Never doubt that a group of thoughtful, committed citizens can change the world: indeed it is the only thing that ever has.

Margaret Mead
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Dear Volunteer,

Thank you for reaching out to the Northeast Kingdom Council on Aging (NEK Council). We are thrilled you are interested in our Volunteer Program.

This Volunteer Handbook is designed to acquaint you with the NEK Council. We view each Volunteer as a valuable asset, and consider you a “teammate” who shares our same standards of excellence and mission to serve the residents of the Northeast Kingdom. Our volunteers are an essential part of our staff. Therefore, we are committed to providing you with a quality volunteer experience, professional support, and an opportunity to serve others.

The Volunteer Program encompasses a variety of volunteer opportunities that provide support and assistance to NEK Council’s programs and services. We provide direct support to seniors in their homes and in the community in addition to a multitude of "in house" services. These opportunities include: Healthy Aging programs, home delivered meals, health insurance counseling, senior center programs, and assisting in our NEK Council administrative offices.

We offer a flexible program because we want you to become a member of our organization. For example, your service can be long-term or periodic; your hours can be regularly scheduled, seasonal, or occasional. Regardless of your age, we have an opportunity awaiting you! During your orientation, we will take time to explore your interests and skills and find the right fit for you. On behalf of the Northeast Kingdom residents who will experience your valuable skills, we say…

Thanks—you will make a difference in our community!

Karen Budde, RSVP Volunteer Coordinator
Patty Beckwith, Volunteer Engagement Coordinators
About the NEK Council on Aging Volunteer Program

**Mission:**
The NEK Council on Aging enthusiastically engages volunteers and allows them to contribute their unique talents and skills. Volunteers will work in partnership with our paid professional staff, to strengthen the fabric of our communities and ensure mutual support of elders to live healthy, active, independent and productive lives.

**Vision:**
The Volunteer Program will create more roles for our volunteers to contribute and expand the capacity of this organization to meet the growing needs of our communities.

**Values:**
Our work will be guided and informed by our beliefs and commitments to:

- **Inclusiveness**—we respect people, value diversity and are committed to equality
- **Participation**—we value and recognize the contribution of all people within the organization and communities
- **Quality**—we strive for excellence through continuous improvement
- **Openness**—we are committed to a culture of teamwork and collaboration
INTRODUCTION

What Is the Northeast Kingdom Council on Aging?

The NEK Council on Aging is a private, non-profit organization with a mission to help people age with independence and dignity. The NEK Council has been designated under the Older Americans Act as the NEK Council on Aging for Caledonia, Essex and Orleans Counties.

This designation means that the NEK Council carries out programs that establish a coordinated system of services for older persons in this region. We are one of five Council on Aging in Vermont. Since 1979, this NEK Council has been providing nutrition and supportive services to seniors in the Northeast Kingdom. Anyone who is 60 or older (or a spouse) is eligible to participate in programs provided by the NEK Council and in most cases we can serve people regardless of their income. However, we do encourage people to contribute toward the cost of the service if they are able.

The NEK Council on Aging is governed by a Board of Directors, has 24 employees and many volunteers. Some services, such as Information and Assistance and Case Management, are provided directly by NEK Council staff. Other programs, such as Senior Meals and Transportation, are largely contracted to other community based organizations.

Rules for acceptance and participation in our programs are the same for everyone, without regard to race, color, religion, national origin, sex, disability or sexual orientation.
What Does the NEK Council on Aging Do?

Below is a list of the programs associated with NEK Council on Aging:

**Caregiver Support:**
**Caregiver Support Programs**
- Classes
  - Powerful Tools for Caregivers
  - Alzheimer Association Programs
- Coaching
- Dementia Caregiver Support Program
- Caregiver Rejuvenation Teas
- Respite Grants
  - Dementia Respite/Family Caregiver Respite Programs
- Grandparents Raising Kin
  - Respite Grants
  - Support Groups

**Case Management Services:** for older adults who need help coordinating resources and services in order to maintain independence.
- Public Benefits
- In Home Supports
- Transportation
- Legal Referrals
- Family Caregiver Support
- Veteran’s Independence Program

**Community Education:** speakers and publications are available to address a variety of topics of interest to seniors and their families.

**Elder Justice/SMP (Senior Medicare Patrol):**
We work closely with community partners to provide education, outreach and support for older adults and service providers on issues and concerns related to abuse, neglect and exploitation of Older Adults.

We have the Co-chair of The Northeast Kingdom Vulnerable Adult Action Coalition (NEKVAAC) on staff. NEKVAAC is made up of a team of local law enforcement, social service and health care providers dedicated to insuring the safety and well-being of vulnerable adults.

SMP (Senior Medicare Patrol) provides education, assistance and advocacy to elders so that they can identify, report and prevent Medicare and Medicaid fraud, waste and abuse. Outreach is completed in a variety of ways, including but not limited to:

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Nutrition and Wellness:

Nutrition
- Meals on Wheels
- Blizzard Boxes
- Community Senior Meals
- 3 Squares Vermont

Healthy Aging
- Growing Stronger – Weight Training
- Matter of Balance - Fall Prevention
- Golden Ball Tai Chi and Tai Chi for Arthritis
- Healthy Eating
- Healthier Living
- Eldercare Clinician

Pets for Life – NEK Council with local partners, is helping seniors in Vermont’s Northeast Kingdom keep their companion animals healthy, happy and safe.

Senior HelpLine – Information, Assistance & Referral
- Senior Helpline (1-800-642-5119)
- Assists callers in finding answers to their questions.
- Understand and utilize the broad variety of programs and services available for callers.

