



## Appendix C

### RSVP 2020 Medical Transportation Volunteer Survey Retired Senior Volunteer Program (RSVP)

Thank you for taking the time to complete this survey. We would like to know how becoming an RSVP volunteer driver has affected your life and to learn about the effectiveness of our program. All information will be kept confidential; do not disclose your name. Please answer each question to the best of your ability. Please check the appropriate box for each question. A self-addressed stamped envelope is enclosed for your convenience.

1. How long have you been volunteering with RSVP's Non-Emergency Medical Transportation Program?

- < 1 Year
- 1-3 Years
- 4-6 Years
- 8-10 Years
- 10+ Years

2. In a typical month, about how many hours do you volunteer?  1-3 Hours

- 4-6 Hours
- 8-10 Hours
- 10+ Hours

3. Overall, are you satisfied or dissatisfied with your volunteer experience with RSVP?  Very satisfied

- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

4. How much of an impact do you feel your work as a volunteer driver has on your daily life?  A great deal of impact

- A lot of impact
- A moderate amount of impact
- A minor impact
- No impact at all

5. I find my volunteer experience transporting RSVP's clients rewarding  Strongly agree

- Agree
- Disagree

6. How friendly is the RSVP staff?  Extremely friendly

- Very friendly
- Somewhat friendly
- Not so friendly
- Not at all friendly

7. How helpful is the RSVP staff?  Extremely helpful

- Very helpful
- Somewhat helpful
- Not so helpful
- Not at all helpful

8. How appreciated does the RSVP staff make you feel?  Very Appreciated

- Somewhat Appreciated
- Not so Appreciated
- Not at all Appreciated

9. I find the RSVP staff receptive to any suggestions or concerns I may have  Strongly agree

- Agree
- Disagree

10. I receive the correct information I need regarding the client I am transporting  All of the time

- Most of the time
- Some of the time
- Never

11. I feel safe while transporting RSVP clients  Strongly agree

- Agree
- Disagree

12. I feel as though I have a good rapport with the clients that I transport  Strongly agree

- Agree
- Disagree

13. I feel that I am improving the lives of Non-Emergency Medical Transport clients  Strongly agree

- Agree
- Disagree

14. Overall, how would you rate your experience volunteering with RSVP's Non-Emergency Medical Transportation Program?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied
- Extremely likely
- Very Likely
- Somewhat Likely
- Not Likely
- Never
- Extremely likely
- Very Likely
- Somewhat Likely
- Not Likely
- Never

15. How often did you transport a client with Limited English Proficiency (LEP)?

- Often
- Seldom
- Never

15. How likely are you to continue volunteering at RSVP in the future?

- Often
- Seldom
- Never

16. How likely is it that you would recommend this organization to a friend or colleague?

- Often
- Seldom
- Never

17. Please use this last section to write down any additional comments, questions, or concerns that you would like to share with us.

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