

File No. 240060

Committee Item No. 2

Board Item No. 12

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date March 6, 2024

Board of Supervisors Meeting Date March 12, 2024

Cmte Board

- | | | |
|-------------------------------------|-------------------------------------|----------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | MOU |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Information Form |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Form 126 – Ethics Commission |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

- | | | |
|-------------------------------------|-------------------------------------|-------------------------------------------------|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>Healthy Steps Business Proposal</u> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>GHF Donor Disclosure Fund</u> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>DPH Statement on Retroactivity 2/28/2024</u> |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <u>DPH Presentation 3/6/2024</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Completed by: Brent Jalipa Date February 29, 2024

Completed by: Brent Jalipa Date March 7, 2024

1 [Accept and Expend Grant - Retroactive - San Francisco General Hospital Foundation -
2 Children’s Health Center’s HealthySteps Program - \$373,084.11]

3 **Resolution retroactively authorizing the Department of Public Health to accept and**
4 **expend a grant in the amount of \$373,084.11 from the San Francisco General Hospital**
5 **Foundation for participation in a program, entitled “Children’s Health Center’s**
6 **HealthySteps,” for the period of November 1, 2023, through June 30, 2024.**

7

8 WHEREAS, The San Francisco General Hospital Foundation (SFGHF) has agreed to
9 fund the Department of Public Health (DPH) in the amount of \$373,084.11 for participation in
10 a program, entitled “Children’s Health Center’s HealthySteps,” for the period of November 1,
11 2023, through June 30, 2024; and

12 WHEREAS, The Children’s Health Center’s HealthySteps Program provides screening,
13 prevention and early intervention services to approximately 3,000 San Francisco Health
14 Network (SFHN) primary care patients ages 0-5 and their SFHN caregivers, including
15 dyadic/family-centered behavioral health promotion and prevention services to address
16 adverse childhood experiences (ACEs) and interrupt inter-generational trauma; and

17 WHEREAS, Targeted Tier 2 and 3 services are provided to 20% of the Chinatown
18 Community Children (CHC) early childhood population that was not otherwise accessing care;
19 and

20 WHEREAS, The grant does not require an Annual Salary Ordinance Amendment; and

21 WHEREAS, A request for retroactive approval is being sought because DPH received
22 the memorandum on October 20, 2023, for a project start date of November 1, 2023; and

23 WHEREAS, The Department proposes to maximize use of available grant funds on
24 program expenditures by not including indirect costs in the grant budget; now, therefore, be it

25

1 RESOLVED, That the Board of Supervisors hereby waives inclusion of indirect costs in
2 the grant budget; and, be it

3 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
4 expend a grant in the amount of \$373,084.11 from the SFGHF; and, be it

5 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
6 expend the grant funds pursuant to Administrative Code, Section 10.170-1; and, be it

7 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
8 Agreement on behalf of the City.

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1 Recommended:

Approved: /s/

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Mayor

3 /s/

4 Dr. Grant Colfax

Approved: /s/

5 Director of Health

Controller

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Grant Accept & Expend: San Francisco General Hospital Foundation Children's Health Center's HealthySteps

BOS Budget & Finance Committee

Carol Taniguchi

Deputy Director, Primary Care, SF Health Network

March 6, 2024



SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Overview of Funding



- **Accept & Expend Grant:**

- **Funder:** San Francisco General Hospital Foundation
- **Grant Summary:** Funding will be used to support UCSF personnel at Children's Health Center (ZSFG) for:
 1. primary care for children 0-5, and
 2. dyadic care for their caregivers with focus on behavioral health and developmental care
- **Amount:** \$373,084.11
- **Timeline:** November 2023 through June 2024

Children's Health Center's HealthySteps Program Services



- **Pilot dyadic care program** for pediatric patients and their caregivers
- Offers **family-centered behavioral health promotion and prevention services** to address adverse childhood experiences (ACEs) and interrupt intergenerational trauma
- Provides **screening, prevention and early intervention services** to approximately 3,000 SFHN primary care patients ages 0-5 alongside their caregivers
- **Provides Tier 2 and 3 services** to 20% of the Children's Health Center early childhood population who were otherwise not accessing care

Retroactivity



- We are seeking **retroactive authorization** for this item.
 - DPH received notice of the award from SFGHF eleven days prior to the pre-determined project start date.
 - DPH received notice of the award on October 20, 2023 for a project start date of November 1, 2023.
 - The project start date was predetermined by the grantor.
 - DPH brought this item to the BOS after going through the fiscal approvals process, including Controller's Office review and approval.
- **DPH respectfully requests retroactive approval of this item.**

Thank you!

