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# Volunteer Recruitment and Retention Evaluation for Volunteers in Medicine of Southern Nevada

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## **VOLUNTEERS IN MEDICINE OF SOUTHERN NEVADA**

**Volunteer Recruitment and Retention Evaluation  
for  
Volunteers in Medicine of Southern Nevada**

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**August 10<sup>th</sup>, 2018**

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## TABLE OF CONTENTS

Acknowledgements.....	3
Executive Summary.....	4
1. Introduction.....	6
2. Review of Volunteers in Medicine of Southern Nevada.....	10
3. Purpose of Evaluation.....	12
4. Research Question.....	13
5. Evaluation Methodology.....	14
5.1 Literature Review.....	14
5.2 Benchmark Studies.....	15
5.3 Staff Interviews.....	18
5.4 Field Observations.....	19
6. Evaluation Findings.....	23
6.1 Literature Review.....	23
6.2 Benchmark Studies.....	24
6.3 Staff Interviews.....	37
6.4 Field Observations.....	40
7. Recommendations.....	42
7.1 Short Term.....	42
7.2 Medium & Long Term.....	44
8. Conclusion.....	45
References.....	48
Appendix.....	50

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- Volunteers In Medicine San Diego (Ms. Maureen Hartin)
- Clinic by the Bay-San Francisco (Mr. Henry Smith)
- Macon Volunteer Clinic -Macon, Ga (Ms. Angela Millett)
- Volunteers In Medicine Clinic of the Cascades-Central, Oregon (Ms. Kristi Jacobs)
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## Executive Summary

Student evaluation team, Efficient Evaluators (E2), conducted an evaluation of Volunteers in Medicine of Southern Nevada (VMSN) from early 2018 until July 2018. This report serves as a guideline that provides thorough analytical results from literature review, benchmark studies, staff interviews and field observation and list of recommendations for VMSN to voluntarily adopt to improve volunteer recruitment and retention efforts.

The primary purpose of E2 is to provide Volunteers in Medicine of Southern Nevada with both short and longer term recommendations, that if utilized could improve their current volunteer recruitment and retention efforts, benefitting the agency and community as a whole.

E2's methodology employed the qualitative research approach. Qualitative information was found in literature reviews, benchmark comparisons, coupled with staff interviews and field observations.

The major findings in this report are as follows: the importance of recognizing volunteer efforts for all volunteers; volunteer training and task assignment are critical components to volunteer retention; high usage of marketing and social media; efficient procedures for responding to prospective volunteers; and strong collaboration with local medical and hospital organizations.

This evaluation report finds that while Volunteers in Medicine of Southern Nevada's volunteer recruitment and retention efforts are adequate, utilization of the recommendations in this report can further improve recruitment and retention of volunteers.

The results of our evaluation indicated that the ability to improve and increase VMSN's recruitment and retention of licensed medical volunteer staff can be accomplished with the implementation of the following adjustments:

Short Term Recommendations:

- Organizational Improvements (recognition & intake procedures)
- Increased marketing/media exposure

Long Term Recommendations:

- Maintain and Develop New Volunteer Partnerships
- Increased engagement with the Community

The use of literature reviews, benchmark studies and field observation allowed E2 to adequately evaluate VMSN compared to other clinics to create recommendations that would improve VMSN's own volunteering efforts.

We believe these recommendations would assist VMSN in the recruitment and retention, specifically of licensed medical professionals. VMSN has the final say in any implementation of our suggestions and may chose not to implement any aforementioned recommendation. E2 believes these recommendations could be implemented at VMSN efficiently even with limited internal resources.

## 1. Introduction

Volunteers in Medicine of Southern Nevada are a nonprofit volunteer driven agency with two locations in the Las Vegas valley. Their mission is to provide quality health care and support for people without access to health care in the Southern Nevada area with a culture of caring

VMSN was founded in 2008 by a group of visionaries who recognized the significant community issue of residents lacking quality, affordable healthcare in and around Southern Nevada. VMSN's primarily serves the underserved population of those whose income is too high to qualify for Medicaid/Medicare, but not high enough to fully afford private insurance. By providing quality healthcare to this niche segment of society, VMSN services can greatly contribute to the overall well-being of Southern Nevada by reducing the number of uninsured residents who do not receive healthcare, currently estimated to be around 225,000 in Southern Nevada.

As a nonprofit health organization, VMSN provides medical care and support at no cost to uninsured and underserved residents of Southern Nevada. Affiliated with the Volunteers in Medicine Institute (VIMI), a national organization in operation since 1993, VMSN has provided healthcare services to over 25,000 patients in Southern Nevada since its inception. In 2010 VMSN opened their first Southern Nevada clinic at Paradise Park. A second clinic was opened in 2015.

To help convey the importance of the services VMSN can and does provide to our local community, it is important to realize the scope of services Volunteers in Medicine does provide. Today, VMSN is able to provide a variety of healthcare services by means of its volunteers. These medical programs include, but are not limited to:

- *Medical Services:* By means of both Las Vegas clinics, patients are provided with adult and pediatric preventative, chronic and acute primary medical care. Women's care, pediatric checkups and immunization, colorectal, breast and cervical cancer screenings, and laboratory and imaging services. VMSN also provides on-site specialty clinics via a comprehensive network of in-house referral and residency programs
- *Pharmacy Services:* In collaboration with the Roseman University School of Health Sciences College of Pharmacy, VMSN provides direct medication management through the Ruffin Family Clinics onsite pharmacy.
- *Dental Health Services:* In addition to the normal volunteer services of practitioners like dentists and dental hygienists, VMSN works in partnership with the UNLV School of Dental Medicine and College of Southern Nevada Dental Hygiene and Assisting programs.



- *Social & Behavioral Health Intervention Services:* By incorporating social and behavioral health services, VMSN is able to provide patients with access to care coordination and group intervention services. VMSN maintains a partnership with the UNLV School of Social Work and Simmons School of Social Work.

However, VMSN can only provide services with the aid of its volunteer practitioners: licensed medical professionals and student volunteers, and regular volunteers who perform required administrative functions. Recruitment and retention of these individuals, specifically licensed medical professionals, is a challenging undertaking. To facilitate this task, VMSN currently has affiliations with various local educational institutions that provide dental, medical, and social & behavioral healthcare accreditation.

By collaborating with other local organizations, VMSN continues to combat healthcare disparities in Southern Nevada. The value of VMSN cannot be overstated. In 2016, VMSN provided over 7,500 patient visits and over \$1,000,000 in diagnostic tests and \$1,682,125 in free medications. Volunteers logged over 33,000 hours valued at roughly \$974,562.

VMSN has expressed interest in wanting to be able to expand services; however, the need for professional volunteers limits their ability to do at this time. Our evaluation points to VMSN confronting normal “growing pains” as a result of their small number of licensed medical volunteers. Still, VMSN continues to operate as one of the largest Volunteer in Medicine clinics in the nation.

E2 in cooperation with VMSN decided on the following research question “How to increase the effectiveness of VMSN volunteer efforts?” Within this research question, E2 posed the following subset questions: how to retain student professional volunteers and how to increase recruitment of licensed professional volunteer staff. E2 particularly concentrated on licensed volunteer recruitment as this was a need most expressed by VMSN.

To complete a thorough qualitative evaluation for VMSN, E2’s analysis relied on literature reviews, benchmark studies and staff interviews and field observations to evaluate VMSN’s current recruitment and retention efforts in order to best deduce recommendations for volunteer recruitment and retention improvement within VMSN. By reviewing successful volunteer information through literature review, analyzing what other comparable agencies do to recruitment and retain volunteers and in observing and reviewing VMSN’s own volunteer efforts, E2 created the following report to help improve VMSN’s own volunteer efforts.

This section reviews VMSN’s structure and volunteer program. The following sections will include the purpose of our evaluation, our research question and evaluation methodology, our evaluation’s findings, E2’s recommendations and the conclusion of this report.

