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COMPONENTS OF JUST 1 CALL SERVICE DELIVERY

Information and Referral

Because the caller may not necessarily be aware of the totality of his/her needs, because a customer's needs rarely, if ever, exist in isolation from (or have no effect on) the other facets of his/her life, and because an effective referral is an informed one, the worker will view one of his/her ongoing major tasks as that of assessment. For assessment purposes, the worker will strive to ask open-ended questions regarding the larger domains of the caller's life, such as, but not limited to, those domains represented on the various screens of the J1C computer program—financial, medical, health/functional status, support system, etc. The worker will bear in mind that each caller has idiosyncratic circumstances that differentiate the caller from others. Knowing this, the worker must be aware of the occasional necessity of following the lines of inquiry that are revealed by the caller and which are pertinent to the task at hand. However, the worker must also strive to strike a balance between assessment and unsolicited interrogation; each caller may not wish to have or may not see the necessity in having the various (personal) facets of his/her life scrutinized by a stranger, no matter how well-intentioned that stranger may be.

The worker will provide direct answers to direct questions, given that the requested information is not considered confidential, or that a partner agency allows the release of the requested information (some services of some agencies do not accept direct inquiries from clients).

The worker will strive to avoid the appearance of preferring one like service over another; Just 1 Call must avoid preferential referral practices in order to be as even-handed as is possible in its distribution of referrals. When making referrals, the worker will provide the caller with as many options as are practical; a general rule of thumb should be to provide three referral options when choosing from a wider range of referral options. One logical guiding principle in choosing among options may be the proximity of the service to the caller's location, if proximity is an important factor. Other elements specific to the caller's situation should be used in determining the range of viable options, e.g., type of insurance coverage, ability to pay, level of service requested, mobility/transportation restrictions, etc.

Access Assistance

In the event a caller expresses the desire for assistance in accessing a referred service, the worker will do what is necessary, in concert with the caller, to access the service. This may be as simple as a conference or three-way call; it may be necessary to utilize regular mail and facsimile machines to effect some types of applications; it may be necessary to arrange transportation on a customer's behalf; it may be necessary to advocate on a customer's behalf to a service provider or agency; it may require a home visit to the customer to determine what the evident barriers are.

In general, the worker's directive is to assist the customer in identifying and removing whatever practical obstacles exist between the customer and the service, and to educate

and empower the caller to the extent that the caller may be able to access services for him/herself in the future. The worker will strive to avoid creating dependent relationships with callers.

The worker will, when appropriate, defer to the caller's responsibilities in accessing services; a worker can not do for a caller what only the caller can and realistically should do for him/herself (given whatever limitations exist)—e.g., the worker can not go to DSS and apply for the caller's Medicaid, the worker can not be sitting by the caller's phone to accept a phone interview from Social Security, the worker can not make doctor's appointments on an ongoing basis for the caller, etc. The worker should endeavor, when requested, to help remove barriers to service access; the worker has no prerogative to act as proxy agent for the caller on an ongoing basis.

Resource coordination

In the event a caller presents multiple areas of need, the worker may need to assist the caller in coordinating the delivery of needed services. Such a task would require full assessment of the customer, combined with the requisite levels of access assistance, advocacy, and enlisting (when indicated) a range of service providers to meet the needs of a customer. This may be done by field work, telephone contacts, or any combination of the two. The worker may need to act as a very short-term case manager in order to obtain the appropriate mix and level of service for the customer, but should avoid any ongoing or long-term case management commitments. The worker's general directive, again, is to assist the customer in identifying and accessing services to meet needs, however complex or simple that task becomes.

CUSTOMER SERVICE EXPECTATIONS

The Just 1 Call staff will, at all times, comport themselves professionally and strive to provide excellent customer service. Excellent customer service is determined by a number of basic behaviors, skills, and attitudes. The Just 1 Call staff member will:

- Seek quality in all aspects of work performance
- “Be here now” with each caller
- Strive for a positive, helpful outcome with every call
- Be eager to help and willing to exceed expectations
- Demonstrate empathy and exhibit a spirit of caring
- Will creatively seek solutions
- Treat each customer with respect
- Listen actively and attentively by paraphrasing, summarizing and asking questions
- Encourage dialogue by asking open-ended questions
- Set a positive and responsive tone
- Listen for content, not delivery
- Present an array of options when possible
- Be clear on the respective responsibilities of worker and caller
- Know the program's services

- Speak and explain in clear, simple, well-enunciated language that avoids technical, slang, or colloquial expression
- Interject the caller's name in conversation
- Display a "Can Do" attitude and focus on what can be done
- Be honest about knowledge of and limitations of services
- Vary inflection to convey interest
- Follow through with all commitments
- Act with honesty, integrity, and sincerity
- Employ the Golden Rule

GREETING THE CUSTOMER AND TERMINATING THE CALL

These elements must be included each time the J1C worker answers the phone or terminates a call.

The standard telephone greeting will include the following elements, in no defined order:

- A greeting--Hello, Good morning, Good afternoon...
- Announcement of the service name--Just 1 Call
- Identification of the worker taking the call, *including first name*—This is..., My name is...
- An invitation for the caller to speak—How can I help, What can I do for you...

