

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

COUNTY OF SAN DIEG

2017 JUL 17 PM 4: 4

CLERK OF THE SCAR
OF SUPERVISORS

1. **DEPARTMENT INFORMATION:**

Department:

Health and Human Services Agency

Division/Unit:

Public Health Services / Public Heath Limeing

2. VOLUNTEER PROGRAM BENEFITS:

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

Contract of the Contract of th				
No. of Vol.	200 Hours	19,500 X	\$24.14 =	\$470,730.00

Types of work performed by GENERAL VOLUNTEERS in this category:

They participated in supervised visits to MCH cleint in the home to provide education, outreash, assessments and referrals ervices to low-income families. Students did not provide these services as a substitute for PHN services.

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

No. of Vol.	Hours	X	\$24.14 =	\$0.00
	Section and the section of the secti			

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

Position		<u>Hours</u>	X	$\underline{\text{VCL}} =$	Dollar Benefit
PHN Project Manager		208		\$45.00	\$9,360.00
PHN Project Worker		100		\$35.00	\$3,500.00
					\$0.00
					\$0.00
					\$0.00
No. of Vol.	Total Hours	308		Total Value =	\$12,860.00

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

No. of Volunteers		<u>Hours</u>	Dollar Benefit	
2a.	200	19500	\$470,730.00	
2b.	0	0	\$0.00	
2c.	0	308	\$12,860.00	
Total Vol.	200 Hours	19,808 Total Value =	\$483,590.00	

3. DONATIONS TO VOLUNTEER PROGRAM:

(add 4a, 4b, and 4c)

Please list all donations to the department's Volunteer program including monetary donations and <u>tangible/intangible</u> 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.

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Item Donated: Item Donated:			/alue:	
Item Donated:	<u> </u>		/alue:	
Item Donated:	<u> </u>		/alue:	
Item Donated:			Value:	
Item Donated.				
	TOTAL VA	LUE =		\$0.00
VOLUNTEER PROGRAM COS				
 a. Cost of supervision of volunteer rate of staff person (s) directly super 			multiplied by	y the hourly
rate of staff person (s) unectry supe	Alzing brokram voic	intects.)		Ca .
Hours 110 X	Rate \$48.04	=		\$5,284.40
b. Cost of program coordination (to coordinator(s)). This section sho description preparation, volunteer programs of the contraction of the coordinate of th	uld include coordina	tion of staff, c		
Hours 50 X	Rate \$52.07	=		\$2,603.50
c. Other program costs (volunteer	training materials/su	pplies, recogn	ition costs, et	tc.):
<u>Item</u>				Cost
Desktop Services (\$81.20 mo. x 12	mo. x 6 stations)			\$5,846.40
Wireless Network Access (\$81.32	mo. x 12 mo. X 6 sta	tions)		\$5,855.04
Voice Jack & Multiline Phone (\$49	9.59 mo. x 12 mo. x	5 Accts)		\$3,570.48
Voice mail (\$3.70 mo. x 12 mo. x	6 Accts)			\$266.40
Email Services (\$10.35 mo. x Avg	gas 8 mo. x 6 Accts)			\$745.20
TOTAL OF OTHER PROGRAM	M COSTS	=		\$16,283.52
d. TOTAL OF VOLUNTEER PRO	OGRAM COST	=		\$24,171.42

5 NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)

\$483,590.00

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

\$0.00

c. Subtract Total of Program Costs, Item 4d (Page 3)

\$24,171.42

TOTAL PROGRAM BENEFIT

\$459,418.58

6. RECRUITING:

Please describe your recruiting programs:

PHN Administration staff evaluates requests for internship opportunities passed on by the DHRO, and/or received via email or telephone calls. Students with the highest qualifications, and whose learning program and goals align with those of PHS/PHN Administration are moved to the top of the priority list. PHN Administration has limited staff to supervise interns and limited space to house them. Therefore, PHN Administration generally only has one intern at any given time.

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:

Worked with HSHB and PHN Admin to manage input of policies into PolicyTech.

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:

Public Health Nursing adminstration will continue maintaining re;lationship with nursing programs with higher education institutions.

9. GENERAL INFORMATION:

Name of person completing report:

Bruce Coon

Phone: 619-542-4136

Mail Stop: P579

E-Mail: bruce.coon@sdcounty.ca

Volunteer Coordinator:

Phone: 619-542-4008

Saman Yaghmaee

Mail Stop: P578

E-Mail:

saman.yaghmaee.sdcou

10. DEPARTMENT CERTIFICATION:

DEPARTMENT HEAD SIGNATURE

July 14, 2017