## 2. Review of Volunteers in Medicine of Southern Nevada

Volunteers in Medicine of Southern Nevada is a nonprofit organization located in Las Vegas Nevada. VMSN's organizational structure can be broken down into three categories: a board of trustees, the hired faculty, and volunteers. Volunteers in Medicine's board are comprised of community healthcare leaders from within Southern Nevada. Hired faculty at VMSN includes Chief Executive Officer Jamie LaFavour, who manages the agency and oversees both Las Vegas locations (Paradise Park & Ruffin Clinic).

In addition, VMSN faculty includes a Volunteer Director; a Medical Director, Rebecca Edgeworth M.D.; a Nursing Director, Dian Ward, RN; a Social Services Director, Tabitha Pederson, A.M., LISW; and a Director of Philanthropy, Shari Bridges, MBA. Volunteers are the most pivotal aspect of VMSN and make up the remainder of organizational structure within the agency.

Volunteers in Medicine's volunteer program really began prior to the opening of its first Las Vegas clinic (Paradise Park) in 2010. Since that time, the organization has served over 25,000 Southern Nevadan's by providing no cost healthcare and prescriptions medications. 650+ volunteers have donated a total of 44,673 hours valued at \$1,324,517.

To become a volunteer at VMSN, a prospective volunteer submits a detailed application which includes a screening process and verification process for licensed professional volunteers. Prospective volunteers are then interviewed and guided through an orientation

process. Licensed medical professionals provide an overview of their upcoming schedules and VMSN schedules medical services for patients based on their licensed medical professional's schedules.

As VMSN does not use hired physicians, their agencies services depend licensed medical volunteers for the bulk of the services they can provide. Volunteers make everything possible at VMSN, the importance of being able to increase VMSN's volunteer efforts.

### 3. Purpose of Evaluation

Evaluation is defined as the making of a judgement; an assessment. In that effect, E2's primary purpose to complete an in-depth evaluation of Volunteers in Medicine of Southern Nevada's volunteer efforts. We narrow our evaluations focus to VMSN's ability to recruit and retain licensed medical professionals and students, who perform vital work for the agency daily.

To complete this evaluation, our team used a variety of qualitative data to best analyze how to improve VMSN's ability to recruit and retain licensed medical professionals and student volunteers. We obtained this data by conducting literature reviews of relevant data; benchmark comparisons of other Volunteers in Medicine agencies within the United States; and in performing staff interviews & field observations at VMSN's Ruffin Clinic.

## 4. Research Question and Objectives

The assessment of Volunteers in Medicine of Southern Nevada and goals for the program evaluation led to the maturity of our research question: *How can we increase the effectiveness of VMSN's volunteer program?* Within this question, we have derived two sub-questions to this research question as follows:

- I. How can VMSN increase their recruitment efforts for licensed medical professional volunteers?
- II. How can VMSN retain licensed medical professional volunteers?

This program evaluation of Volunteers of Medicine of Southern Nevada is intended to provide an overall program assessment, including observations and findings from data collected as well as suggested recommendations to determine if VMSN is effective at recruiting and retaining volunteer staff to maintain and increase their operations and services. This program evaluation will assist Volunteers of Medicine of Southern Nevada at improving their volunteer recruitment and retention abilities. For further information concerning the methodology and findings, please review our benchmarks studies, interviews and observational notes provided later in this paper.

## 5. Evaluation Methodology

The method used within E2's program evaluation for Volunteers in Medicine of Southern Nevada consists of a qualitative approach. Using qualitative data, we identified areas for improvement within VMSN and created recommendations we believe will enhance VMSN's volunteer recruitment and retention efforts. This qualitative analysis includes the aforementioned literature reviews; benchmark comparisons; and staff interviews & field observations.

Since volunteering is a personal decision people choose for a variety of reasons, we felt it is important to attempt to measure these intangible factors which affect volunteerism. In order to best accomplish our goal of increasing VMSN's recruitment and retention efficiency of licensed medical professional volunteers, E2 used the qualitative data collected to provide this in-depth analysis of VMSN current volunteer structure.

### 5.1 Literature Reviews

Literature reviews are a useful methodological approach to reviewing comparable data and studies concerning any particular topic and or organization. E2 examined corresponding literature regarding volunteers and volunteer recruitment and retention programs to thoroughly address VMSN efforts to derive the most optimal recommendations.

Our Team reviewed scholarly articles with current knowledge and information on substantive findings related to volunteerism. As literature reviews are a secondary sources of valuable information, we used scholarly articles as a basis to provide context to our evaluation.

## 5.2 Benchmark Studies

Benchmark comparisons are a crucial methodological way of evaluating VMSN's operations and volunteer capacities in relation to other Volunteer in Medicine (VIM) organizations throughout the United States. There are eighty-eight member clinics across the nation that fall within the Volunteer in Medicine organizational umbrella. E2 evaluators were cognizant of the fact that certain geographic regions of the country with VIM clinics have high percentages of retirement aged individuals, which might skew our analysis of benchmarking similar volunteer recruitment/retention programs for VMSN. As a result, E2 assessed the following variables: population size, population demographics, and patients served annually in other clinics.

It should be noted that Volunteers in Medicine of Southern Nevada is one of, if not the largest VIM clinic operating in the United States. Add to this fact the sheer size and high transience of people living in the Las Vegas valley, the direct number of comparable VIM clinics that might yield pertinent data was small. We chose the top fifteen clinics that were



most comparable to VMSN and reached out to them via email and phone with our main questions are as follows:

- *What are your strategies for recruiting professional licensed volunteers?*
- *What are your strategies in retaining the current licensed volunteers?*
- *Do you offer any incentives for licensed volunteers?*
- *Approximately, how many licensed volunteers are in your agency?*
- *On average, how many months/years do licensed volunteers stay with agency?*
- *How many patients does your office see over the course of a year?*

These six basic questions were derived due to their simplicity. They also obtain relevant information concerning how other VIM agencies recruit and retain licensed medical volunteers that may differ from VMSN. To our surprise, most agencies were very forthcoming with their responses, information we incorporated into our recommendations. Please see appendix for complete list of comparable VIM questionnaire responses.

Ultimately, seven comparable clinics were chosen. Those participating VIM clinics used to review and benchmark include the following:

- Volunteers in Medicine-Jacksonville
- Lakeland Volunteers In Medicine
- Volunteers in Medicine Free Clinics of South Jersey
- Volunteers In Medicine San Diego

- Clinic by the Bay (San Francisco)
- Macon Volunteer Clinic (Macon, GA)
- Volunteers In Medicine Clinic of the Cascades (Central, Oregon)

In obtaining the necessary information from E2's eligible list of comparable clinics, E2 evaluators placed initial telephone calls to each VIM agency to personally introduce our evaluation team and explain the ultimate aim of our evaluation. E2 mentioned our affiliation with UNLV's School of Leadership and Public Policy as graduate students, under the guidance of Dr. Jaewon Lim and of our goal in aiding VMSN's own volunteer efforts. We believe this personal approach yielded dividends for our ability to collect information, as each of our listed VIM clinics did not hesitate in providing and offering additional information for our evaluations success. In reciprocation of these comparable agencies efforts, E2 will be providing copies of this report to those each of these agencies.

E2 then forwarded a questionnaire to willing respondents and waited for the respondents to return the questionnaire. All information obtained was done so either electronically (email) or via telephone conversations with E2 evaluators.

### 5.3 Staff Interviews

Interviews are a useful qualitative tool which allows an evaluator to perceive intangible insights and understandings about a specific program. Our purpose of using interviews was to gain first-hand knowledge into why interviewees chose to volunteer in an attempt to ascertain if any similarities were present. By conducting these interviews, E2 gained valuable data and insight to volunteers' particular perspective and feelings towards their volunteerism.

Qualitative interviewing is useful as it evaluates programs that have individualized outcomes; it captures and describes program processes and allows for an understanding of the meaning programs have to participants. It also allows for documentation of program variations within different site locations, which E2 was unable to perform due to only visiting the Ruffin Family Clinic location.

