Deployment of Medical Reserve Corps (MRC) Volunteers

INTRODUCTION:

1. Purpose: This standard operation procedure (SOP) is published to provide general guidance for day to day operations, training, and/or to prescribe actions to be taken in the event of a general emergency, resulting from natural or man-made disaster, civil disturbance, or terrorist acts affecting the Communities of Region 4A, the Commonwealth of Massachusetts, and/or the Nation which requires the response of the Medial Reserve Corps. Units deployed for emergencies are authorized to implement these procedures as required. This SOP may also apply to special events and other non-emergencies, such as local events, health promotions, wellness clinics and other community support.

2. Audience: This SOP is designed for use by the Local Health Departments, Board of Health, and Medical Reserve Corps Leadership. Guidance for Volunteers can be found in the "MA Region 4A MRC Volunteer Manual"

3. Applicability: This SOP applies to all elements of the Massachusetts Region 4A Medical Reserve Corps (MRC) and should be used in conjunction with applicable source documents.

4. Suggested Improvements: This SOP is intended to be an operational document, users of this SOP are encouraged to submit comments, recommended changes and suggested improvements to MA Region 4A MRC Coordinator.

Deployment of Medical Reserve Corps (MRC) Volunteers

General:

1. MRC Volunteers are not "first responders" and are not to be considered a rapid-reaction force. It is assumed that in emergencies and disasters, first responders will be appropriately deployed through their normal channels.

2. Volunteers should NEVER self-deploy - either as individuals or as units. Deployment of resources requires organization, preparation, and significant effort in order to maintain order.

3. MRC Volunteers are indeed volunteers, they have a right to be informed about the nature of the incident and what to expect about field conditions, housing, transportation, etc.

   a. MRC Volunteers may choose to be deployed:

      1. Locally—within his/her community only.

      2. Regionally—within his/her community and any of the other communities in Region 4A.

      3. Outside the region—e.g., as part of a statewide or national deployment.

   b. MRC Volunteers are not mandated to respond and may choose NOT to be deployed.

4. The primary focus of the MRC's within Region 4A is local response. The decision to mobilize volunteers rests with each local Health Department/MRC Leader. In the event of a multi-community emergency or event, the local MRC will first mobilize volunteers to provide service for their local communities. If local needs are met, the local Health Department/MRC Leader may authorize deployment of its volunteers to respond to other communities within Region 4A, or to be mobilized to respond during a statewide or national emergency.

5. **Communication protocol**: MRC Coordinator will first send an email, if no response, will send a text message, if no response will call the primary point of contact first then the alternate point of contact.

6. Forms used in this chapter can be found as separate attachments for ease of use. Local Health Department/MRC Leader may call the MRC Coordinator who will have forms available and will receive the information over the phone.

Local (within your Community) Activations:

1. For local activations, MRC Volunteers from a particular community can be deployed within their own Community by the local Health Department, the Emergency Manager, or other designated official. If this happens, the local Health Department/MRC Leader should notify the Region 4A MRC Coordinator as soon as possible after this activation, should keep a record of the MRC Volunteers who were activated, what their role/position was, and provide that information to the Region 4A MRC Coordinator for documentation purposes.

2. If preferred, the local Health Department/MRC Leader may contact the Region 4A MRC Coordinator to coordinate the activation, deployment and record-keeping. The MRC Coordinator will contact the community, assess their needs for assistance and then follow activation procedures below.

Regional Activation (within Region 4A):

1. A local Health Department Leader, Emergency Manager, or other designated official of a community within Region 4A may request activation of MRC Volunteers for emergency response. An official from the Requesting Agency will make a request for MRC personnel using the "MA Region 4A MRC Volunteer Request Form" (*page 6-9*) and will be as specific as possible about the required non-medical and/or medical professional skills. All requests and activations for missions larger than within the local community should be forwarded to the Region 4A MRC Coordinator.

2. When activation is requested, the MRC Coordinator will send a situation report to the local Health Department/MRC Leaders to inform them of the need for volunteers and, depending upon the situation, ask them to put their volunteers on standby or discuss activation of their volunteers.

