

Volunteers Expanding Access to Health Care: A Resource Toolbox

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Western Washington Area Health Education Center

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Volunteer/Retired Providers Program

The Washington State Volunteer/Retired Providers Malpractice Insurance Program was initiated in 1992. The intent of the program is to extend access to primary care services among low-income individuals. The program funds insurance for volunteer physicians, physician assistants, nurse practitioners, pharmacists, dentists and dental hygienists.

Coverage

Program insurance covers providers when they are engaged in providing primary, non-invasive care to low-income persons. With regard to medicine this includes injections, suturing of minor lacerations and incisions of boils or superficial abscesses, but does not include obstetric services. For dental providers, these services include diagnosis, oral hygiene, restoration and extraction. Insurance is available for retired volunteers, or for active providers whose insurance is site-specific but who volunteer at other sites. The program also covers the cost of license renewal for retired volunteers.

Provider Setting

Prior to the 2004 legislative session, all care insured under this program had to be provided at a public or private not-for-profit site. Substitute House Bill 2788 removed that restriction. Now care to low-income patients may be provided in private, for-profit settings, as well. A volunteer provider would be insured while serving low-income patients in a private medical office.

Application Process

Program insurance is site-specific, so both the provider and the site must be approved for participation by the program. The approval process is very simple. The provider and the site each submit a form to the Western Washington Area Health Education Center (WWAHEC), the administrating body for the program. Providers must have a valid license to practice in Washington State. Information can be obtained through the Program Coordinator, Christine Lindquist, at (206) 441-7137 or Christine@wwahec.org.

For more information about the program please contact:

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About the Volunteer Toolbox

This is a toolbox. It contains a variety of levers, hammers, nails, and so on that one might use to do construction or remodeling work. As such, it represents a flexible, adaptable grouping of tools that can be added to and subtracted from in order to fit with the building crew. We have not presumed to provide a blue print, the raw materials, or the building site – those elements are rightfully found within the local community.

The format is designed in five separate - but closely related - categories. *Mobilization, Motivation, Integration, Communication* and *Recognition*. These categories broadly identify the kind of tools you find in that section.

Choose what you think will work for the task you have in mind. Our staff is available by phone, (206) 441-7137, if you have questions and to support you in expanding your capacity to utilize volunteers in your clinical setting.

Volunteers Analysis

Why Do A Volunteers Analysis?

Strategic planning includes analyzing the impact of the volunteers you hope to engage. Volunteers not only provide direct service on behalf of your program, they are also key ambassadors on your behalf in the wider community.

What Are Volunteers?

Volunteers are those individuals and groups who have an interest and a commitment to the mission of your organization. Volunteers support your mission with their time, money, and abilities. Most volunteers choose to give of themselves in response to a clearly perceived need and out of their desire to make a difference.

The volunteer is free to choose where he or she will invest energy. The decision to invest in volunteering with your program clinic, or agency, impacts the future of your organization.

Volunteers are an invaluable resource not only in terms of their direct service, but also in terms of their ability to promote and support the long-term success of the organization.

Volunteers in your clinic may include the following:

- Physicians
- Dentists
- Dental Hygienist
- Nurse Practitioners
- Physician Assistants
- Pharmacists
- Dental Assistants
- Lab Technicians
- Receptionists
- Special Projects Groups

How to Work with Volunteers

Volunteers have varying expectations and interests in your clinic or program. They may also differ in the influence they exert as they work with your organization.

Basic Steps to Working with Volunteers

- Make a list of volunteers.
- Identify each volunteer's expectation of the organization.
- If at all possible, talk with the volunteers to check your perceptions.
- Assess the level of satisfaction each volunteer is experiencing.
- Listen, respond, and if possible, remedy points of contention.
- Identify means of communicating your satisfaction with their contribution.

Assess Need for Changes

Use the information you have gained to continue to create an organization that learns. Change is a constant in life. Good information from individuals committed to the success of your clinic or program can help you map your future.

Map Out a Plan

Target three to five priority areas. For each idea or issue, provide a one-sentence statement of what you want to be different as a result of your effort. Next, identify – **What** activity is needed? **Who** will do this? **When** will this be done? You'll have a basic map to navigate the "getting started process." Revisit and revamp as the first round targets are reached.