SHIP (State Health Insurance Program): provides information and guidance related to health insurance, Medicare and Medicaid; and Medicare prescription drug program. Health Benefits Counseling
Medicare A & B
Medicare Part D
Medicare Supplemental Insurance
State and Federal Assistance Programs
+Monthly Medicare Boot camps

Volunteer Services: places volunteers of all ages and backgrounds into challenging, rewarding, and interesting volunteer opportunities in the NEK Council and county-wide locations.
- Senior Companions- a National Senior Corps Program supported by the state of Vermont
  - Flexible 15-40 hours a week schedule:
  - Volunteers 55+ provide support and companionship to seniors
- Keep a homebound senior company
- Provide respite to a caregiver
- Offer transportation for:
  - grocery shopping, errands, recreational activities
  - medical appointments,
- Other volunteer opportunities:
  - Collaborate with staff in the office and support seniors in the community
  - Contribute to expanding the capacity of the organization
  - Utilize the unique talents, skills and knowledge of our community members
VOLUNTERR ENGAGEMENT HIGHLIGHTS

What Can You Expect from the NEK Council on Aging as a volunteer?

NEK Council Volunteers have the right to:

1. Receive a clear specific job description.
2. Be assigned appropriate assignments according to skill, interests, availability, and training.
3. Be trusted with confidential information that will help carry out assignments.
4. Be given proper expressions of appreciation and recognition.
5. Receive orientation, training and supervision for the jobs they accept.
6. Expect that their time will not be wasted by lack of planning, coordination and cooperation with the NEK Council.
7. Offer suggestions about the assignment and the Volunteer Program
8. Be treated as a fellow staff member who contributes to NEK Council goals through the Volunteer work.
9. Have all these things done in a spirit of friendliness and cooperation so that NEK Council will continue to be known as “a great place to volunteer!”

What NEK Council expects from you:

1. Your first responsibility is to know your own duties and how to do them promptly, correctly and pleasantly.
2. You are expected to keep all communications with or concerning clients confidential.
3. You are expected to cooperate with other staff and maintain a good team attitude.
4. You will attend all training sessions scheduled for your assignment
5. You will inform your Volunteer Coordinator as soon as possible of any planned absence or lateness.
6. You will report for all duty on time.
7. You will sign in each time you arrive for a work assignment.
8. We expect you to voice your opinions and contribute your suggestions to improve the quality of NEK Council on Aging.

Volunteer Benefits

Volunteers will work as part of a team, and will have the chance to contribute to the welfare of the community and organization. Additionally, volunteers may develop new skills, learn about new community programs, meet new people, and have an opportunity to participate in fun social events.

Orientation and Training

Volunteers will attend an orientation to receive an overview of NEK Council programs, and related information. Training is also provided “on-the-job” at individual assignments on an ongoing basis.

Definitions

Volunteer Workstation: The location where each volunteer carries out his or her work assignment. The volunteer workstation serves as the Volunteer’s central point of contact.

Volunteer Workstation Supervisor/Program Coordinator: The NEK Council staff person who provides training, support and oversight to you while you carry out your work assignments.

RSVP Volunteer Coordinator: NEK Council staff person who recruits Volunteers from the local community, identifies the need for utilizing volunteers within specific NEK Council programs, and then facilitates appropriate placement for each volunteer. The Volunteer Coordinator also maintains registration and work history data on all Volunteers, provides ongoing support to volunteers and workstation supervisors, and organizes recognition events.
**Application Process**

We believe that the best situation is one that works for everyone: seniors, volunteers and NEK Council. We take time to explain NEK Council mission and work so that volunteers know about us before they begin their work with us. Our goal is to get to know volunteers so that we can find an appropriate volunteer opportunity for them.

The application process begins with a personal Interview. Prospective volunteers must complete a volunteer Information Form and provide two references, which we do check.

Because elders can be a vulnerable population, we do screening and background checks, as required by the State of Vermont. Volunteers are asked to sign a release for the following background checks:

- Child Abuse Registry - a request for information about all substantiated findings of abuse, neglect and exploitation directed to the Dept. for Children and Families (DCF)

- Adult Abuse Registry - a request for information about all substantiated findings of abuse, neglect and exploitation directed to the Dept. of Disabilities, Aging and Independent Living (DAIL), Division of Licensing and Protection.

- Vermont Crime Information Center’s Vulnerable Populations Program - a request for information about all criminal convictions.

NEK Council will not accept court-ordered community service volunteers due to the vulnerability of the seniors we serve.

We ask about your vehicle, your automobile liability insurance, and your driving record because some volunteers transport seniors in their vehicles.

We ask volunteers to sign a release for media publicity purposes, allowing us to put photographs in news releases about NEK Council or on our web site. Signing the media publicity release is optional for volunteers.

Information gathered in the interview process is confidential and is kept in a file cabinet at NEK Council. This information is accessible only to the staff directly involved with the volunteer. All State of Vermont Adult Abuse Registry, Child Abuse Registry, and Criminal Information Center checks are subject to rigorous confidentiality standards. These documents are kept in a locked file cabinet and are not shared with anyone other than the volunteer Coordinator and the NEK Council HR Coordinator. It takes approximately one week for all paperwork to be processed. After that, we will call to set up an introduction to a local senior or to meet with a workstation supervisor for training.
Guidelines for Volunteers

Time Sheets
We ask volunteers to report their service hours at the end of each month. By doing so, you help us meet performance and funding goals. You can report hours in one of three ways:
1. Via email to kbudde@NEKCouncil.org. If you have provided an email address we will send a reminder at the end of the month.
2. Via phone by calling 802-751-0431
3. Via U.S. mail using time sheets that we will supply at your request.
   When reporting your hours, please include your name, the number of service hours, the month and any additional information that you feel is relevant. This information helps the NEK Council keep in touch with our volunteers, as well as letting us know how you are doing and how we can support you as you give service to seniors.

Personal Appearance
Please follow these guidelines regarding proper appearance while you are volunteering:
- Clothing should be clean and presentable. Take care to protect your clothing if you are working in someone's yard or doing cleaning. Remember that you are in contact with people who deserve your respect, so try to keep within acceptable boundaries without sacrificing your own personality altogether. Neat and clean is the most important to thing to consider.
- Jewelry should not get in the way of what you are doing.
- Be aware that heavy use of perfume, cologne or aftershave can sometimes cause allergic reactions in some people.

