

File No. 210457

Committee Item No. 6

Board Item No. \_\_\_\_\_

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Committee: Budget & Finance Committee

Date May 19, 2021

Board of Supervisors Meeting

Date \_\_\_\_\_

#### Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
- MOU
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Form 126 – Ethics Commission
- Award Letter
- Application
- Public Correspondence

#### OTHER (Use back side if additional space is needed)

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Completed by: Linda Wong

Date May 14, 2021

Completed by: Linda Wong

Date \_\_\_\_\_

1 [Accept and Expend Gift - Retroactive - EPIC Charitable Fund - Safety Net Gift - \$90,000]

2

3 **Resolution retroactively authorizing the Department of Public Health to accept and**  
4 **expend a monetary gift in the amount of \$90,000 from the EPIC Charitable Fund to help**  
5 **low income and at-risk populations, for the period of March 27, 2021, through March 27,**  
6 **2022.**

7

8 WHEREAS, The EPIC Charitable Fund (ECF) has donated to the San Francisco  
9 Department of Public Health (DPH) in the amount of \$90,000 for the department's role as a  
10 safety net provider; and

11 WHEREAS, DPH Safety Net is comprised of DPH hospitals, DPH clinics, DPH civil  
12 service providers, Emergency Medical Service Treatment providers, Department of Aging and  
13 Adult Services Case Management programs, and DPH affiliate and contract treatment  
14 providers; and

15 WHEREAS, The ECF provides gifts to entities that help low income and at-risk  
16 populations; now, therefore, be it

17 RESOLVED, That the Board of Supervisors approves the gift and authorizes DPH to  
18 accept and expend a gift of cash in the value of \$90,000 donated by ECF; and, be it

19 FURTHER RESOLVED, That the proceeds of the gift by ECF will be accepted and  
20 expended consistent with the San Francisco Administrative Code Sections governing the  
21 acceptance of gifts to the City and County of San Francisco, including the San Francisco  
22 Administrative Code, Section 10.100-201; and, be it

23 FURTHER RESOLVED, That the Board of Supervisors extends its gratitude to ECF for  
24 the generous gift to the City and County of San Francisco in support of DPH.

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Recommended:

/s/\_\_\_\_\_

Dr. Grant Colfax  
Director of Health

Approved: /s/\_\_\_\_\_

Mayor

Approved: /s/\_\_\_\_\_

Controller

**File Number:** \_\_\_\_\_  
(Provided by Clerk of Board of Supervisors)

**Gift Resolution Information Form**  
(Effective July 2011)

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

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

- 1. Gift Title: **Safety Net Gift**
- 2. Department: **Department of Public Health**
- 3. Contact Person: **Eric Raffin** Telephone: **(916) 258-7288**
- 4. Gift Approval Status (check one):
  - Approved by funding agency
  - Not yet approved
- 5. Amount of Gift Funding Approved or Applied for: **\$90,000**
- 6a. Matching Funds Required: **\$0**
- b. Source(s) of matching funds (if applicable): **N.A.**
- 7a. Gift Source Agency: **EPIC**
- b. Gift Pass-Through Agency (if applicable): **N.A.**
- 8. Proposed Gift Project Summary: **Epic Systems provides gifts to entities that serve the underserved as we do in the Safety Net. We will be receiving the gift honoring our support of FQHCs, and our role as a safety net provider.**
- 9. Gift Project Schedule, as allowed in approval documents, or as proposed:
  - Start-Date: **03/27/2021** End-Date: **03/27/2022**
- 10a. Amount budgeted for contractual services: **\$0**
- b. Will contractual services be put out to bid? **N.A.**
- c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements?
- d. Is this likely to be a one-time or ongoing request for contracting out? **N.A.**
- 11a. Does the budget include indirect costs?  Yes  No
  - b1. If yes, how much? \$
  - b2. How was the amount calculated?
  - 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? **N.A.**

12. Any other significant gift requirements or comments:

**We respectfully request for approval to accept and expend these funds retroactive to January 22, 2021. The Department received the award letter on April 5, 2021.**