This qualitative approach of using interviews tested the effectiveness of Volunteers of Medicine of Southern Nevada and assisted in the identification of opportunities the agency could improve upon. For detailed information regarding interview questions, please see Appendix.

An E2 evaluator visited VMSN's Ruffin Clinic campus on two separate occasions. During these visits, brief and informal interviews were conducted in between patients and just prior to volunteers completing their volunteer shifts.

## 5.4 Field Observations

Observations provide much raw data from a qualitative perspective. By observing the quality of VMSN's services firsthand, E2 evaluators were able to accurately analyze how VMSN operations may differ from literature review studies and our benchmark comparisons, to best provide recommendations that would be useful and effective for VMSN.

One of E2's evaluators first visited Volunteers in Medicine of Southern Nevada on Thursday June 28th, 2018 and again on July 14th, 2018. The initial visit was conducted on June 28th, 2018 and included a field observation of VMSN's entire day of operations as well as interviews with staff. The second visit conducted on July 14th consisted primarily of staff interviews along with a brief field observation of VMSN.

- **June 28th, 2018**

Evaluator was present for full day of operations at VMSN. The day began with a morning briefing conducted by VMSN Volunteer Director Lisa Curran. Morning briefing's occur daily at VMSN and are intended to provide VMSN volunteers with an overview of the day's operations and goals. After the "morning huddle," volunteers including licensed medical volunteers and administrative volunteers' assignments for the day are confirmed.

VMSN operations were observed to be efficient with various redundancies. Volunteers' assignments are provided via email, in morning briefings and on a medical assignment wall located within the agency. Licensed medical professionals are able to choose their own volunteer shift/hours and arrived accordingly. On an average basis, VMSN operations accommodate two to three doctors to provide VMSN services for their clients. Each licensed doctor is assigned two medical student volunteers, one nurse volunteer and a scribe volunteer. Efforts are made to assign particular student, nurse and scribe volunteers when specifically requested by a particular doctor. Deference is also provided to licensed medical doctor/volunteers in how VMSN structures their volunteer shifts.

Assigning medical student volunteers, a nurse volunteer and a scribe with each doctor volunteer is intentional. This VMSN practice reduces paperwork and administrative tasks doctors might otherwise have to perform, allowing doctors to focus more on patient care and their volunteer shift than red tape.

A typical VMSN client is seen as follows: a client arrives and completes necessary paperwork prior to being seen. Medical student volunteers then prep the examination room as well as the patient by taking regular medical assessments, such as blood pressure and temperature. Once completed, licensed doctor volunteers assess the patient and provide a medical examination service/care. During this examination the assigned volunteer scribe takes notes for their assigned doctor volunteer. This practice

allows the volunteer doctor to exclusively focus on their patient. This also reduces paperwork and allows for efficient processing of VMSN patients. Once the examination is complete, the doctor volunteer usually staffs the situation with their assigned nurse volunteer and verifies all required notations are made by their scribe. The doctor volunteer then preps for the next patient by reviewing medical history while their assigned student and nurse volunteers discharge the current patient before preparing for the next patient on any given doctor's daily schedule.

VMSN procedures were observed to be tailored with their licensed medical doctor/volunteers in mind. Evaluator observed how VMSN practices allow doctor volunteers to practice medicine where medicine is the focus of their volunteer shifts. Paperwork, routine examination assessments (blood pressure, temperature, current medications) is gathered and completed by student and nurse volunteers, allowing doctor volunteer shifts to focus entirely on medicine and patient care. Interviews with licensed medical nurses and doctor volunteers also suggest that increased patient care and the lack of paperwork is a great asset and continuing reason why medical doctors take time to volunteer at VMSN.

- **July 14th, 2018**

Evaluator was present for half day of VMSN operations. Evaluator arrived after “morning huddle” was conducted and doctor volunteers at VMSN for the day had already began seeing their daily patients. Evaluator conducted interviews with student volunteers, nurse volunteers and doctor volunteers in between their patients and tasks.

Evaluator explained the importance of this qualitative information and how it might assist VMSN with volunteer recruitment and retention. Evaluator completed interviews with each volunteer prior to beginning a new interview with a volunteer. Interviews were conducted individually in an empty examination room available at VMSN.

Volunteers were not provided access to previous interview responses and were advised their identities would not be disclosed for participating in these qualitative interviews.

Evaluator had brief discussions with student, nurse and doctor volunteers prior and after exchanged interviews. Several of those comments and observations are included in the evaluation section of this report.

## 6. Evaluation Findings

For supporting evidence to the methodology used in this evaluation we drew from examples in two specific areas or fields of study, why evaluations are important and how to improve volunteer recruitment and retention rates. Our findings suggest improvements will increase volunteer recruitment and retention rates within VMSN. In this section, E'2 provides an in-depth review and analysis of our collected qualitative data.

### 6.1 Literature Reviews

In completing our literature review of relevant scholarly articles concerning volunteerism, with specific reference to recruitment and retention, this report highlights three key findings:

- Recognition is a necessity for volunteerism, not a courtesy
- Volunteers require training
- Place the right volunteer (and their specific skill sets) in the right position

VMSN should always be sure to recognize the hard work of volunteers, recognizing the work and time volunteers put in matters and this should be done in a personal way that makes the volunteer feel both valued and appreciated."Nonprofits need to recognize volunteers both through an organizational culture that values them and through specific appreciation ceremonies and events. In their annual reports, most nonprofits list all individual donors categorized by the amount of money they have donated. Very few nonprofits, however, do the same for people who donate their time. Naming individual



volunteers with the number of hours they have contributed (and perhaps the dollar value) is one way to demonstrate a culture that values volunteer" (Eisner and Grimes, 2009).

Make sure all volunteers are properly trained and invest in them, they are your future."Volunteers need training to understand the organizations with which they are working and employees need to be trained to work with volunteers. Nonprofits rarely invest substantial amounts of time or money in volunteer recruiters and managers" (Bussel and Forbs, 2002). Proper training is critical, they will need direction and guidance and there should be an organizational manager whose job responsibilities are to help with volunteer training and development. An organization MUST invest in their volunteer workforce and help them excel in their position.

Make sure that every volunteers talents are being used effetely, it is a top reason behind why they leave. "All too often volunteers with valuable and specialized skills are often dispatched to do manual labor rather than tasks that use their professional talents" (Sowa, Selden and Sandfort, 2009). If a volunteer, specifically a licensed medical volunteer does not feel their specialized skill set for which they are volunteering is not being utilized, they are not likely to volunteer for the long-term.

## 6.2 Benchmark Comparisons

E2's benchmark comparisons provided valuable insights into the structure and implementation of similar volunteer programs at other VIM agencies. Using data obtained and analyzed from E2's list of contacted comparable agencies, our evaluators created

suitable recommendations related to the improvement of the recruitment and retention of medical professional volunteers at VMSN.

All of the clinics E2 contacted noted the difficulty and importance of maintaining efficient volunteer recruitment and retention efforts. The ability to convince and sign-up new physicians that are willing to volunteer their time and services is not an easy task for any agency. As such, our benchmark analysis was instrumental in reviewing and selecting effective volunteer programs that could make a difference for Volunteer in Medicine of Southern Nevada's operations.

Of the comparable VIM clinics we performed a benchmark analysis on, the following were all findings related to recruitment and retention within each of the VIM facilities analyzed:

- Use of Social Media (Facebook, Twitter, Instagram)
- Volunteering at Health Fares/Events
- Church outreach/ speaking engagements
- Free advertisement (newspaper ads, e-newsletter ads, mail)
- Open houses/ tours for local citizens and Physicians
- Being proactive once a volunteer form is filled out

In fact, nearly all of the agencies used similar or identical processes to recruit medical volunteers for their clinics. VMSN on the other hand primarily relies only on associations and partnerships they maintain with local medical and training schools and hospitals.

