

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

2017 JUL 14 PM 1:41
CLERK OF THE BOARD
OF SUPERVISORS

#### 1. DEPARTMENT INFORMATION:

Department:

**Medical Examiner** 

Division/Unit:

Administration/Investigations/Toxicology/Pathology

## 2. VOLUNTEER PROGRAM BENEFITS:

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

The state of the s				
No. of Vol.	0.71	042 0 7	00414	020 260 22
INO. OI VOL	8 Hours	843.8 X	\$24.14 =	\$20,369.33
MONTH CONTRACT OF THE PARTY OF				4-0,000

Types of work performed by GENERAL VOLUNTEERS in this category:

Administration/Investigation/Toxicology: answer incoming phone calls and route appropriately, filing and special projects.

Pathology: researching cases and updating the case management system.

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

No. of Vol.	The second second	WY 00 4	4 4 000000	\$0.00
No of Wal	Life Part 1947		200	
No. of Vol.	Hours	X \$24	100000	DU-UU
				40.00

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

<u>Position</u>		<b>Hours</b>	X	$\underline{VCL} =$	Dollar Benefit
Chaplain		1500		\$26.95	\$40,425.00
Epidemiologist		292		\$32.52	\$9,495.84
					\$0.00
					\$0.00
					\$0.00
No. of Vol.	Total Hours	1,792		Total Value =	\$49,920.84

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

Chaplains: provide peer support internally and at death scenes. Family consent facilitated for research.

Epidemiologist: provides SIDS support and compiles statistical data.

# d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

No. of Volunt	eers	<u>Hours</u>	Dollar Benefit
2a.	8	843.8	\$20,369.33
2b.	0	0	\$0.00
2c.	3	1,792	\$49,920.84
TotaltVoL	11 Hours	2,636 Total Value =	\$70,290.17

3. DONATIONS TO VOLUNTEER PROGRAM	M
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4.

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
VOLUNTEER PROGRAM COSTS:  a. Cost of supervision of volunteeers (total rate of staff person (s) directly supervising person (s)	program volunteers.)	
Hours 72 X Rate	\$60.65 =	\$4,366.80
Hours 36 X Rate C. Other program costs (volunteer training)	\$35.39	\$1.274.04 ecognition costs, etc.):
<u>Item</u>		Cost
TOTAL OF OTHER PROGRAM COST	rs =	\$0.00
d. TOTAL OF VOLUNTEER PROGRAM (add 4a, 4b, and 4c)	f COST =	\$5,640.84

# 5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

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

\$70,290.17

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

\$0.00

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

\$5,640.84

## **TOTAL PROGRAM BENEFIT**

\$64,649.33

# 6. RECRUITING:

Please describe your recruiting programs:

COSD Website; Medical Examiner website and contact with local colleges. All volunteers recruited are from specialized fields that benefit our department.

## 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:

8.	<b>VOLUNTEER</b>	<b>PROGRAM GOA</b>	LS FOR FISCAL	YEAR 2017-18:
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Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

Continue to build a volunteer workforce to supplement our staffing level and provide customer service to our next of kin.

#### **GENERAL INFORMATION:** 9.

Name of person completing report:

Theresa Liget

Phone: (858) 694-3072 Mail Stop: O-10 E-Mail: Theresa.Liget@sdcounty

Guadalupe Giraldo Volunteer Coordinator:

Mail Stop: O-10 E-Mail: Phone: (858) 694-2894 Guadalupe.Giraldo@sdc

10. DEPARTMENT CERTIFICATION:

7/14/2017