Alcohol and Tobacco Policy
Volunteers are not permitted to purchase alcoholic beverages and/or tobacco products on behalf of a senior while doing shopping/errands for the senior. The senior may accompany the volunteer and purchase these items her/himself. If you have any questions about the policy, please speak to the Volunteer Coordinator.

General Infection Control
- Wash your hands often.
- If you are feeling ill or have symptoms of respiratory problems or flu such as coughing, sneezing, heavy discharge, diarrhea, or rash - PLEASE STAY HOME. For a senior a cold or flu can be life threatening.
- If the senior is ill, he/she will most likely ask to reschedule the visit or you may suggest doing so. If you have a question about doing anything that seems dangerous, always call NEK Council or your supervisor first.

Medical Emergencies or Accidents
- Safety is everyone’s responsibility. If you are handling materials that contain bacteria or body fluids, it’s imperative that you wear protective gloves. In general, your volunteer duties should not include any activity that would put you at risk. If there is a Visiting Nurse or LNA involved with the senior and there has been an accident or spill, notify them and have them take care of it. If it is necessary to call 911, please wait with the senior until help arrives and then notify NEK Council.
- If you receive an injury or are accidentally exposed to blood or body fluids (which puts you at risk for contracting an illness), go immediately to the emergency room nearest where you are. Be sure to notify the Volunteer Coordinator of any accident or incident that is significant enough to require medical attention.
**Smoking**

Please refrain from smoking in a senior’s home where you are volunteering. If you must smoke, step outside. If you are a non-smoker and find it offensive to have seniors smoke while you are with them, we advise you to ask them to refrain during the short time you are together. If this presents a problem for you, ask to be matched with someone who does not smoke.

**Volunteer Tax Deduction Information**

NEK Council is tax-exempt under Section 501(c)(3) of the Internal Revenue Code which allows volunteers to deduct certain unreimbursed out-of-pocket expenses on their federal income tax returns. In order to qualify for these deductions, you must file within that tax year and itemize deductions under “Gifts to Charity” on Schedule A (Form 1040) subject to certain limits.

An example of a tax-deductible expense could be transportation costs from home to the nonprofit work site at which the volunteer serves. Volunteers may not deduct the value of time or service donated to a nonprofit organization. Volunteers should keep a detailed record of expenses including the date, time, name and address of the nonprofit organization, and the nature and amount of the expense. Detailed information on deductibility of expenses can be found in two IRS publications, Number 526 “Charitable Contributions” and 463 “Travel, Entertainment and Gift Expenses.” Contact the IRS at 1-800-829-3676 for a copy or contact your accountant.

**A Few Tips on Communicating with Seniors**

When speaking with seniors, bear in mind that some seniors may have difficulty hearing. Speak clearly and somewhat slowly but not louder than you usually do. If you are asked to speak up then do so. It helps to keep your voice moderated to the middle range—not too high or too low. You may want to ask that television or radio sound be turned off so that background noise does not interfere. If you do not understand what is being said to you, ask to have it repeated until you understand. Do not pretend that you understand something you don’t. If needed, you might ask to have things written down.

Maintain eye contact if you are in the physical presence of the senior. If the senior is visually impaired, try to avoid having light behind you, such as sunlight from a window, as this can make it more difficult for the senior to see you.

Please notify NEK Council if you are unable to reach your senior by phone or if you arrive for a visit and the senior does not answer the door. We will help you find out what has happened by contacting the senior’s emergency medical contact and/or case manager.

If you encounter someone who is upset or angry, do not argue with them. Instead, let them say what they need to and then ask what would be most helpful for you to do for them. If the person is upset with you, try to understand what it is that is bothering them without becoming defensive. Remain calm and respectful and do not raise your voice. At times, people may treat you unfairly or with disrespect. These situations are important to discuss with the Volunteer Coordinator or the Case Manager who works with your senior. For other difficult situations involving staff, please see the Complaint Procedure in this manual.
A Brief Summary of NEK Council Policies

Absences and Lateness
The positions volunteers fill are critical to this organization. If you are unable to report to volunteer, or if you will arrive late, please contact your Volunteer Coordinator immediately. Give her or him as much time as possible to cover your position until you arrive. Excessive absences may be cause for termination. If a volunteer plans to be absent consecutively for a week or more, please inform the Volunteer Coordinator to help get a replacement while you are gone.

Anniversary Date
The first date you report to volunteer is your “official” anniversary date.

Antidiscrimination Policy
In order to achieve work relationships throughout this NEK Council that are free from any form of discrimination, intimidation, or harassment, no one shall discriminate against or harass another person because of age, race, color, religion, creed, ancestry, sex, marital or civil union status, sexual or gender orientation, national origin, place of birth, citizenship, veteran status, or disability or any other for which discrimination is prohibited by law.

Attendance
Sign-in time sheets are necessary for our program, in order for us to keep an accurate record of your contribution to the NEK Council. Volunteers are required to sign in and out each time.

Auto Liability Insurance
A volunteer who uses her/his personal car while providing services for clients is responsible for the state minimum liability insurance coverage protecting her/his vehicle. In the event of an accident while you are providing services, your private insurance is the primary payer. Please reschedule volunteer activities when weather or other conditions make driving hazardous.

Complaint Procedure
If you have a complaint about a senior’s behavior to you, share that with the Volunteer Coordinator who will assist you in resolving the situation.

If possible, complaints regarding people at the NEK Council should first be taken up directly with that person. If you do not get results with that approach, your next step is to speak with the Volunteer Coordinator.

If the complaint involves your supervisor or the Volunteer Coordinator, you should contact that person’s supervisor. If the complaint still remains unresolved, the next step is contacting the Executive Director and, if necessary, the Board of Directors.

Confidentiality
We have an obligation to our clients to maintain their confidentiality and respect their privacy. Every client served by NEK Council has the right to confidentiality. But at the same time, every Volunteer must use her/his own best judgment. If you are aware of a client issue that requires immediate help, please inform your Volunteer Coordinator.