The first finding E2 would like to discuss pertains to the level of social media engagement VMSN conducts compared to other VIM clinics. Our benchmark analysis shows that nearly every other VIM clinic reached use social media relations heavily in the recruitment of potential medical volunteers. By creating hashtags, other VIM clinics utilize a short and expeditious communication platform that provides information about needed volunteers, volunteer requirements and locations where volunteers might be needed. In contrast, VMSN solely relies on the organization's website as the only electronic platform to engage potential volunteers. The heavy use of social media by other VIM clinics also leads to free advertisement and increased community engagement as more prospective volunteers and patients learn about the agency.

Two other key findings common within our benchmark analysis includes agency participation in health fairs and community activities, such as church outreach and special events. By reaching directly into their local communities, other agencies both advertise, recruit and retain volunteers through their participation in these various community and special events.

Other the other common findings identified that are seen to benefit recruitment efforts, the procedure and processes VIM clinics implement once a prospect volunteer is identified seems to be the most relevant.

All of the compared agencies have organizational processes in place to make contact with prospective volunteers the same day interest is expressed. VMSN's volunteer intake process currently allows for up to three days before potential volunteers are contacted and the application process begins. This excess amount of time allows for the possibility prospective volunteers lose interest.

Of the comparable VIM clinics we performed a benchmark analysis on, the following were common findings related to retention that are present within each of the VIM facilities analyzed includes:

- Hold Appreciation parties or annual/quarterly recognition events
  - Clinic By The Bay
  - Macon Volunteer Clinic
  - VIM Jacksonville
  - VIM San Diego
  - VIM Clinic of The Cascades
- Provide snacks, coffee, or conduct "weekly/monthly pizza parties"
  - Clinic By The Bay
  - VIM South Jersey

- VIM Jacksonville
- VIM Clinic of The Cascades
  
- Allowing the physician to choose hours, days, and how volunteers to see in a day
  - Clinic By The Bay
  - Macon Volunteer Clinic
  - VIM Jacksonville
  
- Partnership with local business' that volunteer services or food
  - Macon Volunteer Clinic
  - VIM Jacksonville
  - VIM Clinic of The Cascades
  
- Show recognition with gifts or volunteer milestone achievement mementoes
  - Macon Volunteer Clinic
  - VIM Jacksonville
  - VIM Clinic of The Cascades

Of the identified above similarities comparable VIM clinics implement to retain their volunteers, E2 stresses the importance of providing small luxuries and courtesy's towards those who volunteer at Volunteers in Medicine of Southern Nevada. For example, most of the benchmarked clinics provided snacks, soft drinks and minimal snacks during volunteer

shifts. These items were either donated or purchased financially by the clinics. By providing snacks to their volunteers, the VIM clinics created an atmosphere of appreciation, where volunteers' efforts were saluted and encouraged.

Another common action other clinics employed was the use of appreciation events for their volunteer staff. These events improve moral and highlight the volunteerism that makes VIM agencies successful and operational. Many of the clinics analyzed had created partnerships with local businesses that provided catering for these events and little or no cost due to the nature of services VIM clinics provide to their local communities.

As our benchmark analysis continued, it became apparent that most of the relayed actions other VIM clinics were undertaking were related to the moral of volunteers. Another of these approaches included providing individualized appreciation and attention to volunteer staff by means of recognizing birthdays, holidays and in providing awards for their time and work. Often small actions yield the largest dividends. For example, many clinics have a centralized plaque to recognize milestones, such as total volunteer hours. One clinic in particular provides polos, clothing pins, and badges to distinguish between seniority amongst volunteers. These actions require little financial backing and create a synergistic effect on retention and recruitment efforts.

## VIM PROGRAM COMPARISONS

	VMSN (Southern Nevada)	Jacksonville VIM	South Jersey - Atlantic County	VIM San Diego	Clinic by the Bay- San Francisco	Macon Volunteer- Macon, GA	VIM Clinic of the Cascades- OR
Population	2,204,079	892,062	1,251,521	3,337,685	1,655,773	35,982	233,756
Licensed Volunteers	107	112	100	30	25	250-300	87
Annual Patient Visits	7500	6000	550	2500- 3000	1700- 2000	5294	1000
Patients per Physician (Annual)	70	53	5.5	83-100	68-80	21-17	11

Source: U.S. Census Bureau

## Individual Agency Comparisons

Below is an overview of the programs we chose to administer our benchmark studies. This is only six of the fifteen VIM agencies we contacted. Below includes a brief summation of each of the six clinics we chose, why we believe they are comparable and a highlighted synopsis of what they specifically do well in terms of their volunteer and retention efforts.

- **Jacksonville**

The first comparable VIM Clinic reviewed is in Jacksonville, Florida. Jackson is viewed as a comparable clinic to VMSN as the clinic serves an estimated population of roughly 892,062 in 2016. The demographics of the Jacksonville area are also similar to Las Vegas in that the population is known to be more transient than the national average.

Jacksonville primarily recruits medical professional volunteers via their current medical professional volunteers. Using a “personal word of mouth” approach, Jacksonville has created a community of medical volunteers that can utilize to adequately staff their agency. Jacksonville also uses extensive advertisements through local publications such as Spanish-language newspapers, local periodicals and community outlets. Jacksonville also initiates various volunteer support actions, such as providing snacks and recognizing volunteerism through appreciation certificates and awards.

Jackson has also taken some specific steps to promote and encourage medical professional volunteerism throughout their organization. This clinic provides full 30 minute examination



appointments to allow physicians more time with patients to focus on medical healthcare. This fact is highly stressed between current medical volunteers and prospective medical professional volunteers, as patient time is rare in the healthcare industry.

Currently, Jacksonville has a plethora of volunteers that have been with their agencies for years. 19% have been volunteering for over 10 years; 19% have been volunteering for 5-10 years; 36% have been volunteering for 1-5 years; and 26% have been there for less than one year.

- **South Jersey – Atlantic County**

The second comparable agency we reviewed was the South Jersey – Atlantic County clinic. The population of this region also compared favorably to the Southern Nevada. With a population of 1,251,521, South Jersey represents one of the most comparable agencies population wise with VMSN. However, the population of South Jersey tends to have higher incomes and educational levels than the population of Southern Nevada that should be considered. The South Jersey also services a smaller number of patients' percentage wise than VMSN does. This is largely due to the increased amount of cooperatives and social services agencies in the South Jersey area that benefits that population in terms of healthcare.

South Jersey is very successful at recruiting nurse volunteers. South Jersey credits this success to regular and consistent participation in local health fairs, churches and other civic events and special events that highlight their services and need for volunteers. South Jersey also conducts advertising with local, free ads in regional papers and outlets. South Jersey maintains no specific recruitment or retention program. Rather South Jersey has a process; they believe is effective at onboarding and retaining prospective volunteers. This includes determining the level of patients volunteer physicians would like and the level of follow-up they are willing to engage in. South Jersey provides great deference to accommodate physicians' schedules. South Jersey also provides snacks and beverages for their volunteers.

- **VIM San Diego**

Another comparable clinic E2 reviewed in our benchmark analysis was VIM San Diego. With a population size of 3,337,685, the San Diego clinic provides services for a slightly larger population center than does VMSN within Southern Nevada. Demographically, the population of San Diego is also similar to Southern Nevada in terms of age, transience and healthcare needs. San Diego however is not experiencing a great a shortage in medical professionals as Southern Nevada currently is.

Serving approximately 3000 patients annually, VIM San Diego serves roughly half the patients VMSN does. However, San Diego has implemented a recruitment approach that includes maintaining participation with three different recruiter specific websites that

match prospective volunteers with agencies in need. VIM San Diego also collaborates with the San Diego Medical Society, providing lectures at their retired physicians meetings, which yields regular new medical volunteers.

VIM San Diego is also unique in that the clinic hosts a quarterly dinner event for all medical professional volunteers to attend at no cost. At this meeting, physicians are able to address their concerns and San Diego clinic staff work to develop and maintain personal networks with their physicians in the hopes current medical professional volunteers will be successful in bringing over other medical professional volunteers.