Upon termination of the call, the worker will:

- Thank the caller for calling or for using the Just 1 Call service
- Encourage the caller to call back at any time in the future for assistance.

COMPLAINTS

About Just 1 Call from customers

Complaints from customers about any aspect of the Just 1 Call service, including personnel, will be routed to the unit supervisor for resolution. Any social worker who receives a call that wishes to register a complaint will not attempt to reconcile the complaint without direct authorization from the unit supervisor to do so. If the unit supervisor is unavailable, the social worker will transfer the call into the unit supervisor's voice mailbox and assure the caller that s/he will receive a call back within 24 hours.

About service providers from customers

Complaints from customers about any aspect of service provision by a referral agency or business will be routed to the unit office assistant for resolution in concert with the unit supervisor. Any social worker who receives a call that wishes to register a complaint will not attempt to reconcile the complaint without direct authorization from the unit supervisor to do so. The office assistant will inform the unit supervisor of the

nature of the complaint and the office assistant and the unit supervisor will work toward complaint resolution. If the office assistant is not available, the social worker will transfer the call to the office assistant's voice mailbox and assure the caller that s/he will receive a call back within 24 hours.

About Just 1 Call from service providers

Complaints from service providers about any aspect of the Just 1 Call service will be routed to the office assistant, who will inform the unit supervisor of the nature of the complaint. The office assistant and the unit supervisor will work toward complaint resolution. Any social worker who receives a call that wishes to register a complaint will not attempt to reconcile the complaint without direct authorization from the unit supervisor. If the office assistant is not available, the social worker should transfer the call to the office assistant's voice mailbox and assure the caller that s/he will receive a return call within 24 hours.

CRISIS/EMERGENCY CALLS

At any point in a call when emergency intervention is required (MEDIC, Police, Fire), the worker will remain calm, assert control over the conversation, and be as directive as is necessary in order to obtain the following information, in order of priority:

1. The specific location of the person(s) requiring assistance (street address, location on property—e.g., front bedroom, back yard, parking lot)
2. The phone number of the person needing assistance or the caller.
REMEMBER—THE CALLER MAY NOT BE THE PERSON(S) REQUIRING ASSISTANCE
3. The chief complaint of the person requiring assistance.

The worker will then transfer the caller to **943-6200** (MEDIC) and stay on the line until the natural conclusion of the call. The worker will not call 911 for a medical emergency, as a 911 call may take longer to be answered and for assistance to be dispatched due to the call routing of the 911 system. Our assumption will be that the predominant nature of the emergencies of our target populations will be medical/health related. If the emergency requires police and/or fire, MEDIC can ensure the proper routing of that call.

The worker will not tell the caller to hang up and dial 911. The call received may be the only opportunity a person may have to obtain assistance.

The worker will not attempt to substantially diagnose or question the caller about the nature of a medical emergency prior to taking decisive action. The worker's first priority will be to ensure that medical assistance is *en route* at the earliest possible opportunity. The worker may ask the caller about sudden or drastic changes in medical conditions in order to ascertain whether or not an emergency exists.

The worker will accept the caller's statements as valid and will not attempt to interpret or question the caller's perception or intent.

The worker will contact medical emergency personnel when possessing any doubt as to the necessity of medical assistance.

*****The worker must scrupulously document, in writing, the course of the call from greeting to termination, with specific attention to the caller's statements and how the worker interpreted them, the worker's responses and directives, the worker's perceptions, the worker's actions, and the outcome of the call.**

Non-emergency ambulance transportation: 943-6190

SUICIDAL CALLER

CMC-Randolph Behavioral Health Call Center 444-2400

CMC-Randolph (Mental Health Emergency) 358-2800

Area Mental Health Assessment and Referral Center 336-6404

In the event that a caller threatens harm to self, the worker will not immediately refer the caller to the Behavioral Health Call Center; the caller may be actively engaged in suicidal ideation and interpret that attempt as rejection, commentary on his/her meaninglessness, or further evidence of the hopelessness of his/her plight. The worker will attempt to guide the caller to the Behavioral Health Call Center if and when the caller is agreeable. If the Behavioral Health Call Center is not a viable option, the worker will get a co-worker to contact 911 while the worker remains on the call. If the worker can not obtain the caller's address or location, the worker will use the caller identification function of their phone as identifying information to transfer to 911. The worker will obtain as much information from the caller as possible in order to be able to dispatch emergency services to the caller, but the worker will be careful not to alienate the caller by avoiding the purpose of the call or by moving faster than the caller wants to.

The worker will ask the caller's name and interject it frequently during conversation. The worker will attend specifically to the caller's concerns.

The worker must be in firm control of the conversation. The worker will be directive to minimize imminent potential for harm (I want you to place the gun on the table on the other side of the room; I'll wait here while you do that, and I want you to come directly back to the phone.)

The worker will also take control of the conversation by asking questions related to the present suicidal crisis. The worker must be prepared to direct each successive action of the caller.