While serving clients, volunteers often learn a great deal about clients' health, families, finances, attitudes and personal lives. You must not share this information with anyone who does not have a professional right or need to know it. Remember, you would not want someone to discuss your
situation with others without your express permission. You may discuss what you do with our NEK Council. However, it is not appropriate to reveal any sort of identifying information about clients. This includes answering questions about other volunteers and NEK Council staff. Any confidential information that you receive as a volunteer should be used for NEK Council purposes only.

Exit Interviews
In instances where a volunteer voluntarily leaves, NEK Council would like to discuss your reasons for leaving and any other impressions that you may have about the NEK Council. If you decide to leave, you will be asked to grant us the privilege of an exit interview. During the exit interview, you can express yourself freely. It is hoped that this exit interview will help us part friends, as well as provide insights into possible improvements. All information will be kept strictly confidential and will in no way affect any references that NEK Council will provide another agency about you.

Gifts and Money
It is not appropriate for volunteers to accept any gifts or gratuities for their services. If offered a gift or gratuity, please graciously decline by explaining this policy. An item that is less than $10 in value may be accepted from time to time. Seniors who will not take “no” for an answer can be told that you cannot violate this policy, but that you will forward any monetary donation to NEK Council. When you give the donation to the NEK Council, please provide the donor’s name and address so that a thank you acknowledgement can be mailed.

Also, you may not promote or solicit your own business enterprise, political agenda or religious beliefs while volunteering with us.

Harassment Policy
NEK Council is serious about creating a safe, supportive environment for employees and Volunteers to do their best work and does not tolerate harassment in any form.

Although you may be working in a private setting with seniors, you are not expected to tolerate anything that would be unacceptable in any working environment. Conduct that would be considered harassment includes coercive or disruptive behavior, as well as harassment due to gender, race, color, ancestry, national origin, religion, age, sexual orientation, place of birth or disability. If you are unsure whether you are experiencing harassment, discuss the situation with the Volunteer Coordinator. In general if someone is doing something that makes you uncomfortable, you should bring that to someone’s attention so that the behavior can be addressed. We encourage volunteers to respect their own comfort level and use their own judgement.

Please contact the Volunteer Coordinator at NEK Council if you experience harassment while volunteering. If you find that the Volunteer Coordinator is the source of the harassment, contact the Executive Director. Your complaints will be taken seriously, investigated and resolved.

Introductory Period
Your first 60 days of volunteering at the NEK Council on Aging are considered an Introductory Period. This Introductory Period will be a time for you to get to know your fellow volunteers, paid staff, your Volunteer Coordinator and the tasks involved in your job position. Your Volunteer Coordinator will work closely with you to help you understand the needs and processes of your job during this period.
This Introductory Period is a try-out time for both you, as a volunteer, and NEK Council as an agency. At the end of the Introductory Period, your Volunteer Coordinator will hold an informal feedback session with you to discuss your job performance. This feedback will be much the same as the feedback session that is held for volunteers on an annual basis. During the course of feedback, you are encouraged to give your comments and ideas.

**Job Description**  
We maintain a job description for every volunteer position at the NEK Council on Aging. When your duties and responsibilities are changed, your volunteer job description will be updated. You will be given the job description by your Volunteer Coordinator.

**Orientation**  
Orientation is provided to each volunteer individually. At the beginning of the volunteer experience with NEK Council the Volunteer Coordinator will meet with each and every volunteer and review the Volunteer Handbook. You will be given an overview of the NEK Council, a tour of the offices and introduced to our paid staff team.

If you are working as a Friendly Visitor, the NEK Council person who matches you with the senior will arrange a meeting to introduce you to the senior and will assist in creating the Volunteer Care Plan. You will receive a copy of this Care Plan so that you can refer to it as needed. If you wish to take on additional responsibilities, please contact NEK Council to have the Care Plan adjusted. We suggest that you do not take on additional responsibilities until your relationship with the senior has been established and you feel comfortable doing additional task. **We also recommend that you do not give your phone number to the senior until you feel comfortable doing so.** You are welcome to call the senior directly, but we do not encourage seniors to call you directly until the relationship has evolved to the point where that is agreeable to you. **We are always available to relay messages and assist in any way.** It is our goal that your volunteer experience is mutually rewarding for you and the senior.

It is our goal that your volunteer experience is mutually rewarding for you and the senior.

**Resignation**  
While we hope both you and the NEK Council will mutually benefit from your continued volunteering, we realize that it may become necessary for you to leave your job with NEK Council. If you anticipate having to resign your position with the NEK Council, we would hope that you would notify your Volunteer Coordinator in writing as far in advance as possible and make arrangements for an exit interview.

**Smoking**  
The NEK Council on Aging is a non-smoking environment. If you smoke, there are outside places appropriate for you to enjoy a short break. Please be courteous and concerned about the needs of your fellow volunteers and others. The wishes and preferences of non-smokers will take precedence over those volunteers who smoke.

**Termination Policy**  
The NEK Council on Aging is an at-will agency and has the right to terminate a volunteer without cause, but will always consider the cause leading to the termination. In general, failure to adhere to policies of the agency is cause for immediate release.
Friendly Visitor Job Description

Objective:

To enable seniors to remain independent
To provide social opportunities in the settings of their choice

Qualifications/skills:

- Ability to converse with people of all backgrounds and philosophies
- Reliable transportation, adequate insurance and a clean driving record
- Ability to understand and practice confidentiality under all circumstances
- Dependability and accountability to seniors
- Ability to accept senior direction and to set clear, reasonable boundaries

Responsibilities*

- Meet with senior on regularly scheduled basis
- Chat, play games, read or otherwise interact with senior
- Run errands or accompany senior on errands
- Perform light housekeeping tasks, such as organizing or yard work
- Refer senior to Case Management as appropriate, with senior consent

*Volunteer may do some or all of the above tasks.

Time Commitment:

Flexible schedule; senior and volunteer agree on mutually convenient frequency and time/day to meet. No minimum time commitment.