3. MRC Coordinator will send a message to local Health Department/MRC Leaders to inquire if there are volunteers available for the assignment using the following protocol:

a. For the communities listed under LBOH Deploy, "TOWN DEPLOYMENT COMMUNICATION PREFERENCE", (*page 6-8)*:

1. MRC Coordinator will send the request to local Health Department/MRC Unit Leaders with staffing requests.

2. Health Department/MRC Unit Leaders will follow their own protocols for activating volunteers.

3. Health Department/MRC Unit Leaders will provide the MRC Coordinator with a response to the request and indicate if they can or cannot fill it (negative response required).

4. Health Department/MRC Unit Leaders will ask MRC Volunteers to contact MRC Coordinator directly if they are available, and the MRC Coordinator will gather the following information using the "MA MRC Region 4A - Deployment Availability of Volunteers Form" (*page 6-10*):

A. Names, contact information (phone/email), and community they are from.
B. Type of volunteer's available (profession/job).
C. Available dates/times of volunteers.

b. For the communities listed under MRC Deploy, "TOWN DEPLOYMENT COMMUNICATION PREFERENCE", (*page 6-8)*: The MRC Coordinator will contact volunteers directly and will gather the following information using the "MA MRC Region 4A - Deployment Availability of Volunteers Form" (*page 6-10*): Please note: Health Department/MRC Unit Leaders and MRC Coordinator must communicate to ensure that both have the most updated list of MRC Volunteers.

1. Names, contact information (phone/email), and community they are from.
2. Type of volunteer's available (profession/job).
3. Available dates/times of volunteers.

4. When MRC Coordinator receives this information, she will communicate directly with the Volunteers and give them as much information as possible, to include:

a. Type of mission (i.e. vaccination clinic, shelter, etc.).
b. Location of mission (with enough specificity to suggest the kind of travel involved).
c. Duration of mission to include possibility of shifts.
d. Anticipated field conditions (e.g., local school or clinic vs. austere conditions such as housing in tents with Meals Ready to Eat and portable showers).
e. Any requirements for special clothing and/or personal protective equipment.
f. Any known risks or safety concerns (e.g. dust, aerosolized debris, social unrest, etc.)
g. Any other conditions which would influence a volunteer's decision to participate.
h. What volunteers should bring with them (e.g. food/ water/jacket/boots, etc.)

5. Based on the expected working conditions and the volunteers' expected duties, an honest assessment should be made by each volunteer of their personal health and fitness. This information will enable volunteer to determine if their personal health and fitness will enable them to accept the assignment.

6. If the volunteer replies that they are willing and available to deploy, they may then be assigned to a specific task, location and time-frame. MRC Coordinator will send a message (email, text, or phone call in accordance with Communication Protocol, page 6-2) stating that they have been assigned and will receive specific information about time, dates and location of assignment along with details of the mission.

7. After accepting the assignment, volunteers will be updated about when and where to report and the name of the contact person or supervisor to whom they will report.

8. Upon safe arrival, volunteers should call/text MRC Coordinator, and then should check in with their specific point of contact or supervisor. At check-in volunteers should present a MRC Badge and/or government-issued photo I.D. such as a driver license, and clinical license, if applicable. Volunteers should receive an Orientation or Situation Briefing and a Safety Briefing, in addition to specific instructions for housing, meals, etc. (if deployed outside local area), volunteers may receive "Just in Time Training" to prepare them to respond to the specific event.

9. During Assignment: Consistent with local plans and protocols, volunteers will be assigned to specific duties. Regardless of job, all volunteers must:

a. Sign-in at the beginning of each shift and sign-out at the end of shift.
b. Remember that wellness and safety are the highest priority.
c. Immediately report any personal injuries or illness to supervisor and Region 4A MRC Coordinator.
d. Volunteers are expected to keep their Region 4A MRC Coordinator aware of their whereabouts as needed, and communicate with their family.

e. Remember that the conduct of all volunteers on assignment will reflect on the individual, home agency and the entire disaster response operation. Individual conduct will impact the people we are serving and we expect that conduct to be positive.

10. Demobilization: Volunteer will be "released from duty" when the assignment has been fulfilled. It is essential that the volunteer complete all necessary paperwork as part of the "Demobilization" process. Each MRC Volunteer must ensure they have properly signed out from the scene. If possible, take the opportunity to write and share observations. If deployed outside the local region, instructions for transportation home may be given.

11. Post – Deployment: Volunteer will report safe return home to Region 4A MRC Coordinator. Be sure physical and emotional health is attended to as needed upon return.