- **VIM Clinic by the Bay-San Francisco**

Another comparable clinic included in E2's benchmark analysis was the Clinic by the Bay in San Francisco. In terms of population, Clinic by the Bay primarily serves the counties of San Mateo and San Francisco, which combined carry a population of roughly 1.6 million people. E2 evaluators again considered the demographic differences of this region as its population tends to be healthier and more educated than Southern Nevada as a whole. The Bay area population also has significantly higher incomes than people in Southern Nevada.

Clinic by the bay sees on average 1700-2000 patients with only volunteer staff of twenty-five medical professional volunteers who regularly volunteer once or twice per year. Clinic by the Bay is a VIM clinic that is active in social media engagement. This is not surprising

given the Clinic's proximity to the Silicon valley, the technology capital of the world. Clinic by the Bay regularly posts on social media and is active in community outreach efforts. Clinic by the Bay also consistently updates and improves their organization's website as roughly over half of the clinic's prospective volunteers apply through their website. Clinic by the Bay is another VIM clinic that uses appreciation efforts such as free snacks and beverages to their volunteers.

- **VIM Macon Volunteer-Macon, GA**

One of the final clinics we included in our benchmark analysis was the Macon Volunteer Clinic in Macon, Georgia. With a population just under 40,000, the Macon Volunteer clinic does not favorably compare to Southern Nevada. While the general population of this area does not correlate well to Southern Nevada's, the actual population of those served by this clinic mirrors Southern Nevada's who utilize VMSN services.

The Macon Volunteer clinic has strong relationships and partnerships with local community organizations, medical schools and hospitals which allow the clinic to recruit and retain medical professionals with relative ease. The Macon Volunteer clinic also offers small incentives to encourage retention. For example, this clinic provides continuing education credits that are recognized by the Georgia Medical Composite Board and clinical ladder hours for nurses and nurse practitioners as well as providing snacks and beverages to current volunteers.

The Macon clinic also hosts a volunteer appreciation event to highlight the spirit of volunteerism and where top volunteers can be recognized and celebrated. Additionally, the Macon clinic has a wonderful partnership with the Mercer University Medical School where faculties rotate on a monthly basis to the Macon clinic.

- **VIM Clinic of the Cascades-OR**

The last comparable clinic E2 evaluated in our benchmark study was Clinic of the Cascades in Central Oregon. Serving a population of approximately 233,756, Clinic of the Cascades serves a smaller population than does VMSN. Still, their individual recruitment and retention efforts reinforce what our benchmark study thus far demonstrates, that various actions can improve and increase volunteerism within medical professional volunteers.

Clinic of the Cascades uses a “word of mouth” strategy as their main marketing technique. At Clinic of the Cascades, the volunteer manager will regularly follow up on medical professional volunteer leads by making contact and inviting prospective volunteers for a visit to the clinic. These potential medical volunteers are then referred to the clinic’s medical director for follow-up discussions. The main point at Clinic of the Cascades is to be very proactive in following up on potential and disclosed volunteer leads.

Clinic of the Cascades uses a similar, informal approach towards their retention efforts. Clinic staff attempts to address every concern they can control for medical professional

volunteers, to ensure medical volunteers are satisfied and motivated to continue volunteering their time at the clinic. Snack and beverages are provided, much like other VIM clinics. Clinic of the Cascades also hosts a recognition program where volunteers receive mementos acknowledging their volunteerism and a recognition banquet is held annually.

### 6.3 Staff Interviews

Interviews conducted with licensed medical professionals and training medical professionals provided valuable insight and knowledge into internal aspects of Volunteers of Medicine of Southern Nevada. Participant information pertaining to actual names and title information are not published in this evaluation. The participant's responses are summarized below, for actual interview questions, please refer to Appendices.

E2 conducted informal interviews with volunteers at the Ruffin Family Clinic in Southern Nevada to obtain first-hand information pertaining to the recruitment and retention of volunteer staff.

The following questions were asked in sequence to those interviewed:

- *Why are you volunteering at VMSN?*
- *What was the biggest challenge/obstacle to volunteering at VMSN?*
- *Do you feel supported volunteering at VMSN?*
- *Have you observed any impacts from volunteering with VMSN?*
- *Recommendations to assist with the recruitment/retention of future volunteers?*

Based on the summarized interview responses to these questions, the following are the major conclusions from our interview findings.

**1. Medical student volunteers do so nearly entirely as a requirement of their medical school requirements**

Our first conclusion highlights the importance and need for VMSN to have effective partnerships with local medical schools and training sites to augment their already signed up student volunteers.

**2. 80% of medical student volunteers interviewed state they would not continue to volunteer once their school hours have been completed**

The knowledge that all, if not most student volunteers will volunteer only so long as they continue to require medical training hours means VMSN should focus efforts for student volunteers on the retention side.

**3. Scheduling does not appear to be an obstacle or constraint for student volunteers**

Student volunteers differ greatly from licensed volunteers as their required training hours serves as a personal incentive. Student volunteers present as more likely to accommodate scheduling needs at VMSN due to requiring completion of their hours.

**4. Roughly two-thirds of VMSN's doctor volunteers are retired**

A majority of VMSN's licensed volunteers are retired and have the flexibility to volunteer weekdays and during normal business hours. VMSN regularly operates Tuesday through Saturday, 8am-5pm.

**5. Scheduling and awareness appear to be the greatest impediments for licensed volunteer retention**

Scheduling conflicts, in terms of when licensed volunteers can actually volunteer greatly impacts those willing and able to volunteer at VMSN. Additionally, the lack of awareness and need limits licensed medical professionals from knowing they can volunteer their services and time at VMSN.

**6. Doctor volunteers believe greater outreach via marketing and awareness would yield the best results in recruiting more licensed volunteers**

Several interviewed licensed medical professionals stated they themselves only became aware of VMSN through charity events and/or word of mouth from friends already volunteering their time at VMSN. Interviewees are largely in agreement that increased marketing would lead to increased pools of prospective volunteers, likely in all volunteer areas.



Overall, interview responses highlight the need for increased marketing and awareness for Volunteers in Medicine of Southern Nevada as well as an increased ability to accommodate licensed professionals schedules might lead to increased recruitment and retention efforts within the pool of licensed medical volunteers.

## 6.4 Field Observations

Upon evaluating Volunteers in Medicine of Southern Nevada during normal business operations, we made observations on the process volunteers engage in while volunteering at VMSN for both licensed medical professionals and regular administrative volunteer staff. Our analysis details observations almost entirely focused on licensed medical volunteers.

Our focus on licensed medical professional volunteers stems from the increased need VMSN has for licensed medical professionals. Licensed volunteers were observed arriving at VMSN just prior to their scheduled shifts. Licensed volunteers were not required to attend or be present for morning huddles. Licensed volunteer staff was observed doing very little administrative functions, as those tasks were performed by volunteer nurses, medical students and scribes. Evaluator observed several licensed volunteers arrived just prior to their shift and then leaving immediately after their volunteer shift. These observations enforce the idea that much of the “red tape” and time consuming tasks these professionals might have to partake in have been eliminated from their volunteer shifts in efforts to streamline and improve their volunteer shifts.

The following bullet-points are observations considered to be areas of strength for VMSN to increase their effectiveness in the recruitment and retention of licensed volunteers:

- Deference to licensed volunteers for scheduling/shifts at VMSN
- Licensed volunteers are assigned nurses, student volunteers, and a scribe to limit/reduce the amount of administrative functions doctor volunteers must engage in during volunteer shifts
- Doctor volunteers freely provide guidance and assist with training student volunteers
- Doctor volunteers can form relationships and build rapport with their patients through increased examination time

The following bullet-points are observations considered to be areas in need of improvement for VMSN to increase their effectiveness in the recruitment and retention of licensed volunteers:

- Administrative volunteers give deference to licensed volunteers who do not fully or thoroughly understand VMSN policies and procedures
- VMSN has a limited number of licensed volunteers to administer medical services on any given day
- VMSN does not conduct daily exit surveys or provide a means for licensed volunteer staff to ask for assistance or notify of VMSN of volunteer issues

## 7. Recommendations

The recommendations created by E2 evaluators were created using the qualitative data outlined in the report above. This data includes relevant information via our literature reviews, benchmark analysis and interviews & field observations. E2 developed and categorized our recommendations as either short-term recommendation or medium to long-term recommendations. Based on discussions held with VMSN executive staff, E2 set out to develop recommendations and strategies that might assist VMSN with meaningful data and recommendations to aid with VMSN's recruitment and retention efforts of medical professional volunteers.