The worker will stay on the call as long as is required to ameliorate the current crisis, and will enlist the aid of co-workers for collateral phone calls or other assistance.

*****The worker must scrupulously document, in writing, the course of the call, from greeting to termination, with specific attention to the worker's perceptions, the caller's statements and how the worker interpreted them, the worker's intervention(s) and directives, the caller's responses, and the outcome(s) of the worker's interventions.**

Points to remember:

- **Talking about suicide to a troubled person will not give him/her the idea. The ideas are already there. Almost all suicidal types feel relieved to discuss it.**
- **A “garden variety” depression triggers most suicide attempts, not psychosis. The worker must endeavor to look for and emphasize the individualized reason(s) a person may have to live.**
- **Typical suicides are not impulsive actions; they are preceded by long deliberation. Suicide is often a choice that is contemplated for months, if not years.**
- **The caller who only talks vaguely or threateningly about suicide or makes feeble “gestures” is not interested only in manipulation, and should be taken seriously. This person requires attention, without which the next suicide attempt may be lethal.**

The worker may assess the risk of suicide by using the following interview guide (adapted from Behavioral Health Call Center Policy and Procedure). This instrument is a guide to assessing risk; it is not intended to provide a score that will determine a decision. It is not intended to be a substitute for sound clinical judgement.

A. CHARACTERISTICS OF THE SUICIDAL CRISIS

1. Is this person thinking about killing himself/herself?
2. What event(s) or situation precipitated the crisis this time? (What , when, who is involved?)
3. What does the event(s) or situation *mean* to this person?
4. What has been this person’s reaction (behavior, feelings, and thoughts) to the precipitating event(s)?
5. How are significant others responding, and/or how does this person *believe* they are responding?
6. Will available significant others be helpful, or will they contribute to this person’s suicidal preoccupations?
7. What “secondary motivations” and affects are expressed on the surface? (Vindictiveness, self-hatred, hopelessness)

B. CHARACTERISTICS OF THE CONTEMPLATED ATTEMPT	RISK INTENSITY		
	LOW	MODERATE	HIGH
1. How lethal is the planned method? (Pills, especially antidepressants and acetaminophen, driving into a tree, jumping from a height, a shotgun in the mouth)			
2. Does the planned method match the personality type?	No	Maybe	Yes
3. How specific is the plan?	No plan	No details worked out	Well formulated
4. How available to the person is the planned method?	Not available or no opportunity	Not immediately available; would take time and effort	Method and opportunity available
5. Has this person made any preparation to implement the method? (started collecting pills, bought gun)	None	Partial	Completed
6. Has this person told anyone of the plan or written a suicide note? (To whom, what is the anticipated response?)	None	Thought about or started	Completed or deposited
7. Has this person made prior attempt(s)? What was the response of significant others?			Yes
8. How lethal were the methods?			
9. Is the present planned method similar?			Yes
C. CHARACTERISTICS OF THE SUICIDAL IDEATION			
1. How frequently does this person think about killing himself/herself?	Now and then	Intermittently	Persistently
2. How long do these thoughts last at any given time?	Fleeting	Longer	Continuous, has trouble putting out of mind
3. How does client view thoughts of suicide at this time?	Overtly rejects	Ambivalence is expressed	Overtly accepts
4. How much inner control does	Has a sense of	Unsure of control;	No sense of

this person over his/her suicidal thoughts? Is he/she psychotic?	control	sometimes abuses drugs or alcohol	control; psychotic; regularly abuses drugs or alcohol
5. Does client state there is anything to deter him/her from suicide? (Sense of responsibility, religious belief, disapproval of others, no courage)	Does not feel s/he would kill self because of deterrent	Some concern	Minimal concern
6. Has this person carried out any actions in anticipation of death? (Giving away possessions, will insurance)		Has mentally planned or has made some arrangements	Completed arrangements

ANGRY CALLER

In the event of a caller who expresses anger toward the worker, Just 1 Call, or a referral source, the worker will:

- Remain calm and patient, and not engage in argument
- Work to defuse the caller's anger by active listening and by responding empathetically
- Help the caller to identify the source of his/her anger and define it
- Endeavor to understand the cause of the anger as the caller defines it
- Remain positive and offer assistance in resolving (if possible) the cause of the caller's anger
- Explain how Just 1 Call is able (and unable) to assist its customers
- Offer help wherever possible
- Assist the caller in problem-solving
- Follow through with commitments made to the caller
- Offer future assistance
- Follow up
- Document

*****The worker will document such calls to the unit supervisor, specifically attending to the nature of the conflict, what the caller wanted, how the worker intervened, and what resolution was reached.**

PROFANE/OFFENSIVE CALLER

In the event of a caller who uses language that the worker perceives as profane or offensive, the worker will:

- Be explicit about what the caller is saying that the worker finds offensive or profane
- Inform the caller that the worker will be unable to continue the conversation until the specific profane or offensive language ceases
- Offer the caller other word choice/language options to express him/herself that the worker would not find offensive or profane
- Emphasize willingness to be of assistance
- Set limits and stick to them
- Terminate the call once the above conditions are met and the offensive/profane language continues