12. Debriefing: Region 4A MRC Coordinator will contact all deployed volunteers to ask for comments to be included in an after-action report for the Region 4A MRC (see "MA Region 4A MRC Post Deployment Evaluation Form", *page 6-16).* This report will be shared as needed in overall post-event reviews with other agencies. Volunteers' names may be removed for confidentiality, if appropriate.

Outside the region—Statewide or National deployment:

1. An activation request for assistance outside Region 4A will come through the Massachusetts Department of Public Health (MDPH) Volunteer Support Team (VST), or the MDPH Emergency Preparedness Bureau (EPB) Staff Officer, to the Region 4A MRC Coordinator, in accordance with their protocol, *pages 6-13 through 6-15*.

2. When activation is requested, the MRC Coordinator will use the process listed above, "Regional Activation (within Region 4A)".

3. MRC Coordinator will provide the Volunteer Support Team (VST), with the "MA MRC Region 4A - Deployment Availability of Volunteers Form" information. NOTE: this process is published in the "COMMUNICATIONS PROTOCOL FOR COORDINATION OF VOLUNTEER REQUESTS FOR A CROSS-JURISDICTIONAL EVENT", developed by the Massachusetts Department of Public Health, Emergency Preparedness Bureau, see *pages 6-13 through 6-15*. The VST will communicate/update the MRC Coordinator with MRC Volunteer activities.

MRC Coordinator Responsibilities during all Activations

1. Monitoring communication and staffing levels with direction from the Incident Commander.

2. Scheduling volunteers in shifts for events of long-term duration.

3. Verifying that volunteers are dispatched with the appropriate identification (MRC badge, driver's license, CPR card, other) to include issuing MRC identification badges as needed.

4. Verifying transportation of MRC volunteers to and from the correct sites.

5. Ensuring that volunteers respond to the appropriate locations (such as a predefined staging area) with the appropriate gear and instructions and checking on safety issues as needed.

6. Maintaining and communicating situational awareness to local Health Department/MRC Leaders to include, communication with volunteers and/or monitoring their involvement.

7. Verifying that reporting and de-activation procedures are followed.

NOTE: If the Region 4A MRC coordinator is unavailable or absent during an emergency or activation, designees from the MRC Advisory Board will be pre-appointed to serve as alternate contacts. MRC Coordinator will monitor possible weather and public health events, and notify MRC Advisory Board ahead of time when she will be unavailable.

MRC Region 4A Volunteer Deployment Checklist

Date	Request for activation of MRC volunteers
	MA MRC Region 4A Volunteer Request form received:
	MRC Coordinator sends situation report to Local Health Department/MRC Leaders (LHD/MRC) to put MRC Volunteers on stand by
	MRC Coord email LHD/MRC with update and attachments: completed Volunteer Request Form, blank Volunteer Availability form
	MRC Coord emails Volunteers from listed communities with information above
	MRC Coord contact Volunteers with specific mission information
	Ongoing operations
	ESF8 Activated: # 508-820-2000 call in to report activities 3 times a day: report activated staff + available staff + sites activated + additional staffing needs 8am-4pm and 12am
	MRC staff checks in with Site Command staff 2 times a day to confirm volunteer staffing needs and shifts
	MRC staff checks in with MRC Director during operations daily
	If issues arise outside of protocol MRC staff discusses actions with MRC Director
	Ongoing record of staff hours/MRC volunteer deployment/Shelters being staffed by MRC volunteers
	Deactivation approved
	ESF8 stands down
	Shelters/EDS stands down
	Close future shifts, notify any future scheduled volunteers
	Report stand down to MRC Advisory Board
	Report stand down to ESF8 if still activated or Duty Officer
	De-Briefing for volunteers and staff
	Referral for Medical/Behavioral Health Services if needed
	Survey to all volunteers who responded
	Follow up to thank the volunteers for making themselves available for service
	After Action Report
	Corrective Actions

TOWN DEPLOYMENT COMMUNICATION PREFERENCE
(updated 9 Nov 2014)

When activation is requested, the Region 4A MRC Coordinator will contact all local health departments FIRST to inform them of the need for volunteers.
MRC Coordinator will keep you informed of volunteer activities throughout any event.