Clinic & Volunteer Questionnaire

Adapted from *How to Mobilize Church Volunteers* by Marlene Wilson.
Minneapolis, MN: Augsburg Fortress Publishers, 1983.

Introduction and Definitions

The following questionnaire can be a useful tool to stimulate your thinking about your clinic’s volunteer program and to begin to identify parts of the program which might require attention or be a good place to begin when making changes.

The questionnaire may be completed individually, but it probably will be more helpful for you as a group to complete it together so that you can work out a consensus on each answer. If people disagree about an issue it indicates that the clinic needs to clarify its work in this area.

The following questions use *volunteer* to mean a person who does a task without financial compensation and without being forced to do it; a *volunteer program* to mean a clinic’s intentional, planned work with its volunteers; and *volunteer position description* to mean written information about the purpose and activities of a volunteer position and expectations the clinic has of the person who does the work.

Mission Statement

	Yes	No
1. Does your clinic have a mission statement (a description of its special purpose)? If YES, answer questions 2-6. If NO, skip to 7.	_____	_____
2. Has the mission statement been reviewed and either affirmed or revised in the last five years?	_____	_____
3. Is the mission statement regularly referred to as a guide and foundation for the clinic’s program and planning?	_____	_____
4. Are volunteers in the clinic familiar with the mission statement?	_____	_____
5. Do volunteers understand how their volunteer work contributes to the mission of the clinic?	_____	_____
6. Does your clinic regularly establish goals and outcomes for its work?	_____	_____
7. Who should decide if a mission statement needs to be developed or reviewed, and how it could be done?	_____	

Volunteer Position Descriptions

	Yes	No
1. Is there a list of all volunteer positions in the clinic?	_____	_____
2. Generally, do people have a good idea of what is expected of them when they accept a volunteer position?	_____	_____
3. Are there written position descriptions for at least 50% of the volunteer positions in the clinic?	_____	_____
4. Who is, or could be, responsible for identifying volunteer clinic positions and writing position descriptions for them?	_____	

Identifying Volunteers

1. Are the current volunteers satisfied with their volunteer position?	_____	_____
2. Is there any specific method for learning about potential new volunteers?	_____	_____
3. Is there any record kept which profiles what volunteers have been trained to do or have an interest in doing?	_____	_____
4. When persons complete a volunteer position, do they have an opportunity to explore new ways of volunteering with the organization?	_____	_____
5. Who is, or could be, responsible for volunteer information management?	_____	
6. Has everyone who is participating in a volunteer position been given a chance to discuss other positions for which they feel suited?	_____	_____
7. Can you say: “No one ever stopped participating because we simply weren’t interested or prepared for their contribution?”	_____	_____
8. Is an effort made to make others aware of volunteer opportunities in the wider community?	_____	_____

Recruiting Volunteers

	Yes	No
1. Is a face-to-face conversation used for asking persons to serve in volunteer positions?	_____	_____
2. Are persons being asked to take on a job given a written description of what they are being asked to do?	_____	_____
3. Is everyone who is asked to participate as a volunteer given an accurate picture of how much time and effort it will take to carry it out?	_____	_____
4. Is everyone who is asked to participate in a volunteer position given information about what they need to know in order to do the position well?	_____	_____
5. Are persons told why they were chosen to be asked to undertake a particular volunteer position?	_____	_____
6. Who is, or could be, responsible for recruiting volunteers within your organization?	_____	

Training Volunteers

1. Before people take on new positions do they participate in an orientation session?	_____	_____
2. Is there some way for persons who have completed a position to pass on helpful information to the persons who take over their positions?	_____	_____
3. Are learning opportunities provided for members as they carry out a volunteer position?	_____	_____
4. Does your clinic sponsor opportunities or specific courses designed to help volunteers develop new skills and knowledge?	_____	_____
5. Does your clinic pay for volunteers to attend training sessions outside the clinic?	_____	_____
6. Are all volunteer positions currently filled by people adequately trained to do them?	_____	_____
7. Within the organization, who is, or could be, responsible for a training program for volunteers?	_____	