*****The worker must scrupulously document the course of the call, from greeting to termination, with specific attention to the nature of the offensive or profane language, the worker's statements, the caller's responses, and the outcome of the call.**

THREATENING CALLER

In the event a caller uses threatening language or issues specific threats to the worker, the worker will:

- Be explicit about the worker's perception of an issued threat
- Inquire about the nature and motivation of the perceived threat
- Emphasize that the worker will not accept threats and will take appropriate action to nullify the threat, up to and including police intervention, if required
- Offer positive options
- Offer future assistance
- Offer positive avenues for conflict resolution
- Attempt to preserve the relationship with the caller
- Set limits and stick to them
- Terminate the call if the above conditions are met and the threats continue
- Take appropriate protective action, depending on the nature of the threat, including a report to law enforcement, if indicated

*****The worker must scrupulously document the course of the call, from greeting to termination, with specific attention to the nature of the perceived threat(s), the caller's statements, the worker's perceptions, the worker's statements, and the outcome of the call.**

REFERRALS TO SERVICES FOR ADULTS

In the event a caller requests application for any service(s) offered by the Services For Adults Division of the Mecklenburg County Department of Social Services, **not including Adult Protective Services**, the worker will obtain all relevant information from the caller. Minimal information necessary to process a referral to SFA includes, but is not limited to:

- Name (of person requesting services)
- Address
- Phone number
- Service(s) requested

The worker will print all screens in the JIC program that have information entered in them. The worker will write the service(s) the customer is requesting on the leading page of the printed screens (i.e., Services Requested : transportation, in-home aide, etc.), and place this information in the cubicle mailbox of the supervisor of the Centralized Intake Unit of SFA. The worker will assure the caller that s/he will receive a call back from SFA.

ADULT PROTECTIVE SERVICES REFERRALS

North Carolina state law requires that any individual who knows of the alleged maltreatment of any adult—who 1) is age 18 or older and is incapacitated by a disabling condition; 2) has suffered some harm by an act of omission or commission by a care provider; and 3) has no one willing and/or able to access services on his/her behalf—must report such alleged harm to local authorities.

Such harm may be classified as abuse (physical, sexual, psychological/emotional), neglect (by care provider or by self), or exploitation (financial, sexual, other). The identity of an individual who reports such alleged maltreatment is protected by law; the reporter may remain anonymous.

When a report of maltreatment is received by a representative of the Department of Social Services, the agency is considered to have been notified; the time frame for agency response begins, and the agency may need to respond immediately.

In the event that a caller reveals information that a worker believes may constitute maltreatment, the worker will make such reporting his/her first priority. The worker will not attempt to judge for him/herself the credibility of the allegations nor will the worker attempt to determine whether or not the allegations fall within the statutory definitions of maltreatment.

The worker will contact Mecklenburg County DSS' SFA Centralized Intake (**336-4812**) to report the alleged maltreatment. The worker may attempt to get the caller to report the alleged maltreatment, but if the caller is unable or unwilling to do so, **the worker must report**. If the worker calls Centralized Intake and is unable to get an intake social worker on the phone within 5 minutes, s/he will go to the work area of Centralized Intake with whatever information s/he has, in writing, and give such

information to the Intake Supervisor. If the supervisor is unavailable, the worker will give the information to any available intake social worker. If no intake workers are available, the worker will page an APS supervisor.

Minimal information that is most helpful in responding to such a referral includes, but is not limited to, such elements as:

- Name of the adult who has suffered the alleged maltreatment
- Address or location of the adult
- The nature of the alleged maltreatment
- Contact information for collateral sources

Allegations of maltreatment by licensed care facilities are treated in the same way.

APS referrals made after business hours are reported to 336-2273 (336-CARE).

CHILD PROTECTIVE SERVICES REFERRALS

North Carolina state law requires that any individual having knowledge of the alleged maltreatment of a minor child (under 18 years old) must report such maltreatment to local authorities. Such maltreatment may be classified as abuse (by care provider), neglect (by care provider), or dependency (no appropriate adult care provider willing and able to meet the child's basic needs). While the statutory definition of abuse is fairly specific, the definition of neglect is purposefully written in more general language. Much maltreatment of children is encompassed within this broad definition of neglect.

Once a representative of the Department of Social Services has been informed of alleged maltreatment of a child, the agency is considered to have been notified; the time frame for agency response begins, and the agency may need to respond immediately.

In the event a caller reveals information to the worker that indicates maltreatment of a child (or children), the worker must make the reporting of such information his/her first priority. The identity of a reporter is protected by law; the reporter may remain anonymous.

The worker may attempt to get the caller to report the information to Child Protective Services, but if the caller is unable or unwilling to do so, **the worker must report**. The worker will not attempt to evaluate the credibility of the allegations nor will s/he attempt to determine whether or not the alleged maltreatment falls within the statutory definitions.