MRC Coordinator will contact your volunteers directly:

Acton	Doug Halley, Evan Carloni, Patricia Sullivan
Boxborough	Swan (leaving, BOH?)
Concord	Susan Rask
Framingham	Marissa Garafano
Lexington	Gerry Cody, Dave Neylon
Littleton	Jim Gareffi, Ron Thorton
Sharon	Linda Callan, Sheila Miller
Waltham	Michael Delfino

Contact LBOH-MRC Coordinator will request that you put your volunteers on standby:

Ashland	Mike Gurnick
Bedford	Heidi Porter
Carlisle	Linda Fantasia
Dover	Karen Hyatt
Holliston	Scott Moles
Hopkinton	Ed Wirtanen
Hudson	Sam Wong
Lincoln	Michael O'Donnell
Marlborough	Don Cusson, Michele Kanavos
Maynard	Stephanie Duggan
Medfield	Brian Gallant
Millis	Karen D'Angelo
Natick	Jim White, Leila Mercier
Norfolk	Betsy Fijol
Sherborn	Ellen Hartnett
Southborough	Leslie Chamberlin
Stow	Jack Wallace
Sudbury	Bill Murphy
Walpole	Robin Chapell
Wayland	Ruth Mori
Weston	Wendy Diotalevi
Winchester	Jen Murphy, Kathy Whittaker
Woburn	Karen DaCampo
Wrentham	Judy Fenton

MA MRC Region 4A Volunteer Request Form

Requesting Agency Information			
Date: Click here to enter a date.			
Requesting Agency:			
Requestor's name:			
Requestor's telephone:	W:	C:	
Requestor's email:			

Event Information			
Description of event:			
Address/Location:			
Point of Contact at Site:			
Number:	W:	C:	
Type of event? ☐Shelter	☐Emergency Dispensing	☐Other	
When is response needed?			

Volunteer Information				
Date: Click here to enter a date.				
	Start Date: Click here to enter a date.			
	End Date: Click here to enter a date.			
Skills/Shifts Requested:	How Many	Shift Time	Shift Time	Shift Time
Shelter Supervisor				
Medical				
Behavioral Health				
Non-Medical				
Registration				
Food Services				
Dormitory				
Security				
Job Descriptions included? ☐ Yes ☐ No				
Who do volunteers report to?				
Number:	W:	C:		
Additional Info(meals, supplies, lodging, transportation, parking, directions, etc.)				

MA MRC Region 4A							
Deployment Availability of Volunteers Form							
Date:							
Event Description:							
Location:						Please note which shift	
						volunteer is available for	
Community	**NAME**	**Email**	**Cell Phone**	**home Phone**	**Profession**	**Shift Date**	**Shift Date**
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Sample Email to Volunteers

Dear Region 4A MRC Volunteer: Thank you very much for volunteering.

Attached is the updated "Massachusetts Volunteer Request Form" with the specific information for the *(add event location).*
Please let me know if you have trouble reading it.

This is the schedule, please drive safe and don't forget to bring your MRC Badge, driver's License, and/or professional license.
Please let me know as soon as possible if something happens and you cannot fulfill your shift.

Event location:
Street:
Town/City:
Phone:
Special travel instructions:
Point of contact at Site:
Name:
Phone:
Email:
Assignment:
Job Action Sheet:
Shift hours:
Who you will relieve:
Name:
Phone:
Email:
Who will relieve you at the end of your shift:
Name:
Phone:
Email:

Upon safe arrival, please text or call MRC Coordinator (Cathy Corkery, 508-735-3566), and then check in with *(point of contact)* at the *(event location).*
At check-in you should present a MRC Badge and/or government-issued photo I.D. such as a driver license, and your clinical license if you are a clinician.
You should receive an Orientation or Situation Briefing and a Safety Briefing, in addition to specific instructions for housing, meals, etc.

During Assignment: Regardless of your job, all volunteers must:

a. Sign-in at the beginning of each shift and sign-out at the end of shift.
b. Remember that your wellness and safety are the highest priority.

c. Immediately report any personal injuries or illness to your supervisor and your Region 4A MRC Coordinator.
d. Keep your Region 4A MRC Coordinator (Cathy Corkery, 508-735-3566) aware of their whereabouts as needed, and communicate with your family.
e. Remember that the conduct of all volunteers on assignment will reflect on you, your home agency and the entire disaster response operation. Your conduct will impact the people we are serving and we all expect that conduct to be positive.