This section of E2's report highlights these recommendations, including a brief justification for this recommendation as well as strategies VMSN might take to implement the recommendation.

### 7.1 Short Term Recommendations:

- **Organization Improvements**

A variety of low cost fundraising tools are available to VMSN. For example, VMSN could incorporate a fundraising portal into their website, allowing website visitors and prospective volunteers the opportunity to provide funding to VMSN. These funds could be used for a variety of facets, specifically in VMSN's organizational realm, towards volunteer recognition efforts.

By continually recognizing their volunteers, VMSN creates a synergistic word of mouth effect among its volunteers that can permeate the community. This word of mouth marketing increases both volunteers and retention as prospective volunteers become aware of a highly regarded agency where they can donate their services and time. E2's findings, including from all three qualitative methodologies used in this report highlight the importance of volunteer recognition. More so than employees, volunteers want to be recognized for their time. Donating your services and time is highly valuable and should be treated as such. Providing increased amenities boosts moral and furthers positive word of mouth for the agency.

It is also important that VMSN properly address prospective volunteers, specifically, licensed medical professionals who are expressing an interest in donation both their services and time. Most of the agencies reviewed in our benchmark studies that expressed no limit or serious need for licensed physician volunteers had procedures in place to immediately respond same day to prospective professions. These professionals were usually referred to the agencies medical director, much as VMSN does now, however, E2 stresses this was done within hours of contact in comparable clinics.

- **Increased Marketing**

Increasing visibility is vital for Volunteers in Medicine of Southern Nevada as the agency and community grow in tandem. By publishing volunteer needs in local publications, to low cost advertising on public radio, VMSN has the opportunity to reach an increasingly

diverse population within Southern Nevada. This will increase the clinics exposure to both patients and prospective volunteers.

Participating in events like “Health Week” or hosting an information booth at local and special events continues to provide exposure for VMSN and increases the pool of potential volunteers. Staffing these information booths with volunteers is a useful strategy to recruit more volunteers and allows VMSN to provide current volunteers the task of helping to recruit more volunteers. Volunteers recruiting volunteers is a main method many comparable VIM clinics used. Informal staff interviews also highlighted the fact that many current VMSN volunteers knew a current licensed volunteer before deciding to volunteer themselves.

## **7.2 Medium to Long Term Recommendations:**

- **Maintain & Develop New Volunteer Partnerships**

VMSN has the opportunity to establish a strong foundation with UNLV’s emerging medical school. By fostering a strong partnership now, VMSN will be able to capitalize for years on the potential pool of new licensed medical professionals who may require and/or want patient hours for residency or accreditation purposes. E2’s benchmark analysis and staff interviews again highlight the importance of nurtured relationships and the benefits they yield.

Other success volunteer programs in comparable VIM clinics had strong relationship with medical schools or charitable medical foundations that assisted them in locating and retaining medical volunteers. Continue to foster VMSN's current relationship with Roseman University. This institution provides a growing number of volunteers for VMSN and can be a strong recruitment tool as they have a national presence.

- **Increased engagement with the Community**

VMSN could participate in more community events. Las Vegas hosts more fair, exhibitions and local events than most cities in the United States, regardless of population size. Engaging in the community in more of these sponsored events would expand awareness about VMSN to more and more of Southern Nevada while also increasing volunteers.

Creating and distributing pamphlets specifically targeted to licensed medical volunteers when authorized and providing them at every local area hospitals, in breakrooms and medical stations would increase awareness of VMSN services and likely result in increased applicants.

## Conclusion

The purpose of the Volunteers in Medicine of Southern Nevada program evaluation was to understand and analyze ways in which VMSN can increase the effectiveness of their volunteer recruitment and retention efforts. Done correctly, evaluations can be beneficial forms of information for organizations to utilize in improvement efforts. To complete our evaluation, E2 used a straight forward qualitative approach using the aforementioned literature reviews, benchmark studies, and staff interviews & field observations. In order to accomplish and obtain this research data, E2 reached out and corresponded with various national VIM clinics in addition to conducting field observation and staff interviews. E2 believes our literature review provides a structural foundation for what is most important in volunteer recruitment and retention and correlates to E2's overall findings and recommendations.

Overall, the recommendations suggested by E2 include the following: organizational improvements, such as quicker response times for prospective volunteers and more recognition efforts. Increased marketing and media exposure, many comparable VIM clinics have found great success and increased volunteer recruitment of both licensed and student medical volunteers through social media and free media publications. Longer term recommendations E2 believes VMSN should implement include: maintaining and developing collaborations with medical schools and hospitals. The Las Vegas area is currently a new medical school which may yield new relationship opportunities in the future. VMSN should also increase their engagement with the community. This recommendation, while similar to increased marketing

efforts, is more specific to engaging in training seminars and community events that raise awareness and builds a long term relationship between VMSN and the Las Vegas area.

E2 believes this program evaluation includes valuable information for VMSN and future program evaluators to utilize for current and future recommendations for VMSN. E2's recommendation should improve VMSN's efforts to recruit and retain valuable licensed volunteers, which will in turn yield to increased services and community benefits to the region.



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## Appendix

Listed below are the exact email responses from our benchmark study. Everything is word-for-word from the specific agency that participated.

### (Clinic By The Bay)

1. What are your strategies for recruiting professional licensed volunteers?
  - The Majority of our applicants apply to our clinic after finding us on a web search. We also get about 30% of applicants who apply because of word by mouth. Our strategy is to stay active on social media and to attend outreach events. During outreach events we try to obtain patients and volunteers.
  
2. What are your strategies in retaining the current professional licensed volunteers?
  - We provide scribes to our Licensed Medical Providers. We also make a point to show our gratitude and have an annual appreciation party for volunteers.
  
3. Do you offer any incentives for licensed volunteers? (e.g., gift cards, transportation vouchers, fuel reimbursement)
  - We will sometimes host social events and have parties that offer the chance to win prizes.
  
4. Approximately, how many licensed volunteers are in your agency?

- Around 25.
5. On average, how many months or years do the licensed volunteers stay with your agency?
- Roughly 1 year on average.
6. How many patients does your office see over the course of a year?
- We have between 1700 and 2000 patient visits a year.

**(VIM South Jersey)**

1. What are your strategies for recruiting professional licensed volunteers?
- Nurses are much easier than providers. We participate in local health fairs, church outreach (to include church bulletins) and outreach to religious and civic groups, lots of speaking engagements and e-newsletters. We have some success with free ads in area papers that promote “what’s happening in the community”. E.g. they will run an ad saying VIM has an immediate need for nursing volunteers.
2. What are your strategies in retaining the current professional licensed volunteers?
- We give them VIM Kool-aid! Honestly, our volunteers never leave us willingly. They get great joy out of providing care within our Culture of Caring and on their terms. We onboard new providers to determine how many patients per shift they want, what level

of follow-up do they want when they are not on duty, etc. and then we adhere to their requirements.

3. Do you offer any incentives for licensed volunteers? (e.g., gift cards, transportation vouchers, fuel reimbursement)

- No We provide malpractice and keep our kitchen stocked with sweets and baked goods.

4. Approximately, how many licensed volunteers are in your agency?

- About 100 total volunteers, more than half are licensed.

5. On average, how many months or years do the licensed volunteers stay with your agency?

- Forever / as long as they can. We have volunteers who have been here since opening day (16+ years ago). Of course some retire/move away, leave for a personal issue e.g. sick family member but rarely does anyone “quit”.