The worker will contact Mecklenburg County DSS' Youth and Family Services Division at **336-2273** to report the alleged maltreatment. Minimal information most helpful in processing such a report includes, but is not limited to, such elements as:

- Name(s) and age(s) of child(ren) alleged to have suffered harm
- Address/location of child(ren)
- Name and address/location of parent/care provider

- Nature of alleged maltreatment
- Contact information for collateral sources

Child protective services referrals made after business hours are reported to 336-2273 (336-CARE).

LEGAL ADVICE

In the event a caller asks a worker for advice on legal matters, the worker will refrain from giving legal counsel. The worker may discuss in general terms what s/he knows of legal issues, but may not advise a caller on how to proceed. Such decisions should be left to the caller.

USING THE AUTOMATED CALL DISTRIBUTION SYSTEM

Logging in to the ACD System

Before logging in, the indicator beside the Make Set Busy key must be solid, not flashing

Step	Action	Response
1.	Lift the handset from the cradle, or press the In Calls key	Dial tone is heard
2.	Dial 4-digit Login ID	Make Set Busy key indicator turns off, Not Ready key indicator turns on
3.	Depress Not Ready key	Not Ready indicator turns off

Activating/Deactivating the ACD Not Ready feature

Using walkaway codes

Step	Action	Response
1.	Depress the Not Ready key	Indicator flashes
2.	Enter 3-digit walkaway code: 444—Personal break 555—Lunch 666—Working but not taking calls *If the walkaway code is not entered within 10 seconds, the system will enter a default code	Indicator stops flashing

*Depress the **Not Ready** key once when ready to resume answering calls.

LOB (Line Of Business) Codes

- While on an active call, press the LOB key.
- Enter the LOB code (see code sheet) which reflects the type of call being handled. The digits are shown on the display as they are entered. If a mistaken code is entered, repeat the process and enter the correct digits.
- A maximum of 3 LOB codes may be entered per call. Codes may not be entered after the termination of the call.

Conference/Transfer Calls

To transfer a call directly to another telephone or establish a three-way call:

- Press **Conf/Transfer** key
- Call the person to whom the call is to be transferred
When the person answers, you can talk privately—the original caller can not hear your conversation. If the line is busy or if the person does not answer, press **Rls** (Release) key to return to the original caller.
- Press **Conf/Transfer** to establish a conference. Both of the other parties are now on the line.
- Press **Rls** or hang up to disconnect yourself from the call and complete the transfer.

Display Queue

- Depress the **Display Queue** key.

The labels T1, T2, T3, etc., represent the threshold wait time for the call at the front of the queue or the number of calls in the queue. The number below CallQ indicates the number of calls in the queue. (In some systems CallQ is replaced by Wait, which indicates the actual waiting time, in seconds, for the first call in the queue.)

Logging out of the ACD System

Step	Action	Response
1.	Depress Make Set Busy key	Indicator turns on

Set is now in make busy status, and calls to any number on the set will receive a busy signal. If the worker needs to receive incoming calls on his/her voice mail, proceed to step 2.

2.	Depress the Make Set Busy key again	Indicator flashes
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CONFIDENTIALITY AND RIGHT TO PRIVACY

Because the caller may not be the person for whom services are requested, the worker must be careful about what s/he does in the absence of the knowledge and approval of the person for whom services are requested.

The worker will not give information about or to third parties without an explicit and specific verbal authorization to do so. This authorization is documented by use of the check box and notes field on the “Referral Information” screen of the JIC production system (computer program).

The release of information must be explicit and specific in that it names the person, agency, or company to whom information may be released. For instance, if a friend, relative, or adult child of a senior calls on the senior’s behalf, the worker may not send information to the senior, discuss what the worker may know of the senior to the third party, or send information to that third party about the senior unless there is a documented and specific release of information in the senior’s record in the JIC software program. Whenever the worker is in doubt as to whether or not s/he can release information to a third party, s/he will contact the person for whom services are requested, obtain approval or disapproval for release, and document this release in the record.

The worker may send referral information about community services to a third party without any release of information.

Use of Caller ID

Additionally, a caller who has not knowingly given his/her phone number to the worker may not be contacted or identified by using the caller identification function of the phone system. **The only exception** to this mandate is in the event of an emergency, when the caller ID is the only available method of identifying the caller or the caller’s location.

INITIAL FOLLOW-UP PROTOCOL JUST 1 CALL

Definition

Follow-up is herein defined as a questionnaire survey subsequently initiated by program staff with a previous program customer in order to 1) determine the quality of service the program delivered to the customer; 2) ensure the program is meeting its purposes and goals; 3) validate the program's existence to funding sources, and; 4) generate feedback that will improve future service delivery.

Types of Follow-up defined

Social Work—Done at the discretion of an individual worker as a result of a J1C event. The SW contacts the customer to ensure that a contact was made, that a situation hasn't worsened, etc. This type of follow-up has no defined time frame, and its purpose is subjectively determined.

Quality Assurance—Conducted within 5-7 calendar days from an event on a randomly chosen 20% of identifiable callers. Sample lists will be generated by worker for each day, and another worker will be responsible for blindly (not knowing whose list one has) conducting follow-up on a colleague's caller list. The purpose of this type of follow-up is to provide information regarding the quality of the J1C service.