Supervisor

RSVP Volunteer Coordinator

Benefits

- Enjoy a relationship that is rewarding to both you and your new friend.
- See the difference you make in someone’s life
- Contribute to the greater good of your community
- Obtain experience working with seniors
- Receive ongoing support and recognition from other NEK Council staff
Office Support Job Description

Objective:

NEK Council programs link participants and their caregivers to needed community services. Assistance is unique to each client, ranging from basic information and referral, to comprehensive participant services. Outreach services support involves mailing print materials, community presentations packets, and other behind-the-scene office tasks.

Qualifications/skills:

- Basic administrative skills such as copying, faxing, record keeping, assembling and/or mailing out consumer information packets are needed.
- Also, assistance is needed for special projects and/or events, basic research, and data entry.

Responsibilities*

- Perform routine office tasks, such as copying, faxing, data entry, assembling and mailing resource information.
- Plan and implement individual long-term or detailed projects, such as revision of the Volunteer Handbook, design and develop brochures, surveys and/or booklets, and conduct research to support program coordinators, as needed.

*Volunteer may do some or all of the above tasks.

Time Commitment

NEK Council operates Monday through Friday, 8:30 am to 4:30 pm, except for specified holidays. The main office is located in St. Johnsbury. Volunteer hours are flexible; volunteers typically work two to four hours per week, any weekday. Special projects result in one-time or ongoing time commitments.

Supervisor:

RSVP VolunteerCoordinator

Benefits

- Contribute to the greater good of your community
- Obtain experience working with seniors
- Receive ongoing support and recognition from other NEK Council staff
Medicare Part D Volunteer Job Description

Objective:
SHIP stands for State Health Insurance Program. Medicare is a U.S. Government health insurance plan that provides hospital, medical, and surgical benefits for persons age 65 and older and people with certain disabilities. The on-line “Plan Finder” software program helps beneficiaries and their caregivers understand and enroll in the Medicare Part D Prescription Insurance program.

Qualifications/skills:
- Have good communication skills
- Volunteers must be comfortable with numbers and basic math
- Basic computer skills,
- Be comfortable using the Internet

Responsibilities:
- Return phone calls of Medicare recipients seeking assistance with Part D enrollment
- Collect information on intake form from Medicare recipients.
- Input client data into Medicare software program.
- Handle client information in the strictest confidence.

Time Commitment:
Volunteers work in the NEK Council office in St. Johnsbury, two to four hours per week during the Medicare enrollment period from October 15 to December 7, with some schedule flexibility. The NEK Council office is closed on federal holidays, Thanksgiving, and Christmas. Due to the complex nature of the Medicare program, volunteers work and train continuously.

Training:
Complete training with an experienced counselor.

Supervisor:
SHIP Coordinator

Benefits:
- You will be educated on issues pertaining to Medicare Part D
- You will have continued support from NEK Council staff and other volunteers.
- You will make a difference in your community.
Healthy Aging Leader Job Description

**Objective:**
Promote, maintain, and improve older adult health by assisting individuals and the community to adopt healthy behaviors.

**Qualifications/skills:**
- Certificate or degree may be required for certain health educator or assessment roles.
- Experience working with older adults and caregivers in a one-on-one or group setting is strongly encouraged.
- Understanding of learning styles of older adults is strongly encouraged.
- Knowledge of biological, psychological, and social aspects of aging; the impact of disabilities and illness on aging; community resources, understanding of medical conditions is helpful.

**Responsibilities:**
- Collect and analyze data to identify community needs prior to planning, implementing, monitoring, and evaluating programs designed to encourage healthy lifestyles.
- Responsibilities vary from giving presentations on health related issues to assessment of medication and disease management, injury or fall prevention and assistive devices.

**Training:**
- Complete NEK Council orientation checklist to learn about referrals to county services and programs. On the job review of existing toolkits.
- Complete webinars on topics, if available.
- Prepare and conduct public presentations and meet with individual volunteers and/or clients. Presentations may include:
  - Healthy aging issues such as arthritis, exercise and poison prevention
  - Nutritional counseling
  - Music, art, or dance therapy
- Help develop or revise presentation materials
- Distribute presentation evaluations
- Provide client follow-up, as necessary.
- Handle client information in the strictest confidence.

**Time Commitment:**
Volunteers typically educate older adults at local senior centers or independent living facilities. Schedules vary based on presentation needs, but typically held between 10 am to 2 pm during the weekday.

**Supervisor:**
Nutrition/Wellness Coordinator

**Benefits:**
- See the difference you make in someone’s life
- Contribute to the greater good of your community
- Obtain experience working with seniors
- Receive ongoing support and recognition from other NEK Council staff
A Matter of Balance: Managing Concerns About Falls
Coach Job Description

Objective:
To provide information and guidance toward the goal of increasing awareness and prevention of falls in the elder population.

Qualifications/skills:

- Good communication and interpersonal skills.
- Enthusiasm, Dependability
- Interest in working with older adults
- Willingness to lead a small group
- Ability to perform range of motion and low-level endurance exercises
- Ability to carry up to 20 lbs.

Responsibilities:

- Prepare for each class by reviewing the Matter of Balance manual and materials.
- Organize the classroom with supplies and refreshments
- Present the class according to directions, training and material provided
- Encourage interactive discussion about the concepts and skills presented.
- Demonstrate and coach the exercises outlined in the Matter of Balance Program.
- Monitor and connect with each participant
- Promote socialization and a solution-oriented environment among the participants
- Have fun!

Training:

- Attend eight hours of coach training and earn A Matter of Balance Certification.
- Attend 2.5 hours of facilitator training update annually.
- Agree to facilitate two Matter of Balance classes within one year of certification.

Time Commitment:

- Facilitate 2 hour class twice a week for four weeks, or two hour class once per week for eight weeks.
- Allow time for set up and breaking down before and after class.

Supervisor:
Nutrition/Wellness Coordinator

Benefits:
- See the difference you make in someone's life
- Contribute to the greater good of your community
- Obtain experience working with seniors
- Receive ongoing support and recognition from other NEK Council staff
Growing Stronger Coach Job Description

**Objective:**
To provide information and guidance toward the goal of increasing strength and mobility in the elder population

**Qualification/skills:**
- Good communication and interpersonal skills
- Enthusiasm, Dependability
- Interest in working with older adults
- Willingness to lead a small group
- Ability to perform range of motion and strength building exercises

**Responsibilities:**
- Prepare for each class by reviewing the Growing Stronger Manual and materials.
- Organize the classroom with chairs and weights
- Present the class according to directions, training and materials provided
- Demonstrate and coach the exercises outlined in the Growing Stronger Program
- Monitor and connect with each participant
- Promote socialization and a solution-oriented environment among the participants
- Have fun!

