

Department: Division/Unit:

2.

COUNTY OF SAN DIEGO VOLUNTEER REPORT FORM PERIOD JULY 1, 2024 - JUNE 30, 2025

Deadline: August 8, 2025

Department of Strategy and Community Engagement

Health & Human Services Agency

1. **DEPARTMENT INFORMATION:**

| No. of Vol. | 3 Hours | 245 | X | \$40.14 | = | \$9,834.30 |
|---|--|---|---------|---|------------------------|--|
| Types of work perfe | ormed by GENERAL VO | OLUNTEERS ir | this o | category: | | |
| event planning. The Volunteers also sup | - | ich as event flye implementation | rs, soo | cial media mmunity e | posts vents | s, e-newsletters, and videos. s and meetings, including the |
| b. INSTITUTIONA etc.) | L VOLUNTEERS (this | section should i | nclude | honor ca | mp ir | nmates, PIC/RETC, GAIN, |
| | | | | | | |
| | 0 Hours | 0 | X | \$40.14 | | \$0.00 |
| c. SPECIALIZED V requiring specific sl These specialized p | ormed by INSTITUTION VOLUNTEERS (this seckills and/or expertise lev | NAL VOLUNTE tion should included in the compensation le | EERS | in this cate | egory f Spe | |
| Types of work performance | ormed by INSTITUTION OLUNTEERS (this seckills and/or expertise levositions have verifiable of | NAL VOLUNTE tion should included in the compensation le | EERS | in this cate | egory f Spe | : cial Volunteers in positions an, sports figure or celebrity) |
| c. SPECIALIZED V requiring specific sl. These specialized p indicate the position | ormed by INSTITUTION OLUNTEERS (this seckills and/or expertise levositions have verifiable of | NAL VOLUNTE tion should included in the second in the seco | EERS: | in this cate ilization o torney, ph VCL). If y | gory f Spe ysici | : cial Volunteers in positions an, sports figure or celebrity) ave such a volunteer, please <u>Dollar Benefit</u> \$0.0 |
| c. SPECIALIZED V requiring specific sl. These specialized p indicate the position | ormed by INSTITUTION OLUNTEERS (this seckills and/or expertise levositions have verifiable of | NAL VOLUNTE tion should included in the second in the seco | EERS: | in this cate ilization o torney, ph VCL). If y | gory f Spe ysici | cial Volunteers in positions an, sports figure or celebrity) ave such a volunteer, please Dollar Benefit \$0.00 |
| c. SPECIALIZED V requiring specific sl. These specialized p indicate the position | ormed by INSTITUTION OLUNTEERS (this seckills and/or expertise levositions have verifiable of | NAL VOLUNTE tion should included in the second in the seco | EERS: | in this cate ilization o torney, ph VCL). If y | gory f Spe ysici | : cial Volunteers in positions an, sports figure or celebrity) ave such a volunteer, please <u>Dollar Benefit</u> \$0.0 |

| Y | | | | | |
|-------------|---|-------------|---|---------------|--------|
| 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):

| No. of V | <u>'olunteers</u> | <u>Hours</u> | | Dollar Benefit |
|------------|-------------------|--------------|---------------|----------------|
| 2a. | 3 | 245 | | \$9,834.30 |
| 2b. | 0 | 0 | • | \$0.00 |
| 2c. | 0 | 0 | • | \$0.00 |
| | | | • | |
| Total Vol. | 3 Total Hours | 245 | Total Value = | \$9,834.30 |

3. DONATIONS TO VOLUNTEER PROGRAM:

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.

| Item Donated: | Value: | |
|---------------|--------|--|
| Item Donated: | Value: | |
| | | |

4. VOLUNTEER PROGRAM COSTS:

a. Cost of supervision of volunteers (total hours of direct supervision multiplied by the hourly rate of staff person (s) <u>directly supervising program volunteers.</u>)

TOTAL VALUE =

| Hours 6 | X Rate | \$48.90 | = | \$293.40 |
|----------|--------|---------|---|------------|
| Hours 10 | X Rate | \$48.90 | = | \$489.00 |
| Hours 96 | X Rate | \$29.00 | = | \$2,784.00 |

\$0.00

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 | 60 | X Rate | \$38.68 | = | \$2,320.80 |
|-------|----|--------|---------|---|------------|
| Hours | 40 | X Rate | \$42.36 | = | \$1,694.40 |

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

| <u>Item</u> | | Cost |
|---|---|------------|
| Email Services | | \$27.46 |
| Network Access | | \$354.32 |
| Laptops | | \$352.20 |
| | | |
| | | |
| | | |
| TOTAL OF OTHER PROGRAM COSTS | = | \$733.98 |
| d. TOTAL OF VOLUNTEER PROGRAM COST (add 4a, 4b, and 4c) | = | \$8,315.58 |

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

| a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) | \$9,834.30 |
|---|------------|
| b. Total of Donations to Volunteer Program, Item 3 (Page 2) | \$0.00 |
| c. Subtract Total of Program Costs, Item 4d (Page 3) | \$8,315.58 |

TOTAL PROGRAM BENEFIT

\$1,518.72

6. RECRUITING:

Please describe your recruiting programs:

Volunteers submitted interest forms and applications to our department after visiting the County's volunteer website. We receive applications year-round, and do additional promotion through schools, universities, and social media when more volunteers are needed.

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:

During this period, our department merged the Office of Strategy and Innovation, and the Office of Equitable Communities, into the Department of Strategy and Community Engagement. As a result of that merge, we began recruiting and managing volunteers as a joint team. One achievement that resulted from this effort was receiving 35 volunteer applications through our revamped recruitment process.

Our volunteers also contributed to achievements for our department, including leading the planning for a youth-focused networking event, and supporting the Grandparents Raising Grandchildren Family Enrichment Event at the San Diego Safari Park.

8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2024-25:

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

We aim to provide meaningful volunteer experiences for diverse students throughout the region. Although we do not have a specific goal for the number of volunteers we onboard, we plan to continue utilizing volunteer hours to support special projects and new initiatives, and inspire a future County workforce to pursue HHSA careers.

Our team also leads the Live Well Center for Innovation and Leadership, Internship Subcommittee, through which we aim to provide high-quality work experiences and promote HHSA as an Agency of One. To achieve this goal, we are partnering with other departments to develop a sustainable and integrated student internship volunteer program. We have continued to work toward this goal throughout 2024-2025, and plan to continue our partnership in the next fiscal year.

9. GENERAL INFORMATION:

| | Name of person completing report: | | | Allison Hirahara & Madisen Ferras | | | |
|-----|--------------------------------------|----------------------------------|------------|-----------------------------------|---------|--|--|
| | Phone: | (619) 977-5839 (619) 977-0471 | Mail Stop: | W-294 COV-4 | E-Mail: | allison.hirahara@sdcounty.ca.gov madisen.ferras@sdcounty.ca.gov | |
| | Volunteer Coordinator: Allison Hiral | | | hara & Madisen Ferras | | | |
| | Phone: | (619) 977-5839 (619) 977-0471 | Mail Stop: | W-294 COV-4 | E-Mail: | allison.hirahara@sdcounty.ca.gov madisen.ferras@sdcounty.ca.gov | |
| 10. | DEPAH | RTMENT CERTIF | FICATION: | | | | |
| | | | | | | | |
| | | DEPARTMENT | HEAD SIGNA | TURE | DA | <u>ΓΕ</u> | |