Demobilization: You will be “released from duty” when the assignment has been fulfilled. It is essential that you complete all necessary paperwork and ensure you have properly signed out from the scene.

Post – Deployment: When you arrive home, contact your Region 4A MRC Coordinator (Cathy Corkery, 508-735-3566).

MASSACHUSETTS DEPARTMENT OF PUBLIC HEATLH

COMMUNICATIONS PROTOCOL FOR COORDINATION OF VOLUNTEER REQUESTS FOR A CROSS-JURISDICTIONAL EVENT

QUICK REFERENCE GUIDE FOR MRC UNIT LEADERS

REQUESTING ADDITIONAL VOLUNTEERS WHEN SEOC IS ACTIVATED:
If the SEOC ESF-8 desk is activated, the DPH Office of Preparedness and Emergency Management (OPEM) will notify MRC Unit Leaders via the HHAN or email[1] if volunteers are needed and volunteers may be asked by Unit Leaders to standby.

1. Requesting agencies will call the ESF-8 desk[2] requesting volunteers, ESF-8 staff should ask the following questions to fill out the Volunteer Request Form:
   a. Number and type (Medical/Non-Medical) of volunteers needed
   b. Particular professions and skills of volunteers needed, with job descriptions included if available
   c. Date/Time/Duration of shift(s) requested and check in time
   d. Address and location of mission (for example, a shelter); Include directions
   e. Name/Phone number of Point of Contact at site and who volunteers report to
   f. Other relevant information (transportation provided, supplies needed, meals provided, sleeping facilities, safety mechanisms in place etc.)
   g. The requester's contact information in case further information is needed
   h. Job Action sheets relevant to the request

2. ESF-8 sends request to Volunteer Support Team (VST)[3]. VST contacts MRC Unit Leaders through the MA Responds (for MA Responds units) and phone/email (for non-MA Responds units) with staffing requests. VST will first ensure that the unit in the requesting agency's jurisdiction has been contacted and then make every attempt to contact those units with geographic proximity. Based on how quickly a response is needed, VST may begin contacting units out-of-region.

3. MRC Unit Leaders follow their own protocols for activating volunteers.

4. MRC Unit Leaders provide the VST with a response to the request (indicating if they can or cannot fill it), including the following information:
   a. Names and contact information of volunteers
   b. Availability of volunteers
   c. Type of volunteers available

5. VST utilizes MA Responds to assign volunteers to appropriate tasks/shifts and notifies the volunteer and Unit Leader as well as the requestor of assignments. The VST will also notify the requestor if no volunteers are available. This will be done in accordance with the Deployment Protocol.

6. VST hosts conference calls as needed with relevant parties to discuss shelter needs & identify ongoing needs & gaps. Documentation is done in WebEOC or other mechanisms as needed.

7. VST provides regular email updates to the relevant parties to share data collected by regional coordinators as well as MEMA situational updates.

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1. Please update this information at least quarterly, or more often if your unit leader changes. If you are unsure the 24/7 contact information for your unit is up-to-date, please contact Regan Checchio at rchecchio@reginavilla.com.
2. MRC leaders may also choose to contact another MRC unit within region for immediate assistance. Please notify the ESF-8 desk if your unit is deploying cross-jurisdictionally so staff can track activity.
3. The Volunteer Support Team includes the MRC State Coordinator and additional staff as needed from OPEM. See "About the Volunteer Support Team" for more information.

REQUESTING ADDITIONAL VOLUNTEERS WHEN SEOC IS NOT ACTIVATED:

1. Requesting agencies may contact the local unit directly or notify OPEM staff by calling the 24/7 beeper at (617) 339-8351 of a cross-jurisdictional need for volunteers and must include the information listed on the Volunteer Request Form.

2. OPEM staff will contact MRC Unit Leaders with staffing requests. OPEM will make every attempt to contact those units with geographic proximity. Based on how quickly a response is needed, OPEM may begin contacting units out-of-region.