File Number: 240060
(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: **Children’s Health Center’s HealthySteps**
- 2. Department: **Department of Public Health
Zuckerberg San Francisco General**
- 3. Contact Person: **Angelica Journagin** Telephone: **(628) 206-2877**

- 4. Grant Approval Status (check one):
 Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$373,084.11**

- 6a. Matching Funds Required: **\$0**
- b. Source(s) of matching funds (if applicable): **N.A.**

- 7a. Grant Source Agency: **San Francisco General Hospital Foundation**
- b. Grant Pass-Through Agency (if applicable): **N.A.**

8. Proposed Grant Project Summary: **The Zuckerberg San Francisco General Hospital (ZSFG) Children’s Health Center’s HealthySteps Program provides screening, prevention and early intervention services to approximately 3,000 San Francisco Health Network (SFHN) primary care patients ages 0-5 and their SFHN caregivers, including dyadic/family-centered behavioral health promotion and prevention services to address adverse childhood experiences (ACEs) and interrupt inter-generational trauma. Targeted Tier 2 and 3 services are provided to 20% of the Children Health Center (CHC) early childhood population that was not otherwise accessing care.**

- 9. Grant Project Schedule, as allowed in approval documents, or as proposed:
Start-Date: **November 1, 2023** End-Date: **October 31, 2028**

- 10a. Amount budgeted for contractual services: **\$373,084.11**
- b. Will contractual services be put out to bid? **No**
- c. If so, will contract services help to further the goals of the Department’s Local Business Enterprise (LBE) requirements? **N.A.**

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

- 11a. Does the budget include indirect costs? Yes No

b1. If yes, how much? \$ **N.A.**

DocuSign Envelope ID: 7DD97882-34D4-488C-9EB9-BBE1C271739C

b2. How was the amount calculated? **N.A.**

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? **5% of Direct Costs**

12. Any other significant grant requirements or comments:

The grant does not require an ASO amendment.

We respectfully request for approval to accept and expend these funds retroactive to November 1, 2023. The Department received the memorandum on October 20, 2023.

The grantor is a Private entity.

Project Description: HG Children's HC HealthySteps

Project: 10040875

Fund: 21132

Dept: 207680

Authority: 10001

Activity: 0001

Contract: CTR00004002

****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):

- | | | |
|------------------------------------------------------|-----------------------------------------------------|------------------------------------------------------------|
| <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: 11/7/2023 | 5:14 PM PST

DocuSigned by:
Tracy Burris
AD9153BE545A46E...
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax
(Name)

Director of Health
(Title)

Date Reviewed: 11/8/2023 | 1:27 PM PST

DocuSigned by:
Greg Wagner
28327324752843F...
(Signature Required)
Greg Wagner, COO for

San Francisco Department of Public Health (SFDPH)
San Francisco General Hospital Foundation

Children's Health Center's HealthySteps

BUDGET JUSTIFICATION

11/01/2023 – 10/31/2028

A.	PERSONNEL	
B.	MANDATORY FRINGE	
1.	Total Salaries	\$0
	Total Fringe	\$0
	TOTAL PERSONNEL:	\$0
C.	TRAVEL	\$0
D.	EQUIPMENT	\$0
E.	SUPPLIES	\$0
F.	CONTRACTUAL	\$373,084.11
H.	OTHER	\$0
	TOTAL DIRECT COSTS	\$373,084.11
I.	INDIRECT COSTS	\$0
	TOTAL BUDGET:	\$373,084.11

