Caregiver Survey
Caller Logbook

Summer 2000

CaregiverID	Caregiver Name	Phone #	Care Recipient's Name and ID	Date and Time of Attempts to Contact							Final Result*
				1	2	3	4	5	6	7	

* Final Result Categories

C - Completed questionnaire
R - Refused to participate
E - Don't speak English
M - Moved
N - Not enrolled anymore
W - Wrong phone number
D - Deceased
P - No phone or disconnected phone
7 - Over 7 attempts to contact