

TRANSPORTATION POLICY - MENTORING



PURPOSE

This policy will provide guidelines to:

- ensure that each volunteer mentor, parent/ guardian and Program Coordinator understands that Sparkways allows volunteers and staff, to transport mentees in their own private vehicles and/or via public transport.
- ensure that they understand and follow the relevant transportation procedures to ensure the safety of themselves and the young person.
- ensure that all volunteer mentors have met and understand the requirements of Sparkways Young Person Safety policies and procedures



POLICY STATEMENT

GUIDING PRINCIPLES

Sparkways is committed to:

- the provision of quality services to vulnerable young people and children in a safe environment
- ensuring that all safety checks and licences are valid prior to a young person travelling with a volunteer mentor or Sparkways Mentoring Staff.
- Providing transportation by Sparkways Mentoring staff, so young people can attend Mentoring Events, such as Group Programs or Activity Days, when required.
- ensuring that Sparkways is notified of any concerns regarding the wellbeing or safety of the young person as a result of travelling with the volunteer mentor or a Sparkways Mentoring staff member
- encouraging mentor/mentee catch ups within local communities and to limit out-of-town or long-distance trips

SCOPE

This policy applies to Sparkways Mentoring Staff , all Volunteer Mentors and parents/ guardians

RESPONSIBILITIES	Sparkways Mentoring Staff	Volunteer Mentors	Young Person	Parent/Guardian
Providing a copy of this policy to all volunteer mentors and young people	X			
Obtaining and completing a Travel Permission form (<i>see attachment 1</i>), from a young person's parent/guardian when the young person requires transportation from Sparkways Mentoring Staff	X			X
Ensuring the safety and wellbeing of the young person and themselves, at all times	X	X	X	X
When an out-of-town activity is requested by a mentor/mentee match, staff will discuss any potential risks associated with the activity and obtain a completed Travel Permission form (<i>see attachment 2</i>) from the young person's parent/guardian and the mentor.	X	X	X	X
<p>When <i>using public transport</i>:</p> <ul style="list-style-type: none"> ensuring all laws relating to Public Transport Victoria are upheld Cover associated costs for self 	X	X	X	
<p>When <i>transporting by private car</i>:</p> <ul style="list-style-type: none"> Ensuring the car is insured and meets all requirements in relation to Victorian Law Providing a copy of a valid driver's license to Sparkways Mentoring Providing proof of car insurance if requested Obeying all road rules and traffic laws, including the use of seat belts. Avoid taking medication or using any other substances that might impair the ability to drive. 	X	X		
Notify Sparkways Mentoring in the event of any circumstance changes, that may impact your capacity to transport a young person and/or be a mentor	X	X		
Report to Sparkways Mentoring promptly any accident or incident that occurs while involved in a Match activity (<i>also refer Critical Incident & Injury Management policy</i>)	X	X	X	X
Advising Sparkways Mentoring Staff if there are any concerns regarding the wellbeing or safety of the young person as a result of travelling with their mentor			X	X
Covering the associated costs of public transport for the young person, and advising if there are any concerns regarding public transportation			X	X



BACKGROUND AND LEGISLATION

LEGISLATION AND STANDARDS

Relevant legislation and standards include but are not limited to:

- Victorian Child Safe Standards
- Victorian Human Services Standards
- Privacy Act 1988(Cth)
- Information Privacy Act 2000(Vic)

The most current amendments to listed legislation can be found at:

Victorian Legislation – Victorian Law Today: www.legislation.vic.gov.au
Commonwealth Legislation – Federal Register of Legislation: www.legislation.gov.au



SOURCES AND RELATED POLICIES

RELATED POLICIES

- Young Person Safety Policy
- Code of Conduct Policy
- Critical Incident & Injury Management policy



EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, Sparkways will:

- seek feedback from people affected by the policy regarding its effectiveness
 - monitor the implementation, compliance, complaints and incidents in relation to this policy
 - keep the policy up to date with current legislation, research, policy and best practice
revise the policy and procedures as part of the service's policy review cycle, or as required
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ATTACHMENTS

- Attachment 1: Travel Permission Form for Staff
- Attachment 2: Travel Permission Form – Out of Town Travel



AUTHORISATION

This policy was confirmed by Sparkways on 21/06/2023


REVIEW DUE: June 2024

ATTACHMENT 1

TRAVEL PERMISSION FORM FOR STAFF

(Image only; Access from program resources)

TRAVEL PERMISSION FORM
– FOR STAFF



Young Person: _____

Travel from: _____

Destination: _____

Date: _____

Sparkways Mentoring Program Coordinator: _____

Method of transportation: *(please select)*

Staff Company Car Staff Private Vehicle Public Transport – Tram

Public Transport – Train Public Transport – Bus:

I, _____ (parent/guardian) hereby provide permission for my child _____ (name) to travel with the Sparkways Mentoring Program Coordinator to the above listed destination.

I understand the purpose of the travel is for attendance at the Sparkways Mentoring: (please select) Group Program Activity Day.

I consent for the Sparkways Mentoring Program Coordinator to seek in the case of an emergency:

- medical treatment for my child from a registered medical practitioner, hospital or ambulance service; and/or as necessary;
- transportation of my child by an ambulance service.

Signed: _____ (Parent/Guardian)

Date: _____

ABN 90 151 552 331

ATTACHMENT 2

TRAVEL PERMISSION FORM – OUT OF TOWN TRAVEL

(Image only; Access from program resources)

TRAVEL PERMISSION FORM FOR OUT OF TOWN TRAVEL



MENTOR NAME _____

MENTEE NAME _____

TRAVEL FROM (Mentee address) _____

DESTINATION/S (name) _____

(address) _____

(phone) _____

Date Of Travel _____ Time of Outing: From _____ am/pm To _____ am/pm

METHOD OF TRANSPORTATION (please tick)

Car Public Transport – Tram Public Transport – Bus

Public Transport – Train Other: _____

PARENT/GUARDIAN CONSENT

I, _____ (Parent/Guardian) hereby provide permission for _____ (Mentee Name) to travel with _____ (Mentor Name) to the above listed destination/s for the duration of time as specified above.

In the event that I am unable to be contacted, I consent for _____ (Mentor Name) to seek, in the case of an emergency:

- medical treatment for my child from a registered medical practitioner, hospital or ambulance service; and/or as necessary;
- transportation of my child by an ambulance service.

Signed: _____ (Parent/Guardian) Date: _____

MENTOR CONSENT

I, _____ (Mentor) hereby agree to abide by the terms as listed in the Sparkways Transportation Policy (copy available upon request) and return _____ (Mentee) home by the time as specified above.

In the event of a delay, I will contact _____ (Parent/Guardian) and advise of delay and new arrival time.

Signed: _____ (Mentor) Date: _____

Copy sent to Sparkways Coordinator Date: _____

ABN 90 151 552 331