**Training:**
- Attend 4 hour coach training and earn Growing Stronger Leader Certification
- Attend refresher training as recommended

**Time Commitment:**
- Facilitate a class for one hour sessions twice a week for at least 12 weeks.
- Allow time for set up and breaking down before and after class.

**Supervisor:**
Nutrition/Wellness Coordinator

**Benefits:**
- See the difference you make in someone’s life
- Contribute to the health and well-being of others
- Obtain experience working with seniors
- Improve your own, strength, flexibility and balance.
FORMS & GUIDELINES

Confidentiality & Acknowledgement

Dear Volunteer,
Please read the two statements below, then print and sign your name.

Confidentiality
I agree to keep confidential all information pertaining to participants that I may work with during my volunteer assignment. This includes names, address, phone numbers, personal, medical and/or financial information.

I understand that client/participant records include but are not restricted to telephone logs, written files such as a Membership form, Independent Living Assessments (ILA’s), email, and data records such as those in SAMS. My restriction on sharing includes log-in or user ID and passwords.

I understand that participant and Council information is privileged, and is not to be disseminated by me. Failure to abide by this agreement can result in my immediate dismissal.

Receipt of Volunteer Handbook
I have received the NEK Council on Aging Volunteer Handbook and will review the programs and policies set forth for volunteers. I will uphold and follow the policies contained within.

I have read and understand the above statements and have had all my questions answered. My signature below indicates that I agree with both statements.

____________________________________       ___________________
Volunteer Engagement Coordinator Signature     Date

Volunteer Name (please print)

____________________________________       ___________________
Volunteer Signature       Date
Volunteer Time/Activity Log

Volunteer Name________________________ Volunteer Phone Number__________________

Client Name____________________________________ Month:________________________

Please check if you want more time sheets sent to you

□ Please return (by the first of each month) to:
NEK Council on Aging Volunteer Coordinator
481 Summer St., Suite 101, St. Johnsbury, VT 05819
802-748-5182

<table>
<thead>
<tr>
<th>Date of Activity</th>
<th>Type of Service Performed</th>
<th>Amount of Time Spent</th>
<th>Comments(Optional)</th>
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<tbody>
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</table>

Total hours

22
Dear Volunteer:

Thank you for all you do to support seniors in the community. Your activities and the time you volunteer are a very important part of the services we are able to provide for elders.

By reporting your volunteer hours, you help us meet performance and funding goals. It is also a way for you to let us know how you are doing and how we can support you as you give service to seniors.

You can report your hours by email to info@NEKCouncil.org by phone at 802-748-5182, or by mailing in a time sheet each month. There is a time sheet on the reverse side of this letter.

Instructions for Time Sheets

1. Please fill out the top portion of the page with your name, phone number, client’s name, and the month.

2. Please record the date, what you did while volunteering, and how much time was spent on that activity.

3. Record time in increments of 15 minutes or more, even if it was less than 15 minutes.
   Example: if you called the senior to set up a time to come visit, please record 15 minutes even if the conversation was only 5 minutes.

Sample time sheet entries:

<table>
<thead>
<tr>
<th>Date of Activity</th>
<th>Type of Service Performed</th>
<th>Amount of Time Spent</th>
<th>Comments(Optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/1/2013</td>
<td>Grocery shopping</td>
<td>1 ½ hours</td>
<td>Client is in good spirits</td>
</tr>
<tr>
<td>7/13/2013</td>
<td>Drove to medical appointment</td>
<td>2 ¼ hours</td>
<td>Client is feeling ill</td>
</tr>
<tr>
<td>7/26/2013</td>
<td>Friendly visit-played cards</td>
<td>1 hour</td>
<td>Client enjoyed the visit</td>
</tr>
</tbody>
</table>

If you have any questions or concerns, please call us at 748-5182
Thanks again!
Volunteer Care Plan

The volunteer program at Northeast Kingdom Council on Aging has authorized

__________________________________________________________________________________

To provide services to__________________________________________________________________

Location of Service_____________________________________________________________________

Client’s Phone Number:_____________________________________________________________

Client’s Date of Birth:______________________________________________________________

The volunteer will serve on the following time basis:_____________________________________

Planned Services:_____________________________________________________________________

__________________________________________________________________________________

Client’s Emergency Contact (Name and Phone #)_________________________________________

__________________________________________________________________________________

Client Signature: _____________________________ Date: _____________________________

Volunteer Signature: _____________________________ Date: _____________________________

NEK Council Staff Signature: _____________________________ Date: _____________________________
Request for Volunteer Services Guidelines

All requests for volunteer services must be submitted on the attached form. Requests will be active for 90 days after they are received. If we are unable to find a volunteer during that time, the request will be closed. Be aware that if there is a backlog of requests there is a possibility that we will not be able to fill the request.

Case Managers will be updated monthly on the status of a request and notified when a request is completed. If you want to know the status of one of your requests, please ask Jerri.

Through I&A, we will accept requests from clients, family members, other agencies, etc. But these people will not be updated on the status of their request. I & A will advise them when the request is taken that it will be active for 90 days and closed after that if we are unable to find a volunteer. I&A will also check to see if the senior has a NEK Council Case Manager or not.

Acceptable Requests

**Friendly Visiting/Companionship** - requests to provide companionship for someone with dementia, short term memory issues, or challenging medical issues are subject to finding volunteers willing to accept this type of assignment. **We will take these companionship requests only if the client does not have issues with wandering, physical violence or other problematic behavior.**

**Grocery Shopping & Errands** - volunteers will do grocery shopping on behalf of seniors or accompany those seniors who need assistance in the grocery store. If the client just needs transportation we will not be able to provide it.

