



**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 2015 - JUNE 30, 2016
Deadline: July 15, 2016**

COUNTY OF SAN DIEGO
2016 JUL 15 PM 1:39
CLERK OF THE BOARD
OF SUPERVISORS

1. DEPARTMENT INFORMATION:

Department: HHS - Behavioral Health Services
Division/Unit: East County Mental Health Clinic (ECMHC)

2. VOLUNTEER PROGRAM BENEFITS:

a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc).

No. of Vol.	2	Hours	1409.25	X	\$23.56	=	\$33,201.93
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Types of work performed by GENERAL VOLUNTEERS in this category:
ECMHC utilizes Master's level MSW and MFT Interns completing their annual practicum requirements.

b. INSTITUTIONAL VOLUNTEERS (this section should include honor camp inmates, PIC/RETC, GAIN, etc.)

No. of Vol.		Hours		X	\$23.56	=	\$0.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:
N/A

c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level below.)

Position	Hours	X	VCL	=	Dollar Benefit
_____	_____	_____	_____	_____	\$0.00
_____	_____	_____	_____	_____	\$0.00
_____	_____	_____	_____	_____	\$0.00
_____	_____	_____	_____	_____	\$0.00
_____	_____	_____	_____	_____	\$0.00

No. of Vol.		Total Hours	0	Total Value =	\$0.00
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Types of work performed by SPECIALIZED VOLUNTEERS in this category:
N/A

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	No. of Volunteers	Hours	Dollar Benefit
2a.	2	1409.25	\$33,201.93
2b.	0	0	\$0.00
2c.	0	0	\$0.00

Total Vol.	2	Total Hours	1,409.25	Total Value =	\$33,201.93
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3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated: _____ Value: _____
 Item Donated: _____ Value: _____

TOTAL VALUE = \$0.00

4. VOLUNTEER PROGRAM COSTS:

a. Cost of supervision of volunteers (total hours of direct supervision multiplied by the hourly rate of staff person (s) directly supervising program volunteers.)

Hours X Rate =

b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours X Rate =

c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

Item	Cost
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS = \$0.00

d. TOTAL OF VOLUNTEER PROGRAM COST = \$9,588.05
 (add 4a, 4b, and 4c)

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) \$33,201.93

b. Total of Donations to Volunteer Program, Item 3 (Page 2) \$0.00

c. Subtract Total of Program Costs, Item 4d (Page 3) \$9,588.05

TOTAL PROGRAM BENEFIT \$23,613.88

6. RECRUITING:

Please describe your recruiting programs:

ECMHC has collaborated with SDSU School of Social Work for approximately 15 years. Additional recruitment activities have included outreach to: USD School of Nursing (for Nurse Practitioner inters), USC School of Social Work, Chapman, National and University of Phoenix. ECMHC is known throughout San Diego as providing excellent work experience for students and interns. Several Memoranda of Agreement (MOAs) are in place due to ECMHC's high number of relationships with universities.

7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:

Please describe any special activities and/or achievements your program was involved in during the period of this report:

ECMHC offers a rich learning environment for students/interns/volunteers which includes best practices in: Advanced Assess, Bio-Psycho-Social Assessment/Diagnosis, Crisis Intervention, Information and Referral, Treatment Planning, Individual and Group Therapy and State and Federal Standards of Documentation of Medical Necessity.

8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2016-17:

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

The goal of ECMHC is to continue to attract the best Master's level students and provide experience in the disciplines listed in Section 7 above.

9. GENERAL INFORMATION:

Name of person completing report: Jamie Mancera

Phone: 619-401-5518 Mail Stop: S-515 E-Mail: jamie.mancera@sdcounty.ca.gov

Volunteer Coordinator: Michelle Raby

Phone: 619-401-5415 Mail Stop: S-515 E-Mail: michelle.raby@sdcounty.ca.gov

10. DEPARTMENT CERTIFICATION:


DEPARTMENT HEAD SIGNATURE

7-15-16
DATE