**Fund ID: 14820**

**Department ID: 162643**

**Project Description: HN Safety Net\_EPIC System**

**Project ID: 10035431**

**Authority ID: 10001**

**Activity ID: 0001**

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

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

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s)      | <input type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s)       | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s)      |
| <input type="checkbox"/> New Site(s)                 | <input type="checkbox"/> 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:

Toni Rucker, PhD  
(Name)

DPH ADA Coordinator  
(Title)

Date Reviewed: 4/13/2021 | 1:06 PM PDT

DocuSigned by:  
Toni Rucker  
704282F7351F14D...  
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax  
(Name)

Director of Health  
(Title)

Date Reviewed: 4/15/2021 | 9:39 AM PDT

DocuSigned by:  
Greg Wagner  
20527524752484F...  
(Signature Required)



April 5, 2021

Dear Dr. Colfax,

Congratulations on your work to help your patients get well and stay well. We appreciate the opportunity to support your mission through the enclosed charitable gift of \$90,000 issued under Epic's Safety Net Program.

Your grant comes from our Epic Charitable Fund, distributed by Fidelity. Please give me a call if you have any questions or need any additional information.

A handwritten signature in blue ink, appearing to read "Jenna Timm".

Jenna Timm  
Epic

608-271-9000  
Jenna@epic.com

**EPIC**

**EPIC Donation  
One-Year Budget**

**March 27, 2021 – March 27, 2022**

**EPIC Gift Fund Project Code 10035431**

<b>DIRECT COSTS</b>	<b>Fiscal Year 20-21</b>	<b>Fiscal Year 21-22</b>	<b>Totals</b>
<b>Non-personnel services</b> - Computer equipment, upgrades, maintenance, and support	\$45,000	\$45,000	\$90,000
<b>Non-professional services Sub-Total</b>	<b>\$45,000</b>	<b>\$45,000</b>	<b>\$90,000</b>
<b>TOTAL</b>	<b>\$45,000</b>	<b>\$45,000</b>	<b>\$90,000</b>





London N. Breed  
Mayor

Dr. Grant Colfax  
Director of Health

**TO:** Angela Calvillo, Clerk of the Board of Supervisors  
**FROM:** Dr. Grant Colfax  
Director of Health  
**DATE:** April 28, 2021  
**SUBJECT:** Gift Accept and Expend  
**GRANT TITLE:** Accept and Expend Gift – Safety Net Gift- \$90,000

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Attached please find the original and 1 copy of each of the following:

- Proposed grant resolution, original signed by Department
- Grant information form, including disability checklist -
- Budget and Budget Justification
- Grant application: Not Applicable. No application submitted.
- Agreement / Award Letter
- Other (Explain):

**Special Timeline Requirements:**

**Departmental representative to receive a copy of the adopted resolution:**

Name: Gregory Wong Phone: 554-2868  
Interoffice Mail Address: Dept. of Public Health, Fiscal Unit, 101 Grove St #106  
Certified copy required Yes  No

**From:** [Peacock, Rebecca \(MYR\)](#)  
**To:** [BOS Legislation, \(BOS\)](#)  
**Cc:** [Kittler, Sophia \(MYR\)](#); [Duning, Anna \(MYR\)](#); [Wong, Greg \(DPH\)](#)  
**Subject:** Mayor -- [Resolution] -- [Accept and Expend Gift - Retroactive - EPIC Charitable Fund - Safety Net Gift - \$90,000]  
**Date:** Tuesday, April 27, 2021 4:27:00 PM  
**Attachments:** [A&E\\_DPH\\_EPIC\\_Safety\\_Net\\_Gift.zip](#)

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Attached for introduction to the Board of Supervisors is a **resolution retroactively authorizing the Department of Public Health to accept and expend a monetary gift in the amount of \$90,000 from the EPIC Charitable Fund to help low income and at-risk populations, for the period of March 27, 2021, through March 27, 2022.**

Please let me know if you have any questions.

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**Rebecca Peacock** ([they/them](#))  
(415) 554-6982 | [Rebecca.Peacock@sfgov.org](mailto:Rebecca.Peacock@sfgov.org)  
Office of Mayor London N. Breed  
City & County of San Francisco