Impact—Conducted at 40-45 days from the date of the Quality Assurance follow-up on 50% of the QA sample. The purpose of this type of follow-up is to gather information on the impact of the service on a client's quality of life. While the QA is oriented to the quality of J1C's service delivery, the Impact is oriented to the customer's quality of life as a result of having called J1C.

Medium of Contact

Follow-up surveys will be conducted, initially, only by telephone.

THE FOLLOW-UP TELEPHONE SURVEY

The worker will be given a list of previous callers. The worker will call every fifth caller on the list. The worker will only ask the survey questions to the caller that is named on the list (the respondent), which may not be the person who answers the phone. If the caller is unavailable at the time of the call, the worker may state that s/he will call back later when the caller may be in. If after two attempts (not necessarily in succession) the worker is unable to survey the caller, s/he will move to the immediately following name on the list. The worker will record on the caller list the result of the attempts. If the worker is certain that the identified fifth respondent will not be available for the period of time the worker has to make the day's telephone survey calls, the worker does

not have to make subsequent attempts—s/he may move to the immediately next number on the caller list.

Order of callers to be surveyed

For example, the worker receives a list of 50 callers. S/he will attempt to survey every fifth caller on the list: caller #1, 6, 11, 16, 21, 26, 31, 36, 41, and 46, which would result in 10 surveys out of 50, or a 20% sample. If the worker is unable to reach caller #1 to survey after two attempts, s/he will go to caller #2 on the list. If the worker is successful in surveying caller #2, s/he goes to caller #6 (the originally intended next fifth caller); if the worker is unable to reach caller #36 to survey after two attempts, s/he will go to caller #37. If the worker is unsuccessful in surveying caller #37 after two attempts, s/he will go to caller #38. If the worker is successful in surveying caller #38, s/he will then go to caller #41 (the originally intended next fifth caller), etc. The worker does not have to survey the callers in numerical order (#1, then #6, then #11, etc.), but the worker will observe the order of selection, as illustrated by the above example.

Introduction

The worker will bear in mind the following guiding principles when calling respondents to conduct surveys:

- If the respondent (the caller named on the caller list) is not available, the worker may ask when the respondent may be available, and then will state that s/he will call back at a later time. The worker will not leave a message or explain the purpose of the call to anyone other than the respondent.
- The worker will immediately identify him/herself and briefly inform the respondent of the purpose of the call.
- The worker will emphasize the anticipated time that will be taken to conduct the survey.

A suggested script, which the worker may not substantially amend, is:

Good morning/afternoon/evening! My name is (first name only). I work with Just 1 Call. You called us on (insert date from caller list) and I am calling you back to find out how we did, if we were able to help you, and how we may be able to improve our service. What I'd like to do is ask you a few questions. This should take about five minutes, and I assure you that all of your answers will be kept confidential. Now I'd like to ask you...(proceed to first question on questionnaire)

If, at any time during the survey the respondent states that s/he doesn't want to participate, the worker will thank him/her for his/her time, offer encouragement to contact Just 1 Call in the future with any questions or concerns s/he may have, and terminate the call. The worker will not attempt to talk respondents into participation.

Complete Vs Incomplete surveys

The task of the worker will be to obtain complete surveys on 20% of his/her caller list. A completed survey is herein defined as one in which the caller has responded to each question on the questionnaire. The worker will bear in mind that a “no response” to

a question is still considered a valid response. A survey would be considered incomplete where, for example (and unfortunately), the worker has 8 responses out of 9 questions, and the respondent hangs up.

Coding responses

Until the process is automated, staff will conduct the survey from a written list of questions and a separate list on which they code responses. The worker will ask the respondent the question, but will not read or list the range of responses. The worker will accept the statement the respondent offers, and apply the response to the range of responses offered on the code sheet.

On all questions, the first range of answers is a 5-point continuum from an absolutely positive response to an absolutely negative response (exception: Quality Assurance Q.IX, in which the continuum is the same, but the order is reversed). [See **“Quality Assurance” and “Impact” questionnaires on pages following this narrative.**] The worker will code responses that are unqualified (absolute), either positively or negatively, as “definite” responses. Responses that are qualified (limited, moderate, reduced) by the respondent, either positively or negatively, will be coded as “somewhat” responses. Responses that indicate that the respondent doesn’t know, refuses to answer, or has no opinion, will be coded as a “no response.” The worker will endeavor to minimize the amount of “no response(s)” coded; a “no response” does not provide useful programmatic feedback.

The Questionnaires

The questionnaire is the survey tool by which Just 1 Call gathers the information that meets the purposes for Follow-up, outlined at the outset of this section. The worker will ask the questions as they are written and in the order they appear. The worker should refrain from explaining questions. If the respondent doesn’t understand the question, the worker will repeat it. If the respondent doesn’t understand the question after repetition, the worker will code as a "no response" and move to the next question.

