

Memorandum of Understanding

This Memorandum of Understanding (MOU) between San Francisco General Hospital Foundation herein after called "Foundation" and the City and County of San Francisco Department of Public Health, herein after called "DPH", is made and entered into as of 9/6/2017:

PURPOSE AND SCOPE

The Purpose of this MOU is to identify the roles and responsibilities of each party as they relate to the disbursement of funds for expenses incurred in carrying out the purpose of the:

Priscilla Chan and Mark Zuckerberg Patient Care and Quality Improvement Fund (ZPCQI Fund) – Round 1

The funds for which were received by the Foundation as part of the Transformational Gift provided by the donors in 2015.

MOU TERMS

The term of this MOU Agreement is the period within which the project responsibilities of this agreement shall be performed. The expected timeframe of the **ZPCQI Fund - Round 1** begins October 23, 2017 and ends June 30, 2020.

DPH RESPONSIBILITIES UNDER THIS MOU

DPH is a sub-grantee under the ZPCQI Fund – Round 1, expending grant funds to fulfill the purpose of the grant – patient care and quality improvement projects at Zuckerberg San Francisco General.

Expenses allowed are up to the maximum spend not to exceed the totals in the "Maximum Spend" column in following table for each project. Funds may potentially roll over to subsequent fiscal years.

	FY18	FY19	FY20
Maximum Spend (\$)	Oct 23, 2017 - June 30, 2018	July 1, 2018 - June 30, 2019	July 1, 2019 - June 30, 2020
500,000	500,000		
600,000	600,000		
150,000	150,000		6
1,250,000	1,250,000		
	500,000 600,000 150,000	Maximum Spend (\$) June 30, 2018 500,000 500,000 600,000 600,000 150,000 150,000	Maximum Spend (\$) Oct 23, 2017 - July 1, 2018 - June 30, 2019 500,000 500,000 600,000 600,000 150,000 150,000

		FY18	FY19	FY20
Category 2: Transforming Patient, Staff and Visitor Experience		Oct 23, 2017 - June 30, 2018	July 1, 2018 - June 30, 2019	July 1, 2019 - June 30, 2020
Building 5 - Lobby Remodel	570,000	325,000	245,000	
Campus-wide Wayfinding and Navigation Support	3,150,000	1,600,000	1,450,000	100,000
Food and Nutrition Service Transformation	900,000	450,000	450,000	
Expansion of Interpreter Services	612,550	479,550	133,000	
Subtotal Category 2	5,232,550	2,854,550	2,278,000	100,000
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Category 3: Investing in Our Future: Enabling Leaders to Transform Patient Care		FY18 Oct 23, 2017 - June 30, 2018	FY19 July 1, 2018 - June 30, 2019	FY20 July 1, 2019 - June 30, 2020
Strategic and Leadership Coaching	13,500	13,500		
Salaries for Professional Development and KPO Fellowship Program	850,706	632,346	218,360	
Subtotal Category 3	864,206	645,846	218,360	\$
Total ZPCQI Fund	7,346,756	\$ 4,750,396	\$ 2,496,360	\$ 100,000

DPH shall comply with the Foundation Disbursement Request Policies and Procedures (Exhibit A), namely, provide adequate payroll records documenting the personnel expenses. Any exceptions to the disbursement request procedures, including requests for advance payments, must be requested in advance and agreed upon in writing by the Foundation.

MODIFICATION AND TERMINATION

IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

This agreement may be terminated with or without cause by either party upon 30 days prior written notice to the other party. Such notification shall state the effective date of termination or

cancellation and include any final performance and/or payment invoicing instructions/requirements.

Any and all amendments must be made in writing and must be agreed to and executed by the parties before becoming effective.

Either party may terminate this agreement immediately on written notice if the other party has committed a material breach of this MOU and has not cured the breach within thirty (30) days after receiving written notice of the breach by the non-breaching party, or the parties cannot reach an agreement to amend this MOU.

If the ZPCQI Fund – Round 1 budget covered under this agreement does not have sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the Foundation shall have no liability to pay any funds whatsoever to DPH and DPH shall not be obligated to perform any provisions for which they are not reimbursed.

CONTACT INFORMATION

All notices hereunder shall be in writing, personally delivered, sent by certified mail, return receipt requested, addressed to the other party as follows:

Gerry Chow Vice President, Finance San Francisco General Hospital Foundation 2789 25th Street, Suite 2028 San Francisco, CA 94110

SIGNATURE

Date:

9/8/17

Amanda Heier

Chief Executive Officer

San Francisco General Hospital Foundation

2789 25th Street, Suite 2028

San Francisco, CA 94110

Date: 9 10 17

SFDPH Authorized Signer

SheAW P. EHRLICH

CEO, ZSFG

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EXHIBIT A

Disbursement Request Policy and Procedure

For each disbursement requested, a disbursement request form must be completed and authorized by the individual named on the Establishment of Restricted Funds document. Valid documents, such as vendor invoices, receipts,* payroll reports etc., verifying the expense, must be submitted along with the disbursement request form.

The cost categories allowed for use in identifying expenses are as follows:

Salaries & benefits**Acc#	7500	Equipment/Remodeling	7530
Consultants	7510	Permits/Fees/Inspection	7532
Graphic Design	7511	Meals/Refreshment	7540
Translation Services	7512	Transportation & Lodging	7560
Supplies	7520	Conference & Training Fee	7570
Incentives	7521	Patient Assistance	7580
Stipend	7522	Other (please specify):	7590
Printing	7523	, , , , , , , , , , , , , , , , , , ,	
Software	7524		

^{*}Reimbursements: the receipt must show the following information: name of the person who paid it, item purchased, amount and date of purchase. Estimates are not accepted.

The Foundation recommends submitting authorized disbursement requests within 30 days of date of expenditure. All expenses must be submitted on or before July 15th in order to close the June 30 fiscal year. Expenses that do not fall within the open fiscal year will not be reimbursed.

The disbursement form can be submitted several ways:

Email to accounting@sfghf.org

Interoffice mail

Dropped off at Foundation office (located at 2789 25th Street, Suite 2028, SF, CA 94110) Mailed to PO Box 410836, SF CA 94141.

Once the completed form is received, the disbursement check will be issued within 5 to 10 business days.

^{**}Salaries and benefits: the report provided as part of the disbursement request must clearly list the name of the individual, the period or periods covered. The compensation and benefit amounts must be also listed separately.