ZSFG CHC Healthy Steps Business Proposal

Nov 2023 - Jun 2024

Project Personnel

Jul 2023 - Jun 2024		Projected	Projected	Projected	Projected	Projected	Projected	Projected	Projected	Projected	Projected	Projected	Projected	Avg%/Total\$
Faculty		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Bercun,Janelle (022230650)	FTE	0.00%	0.00%	0.00%	0.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	80.00%	53.333% C
(9313) CLIN SOCIAL WORKER 3	Salary	\$0	\$0	\$0	\$0	\$7,116	\$7,116	\$7,116	\$7,116	\$7,116	\$7,116	\$7,116	\$7,116	\$56,928
	Benefits	\$0	\$0	\$0	\$0	\$3,165	\$3,165	\$3,165	\$3,165	\$3,165	\$3,165	\$3,165	\$3,165	\$25,322
Falvey,Cherie (020025037)	FTE	0.00%	0.00%	0.00%	0.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	13.333% N
(4205) QLTY IMPV HC SPEC 2	Salary	\$0	\$0	\$0	\$0	\$1,743	\$1,743	\$1,743	\$1,743	\$1,743	\$1,743	\$1,743	\$1,743	\$13,947
	Benefits	\$0	\$0	\$0	\$0	\$755	\$755	\$755	\$755	\$755	\$755	\$755	\$755	\$6,040
Hallinan,Kathryn (023751936)	FTE	0.00%	0.00%	0.00%	0.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	33.333% C
(4365) BEH HEALTH PSYCHIATRIC PROFL 3	Salary	\$0	\$0	\$0	\$0	\$4,693	\$4,693	\$4,693	\$4,693	\$4,693	\$4,693	\$4,693	\$4,693	\$37,546
	Benefits	\$0	\$0	\$0	\$0	\$2,033	\$2,033	\$2,033	\$2,033	\$2,033	\$2,033	\$2,033	\$2,033	\$16,261
Herrera,Philip H (024024366)	FTE	0.00%	0.00%	0.00%	0.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	33.333% N
(5834) CMTY EDUC SPEC 4	Salary	\$0	\$0	\$0	\$0	\$3,853	\$3,853	\$3,853	\$3,853	\$3,853	\$3,853	\$3,853	\$3,853	\$30,828
	Benefits	\$0	\$0	\$0	\$0	\$1,462	\$1,462	\$1,462	\$1,462	\$1,462	\$1,462	\$1,462	\$1,462	\$11,693
Margolis,Kathryn Leah (022598312)	FTE	0.00%	0.00%	0.00%	0.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	13.333% C
(1733) HS ASSOC CLIN PROF-HCOMP	Salary	\$0	\$0	\$0	\$0	\$2,681	\$2,681	\$2,681	\$2,681	\$2,681	\$2,681	\$2,681	\$2,681	\$21,447
	Benefits	\$0	\$0	\$0	\$0	\$660	\$660	\$660	\$660	\$660	\$660	\$660	\$660	\$5,280
Qian,Cheng (027940675)	FTE	0.00%	0.00%	0.00%	0.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	13.333% C
(1455) ASST PROF OF CLIN-HCOMP	Salary	\$0	\$0	\$0	\$0	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$16,000
	Benefits	\$0	\$0	\$0	\$0	\$634	\$634	\$634	\$634	\$634	\$634	\$634	\$634	\$5,068
Quintero,Roxana (023416142)	FTE	0.00%	0.00%	0.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	66.667% C
(7890) CLIN SOCIAL WORKER 1 EX	Salary	\$0	\$0	\$0	\$0	\$7,007	\$7,007	\$7,007	\$7,007	\$7,007	\$7,007	\$7,007	\$7,007	\$56,056
	Benefits	\$0	\$0	\$0	\$0	\$3,325	\$3,325	\$3,325	\$3,325	\$3,325	\$3,325	\$3,325	\$3,325	\$26,601
Valle,Blanca F (028532174)	FTE	0.00%	0.00%	0.00%	0.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	33.333% N
(4175) AMBUL CARE ADMSTN CRD 3	Salary	\$0	\$0	\$0	\$0	\$4,327	\$4,327	\$4,327	\$4,327	\$4,327	\$4,327	\$4,327	\$4,327	\$34,614
	Benefits	\$0	\$0	\$0	\$0	\$1,182	\$1,182	\$1,182	\$1,182	\$1,182	\$1,182	\$1,182	\$1,182	\$9,453
FTE Total		0.00	0.00	0.00	0.00	3.90	3.90	3.90	3.90	3.90	3.90	3.90	3.90	2.60
Salaries Total		\$0	\$0	\$0	\$0	\$33,421	\$33,421	\$33,421	\$33,421	\$33,421	\$33,421	\$33,421	\$33,421	\$267,366
Benefits Total		\$0	\$0	\$0	\$0	\$13,215	\$13,215	\$13,215	\$13,215	\$13,215	\$13,215	\$13,215	\$13,215	\$105,718

