

S.T.A.R. PROGRAM (Safe Transport and Reimbursement) RIDER HANDBOOK







- Read your eligibility determination letter accompanying this handbook. The letter will explain the
 degree of service you have been approved for including the maximum number of reimbursable
 miles.
- Read this booklet carefully; if there is something you do not understand, please call us at 415-454-0902. We would be happy to clarify any details for you.
- Get a volunteer to agree to help you. Read the part of the handbook that talks about getting a volunteer and do what it suggests.
- As soon as you get someone to be your volunteer driver, talk with your driver about how to use the Whistlestop STAR Program successfully. Give them a volunteer driver information form to complete and return to our program office.
- Learn how to fill out the Request for Mileage Reimbursement forms correctly. Please refer to the sample reimbursement form at the end of this handbook.
- Mark the last day of every month on your calendar -- "Mail STAR Reimbursement form". Don't forget it is very important that you mail your request form immediately at the end of each month to:

Whistlestop STAR Program 930 Tamalpais Ave. San Rafael, CA 94901

• Put this book in a place where it will be safe and where you can always find it!



Finding a Volunteer Driver

- Realize that people help each other every day and many of them are volunteers for other STAR Riders who became volunteers because they were asked.
- Tell yourself that you are going to do what you need to do to get the help you need. Do not be embarrassed or let negative thoughts stop you.
- Did you know that volunteering makes people feel really good about themselves? —Combine that with the **Reimbursement** that the **STAR** Program will provide and you too can find someone to help you with transportation!
- Everyone is not a potential volunteer, but everyone you know potentially knows someone who would like to be a volunteer driver and help out. Just talk to people about your circumstances, and about how the STAR Program provides mileage reimbursements to volunteer drivers; then ask them if they *know* anyone who might be interested!
- Talk with your friends and neighbors. They may have neighbors who drive for others already –
 maybe you can ride along to the store or other places and you can help pay for the gas!
- Talk with your care provider, or the person who delivers meals on wheels, or the people at your doctor's office.
- Don't forget the people at your church or the clerks in the grocery store, or the people who work at your bank.
- Sometimes the best way to find a volunteer driver who can help is to meet new people. So we encourage you to try any activity where you might meet new people!

STAR Program Guidelines

- Now that you are approved to use the STAR program, drivers are found by exploring your social
 network of friends, neighbors, IHSS Caregivers and other community members. Put in action the
 steps outlined in the previous section on finding a volunteer driver.
- Please keep in mind: **You can have more than one Volunteer Driver.** Actually, we encourage you to find **more than one driver** in order to increase the likelihood of find transportation assistance when you need it. Once you have found one or more volunteer drivers, have each of them **complete a driver information form** included in this packet.
- Volunteer Drivers arrange and provide necessary transportation services with eligible Riders.
- Volunteer Drivers may provide transportation for more than one Rider if they wish. If they do, the trips for each passenger must be recorded on **separate reimbursement forms**.
- Volunteer Drivers receive a Volunteer Handbook with program policies which they are expected to read and follow.
- Volunteer Drivers are expected to abide by all driving laws and regulations.
- Volunteer Drivers may want to assist Riders to accurately and correctly complete their monthly
 Request for Mileage Reimbursement forms and to make sure that request forms are mailed to
 Whistlestop immediately at the end of the month of travel for which a reimbursement request is
 submitted.
- Reimbursement payments are mailed to the Rider for distribution to their Volunteer Driver.
- If you are not comfortable with your driver, you may wish to think about asking other individuals to be your driver. Remember, you can decline the further assistance of any Volunteer Driver.

Rules for Travel

- Arrangements for travel are completely up to you and your volunteer driver(s). Plan to travel when it is convenient for you both. Try to make your appointments to fit your volunteer's schedule!
- Plan ahead. Group things that can be done in the same area on the same day to limit the number of times you need your volunteer to help. It is often easier for you, too. Do more things on one day and you won't have to go out as often.
- Treat your volunteer as you would a friend. They are happy to drive for you. Have an "Attitude of Gratitude". Relationships must be cared for; the riders who are most successful and finding people to drive them are those that are genuinely interested in the lives of their drivers.
- When traveling, wear your seatbelt; it's the law. And you wouldn't want your driver to get a ticket, would you?!?
- Always record your travel on the day that you make the trip on your 'Request for Reimbursement' form so it is completely filled out at the end of the month when you need to send it to Whistlestop VDP. Be sure to have your driver sign the form before you mail it.
- If you do not feel comfortable with the way your volunteer drives, don't ask them for another ride.

 Ask someone else to be your volunteer. Call Whistlestop VDP to let them know who your new driver is, and get a new set of driver information materials to give to your new driver.
- If you think you have been the victim of elder abuse, whether it is physical, emotional, financial or self-abuse, please report it to Adult Protective Services (APS) by calling the hotline at 415-473-2774. See www.co.marin.ca.us/aging and click on Adult Services (across the top of the page) to get more information on how to report suspected elder abuse.
- Reimbursement forms are due by the 10th of the following month: For example, reimbursement forms for trips made in December are due by January the 10th.