6. How many patients does your office see over the course of a year?

- Our main clinic has been open 16+ years and has an active patient panel of 450. Our satellite clinic has only been open a year and has an active patient panel of about 100. Most patients are seen about 5-6 times per year for various reasons.

[\(Macon Volunteer Clinic\)](#)

Our clinic is fortunate to have community partnerships with neighboring schools and hospitals, including:

Mercer University School of Medicine – Family Medicine & Residency Program and LMFT department

Central Georgia Technical College – School of Dental Hygiene

Navicent Health – discounted services and a surgery program called S.P.I.N. (Surgery for People In Need) offering out-patient type surgeries

Coliseum Healthcare HCA – discounted services

In February 2018, our clinic celebrated its 15<sup>th</sup> year since our inception in 2003. Through years of networking, attending community health fairs, making presentations among corporations, civic and garden clubs, churches, Rotary and Career Women’s Network, social media promotion, mail outs, clinic tours, open houses, etc., we’ve been able to educate the local and regional population of our mission and the services we provide. We can always do more as we have more people to reach and provide health care to. Through our community partnerships as listed above, we’ve been able to educate the medical professionals within our community of our needs and request their help to serve.

We do offer incentives to encourage retention (i.e., providing free sovereign immunity through the Georgia Volunteer Health Care Program, continuing education credits as recognized by the Georgia Medical Composite Board, clinical ladder hours for nurses and nurse practitioners, recognition through the President’s Volunteer Service Award Program); however, I think our

staff has had a lot to do with making our providers feel welcomed, needed, and appreciated...which creates a wonderful, positive working environment. Providers are able to enjoy practicing medicine without the worry of every day headaches they may face, or had faced, when working from their own practice.

Each spring, we host a volunteer appreciation event and recognize our top volunteers while also celebrating the spirit of volunteerism. It's a fun and relaxed evening of just coming together as friends, rejoicing in our patient care accomplishments. We also invite non-active medical partners to come as a way to recruit potential new team members. In the fall, we partner with two other local non-profit agencies and host a two-day golf and clay shoot tournament/silent auction and dinner program.

Some of our core medical team members have been with us for as many as 10-15 years. Mercer University Medical School faculty rotate on a monthly basis as their 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> year medical students shadow them while caring for patients here. Residents, which are placed with us through Navicent's Family Health Center rotation program, will stay with us for just a few months at a time. We are at the mercy of when our providers are willing to gift their time and services so we remain flexible and keep in communication with a database of providers of our current and future needs.

We have a breakroom at the clinic and invite people within our community to host meals, supply coffee/donuts, snacks, etc. to treat our volunteer team. A local business provides us

with free Styrofoam coffee cups year round. A local pizza parlor provides free pizzas once a month. We do quarterly drawings for gift cards at local restaurants on occasion.

For on-site and off-site volunteers, we fluctuate between 250-300 active licensed health care professionals including nurses, nurse practitioners, medical doctors, dentists, hygienists, mental health therapists, specialists including dermatology, orthopedic, gynecology, dietary/nutrition counseling, endocrinology, ophthalmology, phlebotomists, etc.

In 2017, our patient encounters totaled to 5,294.

#### (VIM Jacksonville)

1. What are your strategies for recruiting professional licensed volunteers?

- I have found that the best way to recruit providers is through other providers who are already with us. Also, we have “advertised” through articles in various publications such as the local newspaper, Spanish newspaper, medical periodicals, Florida Academy of Family Physicians, local magazines, the medical society, and we use our community contacts. Pharmacists we have recruited through their local association and again through current volunteers.

2. What are your strategies in retaining the current professional licensed volunteers?

- Retention is like any other volunteer. We try to accommodate all volunteers in making the schedule and carrying out their wishes as much as possible. We get to know our volunteers and engage with them every time they are here. We provide support such as



good nursing help for providers and ease of use with the EMR. We have 30 minute appt which our medical folks like because it gives them more time with patients. We have volunteer snacks available and do appreciation letters, parties, etc. We have a plaque that honors 500 hour or more volunteers that hangs permanently in our lobby. Many folks shoot for that milestone and we give them a special badge for that.

3. Do you offer any incentives for licensed volunteers? (e.g., gift cards, transportation vouchers, fuel reimbursement)

- No

4. Approximately, how many licensed volunteers are in your agency?

- About 112

5. On average, how many months or years do the licensed volunteers stay with your agency?

- I do not have an average but there are some volunteers who have been here since we opened 13 years ago! I can give you the following % of our current base:

19% have been here over 10 years, 19% have been here 5-10 years, 36% have been here 1-5 years, and 26% have been here less than one year.

6. How many patients does your office see over the course of a year?

- We see about 6,000 visits a year

### (VIM San Diego)

1. What are your strategies for recruiting professional licensed volunteers?

- We are on 3 different web sites to recruit volunteers volunteer match, network for good and our own; we send out email messages to existing volunteers when we have a need for a specific volunteers; we partner with the San Diego Medical Society and speak at their retired physicians meetings; our Medical Director is a retired Kaiser doc and he has a pipeline into docs who may be retiring or interested in volunteering.

2. What are your strategies in retaining the current professional licensed volunteers?

- We have a quarterly dinner meeting that medical providers attend; one of the docs or another community medical provider gives a presentation; they share case info - get to know each other;

3. Do you offer any incentives for licensed volunteers? (e.g., gift cards, transportation vouchers, fuel reimbursement)

- No we do not offer incentives besides paying for their dinner at the quarterly meetings; we do pay the DEA fee for our Medical Director

4. Approximately, how many licensed volunteers are in your agency?

- 14 Medical Providers, 12 Registered Nurses, 4 phlebotomists

5. On average, how many months or years do the licensed volunteers stay with your agency?

- docs - long time Medical Director has been with us 11 years; our acupuncturist just moved to Hawaii and she was with us 3 years - everyone else has been with us longer 6-8 years

6. How many patients does your office see over the course of a year?

- 2500-3000 patients each year

**(VIM Clinic of the Cascades)**

1. What are your strategies for recruiting professional licensed volunteers?

- This is largely word of mouth. As we hear of new physicians in our community, our Medical Director will make a call and find out more about them and invite for a VIM visit. Most of the time I am the one who gets inquiries by phone, email or drop-in. If it's a physician, I'll turn them over to the Medical Director for follow-up. All others are called and invited to submit their application. We never let an inquiry just "drop"

2. What are your strategies in retaining the current professional licensed volunteers?

- All of our staff and volunteers understand that it is critical for us to make sure that ALL volunteers are satisfied (HAPPY) with their work here and tell them in multiple ways. We say "thank you" daily, provide snacks and coffee to make their visit more comfortable, and provide Tue. Night dinners from local restaurants to help make a

volunteer's visit social and friendly. We let them know in every action that the volunteers are the "heart" of VIM and they matter to us!

3. Do you offer any incentives for licensed volunteers (e.g., gift cards, transportation vouchers, fuel reimbursement)?
  - Not really. We do have a "recognition" program where volunteers receive mementos acknowledging many "benchmarks" in their service:
    - o VIM Polo Shirt for 250 hours
    - o Shining Star Pin for 500 hours
    - o Personalized paperweight & their name on the 1000 hour plaque
    - o Pins acknowledging 5 and 10 years at VIM
    - o Special fleece vests for really extraordinary serviceWe have a Recognition Event (banquet) that is grand and very special. This is held every spring and is totally free to current volunteers.
  
4. Approximately, how many licensed volunteers are in your agency?
  - M.D.'s--31
  - Nurse Practitioners—13
  - Physician Assistants--4
  - R.N.'s--26
  - Pharmacy Technicians--5
  - Pharmacist--5
  - Counselors--1

- Physical Therapists--2
5. On average, how many months/years do the licensed volunteers stay with your agency?
- Most of our physician volunteers stay for years, leaving only if they move out of the area or retire their license. We have less luck with active RN's because they leave for career opportunities.
6. How many patients does your office see over the course of a year?
- About 1000. See attached "VIM Facts for Fiscal Year 2017-2078"

Listed below is a document we used to track each clinic and the following are documented in order to keep track of who we contacted, when they were first contact, and whether they responded.

