

COUNTY OF SAN DIEGO VOLUNTEER REPORT FORM PERIOD JULY 1, 2020 - JUNE 30, 2021

Deadline: July 16, 2021

1. DEPARTMENT INFORMATION:

Department:

Health & 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.	3 Hours	384 X \$33.61 =	\$12,906.24

Types of work performed by GENERAL VOLUNTEERS in this category:

All three student interns were brought on to support public health Reaccreditation efforts. This included reviewing narratives and documents against standards; providing feedback to help advance conformity to standards; supporting the preparation of documents and coversheets; assisting domain teams in the conduct of meeting, preparing meeting notes and actively participating in meeting discussions and preparations. These interns also assisted with at least one Performance Management or Quality Improvement Committee meeting by helping with content and preparations for meetings.

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

No. of Vol.	0 Hours	X \$33.61 =	\$0.00

Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

<u>Position</u>			<u>Hours</u>	X	<u>VCL</u>	=	Dollar Benefit
·	_	<u> </u>		_			\$0.00
			-	_			\$0.00
				-			\$0.00
				_			\$0.00 \$0.00
				_			\$0.00
No. of Vol.	0	Total Hours	0		Total Value	e =	\$0.00
		MENT VOLUNT		above):			
d. TOTALS OF I		MENT VOLUNT	EERS (from <u>Hours</u>	above):			<u>Dollar Benefit</u>
No. of Volume		26	Hours 384	<u>1</u>		_	\$12,906.24
No. of Volume 2a. 2b.		3	Hours 384	4 <u>)</u>			\$12,906.24 \$0.00
No. of Volume		26	Hours 384	<u>1</u>			\$12,906.24
No. of Volume 2a. 2b.		3	Hours 384	4))	Value =		\$12,906.24 \$0.00
No. of Volume 2a. 2b. 2c. Total Vol. DONATIONS TO Please list all dona	O VOLU	3 Hours NTEER PROGRETHE department's Verms such as comp	Hours 384 () () () () () () () () () () () () ()	4 Total gram in ne, trans	Value =		\$12,906.24 \$0.00 \$0.00
No. of Volume 2a. 2b. 2c. Total Vol. DONATIONS TO Please list all dona tangible/intangible market value to ear Item Donated:	O VOLU	3 Hours NTEER PROGRETHE department's Verens such as completed to the total value.	Hours 384 384 384 RAM: Volunteer proputers, air timue of the don	gram in ne, trans	Value = cluding mo sportation, bection. Value:	oooks, e	\$12,906.24 \$0.00 \$0.00 \$12,906.24 donations and etc. Please assign a fair
No. of Volume 2a. 2b. 2c. Total Vol. DONATIONS TO Please list all dona tangible/intangible market value to ear Item Donated: Item Donated: Item Donated:	O VOLU	3 Hours NTEER PROGRETHE department's Verens such as completed to the total value.	Hours 384 384 384 RAM: Volunteer proputers, air timue of the don	gram in ne, trans	Value = cluding mo sportation, bection. Value: Value:	oooks, e	\$12,906.24 \$0.00 \$0.00 \$12,906.24 donations and etc. Please assign a fair
No. of Volume 2a. 2b. 2c. Total Vol. DONATIONS TO Please list all dona tangible/intangible market value to ear	O VOLU	3 Hours NTEER PROGRETHE department's Verens such as completed to the total value.	Hours 384 () () () () () () () () () () () () ()	4 Total gram in ne, translations s	Value = cluding mo sportation, bection. Value: Value:	pooks, e	\$12,906.24 \$0.00 \$0.00 \$12,906.24

3.

VOLUNTEER PROGRAM COSTS: a. Cost of supervision of volunteers (total hours of direct	et supervision multiplied by the hourly rate of staff
person (s) <u>directly supervising program volunteers.</u>)	st supervision multiplied by the flourly rate of staff
Hours 20 X Rate \$54.70	= \$1,094.00
b. Cost of program coordination (total hours of program coordinator(s)). This section should include coordination preparation, volunteer placement, recognition, etc.)	· · · · · · · · · · · · · · · · · · ·
Hours 0 X Rate	= \$0.00
c. Other program costs (volunteer training materials/sup	oplies, recognition costs, etc.):
<u>Item</u>	Cost
LAN Access for 3 vol. (\$65.34/month x 17 months)	\$1,110.75
Email Services for 3 vol. (\$5.24/month x 17 months) Laptops for 3 vol. (\$80.65/month x 17 months)	\$89.00
Laptops for 5 vor. (\$60.05/month x 17 months)	\$1,371.09
TOTAL OF OTHER PROGRAM COSTS	= \$2,570.9
d. TOTAL OF VOLUNTEER PROGRAM COST (add 4a, 4b, and 4c)	\$3,664.9
NET BENEFIT TO DEPARTMENT FROM VOLUM	
a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)b. Total of Donations to Volunteer Program, Item 3 (Page 2)	
c. Subtract Total of Program Costs, Item 4d (Page 3)	\$0.00 \$0.00 \$3,664.91
TOTAL PROGRAM BENEFIT	\$9,241.33

5.

6. RECRUITING:

Please describe your recruiting programs:

- Recruited graduate and undergraduate students through local universities and professional development programs that have a MOA with Public Health Services to sponsor internships, which for FY 20/21 included San Diego State University
- · Responded to inquiries from students for volunteer opportunities

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:

- · Supported public health Reaccreditation efforts.
- Assisted the Performance Management / Quality Improvement Committee meetings.

8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2020-21:

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.

Q	GENERAL	. INFORMATION:

Name of person completing report: Caroline Mosher

Phone: 619-542-4174 Mail Stop: P-578 E-Mail: Caroline.Mosher@sdcounty.ca.gov

Volunteer Coordinator: Caroline Mosher

Phone: 619-542-4174 Mail Stop: P-578 E-Mail: Caroline.Mosher@sdcounty.ca.gov

10. DEPARTMENT CERTIFICATION:

DEPARTMENT HEAD SIGNATURE

WILMA J. WOOTEN, MD, MPH Public Health Officer JUL 7 2 202

DATE