**Financial Management** tasks - volunteer can help with bill paying, checkbook balancing - requests for a Rep Payee will be attempted.

**Handyman Tasks** - volunteers will only supply labor and bring their own tools. Senior must supply any materials. Case Managers will be involved in helping coordinate any handyman tasks for their clients.

**Yard work/Snow removal** - we do not guarantee that we can find volunteers to do this. Requests for heavier yard work (shoveling, cleaning gutters, clearing brush, removing trees, hauling wood, etc.) will be taken, subject to finding volunteers that are comfortable doing this type of work. The same applies for regular lawn mowing. The volunteer’s comfort level will be the regulating factor in determining whether this work gets done or not. Client should have
snow shovel or yard tools available for the volunteer. Please get details about exactly what needs to be done.

**Organizing**-(sorting and filing papers as well as household organizing) decisions about lifting items is subject to volunteers comfort level

**Moving**-packing and unpacking for a move may be possible, but not moving furniture, loading trucks, driving trucks, etc.

**Transportation**-We will only accept transportation requests for one-time last minute emergency rides to medical appointments or to necessary scheduled appointments with other agencies in the community. We do not provide transportation for medical emergencies. All other transportation requests should go through RCT.

**Any other type of assistance**-Inform the requestor at the time of the request that we will take the request but it will be a low priority for finding a volunteer. Be aware that some requests may be rejected.
REQUEST FOR VOLUNTEER SERVICES

Date: ______________ Form filled out by:___________________________________

Informed requestor that request will be active for 90 days and will be closed if we can’t find a
volunteer. Client has agreed to this request.

Asked if client has a NEK Council Case manager.

Case Manager Name______________________________

Service requested by:_________________________________________Phone:__________________________

□ Please contact referring person before contacting client

Client Name: ___________________________Phone:________________ DOB: __________________

Street Address:______________________________City:_________________Zip:_________County:______

Mailing Address:_____________________________City:_________________Zip:_________ County:______

Additional Location Information (cross street, landmark, description of house/building, etc.):
________________________________________________________________________________________
________________________________________________________________________________________

What type of volunteer would client be willing to accept (check all that applies):

□ Youth □ Adult □ Male □ Female □ Senior Companion □ Phone Pal

Preferred age range of volunteer: ______________________________

Does client have family or friends that can help with this request? □ Yes □ No

Can client pay for this help? □ Yes □ No

Pets living in client’s home: □ None □ Dog(s) □ Cat(s) □ Other________________________

Does client smoke? □ Yes □ No

Do other members of the household smoke? □ Yes □ No

Would client object to children accompanying an adult volunteer on visits? □ Yes □ No

Service(s) Needed:_________________________________________Frequency/Duration:_____________________

Detailed Description of Services:_______________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Individual’s Special Needs: _________________________________________________________________

Additional Information (OK to share with volunteer □ Yes □ No):
________________________________________________________________________________________
________________________________________________________________________________________

For Office Use
Reviewed by _________
Client Name: ____________________________________________

DOCUMENT PROGRESS BELOW:

<table>
<thead>
<tr>
<th>Date</th>
<th>Action Taken</th>
<th>By Whom</th>
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Motivational Analysis Self-Assessment

This is an optional survey for volunteers to help identify factors and values important to Y-O-U in your work experience which may enhance your successful volunteer position match. The Volunteer Coordinator will know how specific job opportunities reflect the aspects of “influence,” “achievement,” and “affiliation.”

Good luck!

Self-Assessment

Instructions: Each of the following items contains three related statements. Mark the statement that most closely describes your preference, most of the time. There are no wrong answers.

1. _____ a. When doing a job, I seek feedback.
   _____ b. I prefer to work alone and am eager to be my own boss.
   _____ c. I seem to be uncomfortable when forced to work alone.

2. _____ a. I go out of my way to make friends with new people.
   _____ b. I enjoy a good argument.
   _____ c. After starting a task, I am not comfortable until it is completed.

3. _____ a. Status symbols are important to me.
    _____ b. I am always getting involved in group projects.
    _____ c. I work better when there is a deadline.

4. _____ a. I work best when there is some challenge involved.
    _____ b. I would rather give orders than take orders.
    _____ c. I am sensitive to others—especially when they are mad.

5. _____ a. I am eager to be my own boss.
    _____ b. I accept responsibility eagerly.
    _____ c. I try to get personally involved with my superiors.

6. _____ a. I am uncomfortable when forced to work alone.
    _____ b. I prefer being my own boss, even when others feel a joint effort is required.
    _____ c. When given responsibility, I set measurable standards of high performance.

7. _____ a. I am very concerned about my reputation or position.
    _____ b. I have a desire to out-perform others.
    _____ c. I am concerned with being liked and accepted.

8. _____ a. I enjoy and seek warm, friendly relationships.
    _____ b. I attempt complete involvement in a project.
    _____ c. I want my ideas to predominate.

    _____ b. It concerns me when I am being separated from others.
    _____ c. I have a desire to influence others.
10. _____ a. I think about consoling and helping others.
    _____ b. I am verbally fluent and persuasive.
    _____ c. I am restless and innovative.

11. _____ a. I set goals and think about how to attain them.
    _____ b. I think about ways to change people.
    _____ c. I think a lot about my feelings and the feelings of others.

(Adapted from Mackenzie, Marilyn and Gail Moore-The Volunteer Development Toolbox, 1993)

Motivational Analysis

Instructions: Record your choices from the statements above in the space provided below. Simply put a mark (√) next to your answer (a, b, or c) for each question, then add the total number of marks for each of the three categories: achievement, influence, and affiliation on the next page.

