

File Number: 150589
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **Health Impact Assessment for Improved Community Design: Continuing to Advance the Practice to Achieve Health & Equity in San Francisco**

2. Department: **Public Health**

3. Contact Person: **Cyndy Comerford**

Telephone: **(415) 252-3989**

4. Grant Approval Status (check one):

☒ [X] Approved by funding agency

☐ [] Not yet approved

5. Amount of Grant Funding Approved or Applied for: Total = **\$444,997 in the 3-year project period (Year 1 = \$144,999; Year 2 = \$149,999; Year 3 = \$149,999)**

6a. Matching Funds Required: **\$0**

b. Source(s) of matching funds (if applicable):

7a. Grant Source Agency: **Centers for Disease Control and Prevention**

b. Grant Pass-Through Agency (if applicable): **NA**

8. Proposed Grant Project Summary:

The purpose of the San Francisco Department of Public Health's (SFDPH) HIA project is to inform and support health-aware decision-making at all levels of government and to increase both local level capacity and internal department capacity to utilize HIA. This will be done by using a multidisciplinary and collaborative approach to address health inequalities and demonstrate health as an intrinsic value in transportation, land use, and community design decisions. More specifically, the strategy will focus on 1) continuing our leadership role in conducting HIAs, providing trainings and technical assistance and maintaining a website; 2) strengthening existing partnerships and collaborations and developing new ones to institutionalize HIA and to develop HIA tools; and 3) advancing and sharing our existing HIA practice and serving as a model for local health departments, including through our nationally attended, four-day HIA training.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Approved Year 1 Project Start-Date: 09/01/2014 End-Date: 08/31/2015

Full Period Project Start-Date: 09/01/2014 End-Date: 08/31/2017

10a. Amount budgeted for contractual services: **Year 1 - \$135,743 Year 2 - \$140,366 Year 3 - \$140,366**

b. Will contractual services be put out to bid? **We will select an approved contractor on the City's Fiscal Intermediary List.**

c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **Yes**

d. Is this likely to be a one-time or ongoing request for contracting out? **On-going**

11a. Does the budget include indirect costs?

☒ [X] Yes

☐ [] No

b1. If yes, how much? **\$1,315**

b2. How was the amount calculated? **Indirect costs were calculated by multiplying the total salaries and mandatory fringe benefits amount by 24.05%.**

c1. If no, why are indirect costs not included?

☐ Not allowed by granting agency

☐ To maximize use of grant funds on direct services

☐ Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs?

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive 9/1/2014. The Department has had administrative delays in processing the application.

GRANT CODE (Please include Grant Code and Detail in FAMIS): HCEH14-15

****Disability Access Checklist** (Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

☒ Existing Site(s)

☒ Existing Structure(s)

☒ Existing Program(s) or Service(s)

☐ Rehabilitated Site(s)

☐ Rehabilitated Structure(s)

☐ New Program(s) or Service(s)

☐ New Site(s)

☐ New Structure(s)

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;

2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;

3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Ron Weigelt

(Name)

for Director of Human Resources and Interim Director, EEO, and Cultural Competency Programs

(Title)

Date Reviewed: 3-24-15

Harlene C. Daem
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Barbara A. Garcia, MPA

(Name)

Director of Health

(Title)

Date Reviewed: 3/25/15

[Signature]
(Signature Required)