Directions for Completing the Request for Mileage Reimbursement Form:

- Please refer to the next page for a Sample form.
- Fill in your name and your volunteer's name.
- Take the form with you on each trip. **Record each trip separately**, **even if you have multiple trips on a single day.** The reason for this is that we must validate the distances that you claim; if you don't record each trip but instead summarize your trips for each day, the mileage reimbursement will be smaller than if you accurately recorder each trip.
- For each trip, clearly record the date the trip was taken. Please use the letter key at the top of the form to indicate the reason for the trip. For example, if you had an appointment with the cardiologist, record "H" for Healthcare.
- Record the origin and the destination. Only the city and zip code are needed; however, if you do
 not know the zip code, you may enter the address so that the location can be identified.
- Record the miles that you and your driver drive for each trip.
- At the end of each trip fill in the total volunteer hours your driver spent with you on that trip. The
 volunteer hours should include the non-driving you're your driver has spent with you including
 waiting for an appointment, assisting with shopping or participating with you in any activity. For
 example, the trip to the doctor may have been a 10 minute drive but your driver stayed
 with you for the hour that you waited in the waiting room as well. You should include
 that hour.
- Please be aware that you can continue to record trips on the **reverse side**. If you use the reverse side for a different driver make sure that both your name and your second driver's name are clearly noted at the top of the form.
- If you need more space even after using the reverse side you may use additional reimbursement forms to continue recording the remaining trips.
- At the end of the month, you and your volunteer must sign the form, and you mail it to:

STAR Program 930 Tamalpais Ave San Rafael, CA 94901

S.T.A.R. (Safe Transport And Reimbursement) Program ****SAMPLE*** REQUEST FOR MILEAGE REIMBURSEMENT

NAME (OF CI	LIENT:	Sam Rider	Driver:	Mindy Driver

Please complete this form for <u>each leg of the trip</u>, the miles of each trip leg, and the volunteer hours at the **END OF THE TRIP**. Please use the following Key to enter the reason for trip:

H- Health Care F- Visit Family/Friends C- Class/school

B- Banking R- Religious E- Entertainment/Recreation

P- Personal Errands V- Volunteer Work O- Other

S- Shopping D- Dining X- Return Home

DATE	REASON	ORIGIN	DESTINATION	MILES	VOLUNTER
OF	FOR TRIP	*Street number and name*	*Street number and name*	DRIVEN	HOURS
TRIP	(use letter key	*City and Zip*	*City and Zip*	(for each	PROVIDED
	above for	oitj and zip	City and Zip	leg)	(includes
	each leg of				non-driving
	trip)				time)
1/1/2014	S,D	123 Main Street	300 Vintage Way	10	1hr
		San Rafael 94903	Novato 94947		
1/1/2014	Х	300 Vinatge Way	123 Main Street	10	1hr
		Novato 94947	San Rafael 94903		
1/4/2014	Н	123 Main Street	99 Montecillo Rd	6	2hrs
		San Rafael, CA 94903	San Rafael 94903		
1/4/2014	Х	99 Montecillo Rd	123 Main Street	6	½hr
		San Rafael 94903	San Rafael, CA 94903		

Request must be received by our office <u>BEFORE the 10^{th} day</u> after any month of travel to be paid. Actual mileage for each one-way trip must be reported.

I certify that all information provided above is true and accurate and that all travel was taken as reported. I further certify that my volunteer driver is not an employee of Marin Transit or Whistlestop and I understand and agree that the Volunteer Driver Program and its funding sources do not assume any liability for my personal choice of driver, nor any insurance liability. I agree to abide by all Volunteer Driver program policies and understand that failure to do so may result in my becoming ineligible for continued participation in the program. It is our policy for clients to pay reimbursements, when received, to their volunteer drivers.

CLIENT SIGN	NATURE: :	Sam Rider	DRIVER	SIGNATURE: _	Mindy Driver_
DATE:	1/31/2014				



What People are saying about the STAR Program

"I would highly recommend the volunteer driver program because it's a great thing. I can't take cabs because there too expensive and the buses wear me out. This makes it easier to get to my appointments in San Francisco with the help of my driver."

Curt

"The Volunteer Driver Program is a lifesaver and makes me feel more secure in my decision making. I no longer put off doing things I should do because I'm able to have a trusted person in my life give me a ride. It save me a lot of time and improves my quality of life. I'm glad the program gives me the ability to reimburse my driver because with her assistance I can get things done with no stress."

Stanhania

Stephanie

"I'm very grateful for the program. It makes a big difference in my ability get around. I have a degenerative joint condition and although I also use the Whistlestop Wheels program, my condition makes riding the buses extremely painful. When someone I know drives me it is much more comfortable and the trip is shorter. Being able to reimburse my driver makes it possible for me to have people willing to drive. Thank You."

Naomi

"I love the program; it's helped me out a lot. I can't drive as I used to because my reaction time is slow and the Volunteer Driver Program helps me to stay active. It's nice to have company to do things and I enjoy getting to know my drivers." - Carol

"It's great that there are options; it is a much shorter trip than the wheels program. I hope I'll be able to continue to use it. I just started this month and it seems great."

Mary



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Copies of documents are available in accessible Formats upon request. You may request them by calling (415) 226-0855.

All County public meetings are conducted in accessible locations. If you require American Sign Language Interpreters, Assistive Listening Devices or other accommodations to participate in a meeting, you may request them by calling (415) 226-0855 (voice) or contact the California Relay Service by dialing 711 to connect to the telephone listed above. Requests must be received no less than four working days prior to the meeting to help ensure availability. For additional information, visit our website at

http://www.marintransit.org