



**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 2014 - JUNE 30, 2015
Deadline: July 17, 2015**

COUNTY OF SAN DIEGO
2015 JUL -8 AM 11:28
CLERK OF THE BOARD
OF SUPERVISORS

1. DEPARTMENT INFORMATION:

Department: HHSA _____

Division/Unit: Central Region _____

2. VOLUNTEER PROGRAM BENEFITS:

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

No. of Vol. 6 Hours 637 X \$ 23.07 = \$ 14,695.59

Types of work performed by GENERAL VOLUNTEERS in this category:

Under immediate supervision, volunteers perform routine clerical duties including a wide variety of clerical/administrative support tasks such as receptionists, file clerks, and record keeping assignments.

CHAT job description: Assists with CHAT team in community outreach efforts including creating presentations, assisting with several community projects including clean up, community gardens, and health fairs, routine clerical duties, and record keeping assignments.

Central Region Public Health job description: Assists in general clerical duties, greets clients entering lobby, data entry, basic filing, provides general office support to staff and customer service.

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

No. of Vol. 0 Hours X \$ 23.07 = \$

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 below.)

<u>Position</u>	<u>Hours</u>	<u>X</u>	<u>VCL</u>	<u>=</u>	<u>Dollar Benefit</u>
_____	_____		_____		_____
_____	_____		_____		_____
_____	_____		_____		_____
_____	_____		_____		_____
_____	_____		_____		_____
No. of Vol.	Total Hours			=	Total Value = \$

Types of work performed by **SPECIALIZED VOLUNTEERS** in this category:

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

	<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
2a.	<u>6</u>	<u>637</u>	<u>\$14,695.59</u>
2b.	_____	_____	_____
2c.	_____	_____	_____
Total Vol.	<u>6</u>	Total Hours <u>637</u>	Total Value = <u>\$ 14,695.59</u>

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: _____ Value: _____
 Item Donated: _____ Value: _____
 Item Donated: _____ Value: _____
 Item Donated: _____ Value: _____
 Item Donated: _____ Value: _____

TOTAL VALUE = \$0

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.

EC Hours: 27	X	Rate \$19.79	=	\$534.33
AB Hours: 14	X	Rate \$30.58	=	\$428.12
VG Hours: 67	X	Rate \$19.95	=	\$1,336.65
JR Hours: 45	X	Rate \$30.58	=	\$1,376.10
LN Hours: 27	X	Rate \$26.13	=	\$705.51

Total: \$4,380.71

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 35	X	Rate \$16.87	=	\$590.45
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c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

<u>Item</u>	<u>Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS= \$0

d. TOTAL OF VOLUNTEER PROGRAM COST = \$4,971.16
(add 4a, 4b, and 4c)

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

- a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) \$ 14,695.59
- b. Total of Donations to Volunteer Program, Item 3 (Page 2) \$ 0
- c. Subtract Total of Volunteer Program Costs, Item 4d (Page 3) \$ 4,971.16

TOTAL PROGRAM BENEFIT \$9,724.43

6. RECRUITING:

Please describe your recruiting programs:

Keeping HHSA website current and work with individual Central Region sites to process referrals.

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:

A volunteer worked closely with MAAC Project staff and residents at PJAM to develop the Intergenerational Community Garden. PJAM's Intergenerational garden also provided space to promote a healthy lifestyle and build community awareness which supports the County's *Live Well San Diego* Initiative.

8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2015-16:

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

Ensure other departments and the community is aware of the Central Region Volunteer program. Also, continue to attend the Quarterly Volunteer Coordinator meetings.

I would like to increase the number of volunteers within Central Region by connecting with community programs that have people seeking volunteer work.

9. GENERAL INFORMATION:

Name of Person Completing Report: Sarah Alvarado

Phone Number: 619-338-2720 Mail Stop: W408 E-Mail: sarah.alvarado@sdcounty.ca.gov

Volunteer Coordinator: Sarah Alvarado

Phone Number: 619-338-2720 Mail Stop: W408 E-Mail: sarah.alvarado@sdcounty.ca.gov

10. DEPARTMENT CERTIFICATION:



DEPARTMENT HEAD SIGNATURE

6/29/15

DATE