3. Units will work directly with requestor to fill requests. VST will not be activated.

ABOUT THE VOLUNTEER SUPPORT TEAM

The Volunteer Support Team (VST) can be activated in the event of an emergency if additional support is needed to increase the capacity to manage and coordinate volunteer requests. Personnel that may be assigned to staff the VST include the MRC State Coordinator, the Health Volunteer Program Manager, Senior Public Health Preparedness Coordinator, other ESF-8 duty officers, and regional and administrative coordinators as needed from OPEM. All personnel that will staff the VST will be trained on MA Responds use and protocols. The following may also be true, dependent on the event and need for support:

a. VST may also request a regional or local MRC coordinator to provide assistance.
b. The VST may be assigned to the Department Operations Center (DOC) at MDPH Central Offices to support the ESF-8 desk in coordinating deployment of health volunteers
c. If state unaffiliated volunteers are activated, VST staff trained in MA Responds will send requests to the state unaffiliated volunteers in selected categories.
d. The VST will assign volunteers to shifts as needed using the MA Responds database. If there are gaps that cannot be filled, non-MA Responds participating units will be incorporated into the response if the requesting unit/agency is willing to accept volunteers from units not registered on MA Responds.

DRAFT—Last updated August 2014 11/19/2014

MASSACHUSETTS DEPARTMENT OF PUBLIC HEATLH
EMERGENCY PREPAREDNESS BUREAU

Volunteer Support Team (VST)
Deployment Protocol

This deployment protocol is engaged after MRC Unit Leaders provide the VST with a response to a request, including the following information: Names/contact information of volunteers; Availability of volunteers; Type of volunteers available.

The VST uses MA Responds to assign volunteers to appropriate tasks/shifts. Once the volunteers are assigned, the VST member notifies the volunteer, unit leader and requester of the assignment using MA Responds or other modes of communication. This information will include the following:

- Date of Shift
- Time/Duration of shift
- Address of destination (with directions)
- Name/Phone Number of On-site Contact
- Name/Phone Number of Shelter Manager (if different than above)
- Job Action Sheet
- Information about supplies the volunteer may need to bring
- Information about whether meals will be provided

In some cases, some of this information may not be available. The VST will note if it is not available.

In the deployment instructions, the VST will also remind the volunteers of the following:

- Due to the changing nature of the emergency, a shift may be canceled with very little notice.
- If a volunteer arrives on site and the onsite contact or role is different than expected, he/she may contact the VST or ESF-8 desk.
- If a volunteer feels unsafe or is asked to do work outside of his/her scope of practice, he/she should talk to the volunteer manager or incident commander on site and contact the ESF-8 desk and/or the local MRC unit leader immediately.

DRAFT, December 2013

MA Region 4A MRC Post Deployment Evaluation Form

Please complete the following questions:

1. Which volunteer role were you assigned? _____

2. Were you a team leader or in a supervisory role? ___Yes ____No

3. What location/shift were you assigned? _____ am_____ pm_____ full day_____

4. Did you have any problems with any of the equipment? (Example Radios, First Aid Bags, Tents)

Please respond to following statements:

1. The on-site operational briefing was clear and well organized

☐ 1 Strongly Disagree ☐ 2 Disagree ☐ 3 Undecided ☐ 4 Agree ☐ 5 Strongly Agree ☐ 6 Did Not Occur

_____

2. Opportunity for discussion was provided and useful.

☐ 1 Strongly Disagree ☐ 2 Disagree ☐ 3 Undecided ☐ 4 Agree ☐ 5 Strongly Agree ☐ 6 No Opportunity

_____

3. Did you feel comfortable in your assigned role?

☐ 1 Strongly Disagree ☐ 2 Disagree ☐ 3 Undecided ☐ 4 Agree ☐ 5 Strongly Agree ☐ 6 Comment below

_____

4. Were you comfortable with your workspace environment?

☐ 1 Strongly Disagree ☐ 2 Disagree ☐ 3 Undecided ☐ 4 Agree ☐ 5 Strongly Agree ☐ 6 Comment below

_____

5. Did you have all the necessary knowledge to perform your specific task?

☐ 1 Strongly Disagree ☐ 2 Disagree ☐ 3 Undecided ☐ 4 Agree ☐ 5 Strongly Agree ☐ 6 Comment below

_____

6. Demobilization and release plan for my position was clear and concise.

☐ 1 Strongly Disagree ☐ 2 Disagree ☐ 3 Undecided ☐ 4 Agree ☐ 5 Strongly Agree ☐ 6 Comment below

_____

7. Overall, how would you rate your experience from this volunteer opportunity?

☐ 1 Excellent ☐ 2 Good ☐ 3 Fair ☐ 4 Poor

_____

Do you have any other comments, questions, or concerns? _____

Areas for Improvement: _____

What went well: _____