



**COUNTY OF SAN DIEGO  
VOLUNTEER REPORT FORM  
PERIOD JULY 1, 2016 - JUNE 30, 2017  
Deadline: July 14, 2017**

COUNTY OF SAN DIEGO  
2017 JUL 14 AM 10:09  
CLERK OF THE COUNTY  
OF SUPERVISORS

**1. DEPARTMENT INFORMATION:**

Department: HHSA  
Division/Unit: BHS- 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.	3 Hours	1146	X	\$24.14 =	<b>\$27,664.44</b>
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Types of work performed by GENERAL VOLUNTEERS in this category:

ECMHC offers internship programs for Master level MSW and MFT interns as well as Nurse Practitioner interns completing their annual practicum requirements. We generally request and receive 2nd year interns because they are more experienced, useful and need less supervision.

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

No. of Vol.	Hours		X	\$24.14 =	<b>\$0.00</b>
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

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

<u>Position</u>	<u>Hours</u>	X	<u>VCL</u>	=	<u>Dollar Benefit</u>
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00

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

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
2a.	<u>3</u>	<u>1146</u>	<u>\$27,664.44</u>
2b.	<u>0</u>	<u>0</u>	<u>\$0.00</u>
2c.	<u>0</u>	<u>0</u>	<u>\$0.00</u>

<b>Total Vol.</b>	<b>3 Hours</b>	<b>1,146</b>	<b>Total Value =</b>	<b>\$27,664.44</b>
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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: _____
Item Donated: _____	Value: _____
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.):

<u>Item</u>	<u>Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS =

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

**5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:**

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)	<u>\$27,664.44</u>
b. Total of Donations to Volunteer Program, Item 3 (Page 2)	<u>\$0.00</u>
c. Subtract Total of Program Costs, Item 4d (Page 3)	<u>\$9,550.90</u>

**TOTAL PROGRAM BENEFIT**

**\$18,113.54**

**6. RECRUITING:**

Please describe your recruiting programs:

ECMHC has been collaborating with SDSU School of Social Work for about 16 years now. They send us 2nd year interns because we have a relationship with them and ask for them specifically. Other graduate programs that we have recently been working with are the USD School of Nursing which have sent Nurse Practitioner interns to our clinic. Additionally, in the past, USC School of Social Work, Chapman, National, and UOP has sent interns to our clinic. The County of San Diego (HHS and County Counsel) and these universities have MOA's drawn up when students elect to work at our clinic and pass the interview process. We are known throughout San Diego as an excellent placement for Social Work, MFT and Nurse Practitioner students, given the type of experience and expertise that we provide their interns

**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:

We teach our students Best Practices such as Advanced Assess, Bio-Psycho-Social Assessment/Diagnosis, Crisis Intervention, Information & Referral, Trauma Informed Care Practices, Treatment Planning, Individual and Group Therapy and State and Federal Standards of Documentation of Medical Necessity. This allows us to bill for this time from the State (the Feds will not pay for interns), which is an added benefit along with more individual therapy for our clients; which our busy clinicians do not have much time to do themselves.

**8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2017-18:**

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

Our goal is to continue to attract 2-3 of the best Master's level students each year so we can teach them our Best Practices, such as, Advanced Assess, Bio-Psycho-Social Assessment/Diagnosis, Crisis Intervention, Information and Referral, Individual and Group Therapy, and State and Federal Standards of Documentation of Medical Necessity. Billable time is not a total we can easily calculate, but this will be an added benefit to our clinic. Another goal and desire of ours is that when the internship has reached completion, the intern is in good position to enter our System of Care as a full time employee.

**9. GENERAL INFORMATION:**

Name of person completing report: Michelle Raby  
Phone: 619-401-5415 Mail Stop: S-515 E-Mail: [michelle.raby@sdcounty](mailto:michelle.raby@sdcounty)  
Volunteer Coordinator: Same as above  
Phone: \_\_\_\_\_ Mail Stop: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**10. DEPARTMENT CERTIFICATION:**

 7/13/17  
**DEPARTMENT HEAD SIGNATURE** **DATE**