



## FREQUENTLY ASKED QUESTIONS FOR VOLUNTEERS

### **Q. How do I sign up to become a volunteer in the Caregiver Services Corps program?**

- A. Go to the Maryland Medical Reserve Corps (MRC) website and sign up to become a member of the MRC. You do not need to be in a medical or health care field to become a member of the MRC. You will then see the opportunity to volunteer specifically for the CRC program. There is some processing required to become an official member of the MRC, which includes a background check.

### **Q. What are the types of things the volunteers from the MRC will do for the older adults in the *Caregiver Services Corps*?**

- A. Volunteers are needed to perform both in-home tasks for older adults as well as logistical support for the program. Examples include:
- In-home tasks
    - Assisting with the individual's self-administration of medications
    - Helping with ambulation or transferring
    - Assisting with bathing and completing personal hygiene routines
    - Aiding in meal preparation and arrange for delivery for groceries or prepared meals
    - Educating older adults on how to use video technologies to connect with loved ones or healthcare providers
  - Logistical support (through no contact)
    - Sorting and transporting supplies
    - Delivering essential food and groceries

### **Q. Do I need to have a clinical background to volunteer for this program?**

- B. No, you are not required to have a clinical background and do not need to work in the healthcare or medical field in order to volunteer.

**Q. What if I am asked to perform a task that I am not comfortable doing?**

- A. When the call center contacts you to see determine if you are available to be deployed to the home of a given older adult client, you will be informed at that time of the tasks that need to be performed for the client. If you are not comfortable with one or more of the tasks you can decline the deployment. The call center can arrange for another volunteer caregiver to deploy to the home. If you take a call and determine once you are at the home that the client has additional needs, you will not be required to perform anything you are not comfortable doing. The call center will arrange for another visit to that client for follow-up care.

**Q. What if my availability changes and I can not be deployed when I am called upon?**

- A. This is a voluntary program. You are not required to accept any request for deployment. If your schedule changes or if for any other reason you do not choose to accept a given deployment that is your prerogative.

**Q. How much advanced notice will I have when I am asked to deploy to a home? And what hours in the day will services to the homes be provided?**

- A. You will typically be called the day of or the day prior to being deployed. Services will be provided between the hours of 7:00 am and 9:00 pm. The time you spend in a client's home will vary but will likely be 1-5 hours.

**Q. What PPE will be available? Should I bring my own PPE? Will PPE be reused?**

- A. PPE is being provided for all caregiver volunteers as well as for the clients in the home. When the call center contacts you, they will provide information about where to pick up the PPE or if it can be delivered to you. If you have your own PPE you are encouraged to use it. The standard PPE that is being provided for every home visit includes gloves and facemasks. If it is determined that the client or someone in the home has potentially been exposed to the COVID 19 then volunteers will also be provided with gowns and eye shields. PPE will not be reused. Please follow all sanitation precautions you believe are appropriate, such as cleaning your personal phone after a visit.

**Q. Are there specific questions caregivers should ask clients when entering the home to confirm needs? What if the needs are different than expected from the call center?**

- A. There is an at-home check list that includes specific questions that should be asked of each client. Those questions will be in the app that we are asking the volunteers to download before they go to the client's home. We do anticipate there may be other needs - not covered in the at home checklist - the volunteer could identify once being in the home. There is an "other" category in which those items can be noted when the volunteer sends the check list back.

**Q. I am expected to phone the call center when I complete the visit? How do I provide information about any follow – up needed?**

- A. The app (Mimi Rx) will be the mechanism in which feedback to the call center will be provided by the MRC volunteer. All volunteers will be expected to send that report back via the app. If there are any difficulties with the app we will provide paper copies of the at-home checklist and then you can take a picture of the filled out forms and email it back to the call center.

**Q. Who is the volunteer caregiver contact? MRC or the CSC call center? Will I be expected to follow up directly with the client?**

- A. The CSC call center is the contact for the volunteer, not the MRC. The CSC call center is the contact for the client as well. Thus, if a client asks if he/she can call you back or requests that you to call his/her family member, please direct them to connect the call center. All communications must go through the CSC call center. You should not provide the client with any of your personal contact information.

**Q. What if I am asked to perform a task that requires money, such as picking up groceries?**

- A. You will not handle any money. All transactions that require money will have to be arranged via phone, credit card, etc. and will be pre-paid.

**Q. How will the program be monitored and evaluated?**

- A. The CSC call center will be responsible for monitoring the program and reporting on predefined metrics.

**Q. Does client have the opportunity to offer input on the expertise or sex of caregiver? And what if the client does not speak English?**

- A. The call center is experienced at matching the needs of clients and potential caregivers. If the client has specific requests about the expertise or sex of the caregiver, it will be accommodated when possible, but the client will be notified if that is not possible. A match based on language will be required to meet.

**Q. Why is this service being offered?**

- A. It is imperative that we do everything we can to keep older adults living in their homes safely during this crisis. The needs of older adults living in their homes can change very quickly, however. Their caregiver, or person who assists them in everyday tasks, may not be available to help them for a short period of time or the senior may be experiencing new support needs and they do not know where to turn. This service is being offered in order to provide a mechanism to quickly assess the needs of older adults and respond through the deployment of volunteer caregivers and other resources.

**Q: How does an older adult or someone who assists an older adult with everyday tasks access this system?**

- A. They can call 2-1-1. The 2-1-1 operator will transfer you to the *Caregiver Service Corps* call center if it is determined that the need is pressing and can be best served by the Corps. The service is available 7 days a week.

**Q. Should older adults and those people who assist them utilize this service instead of calling 911?**

- A. 9-1-1 should always be called for life – threatening emergencies. If you are having trouble breathing, are experiencing chest pains, have bleeding that won't stop, etc. please call 9-1-1. The CSC program is designed to serve older adults with pressing but not life – threatening emergencies.

**Q. Is there a fee for this service or is it free?**

- A. There is no fee for the service. The service is not designed to provide for ongoing long term needs of older adults but rather serve as a “stop-gap” program.