



COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 2019 - JUNE 30, 2020
Deadline: July 17, 2020

1. DEPARTMENT INFORMATION:

Department:	HHS-Behavioral Health Services
Division/Unit:	Edgemoor DP SNF

2. VOLUNTEER PROGRAM BENEFITS:

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

No. of Volunteers: 519 Hours: 15,379 x \$29.95 = \$460,601.05

Types of work performed by GENERAL VOLUNTEERS in this category:
Volunteers typically help in the Therapeutic Recreation Department at Edgemoor. Some of the programs they assist with include; ceramics, bingo, arts & crafts, jewelry art, fitness, Zumba, relaxation group, yoga, movies, Spanish group, cards & games, and provide 1:1 visits for socialization and to read to residents. Spiritual volunteers offer weekly church services, Catholic Mass, end of life ministry and weekly prayers with residents. Volunteers provide pet therapy, music entertainment, assist with the Richard Brown Car Show, and hold the Kiwanis Club pancake breakfast for residents. Christian College students volunteer on their Day of Service and have come in for special programs/events. Edgemoor continues to work in partnership with local nursing schools in providing training for nursing student interns under MOA with Edgemoor. In March, Edgemoor received a County directive that all volunteers and student interns were not "essential workers" due to the COVID-19 pandemic. No volunteers have been in the building since early March. This report is reflective of the volunteer program from July 2019-early March 2020.

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

No. of Volunteers: None Hours: x \$29.95 = \$

Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

Not Applicable



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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.)

Position	Hours	x	VCL	=	Dollar Benefit
Island Mix-Ukelele Band	5		\$125.00		\$625.00
Music for dining program	4		\$100		\$400.00

No. of Volunteers: 9	Total Hours: 9	Total Value: = \$1,025.00
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Types of work performed by SPECIALIZED VOLUNTEERS in this category:

Island Mix, a ukulele group that plays oldies music, provides entertainment for residents every other month.

Entertainers played piano to provide background music for the evening dining program.

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):



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	No. of Volunteers	Hours	Dollar Benefit
2a.	519	15,379	\$ 460,601.05
2b.	0		
2c.	12	9	\$1,025.00
Total Volunteers	531	Total Hours	15,388
		Total Value	\$461,626.05

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:	Car Show Donation	Value:	\$1500.00
Item Donated:		Value:	
Item Donated:		Value:	
Item Donated:		Value:	
Item Donated:		Value:	
Total Value:			\$1500.00

4. VOLUNTEER PROGRAM COSTS:

- a. Cost of direct supervision of volunteers (total hours of direct supervision times hourly rate of staff person(s) directly supervising program volunteers.

Hours: 160 x Rate: \$30 = \$4,800.00

- b. Cost of program coordination (total hours of program coordination times hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placements and recognition, etc.

Hours: N/A x Rate: N/A = \$ N/A

- c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

<u>Item</u>	<u>Cost</u>
Annual Volunteer Luncheon	\$300.00



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_____	_____
_____	_____
_____	_____
_____	_____
TOTAL OF OTHER PROGRAM COSTS	\$5,100.00



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d. **TOTAL OF VOLUNTEER PROGRAM COST**
(Sum of 4a, 4b and 4c)

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

- | | |
|--|--------------|
| a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) | \$461,626.05 |
| b. Total of Donations to Volunteer Program, Item 3 (Page 2) | \$ 1,500.00 |
| c. Subtract Total of Volunteer Program Costs, Item 4d (Page 3) | \$ 5,100.00 |

TOTAL PROGRAM BENEFIT

\$458,026.05

6. RECRUITING:

Please describe your recruiting programs:

County Website
Personal contacts
Word of Mouth
Connection with various Nursing Schools, Colleges, Universities for nursing students, student interns, other volunteers

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:



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8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2019-20:

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

<ol style="list-style-type: none">1. To hire and train a Volunteer Coordinator to oversee the Volunteer Program at Edgemoor.2. Volunteer Coordinator to work in collaboration with TR department to provide meaningful volunteer opportunities that meet resident needs and incorporate COVID-19 requirements.3. Resume allowing TR, faith-based, and community volunteers allowed in the building by October 2020.4. Design a volunteer T-Shirt to identify volunteers while offering their services at Edgemoor and show appreciation for their services.
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9. GENERAL INFORMATION:

Name of Person Completing Report:	Anne Monaco		
Phone Number:	619-596-5581	Mail Stop:	S552
Email:	anne.monaco@sdcounty.ca.gov		

Volunteer Coordinator:	N/A		
Phone Number:		Mail Stop:	
Email:			

10. DEPARTMENT CERTIFICATION:

DEPARTMENT HEAD SIGNATURE

DATE