



**COUNTY OF SAN DIEGO  
VOLUNTEER REPORT FORM  
PERIOD JULY 1, 2023 - JUNE 30, 2024  
Deadline: August 7, 2024**

**1. DEPARTMENT INFORMATION:**

Department: Medical Examiner  
Division/Unit: Administration/Investigation/Exam Room/Toxicology

**2. VOLUNTEER PROGRAM BENEFITS:**

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

No. of Vol.	12	Hours	1,359.00	X	\$38.61	=	\$52,470.99
-------------	----	-------	----------	---	---------	---	-------------

Types of work performed by GENERAL VOLUNTEERS in this category:

- Administration: Filing and special projects
- Investigations: Filing and special projects with John/Jane Does
- Exam Room: Stocking supplies and special projects
- Toxicology: Filing, cleaning glassware and special projects

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

No. of Vol.		Hours		X	\$38.61	=	\$0.00
-------------	--	-------	--	---	---------	---	--------

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

<u>Position</u>	<u>Hours</u>	X	<u>VCL</u>	=	<u>Dollar Benefit</u>
Chaplain	924		\$27.74		\$25,631.76
Epidemiologist	95.8		\$44.18		\$4,232.44
Pathology Assistant	4080		\$30.97		\$126,357.60
Medical Student	3040		\$49.60		\$150,784.00
Residents	728		\$128.66		\$93,664.48

No. of Vol.	42	Total Hours	8,868	Total Value =	<b>\$400,670.28</b>
-------------	----	-------------	-------	---------------	---------------------

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

Chaplain: Provides peer support internally and at death scenes for families. Obtains family consent for research. Epidemiologist: provides SIDS support and compiles statistical data.

Pathology Assistants: Help the Forensic Autopsy Specialists intake and release decedents and assist with the autopsies. Medical Students: Conduct Autopsies and write reports.

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
2a.	12	1359	\$52,470.99
2b.	0	0	\$0.00
2c.	42	8,868	\$400,670.28

<b>Total Vol.</b>	<b>54</b>	<b>Hours</b>	<b>10,227</b>	<b>Total Value =</b>	<b>\$453,141.27</b>
-------------------	-----------	--------------	---------------	----------------------	---------------------

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

Hours 1920 X Rate \$73.31 = \$140,755.20

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 48 X Rate \$50.56 = \$2,426.88

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

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

TOTAL OF OTHER PROGRAM COSTS = \$0.00

d. TOTAL OF VOLUNTEER PROGRAM COST = \$143,182.08  
(add 4a, 4b, and 4c)

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

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)	<u>\$453,141.27</u>
b. Total of Donations to Volunteer Program, Item 3 (Page 2)	<u>\$0.00</u>
c. Subtract Total of Program Costs, Item 4d (Page 3)	<u>\$143,182.08</u>

**TOTAL PROGRAM BENEFIT**

<b>\$309,959.19</b>
---------------------

**6. RECRUITING:**

Please describe your recruiting programs:

COSD website, Medical Examiner Website and contact with local colleges. All volunteers recruited are from specialized fields that benefit our department.

**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:

Decedent identification: Volunteer assisted in the identifying of decedents that have been in our care. Assist with decedent intake, release and autopsies.

**8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2022-23:**

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

Continue to build a volunteer workforce to supplement our staffing level and provide customer service to our next of kin.

**9. GENERAL INFORMATION:**

Name of person completing report:	<u>Kaleb Soliz</u>		
Phone: <u>(858)505-6807</u>	Mail Stop: <u>O-10</u>	E-Mail:	<u>Kaleb.Soliz@sdcounty.ca.gov</u>
Volunteer Coordinator:	<u>Guadalupe Giraldo</u>		
Phone: <u>(858)694-2440</u>	Mail Stop: <u>O-10</u>	E-Mail:	<u>Guadalupe.Giraldo@sdcounty.ca.gov</u>

**10. DEPARTMENT CERTIFICATION:**

  
\_\_\_\_\_  
**DEPARTMENT HEAD SIGNATURE**

08 August 2024  
**DATE**