaces throughout the day.
- Volunteers are provided a safety training before each shift, including:
  - Hygiene and safety practices
  - How to properly use personal protective equipment (PPE)
  - Social distancing instructions
- To facilitate social distancing, a maximum occupancy has been established for each volunteer space and the volunteer equipment has been rearranged accordingly.
- Volunteers are required to wash hands regularly (or use hand sanitizer if sinks are not available) and wear face masks. Gloves are provided and required for most volunteer activities.
- Staff may make the decision to ask volunteers to opt-out from their shift for any safety concern that may arise (too little space, etc.)
COVID-19 Testing
Testing is not required for most volunteer activities, but you are free to schedule a test at any time.

- You may get tested at the Santa Fe Public Health Office at 605 Letrado Street (off Luisa Street). You will need to call and schedule and appointment. Schedule a test by visiting cvtestreg.nmhealth.org or calling (505)476-2600. The test is free and you do not need to enter insurance information.
- All The Food Depot staff have been tested at least once and may continue to be tested on a regular basis depending on exposure concerns, testing availability, etc.

Staying Informed
Your knowledge and behavior affects both your health and community health.

- The Food Depot expects volunteers to stay informed about COVID-19 and take steps to help prevent the spread of the virus, both while volunteering and in their personal life. Volunteers’ daily precautions will help safeguard The Food Depot’s ability to continue feeding those in need.
- Great resources to check regularly include:
  - State of New Mexico Department of Health: https://cv.nmhealth.org/

Enrollment and Scheduling:
All volunteers need to enroll and schedule shifts. Walk-in volunteers cannot be accepted at this time.

1) To enroll, fill out the enrollment form, questionnaire, and waiver within this packet. You may return the form electronically, to volunteer@thefooddepot.org, or bring a paper copy with you on your first scheduled shift.

2) The Food Depot’s Volunteer Coordinator (Ash Engel) will begin keeping you updated on current volunteer needs via email. Please check your email regularly. Due to the uncertainty of this time period, details and project needs may change frequently. To sign up for shifts, simply respond to the email with your desired shift(s). Our Volunteer Coordinator will then confirm with you which shifts are available.

3) Our preferred method of communication is email, and it may take more time than usual to respond to your messages.

A Note from Staff: We fully recognize that we are asking you to be extremely flexible and responsive to our calls for assistance, while we ourselves are not able to respond to your communications as rapidly as we would like. Our small staff team is doing our best to respond to this crisis as fully as possible, and are stretched thin with new tasks, changes, and daily challenges. We are incredibly grateful for your understanding!

Contact Information:
- For enrollment and scheduling: Ash Engel, Volunteer Coordinator (volunteer@thefooddepot.org)
- For other questions and concerns: Sarah Carter, Volunteer Program Manager (scarter@thefooddepot.org)
The Food Depot Volunteer Enrollment Form
COVID-19 Disaster Response

Contact Information

First Name: ________________________________   Last Name: ____________________________________
Address:  __________________________________   City: ______________State: ______ Zip: ________
Home Phone: _______________________________ Cell phone:  ____________________________________
E-Mail Address:  ___________________________________________________________________________

Registering volunteers at food distributions is one volunteer need. Are you comfortable conversing in Spanish and willing to occasionally help with this specific need?    ☐ YES    ☐ NO

Emergency Information

Contact person: ____________________________________________________________________________
Contact phone: _________________________   Alternate phone: _____________________________________

Do you have any medical conditions, allergies or physical limitations we should know about? __________
__________________________________________________________________________________________

Sickness Disclosure Agreement:

If I begin showing common symptoms for (fever, dry cough, shortness of breath, and muscle pain or fatigue) or are screened for or diagnosed with COVID-19 at any point after volunteering at The Food Depot, I agree to disclose this information with staff. I understand that if I test positive to a COVID-19 screening, The Food Depot staff will anonymously inform volunteers I shared workspace with in the previous 14 days. I understand my identity will not be disclosed

Please initial to confirm that you have read and agree to follow these instructions: ____________.

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand that my actions affect the health of others. I understand and will abide by the instructions in this volunteer packet, including the Sickness Disclosure Agreement.

Name: ________________________________________________
Signature: ______________________________________________
Date: ___________________________________________________
The Food Depot’s Health Screening Questionnaire During COVID-19
Based on guidance issued by the New Mexico Department of Health (DOH) and the Centers for Disease Control (CDC)

In response to concerns regarding COVID-19, all visitors and volunteers entering The Food Depot warehouse or work spaces are screened for certain risk factors before entrance is allowed. The Food Depot may restrict or limit visitation rights to protect the health and safety of others. Please answer the following questions and certify your answers by signing below:

Please answer for both YOURSELF and OTHERS. *
*Others include people with whom you LIVE or have DIRECT REGULAR CONTACT.

<table>
<thead>
<tr>
<th>QUESTIONS:</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>1. Have you or others* traveled internationally or out-of-state in the past 14 days?</td>
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<tr>
<td>1. Have your or others* experienced any flu like symptoms in the past 14 days, such as such as fever, cough, shortness of breath, loss of taste or smell, sore throat, etc.?</td>
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<tr>
<td>2. Have you or others* had contact with anybody who has been screened for or diagnosed with COVID-19?</td>
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Name: ____________________________________________
Signature: ________________________________________
Date: ____________________________________________

Staff will need to ask follow-up questions to any “yes” answers before you may volunteer.
Volunteer Release and Waiver of Liability

1. **Volunteerism:** I understand I am a volunteer at The Food Depot. I understand (i) I am not an employee of The Food Depot, (ii) I will not be paid for my participation and (iii) I am not covered by or eligible for any insurance, health care, worker’s compensation or other benefits. I may choose at any time not to participate in an activity, or to stop my participation entirely, with The Food Depot.

2. **Policies and Safety Rules:** For my safety and that of others, I will comply with The Food Depot’s volunteer policies and safety rules and its other directions for all volunteer activities.

3. **Assumption of Risk:** I understand the activities/work may be hazardous, including but not limited to, lifting, bending, repetitive tasks and other activities. I hereby expressly and specifically assume the risk of injury or harm and release The Food Depot from all liability.

4. **Release and Waiver:** I release and forever discharge and hold harmless The Food Depot and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to The Food Depot. I understand and acknowledge that this release discharges The Food Depot from any liability or claim that I may have against The Food Depot with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to The Food Depot or occurring while I am providing volunteer services. I forever discharge The Food Depot from any claim whatsoever which arises on account of any first-aid, treatment or other service rendered in connection with an emergency during my tenure as a volunteer with The Food Depot. I understand The Food Depot does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury or illness.

5. **Confidentiality:** I may have access to sensitive or confidential information, including, but not limited to, identity, address, and contact information of The Food Depot clients, volunteers and staff. At all times during and after my participation, I agree to hold in confidence and not disclose or use any such confidential information except as required in my volunteer activities.

6. **Receipt of Volunteer Handbook:** I have been given access to a copy of The Food Depot’s Volunteer Handbook and acknowledge it is my responsibility to read and abide by the included policies and procedures. Any violation of policy may lead to disciplinary action up to and including immediate dismissal depending on the severity of the offense and past offenses.

_I have read, understand and agree to the above policies, procedures and waivers of The Food Depot:_

**Date:** _____/_____/_____

**Volunteer Signature:** _____________________________________________

**Volunteer Name (PRINTED):** _____________________________________________

**Legal Guardian’s Signature (if under 18)** ________________________________