



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

COUNTY OF SAN DIEGO
2017 JUL 17 PM 4:41
CLERK OF THE BOARD
OF SUPERVISORS

1. DEPARTMENT INFORMATION:

Department: Health and Human Services Agency
Division/Unit: Public Health Services (PHS) / PHS Administration

2. VOLUNTEER PROGRAM BENEFITS:

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

No. of Vol.	11 Hours	1968	X	\$24.14	=	\$47,507.52
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Types of work performed by GENERAL VOLUNTEERS in this category:

a) Developing the Quality Improvement Organizational Self-Assessment, b) Creating Infographics, c) Working on health equity and climate change, d) helping with metric workshops, strategy maps, and quality improvement, e) working on Hepatitis A and workforce development assessments and trainings e) Working on strategy maps, quality improvement projects, and performance management, f) Working on developing MCFHS operational manuals, g) Working on developing an operational manual for PHS Admin approval processes, h) Working on policies and procedure for PHS Admin, i) Working on regulatory project and TB workshop summary, and J) Organizing Strengths Based Management materials; Supported TB media campaign; and Worked on virtual supervisors' toolkit

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

No. of Vol.	Hours		X	\$24.14	=	\$0.00
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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

No. of Vol.	Total Hours	0	Total Value =	\$0.00
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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.	11	1968	\$47,507.52
2b.	0	0	\$0.00
2c.	0	0	\$0.00

Total Vol.	11 Hours	1,968	Total Value =	\$47,507.52
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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>
Desktop Services (\$81.20 mo. x 12 mo. x 4 stations)	\$3,897.60
Wireless Network Access (\$81.32 mo. x 12 mo. x 4 stations)	\$3,903.36
Voice Jack & Multiline Phone (\$49.59 mo. x 12 mo. x 4 Accts)	\$2,380.32
Voice mail (\$3.70 mo. x 12 mo. x 4 Accts)	\$177.60
Email Services (\$10.35 mo. x Avgas 8 mo. x 4 Accts)	\$331.20

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>\$47,507.52</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>\$17,461.28</u>

TOTAL PROGRAM BENEFIT

\$30,046.24

6. RECRUITING:

Please describe your recruiting programs:

- Recruited students through local universities and professional development programs that have a MOA with Public Health Services to sponsor internships, which included San Diego State University, University of California San Diego, National University, and Health Career Connection.

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:

Students/volunteers completed the following activities/achievements:

- Developed infographics for Public Health Services Branches
- Created the 2017 Public Health Services Quality Improvement Self-Assessment
- Provided input on and developed public health, health equity, and climate change trainings
- Developed policies and procedures to be incorporated in the Branch Operational Manuals
- Assisted with preparing materials and writing reports for the Public Health Services metric workshops
- Managed the Hepatitis A outbreak and response
- Analyzed the Public Health Services Core Competency survey results and developed PowerPoint presentations to showcase results
- Cataloged and organized Strengths-Based Management materials
- Supported the Tuberculosis media campaign
- Worked on the virtual Supervisors' Toolkit
- Created strategy maps
- Assessed quality improvement projects, including team charters and storyboards

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:

To provide an opportunity for students to advance their professional skills while assisting the department with overall program administration.

9. GENERAL INFORMATION:

Name of person completing report:	<u>Pete Sison</u>		
Phone: <u>619-542-4175</u>	Mail Stop: <u>P-578</u>	E-Mail:	<u>pete.sison@sdcounty.ca.gov</u>
Volunteer Coordinator:	<u>Saman Yaghmaee</u>		
Phone: <u>619-542-4008</u>	Mail Stop: <u>P-578</u>	E-Mail:	<u>saman.yaghmaee@sdcounty.ca.gov</u>

10. DEPARTMENT CERTIFICATION:


DEPARTMENT HEAD SIGNATURE

July 14, 2017
DATE