Supporting Volunteers

	Yes	No
1. Do all volunteers receive orientation and training for their tasks so that they can go about them with confidence and work effectively?	_____	_____
2. Do all volunteers know there is someone available to assist and encourage them?	_____	_____
3. Are volunteers recognized and thanked by the organization for their services?	_____	_____
4. Do volunteers have adequate resources to carry out their work?	_____	_____
5. Are records kept of all volunteer services?	_____	_____
6. Who is, or could be, responsible for supporting volunteers?	_____	

Completing a Volunteer Position

1. When people undertake a volunteer position do they know how long it will last?	_____	_____
2. Is it impossible to take on a volunteer position “for life” without renewing the commitment from time to time?	_____	_____
3. Does the clinic have a way of saying thanks to people who have volunteered on its behalf?	_____	_____
4. When a volunteer position is completed, does the volunteer have an opportunity to discuss how it went, what was accomplished, what was learned and what the frustrations were?	_____	_____
5. Do continuing volunteers (and staff) have an opportunity to say “good-bye” to completing members at the end of their tenure?	_____	_____
6. Are people recognized by the clinic or organization when they complete volunteer work?	_____	_____
7. Who is, or could be, responsible for developing ways to recognize and deal with persons who are completing a volunteer position?	_____	

Evaluating the Volunteer Program

	Yes	No
1. Is there a designated group of persons whose responsibility is to evaluate the clinics volunteer program?	_____	_____
2. Have volunteers been given an opportunity to express their feelings about their work and to suggest changes in the clinic's volunteer program?	_____	_____
3. Has there been at least one significant change in the volunteer program during the past year?	_____	_____
4. Are there individuals or groups working on each area of the clinic's volunteer program included in this questionnaire?	_____	_____
5. Is evaluation seen by the clinic as a way to improve and work for greater excellence rather than as criticism?	_____	_____
6. Who is, or could be, responsible for evaluating your clinic's volunteer program?	_____	

Without Volunteers A Lost Civilization

By Erma Bombeck

From *At Wit's End*, by Erma Bombeck. New York, NY: Doubleday, 1967. Reprinted from *America's Voluntary Spirit: A Book of Readings* by Brian O'Connell. New York, NY: Foundation Center, 1983.

I had a dream the other night that every volunteer in this country, disillusioned with the lack of compassion, has set sail for another country.

As I stood smiling on the pier, I shouted, "Good-bye, creamed chicken. Good-bye, phone committees. So long, Disease-of-the-Month. No more saving old egg cartons. No more getting out the vote. Au revoir, playground duty, bake sales and three-hour meetings.

As the boat got smaller and they could no longer hear my shouts, I reflected, "Served them right. A bunch of yes people. All they had to do was to put their tongue firmly against the roof of their mouth and make an O sound. Nnnnnnnnooooo. Nnnnnnnnnnnnoooooooooo. Nnoo! No! It would certainly have spared them a lot of grief. Oh well, who needs them!"

The hospital was quiet as I passed it. Rooms were void of books, flowers and voices. The children's wing held no clowns...no laughter. The reception desk was vacant.

The Home for the Ages was like a tomb. The blind listened for a voice that never came. The infirm were imprisoned by wheels on a chair that never moved. Food grew cold on trays that would never reach the mouths of the hungry.

All the social agencies had closed their doors, unable to implement their programs of

scouting, recreation, drug control, Big Sisters, Big Brothers, YW, YM, the retarded, the crippled, the lonely, and the abandoned.

The health agencies had a sign in the window, "Cures for cancer, muscular dystrophy, birth defects, multiple sclerosis, emphysema, sickle cell anemia, kidney disorders, heart diseases, etc., have been canceled due to lack of interest.

The schools were strangely quiet with no field trips, no volunteer aids on the playground or in the classrooms...as were the colleges where scholarships and financial support were no more.

The flowers on church alters withered and died. Children in day nurseries lifted their arms but there was no one to hold them in love. Alcoholics cried out in despair, but no one answered, and the poor had no recourse for health care or legal aid.

But the saddest part of the journey was the symphony hall which was dark and would remain that way. So were the museums that had been built and stocked by volunteers with the art treasures of our times.

I fought in my sleep to regain a glimpse of the ship of volunteers just one more time. It was to be my last glimpse of civilization...as we were meant to be.