TIME TAKEN:
COMMENTS:

Quality Assurance Survey
Questionnaire

Good morning/afternoon/evening! My name is (first name only). I work with Just 1 Call. You called us on (insert date from caller list) and I am calling you back to find out how we did, if we were able to help you, and how we may be able to improve our service. What I'd like to do is ask you a few questions. This should take about five minutes, and I assure you that all of your answers will be kept confidential. Now I'd like to ask you...(proceed to first question on questionnaire)

- I. Did you have a good experience with Just 1 Call?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- II. Was Just 1 Call easy to make contact with?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- If no, then—*
- Why not?
- Check all that apply—
- 1. Service closed
 - 2. Length of queue
 - 3. Left message, didn't receive call back
 - 4. Didn't understand what to do
 - 5. Other response [**need notes field here**]
 - 6. No response
- III. Do you feel you were treated with respect?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely

- IV. Did the Just 1 Call staff person give you as much time as you needed?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- V. Was Just 1 Call able to answer your question(s)?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- If yes (A or B), then—*
- Did we answer your question(s) with only one call [on your part]?
- Yes _____
- No _____
- VI. Did you get accurate information about service providers from Just 1 Call?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- If no (D or E), then—*
- What (specific) information did Just 1 Call give you that was incorrect?
- Notes:
- Would you like to be called back with updated information (if available)?
- Yes _____
- No _____
- VII. Is Just 1 Call a valuable service?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- VIII. Would you call Just 1 Call again to access other services or needs?
- A. Yes, definitely
 - B. Yes, somewhat
 - C. No response
 - D. No, somewhat
 - E. No, definitely
- IX. Do you feel improvements in Just 1 Call are needed?
- ***NOTE REVERSE ORDER OF RESPONSES*****
- A. No, definitely
 - B. No, somewhat
 - C. No response

D. Yes, somewhat

E. Yes, definitely

If yes (D or E), then—

What improvements do you suggest?

[Need notes field here for narrative response]

Impact Survey

Questionnaire

Good morning/afternoon/evening! My name is (first name only). I work with Just 1 Call. You called us on (insert date from caller list) and I am calling you back to find out how we did, if we were able to help you, and how we may be able to improve our service. What I'd like to do is ask you a few questions. This should take about five minutes, and I assure you that all of your answers will be kept confidential. Now I'd like to ask you...(proceed to first question on questionnaire)

- I. Did you or anyone else contact a provider that Just1Call referred you to?
- A. yes, definitely
 - B. yes, somewhat
 - C. no response
 - D. no, somewhat
 - E. no, definitely
- II. Do you think Just 1 Call had a positive impact/effect on you or the person you called about/for?
- A. yes, definitely
 - B. yes, somewhat
 - C. no response
 - D. no, somewhat
 - E. no, definitely

If yes (A or B), then—

(Check all that apply)

What was positively impacted/affected?

1. physical/mental health
2. finances
3. environmental conditions
4. general well-being/improvement in quality of life
5. other **[need notes field here]**

If no (D or E), then—

(Check all that apply)

Why not? (Indicate the respondent's perception of who was responsible for the call not having a positive impact)

1. J1C responsibility
2. Customer responsibility
3. Service provider responsibility

III. Did you find out anything from Just 1 Call that you didn't know before?

- A. yes, definitely
- B. yes, somewhat
- C. no response
- D. no, somewhat
- E. no, definitely

If yes, then—

What did you learn (about) that you didn't know before?

1. information
2. services
3. service providers
4. matter(s) of advice/counseling/helpful tips

IV. Do you have a better understanding of what your options are since you contacted Just 1 Call?

- A. yes, definitely
- B. yes, somewhat
- C. no response
- D. no, somewhat
- E. no, definitely

V. Do you think that you will call again?

- A. yes, definitely
- B. yes, somewhat
- C. no response
- D. no, somewhat
- E. no, definitely

VI. Is Just 1 Call the best number you can call to get information and referrals?

- A. yes, definitely
- B. yes, somewhat
- C. no response
- D. no, somewhat
- E. no, definitely

VII. Have you begun to receive services/assistance from a provider that Just1Call referred you to?

- A. yes, definitely
- B. yes, somewhat
- C. no response

- D. no, somewhat
- E. no, definitely

NIGHT SERVICE VOICE MAILBOX

The night service is activated from 5:00 p.m. until 8:00 am, Monday through Thursday, and from 5:00 p.m. on Friday until 8:00 a.m. on Monday. The night service is activated on holidays as well. The night service is a Memory Call voice mailbox; it is operated the same as the worker's direct line (work) voice mailbox. To access the night service voice mailbox:

1. Dial 331-4400 (Memory Call)
2. Press *
3. Dial the phone number of the night service—432-0151
4. Enter the passcode for the voice mailbox, which is the same as the phone number—432-0151
5. Press 1 to listen to messages

On Call

Workers will sign up on a rotating schedule for a week at a time to be “on call.” The week will extend from Monday after 5:00 p.m. until 8:00 a.m. of the following Monday. During this week, the worker will be responsible for checking the night service messages at least two times during the evening, and once before coming to work in the morning. The worker will check the night service messages at least three times a day on Saturdays and Sundays. The worker's directive in checking the messages is to ensure that no messages are left which require an immediate response. If an immediate response is warranted, the worker will take responsibility for taking appropriate action in response to the call, up to and including calls for emergency services (police, fire, MEDIC). If the worker is unsure as to how to proceed, the worker will contact the unit supervisor by home phone or by pager.

