1. **DEPARTMENT INFORMATION:**

Department: **Health & Human Services Agency**
Division/Unit: **Public Health Services / Emergency Medical Services**

2. **VOLUNTEER PROGRAM BENEFITS:**

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

No. of Vol.	5 Hours	2224	X	$23.07	=	$51,307.68

Types of work performed by GENERAL VOLUNTEERS in this category:

Contributed to the analysis and preparation of monthly and annual EMS reports. Collected demographic, economic and behavioral health indicators, and also, calculated measures and standardizes data from public health branches, other departments within HHSA, and public at large.

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

No. of Vol.	Hours	X	=	$0.00

Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

Performed research and analysis and collected demographic, economic and behavioral health indicators, and also, calculated measures and standardizes data from public health branches, other departments within HHSA, and public at large.

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

Position	Hours	X	VCL	=	Dollar Benefit
Epidemiologist (2)	1124		$64.42		$72,408.08
					$0.00
					$0.00
					$0.00
					$0.00

No. of Vol.	Total Hours	1,124	Total Value =	$72,408.08

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	No. of Volunteers	Hours	Dollar Benefit
2a.	5	2224	$51,307.68
2b.	0	0	$0.00
2c.	0	1,124	$72,408.08

Total Vol.	5 Hours	3,348 Total Value =	$123,715.76

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

TOTAL VALUE =	$0.00

4. VOLUNTEER PROGRAM COSTS:

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

Hours	100	X Rate	$48.80	=	$4,880.00

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	4	X Rate	$48.80	=	$195.20

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

Item	Cost
Standard PC bundle annual cost $1,889.64 (x2)*	$3,779.28
Voice Jack – VM – Multi Line annual cost (x2)*	$1,278.96
Email annual cost (x2)*	$248.40
*Not every volunteer had IT services, and some share	

TOTAL OF OTHER PROGRAM COSTS	=	$5,306.64

d. TOTAL OF VOLUNTEER PROGRAM COST = $10,381.84
(add 4a, 4b, and 4c)

132

5. **NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:**

   a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) $123,715.76

   b. Total of Donations to Volunteer Program, Item 3 (Page 2) $0.00

   c. Subtract Total of Program Costs, Item 4d (Page 3) $10,381.84

              TOTAL PROGRAM BENEFIT   **$113,333.92**

6. **RECRUITING:**

   Please describe your recruiting programs:

   EMS recruits volunteers primarily from San Diego State University (SDSU / School of Public Health/ Internship Placement Office. In FY 14/15 the physician volunteers came from University of San Diego / Health Care Informatics program and the University of California at San Diego / SDSU General Preventive Medicine Residency Program.

   Health/ Internship Placement Office.

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:

   The volunteer program contributed in generating major reports during this period, such as, Community Health Statistics reports in San Diego County.

133

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:

Recruit up to 5 volunteers from the School of Public Health at San Diego State University.

9. **GENERAL INFORMATION:**

Name of person completing report: Adria Cavanaugh

Phone: 619-285-6485   Mail Stop: S-555   E-Mail: adria.cavanaugh@sdcou

Volunteer Coordinator: Saman Yaghmaee

Phone: 619-542-4008   Mail Stop: P-578   E-Mail: saman.yaghmaee@sdcc

10. **DEPARTMENT CERTIFICATION:**

_____   July 22, 2015
DEPARTMENT HEAD SIGNATURE   **DATE**

134