<table>
<thead>
<tr>
<th></th>
<th>1. ______ a. achievement</th>
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<th>6. ______ a. affiliation</th>
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<tbody>
<tr>
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<td>b. influence</td>
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<td>c. affiliation</td>
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<td>c. achievement</td>
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<td>2. ______ a. affiliation</td>
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<td>7. ______ a. influence</td>
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<td>b. influence</td>
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<td>b. achievement</td>
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<td>c. achievement</td>
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<td>c. affiliation</td>
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<td>3. ______ a. influence</td>
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<td>8. ______ a. affiliation</td>
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<td>b. affiliation</td>
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<td>b. achievement</td>
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<td>c. achievement</td>
<td></td>
<td>c. influence</td>
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<td>4. ______ a. achievement</td>
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<td>9. ______ a. affiliation</td>
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<td>b. influence</td>
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<td>b. influence</td>
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<td>c. affiliation</td>
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<td>c. achievement</td>
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<td>5. ______ a. influence</td>
<td></td>
<td>10. ______ a. affiliation</td>
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<td>b. achievement</td>
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<td>c. affiliation</td>
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<td>c. achievement</td>
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<td>11. ______ a. achievement</td>
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<td>b. influence</td>
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<td></td>
<td>______ b. influence</td>
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<td>c. affiliation</td>
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McClelland’s Social Motivators
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<tr>
<th>CATEGORIES OF SOCIAL MOTIVATORS</th>
<th>POSSIBLE VOLUNTEER POSITIONS</th>
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<tbody>
<tr>
<td><strong>Achievement Motivations</strong></td>
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</tr>
<tr>
<td>Desire for excellence</td>
<td>Home-Delivered Meal Driver</td>
</tr>
<tr>
<td>Wants to do a good job</td>
<td>Medicare Counselor</td>
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<tr>
<td>Needs a sense of accomplishment</td>
<td>Health Educator</td>
</tr>
<tr>
<td>Wants to advance</td>
<td>Instructor</td>
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<tr>
<td>Desires feedback</td>
<td>Administrative Tasks / Data Entry</td>
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<td></td>
<td>Short-term Project Manager Performer</td>
</tr>
<tr>
<td><strong>Influence Motivations</strong></td>
<td></td>
</tr>
<tr>
<td>Likes to lead</td>
<td>Instructor / Activity Leader</td>
</tr>
<tr>
<td>Enjoys giving advice</td>
<td>Advisory Board Member</td>
</tr>
<tr>
<td>Likes influencing an important project</td>
<td>Consultant</td>
</tr>
<tr>
<td>Enjoys job status</td>
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<tr>
<td>Likes to have their ideas carried out</td>
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<tr>
<td><strong>Affiliation Motivations</strong></td>
<td></td>
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<tr>
<td>Likes to be popular</td>
<td>Home-Delivered Meal Driver</td>
</tr>
<tr>
<td>Likes to be well thought of</td>
<td>Kitchen / Dining Room Helper</td>
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<tr>
<td>Enjoys and wants interaction</td>
<td>Friendly Visitor</td>
</tr>
<tr>
<td>Dislikes being alone in work or play</td>
<td>Information Desk Assistant</td>
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<tr>
<td>Likes to help others</td>
<td>Special Events</td>
</tr>
<tr>
<td>Desires harmony</td>
<td>Activities Specialist</td>
</tr>
</tbody>
</table>
Volunteer Placement Survey

Dear Volunteer,

The staff of the NEK Council on Aging strives for continual improvement of our Volunteer Program. As a volunteer, we would appreciate your help identifying what we might do better. Please be as honest as you can when answering these questions. The information is compiled in the strictest of confidence and used to improve the quality of our overall Volunteer Program. Once you complete this form, please send it directly to me in the pre-addressed, stamped envelope enclosed. Thanks a million for your feedback.

In what area(s) do you volunteer? (Please check all that apply)

NEK COUNCIL VOLUNTEER OPTIONS

☐ Healthy Aging Program
☐ Meals on Wheels Program
☐ SMP (Senior Medicare Patrol)
☐ Senior Center
☐ Direct Support to Seniors
☐ Volunteer Office
☐ Other:_______________________

My volunteer experience meets the expectations I had when I first began. (Check one)

☐ Strongly Disagree
☐ Disagree
☐ Neither
☐ Agree
☐ Strongly Agree

How satisfied are you with your volunteer experience. (Check one)

☐ Very Dissatisfied
☐ Dissatisfied
☐ Neither
☐ Satisfied
☐ Very Satisfied

How satisfied are you with the training provided for your volunteer assignment? (Check one)

☐ Very Dissatisfied
☐ Dissatisfied
☐ Neither
☐ Satisfied
☐ Very Satisfied
Volunteer Placement Survey (continued)

How rewarding is your volunteer position? (Check one)

☐ Very Disappointing
☐ Disappointing
☐ Neither
☐ Rewarding
☐ Very Rewarding

What do you like best about your volunteer position?

What suggestions would you make for improvements in our program?

Thank you for taking the time to fill out this survey.

For your convenience, we have enclosed a pre-addressed stamped envelope. If you have any concerns or would like to discuss your ideas in relation to your position, please do not hesitate to contact me at 802-751-0431

I would love to hear from you!

Sincerely,

Karen Budde
RSVP Volunteer Coordinator
Dear Volunteer,

The staff of the NEK Council on Aging strives for continual improvement of our Volunteer Program. As a former volunteer, we would appreciate your help identifying what we might do better. Please be as honest as you can when answering these questions. The information is compiled in the strictest of confidence and used to improve the quality of our overall Volunteer Program.

Once you complete this form, please send it directly to me in the pre-addressed, stamped envelope enclosed. Thanks a million for your feedback.

Sincerely,
Karen Budde
RSVP Volunteer Coordinator

Overall, how satisfied were you with your volunteer experience?

☐ Very Dissatisfied
☐ Dissatisfied
☐ Not Sure
☐ Satisfied
☐ Very Satisfied

How long did you volunteer with us?

☐ Less than 1 year
☐ 1 to 5 years
☐ 6 to 10 years
☐ More than 10 years

Why are you leaving? (Please check all that apply)

☐ Moving away from area
☐ Paid employment
☐ Need a change
☐ Difficult to meet the time commitments
☐ Dislike the tasks I was given
☐ Completed the tasks of the job
☐ Other: ________________________________________________________

What did you like best about volunteering with us?

What suggestions would you make for improvements in our program?