



**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/California Children's Services

2. VOLUNTEER PROGRAM BENEFITS:

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

No. of Vol.	12 Hours	1438	X	\$24.14	=	\$34,713.32
-------------	----------	------	---	---------	---	-------------

Types of work performed by GENERAL VOLUNTEERS in this category:

Assist in gathering background information for research papers, generate various reports, administrative activities such as formatting documents and creating fliers/brochures.

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

No. of Vol.	0 Hours		X	\$24.14	=	\$0.00
-------------	---------	--	---	---------	---	--------

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 below.)

<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.	0	Total Hours	0	Total Value =	\$0.00
--------------------	----------	--------------------	----------	----------------------	---------------

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>12</u>	<u>1438</u>	<u>\$34,713.32</u>
2b.	<u>0</u>	<u>0</u>	<u>\$0.00</u>
2c.	<u>0</u>	<u>0</u>	<u>\$0.00</u>

Total Vol.	12	Hours	1,438	Total Value =	\$34,713.32
-------------------	-----------	--------------	--------------	----------------------	--------------------

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>
Volunteers are not using any office equipment or supplies.	\$0.00
Printing and duplicating fliers	\$100.00

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>\$34,713.32</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>\$18,108.10</u>

TOTAL PROGRAM BENEFIT

\$16,605.22

6. RECRUITING:

Please describe your recruiting programs:

Collaborated with local schools such as, SDSU and St. Augustine to recruit for volunteers. The volunteers in CCS program are required to complete volunteer hours before entering an OT/PT program at a college/university.

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:

Student volunteers are very valuable as they assist with performing variety of tasks such as craft activities, lesson plans in subjects as art, music, dance, fitness, gardening, nutritional cooking, hair-cutting, and design consultation. Volunteers also contribute their talent and energy toward creating comfort, joy, and a sense of stability to children in need as they face transition and temporary placement.

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 a broad range of health and social services, promoting wellness, self-sufficiency, and a better quality of life for all individuals and families in San Diego County by utilizing students volunteers pursuing a career in occupational/ Physical therapy.

9. GENERAL INFORMATION:

Name of person completing report:	<u>Celia Gonzales</u>		
Phone: <u>619-528-4064</u>	Mail Stop: <u>P586</u>	E-Mail:	<u>celia.gonzales@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.Yaghmae@sdcounty.ca.gov</u>

10. DEPARTMENT CERTIFICATION:


DEPARTMENT HEAD SIGNATURE

July 14, 2017
DATE