[Medical Outreach Ministries Family Health Center https://www.momclinic.org/](https://www.momclinic.org/)

- Spoke to Recie Hall and emailed Betty Fitzgerald

[Volunteers in Medicine-Jacksonville https://vim-jax.org/](https://vim-jax.org/)

- Emailed Catie on 6/26/18
- Catie responded 6/27/18

**Lakeland VIM <https://www.lvim.net/>**

- Emailed Kathy on 6/26/18
- Kathy responded on 6/27/18

**Coweta Samaritan Clinic <http://www.cowetasamaritanclinic.org/>**

- Emailed Volunteer Coordinator Ginny Lyles 6/27/18

**Volunteers in Medicine Free Clinics of South Jersey – Atlantic County**

- Emailed Anne Marie Director of Volunteering 8/27/18
- Jackie responded 6/28/18

**Volunteers in Medicine Dearborn, Ohio, and Switzerland Counties**

- Spoke to and emailed Amanda director of volunteering
- Follow up email on 7/2/18

**PCM Medical Clinic (NB) <https://pcmlincoln.org/>**

- Emailed and called volunteer director Art Wilson 8/27/18

**VIM San Diego <http://vim-sandiego.org/about-vim-san-diego/>**

- Have seen over 20,000 pts over 10 years

- CVS awards us a \$30,000 grant for our GET HEALTHY program
- Opened doors in 2006
- Population 1.4 million
- Contact Maren hartin @ vim.ceo.hartin@gmail 6/25/18
- Obtained info and responded

**Clinic by the Bay-SF** <http://clinicbythebay.org/>

- Covers San Francisco and San Mateo Counties
- Population: 870,887 and 764,797
- Only VIM Clinic in Northern California
- Spoke to Viela DuPont and was referred to Henry Smith volunteer@clinicbythebay.org  
6/25/18
- Followed up 7/2/18
- Henry responded 7/2/18

**Macon Volunteer Clinic-Macon, GA** <http://maconvolunteerclinic.org/>

- Population: 155,547
- Opened doors in 2003
- 5,294 total patient encounters in 2017
- Left voicemail and sent email to Angela 6/26/18
- Angela responded 6/27/18

[VIM Clinic, Inc- St. Charles, MO](http://www.volunteersinmedicinescharles.org/about/) <http://www.volunteersinmedicinescharles.org/about/>

- Serves St. Charles and Lincoln County
- Population 440,286
- Over 12,000 volunteer hours in 2016
- Over 2,500 patient visits
- Closed on Tuesday 6/26/18 follow up

[Parker Family Health Center-Red Bank, N](http://www.parkerfamilyhealthcenter.org/about-us/)

<http://www.parkerfamilyhealthcenter.org/about-us/>

- Population: 628,715
- 8,600 patients
- Opened doors in 2000
- Spoke to Grissel Catalan on 6/26/18 sent email to Mary Nicosia

[VIM Clinic of the Cascades-OR](http://www.vim-cascades.org/about/2016-2017-vim-facts.html) <http://www.vim-cascades.org/about/2016-2017-vim-facts.html>

- Serve Central Oregon with roughly a population of roughly 213,578
- Opened doors in 2001
- 6,417 patients in 20017
- Volunteer hours in the clinic: 14,223
- Left voicemail and email for Kristi. Follow up 6/26/18
- Obtained info and responded



[Catholic Charities Free Health Care Center-PA](#)

<https://freecarepgh.org/>

- Opened doors on 2007
- Population: 303,625
- As of 2007, more than 14,000 patients have made 68,000 medical and dental visits
- Left voicemail follow up
- AmySue Lillie responded 6/29/19 (pending info)

[Salud Sin Fronteras, El Paso, TX](#)

<https://www.saludsinfronterasep.org/>

- Population: 683,080
- Ran by students from Paul L. Foster School of medicine
- Biggest population are farm workers.
- Left voicemail follow up 6/26/18

Listed below is the actual formal email that was sent after first contact was made with the agency and they agreed upon working with us.

Dear, Mr./Ms. (put name of the contact person to make it personal),

We are a group of graduate students in the School of Public Policy and Leadership at University of Nevada Las Vegas (UNLV), currently enrolled in the Master of Public Administration program and expect to graduate this year. As part of our Capstone group project for graduation, we are evaluating a local non-profit agency, Volunteers in Medicine of Southern Nevada (VIM affiliation). In partnership with Ms. Lisa Curran ([LCurran@vmsn.org](mailto:LCurran@vmsn.org)), director of volunteer program at VMSN, this capstone project aims to evaluate the retention and recruitment of licensed professional volunteers. Our faculty advisor for this project is Professor Jaewon Lim at UNLV, [Jaewon.lim@unlv.edu](mailto:Jaewon.lim@unlv.edu).

As part of our capstone project, we are interested in learning about your program through this benchmark study. We believe that learning from other VIM affiliations is critical to improving the retention and recruitment of licensed professional volunteers here at Volunteers in Medicine of Southern Nevada. We are contacting several successful Volunteers in Medicine programs nationwide to learn more about the services and programs and your program is on our list for this benchmark study. In order to accomplish this, I have composed a short list of questions (shown below). Your answers will provide valuable input for us to understand and improve the services offered at Volunteers in Medicine of Southern Nevada.

By the end of September 2018, we plan to release the full report to Volunteers in Medicine of Southern Nevada. With your assistance, as an incentive we will send the link to

download the full report so that you can also learn from our in-depth evaluation report that will include; survey data analysis, interviews, observations, and this benchmark study.

We truly appreciate you taking the time out of your busy schedule to answer the following questions which should take about 10 minutes. Your responses are voluntary and we would love to hear back from you within five business days.

**Our questions are as follows:**

1. What are your strategies for recruiting professional licensed volunteers?
2. What are your strategies in retaining the current professional licensed volunteers?
3. Do you offer any incentives for licensed volunteers? (e.g., gift cards, transportation vouchers, fuel reimbursement)
4. Approximately, how many licensed volunteers are in your agency?
5. On average, how many months or years do the licensed volunteers stay with your agency?
6. How many patients does your office see over the course of a year?

If you have any questions or concerns, please contact Mr. Gavin Whipple, graduate student at Master of Public Administration Program of UNLV at 702-715-1734

or [whippleg@unlv.nevada.edu](mailto:whippleg@unlv.nevada.edu)

THANK YOU!

Gavin Whipple (Graduate Student)

MPA (Master of Public Administration)

School of Public Policy & Leadership

University of Nevada, Las Vegas (UNLV)

### **History of VIM Affiliates**

#### **VMSN (Clark County)**

VMSN was first established in 2010 and has two clinics (Paradise Park and Ruffin Family Clinic). VMSN serves Clark County of which makes up roughly all of Southern Nevada's population. According to their web page they have served over 25,000 patients since first opening doors and spend annually \$2.6 million in services.

#### **VIM Jacksonville**

VIM Jacksonville was first established in 2002 and serves the Northeast Florida population.

#### **VIM South Jersey**

VIM South Jersey operates two clinics in Cape May County and Atlantic County. Cape May Clinic was established in 2002 whereas Atlantic County Clinic was established in 2017.

**VIM San Diego**

VIM San Diego serves Sand Diego County and opened doors in 2006. Since opening, VIM San Diego has treated over 20,000 patients.

**Macon Volunteer Clinic**

Macon Volunteer Clinic serves the working class within Macon-Bibb County, Ga. This clinic opened doors in 2003 and has provided care to over 60,000 patients.

**VIM Clinic of the Cascades**

Clinic of the Cascades serve Central Oregon opened doors in 2004 and has generated over \$91.7 million in care.

