VOLUNTEER REVIEW CALL QUESTIONNAIRE

VOLUNTEER Last Name	**VOLUNTEER** First Name	Date	Time	AM PM
COMMUICATED WITH Last Name	**COMMUNICATED WITH** First Name	Result (Circle one) SPOKE LM	Staff Initials	

SUMMARY OF CALL

NOTE: Call Staff should look at Service Summary on previous page to help begin the conversation.
INTRODUCTION:
"Hi, this is _____ calling from the Interfaith Volunteer Caregivers program. I am calling today to review your experiences with our program and would like to ask you just a few questions."

Y or N	1. In general, have you found your volunteer work to be rewarding? *(Circle Y or N); Enter NOTES below.*

	2. What types of benefits do you feel you have gotten from it? *Enter NOTES in blank below.*

Y or N	3. Have program staff been responsive and helpful? *(Circle Y or N); Enter NOTES in blank below.*

Y or N	4. Have you gotten along well with the clients you have served? *(Circle Y or N); Enter NOTES in blank below.*

Y or N	5. Do any of the clients you've been helping have additional needs or concerns that you know of? *(Circle Y or N); Enter NOTES in blank below.*
Y or N	6. Are the types of assignments you have still suitable for you? *(Circle Y or N); Enter NOTES in blank below.*
Y or N	7. Is your volunteer schedule (days, times and frequency) still convenient? *(Circle Y orN); Enter NOTES in blank below.*
Y or N	8. Are there other types of things you'd like to try? *(Circle Y or N); Enter NOTES in blank below.* ***NOTE: REVIEW SOME OTHER VOLUNTEER OPPORTUNITIES WITH THEM.***
Y or N	9. Do you have any questions or concerns? *(Circle Y or N); Enter NOTES in blank below.*
Y or N	10. Do you have any ideas for improving services to clients, or the volunteer experience? *(Circle Y or N); Enter NOTES in blank below.*
Y or N	11. Do you have any friends of acquaintances who might enjoy volunteering? *(Circle Y or N); Enter NOTES in blank below.* ***NOTE: ENTER NAMES AND PHONE NUMBERS OF POTENTIAL VOLUNTEERS BELOW.***
Y or N	12. One last thing: have you been turning in your timesheets monthly? *(Circle Y or N); Enter NOTES in blank below.* ***NOTE: EXPLAIN IMPORTANCE OF TIME SHEETS, REVIEW OPTIONS FOR SUBMITTING THEM AND MONTHLY DRAWING, WRITE DOWN RECENT HOURS IF NEEDED.***

WRAP-UP

"Thanks for taking the time to speak to me today. It helps us keep improving our services. Please remember that you can call us with any questions or concerns whenever you need. Bye."

NOTES:

CHECK THE "NEEDS SUPERVISOR FOLLOW-UP" BOX:
- *if the client has expressed any problems, concerns or new needs;*
- *anything is not going as planned with services;*
- *the client no longer needs any services or has not used our services in over a year;*
- *the client is deceased;*
- *the client wants to be made inactive;*
- *the client needs information on services IVC does not provide;*
- *or you can't get in touch with the client after at least three attempts.*

If you check this box, also remember to print out a "Review Call Report" by using the button on the previous screen and then put the printout in the appropriate bin for a supervisor.

***CHECK THE "REVIEW COMPLETED" BOX: ONLY** if you spoke with the client, the review call is fully completed, the client has no needs, problems or concerns, and the client is expected to continue using our services.*

DO NOT CHECK EITHER BOX: *if the review call has not been completed (for instance just a phone message was left, or the conversation was interrupted) or the call has not been attempted at least 3 times.*

☐ **Review Call Attempted**   ☐ **Review Completed**
☐ **Note Only**   ☐ **Needs Supervisor Follow-Up**

ONCE THIS FORM HAS BEEN COMPLETED, ENTER IT COMPLETELY INTO THE DATABASE, and then:

If the call needs supervisor follow-up, print out a "Review Call Report", attach it to the front of this form & put them into the appropriate bin for a supervisor.

If the call does NOT need supervisor follow-up, give this form to the Office Manager.