The “on call” worker will also bear the responsibility, during his/her weekly shift, of responding to the non-emergency calls in the morning of the next business day. So, a (non-emergency) night message left on Monday evening would need to be responded to on Tuesday morning; a (non-emergency) message left on the weekend would need to be responded to on Monday morning.

Documentation of Night Service Calls

The worker will document his/her response to a night service call. This will be done in the JIC computer program under the record name “**Nightcalls.**” Documentation will be entered in the “Additional Notes” field of this record under the following format:

Date/worker name

Caller:

Telephone number:

Comments:

The worker will document his/her disposition of the call in this record. When the worker makes contact with the caller who has left a message, s/he will establish a customer-specific record in the J1C program under that customer's name and will enter all relevant information under that customer-specific record. The worker will then go back to the Nightcalls record and cross reference the disposition by the customer-specific record ID number.

Example:

9/6/00 taylor

Caller: Joe Smith

Phone: 555-1212

Comments: Mr. Smith called on 9/5/00 to inquire into long-term care facilities. He feels he can no longer care for his wife at home. Wkr. returned call 9/6 and left message for Mr. Smith briefly outlining issues to discuss re care facilities. Mr. Smith later returned wkr's call. See client id #234, Mary J. Smith.

If, for instance, Mr. Smith never calls back, then what is in the Nightcalls record is the worker's documentation that s/he attempted to contact Mr. Smith.

LANGUAGE LINE TRANSLATION SERVICE

Language Line is an over-the-phone interpretation service that utilizes professional interpreters to translate English into any one of more than 140 languages.

Language Line may be used for either an inbound or outbound call.

Inbound call

1. Place the non-English speaker on hold by using the Transfer function of the p-phone.
2. Dial Language Line Services at **1-800-774-4344**.
3. Give the “Answer Point” your account information:
 - Language needed
 - Client ID number—*****
 - Organization name—**Mecklenburg County Department of Social Services**
 - Personal code—**8239 + your position number** (three-digit number found in parentheses beside your name on the JIC Reference List)
4. Add non-English speaker to the line.
5. Wait for the “Answer Point” to conference in the interpreter.
6. Brief your interpreter on the nature of the call. Summarize what you want to accomplish and give any special instructions.

Outbound Call

1. Dial Language Line Services at 1-800-774-4344.
2. Give the “Answer Point” your account information:
 - Language needed
 - Client ID number—*****
 - Organization name—**Mecklenburg County Department of Social Services**
 - Personal code—**8239 + your position number** (three-digit number found in parentheses beside your name on the JIC Reference List)
3. Wait for the “Answer Point” to conference in your interpreter.
4. Brief your interpreter on the nature of your call. Summarize what you want to accomplish and give any special instructions.
5. Add non-English speaker to the line.
 - For domestic calls, Language Line will place the call at no charge.

- International calls are billed to either a calling card or a third party.

INCLUSION CRITERIA FOR SERVICE PROVIDERS

In providing information and assistance, the worker will make referrals to service providers for the purpose of meeting perceived needs. **The worker is limited to making referrals *only* to the specific service providers that are listed in the Just 1 Call database.** For more generalized areas of goods and services, the worker may assist the customer by directing him/her to consumer directories and/or their websites (e.g., Yellow Pages, Better Business Bureau, Charlotte Chamber of Commerce, Mecklenburg County Bar Association Lawyer Referral, Senior Living, etc.), but the worker may not refer the customer to a specific for-profit business that is not included in the J1C database.

In order to maintain the integrity of the information and assistance component of Just 1 Call, the following guidelines have been established to determine what service providers may be included in the data base from which Just 1 Call makes its referrals. These criteria were adapted from inclusion criteria established by the United Way of Central Carolinas for that agency's Information and Referral service.

Any agency or organization serving the residents of Mecklenburg and surrounding counties may be included in Just 1 Call's service provider database if it falls into one of the following categories:

- A. Incorporated as a non-profit (IRS 501(c)3 status) providing direct health and human services, and meeting all of the following criteria:
 - Has an established address, phone, and available contact person
 - Has been providing services for one year **OR** is a member of the Better Business Bureau

- B. An incorporated non-profit providing indirect services in one or more of the following areas:
 - Community organization and planning, improvement of standards and services, research and interpretation
 - Financial support for health and human service agencies
 - Governmental or civic licensing or endorsing of health and human service organizations
 - Education and training for social work and related fields

- C. Government agency

- D. A for-profit organization may be included if it meets all of the following criteria:

- Provides a specialized service for senior citizens or disabled individuals that enable these individuals to accomplish “Activities of Daily Living,” as defined by the North Carolina Medical Assistance Program to include hygiene/bathing/grooming, dressing, ambulation/mobility/transferring, eating and toileting
- Has an established address, phone and available contact person
- Is licensed/accredited, or a Medicare/Medicaid approved provider where applicable
- Has been providing services for one year **OR** is a member of the Better Business Bureau