Payroll expenses not identifiable to an individual

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Additional Adjustments or Accruals													\$0

FY23-24

	Salary	Benefits	Total
Clinicians:	\$187,977	\$78,532	\$266,509
Non-Billing Staff:	\$79,389	\$27,186	\$106,575
Totals:	\$267,366	\$105,718	\$373,084



SAN FRANCISCO
GENERAL HOSPITAL
FOUNDATION

Memorandum of Understanding re:

Support Disbursement of

Grant/Gift Donation

This Memorandum of Understanding (MOU) between San Francisco General Hospital Foundation (Foundation) and the City and County of San Francisco, acting by and through its Department of Public Health, for Zuckerberg San Francisco General Hospital (City), is made and entered into as of **October 20, 2023**.

A. 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 program: **Children's Health Center's HealthySteps**.

B. ZSFG PROGRAM

The funds for HealthySteps were received by the Foundation as part of the donations provided by the San Francisco Public Health Foundation.

C. MOU TERM

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 activities below commences on November 1, 2023 and ends five years later on October 31, 2028. Any extension of this duration requires a formal modification of this MOU executed and approved in the same manner as the original ("Term").

D. GRANT PLAN AND NOT-TO-EXCEED GRANT AMOUNT, INCLUDING RESTRICTIONS, IF ANY

- 1. Grant Plan:** The ZSFG Children's Health Center's HealthySteps Program provides screening, prevention and early intervention services to approximately 3,000 SFHN primary care patients ages 0-5 and their SFHN caregivers, including dyadic/family-centered behavioral health promotion and prevention services to address adverse childhood experiences (ACEs) and interrupt inter-generational trauma. Targeted Tier 2 and 3 services are provided to 20% of the CHC early childhood population that was not otherwise accessing care.

This grant will be used to support the Children's Health Center's HealthySteps Program, the needed funding will be used for UCSF personnel which will allow the program to continue from November 2023-June 2024. ("Grant Plan")

- 2. Not-to-Exceed Grant Amount:** Total grant expenses are not to exceed **\$373,084.11** ("Grant Amount"), and will be disbursed as detailed in the Not-to Exceed Grant Amount and Eligible Expenses table, below.



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- 3. **Restricted Funds:** These funds (Fund 0383) are restricted to the Pediatrics- Children’s Health Center.
- 4. **Unrestricted Funds:** Not Applicable.

Not-to-Exceed Grant Amount and Eligible Expenses

<i>Eligible Expenses</i>	<i>Total Budget Request</i>
<i>Non-Personnel</i>	
UCSF Personnel CHC HealthySteps	\$373,084.11
<i>Total Non-Personnel</i>	<i>\$373,084.11</i>
<i>Not-to-Exceed Grant Amount</i>	<i>\$373,084.11</i>



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ZSFG shall comply with the Foundation Disbursement Request Policies and Procedures (Exhibit A), namely, provide adequate payroll records documenting the personnel expenses and final purchased invoices/receipts. 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.

E. MODIFICATION AND TERMINATION IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT this MOU 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 to this MOU must be made in writing and must be executed and approved in the same manner as the original before becoming effective.

Either party may terminate this MOU 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 Program covered under this agreement does not have sufficient funds for the program, this Agreement shall be of no further force and effect. In that event, the Foundation will have no liability to pay any funds whatsoever to ZSFG and ZSFG shall not be obligated to perform any element of the Grant Plan for which it is not reimbursed.

F. 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
Chief Financial Officer
San Francisco General Hospital Foundation
2789 25th Street, Suite 2028 San
Francisco, CA 94110

[SIGNATURES ON FOLLOWING PAGE]



SAN FRANCISCO
GENERAL HOSPITAL
FOUNDATION

San Francisco General Hospital Foundation

San Francisco Department of Public Health

By: DocuSigned by:
Kim Meredith
11/1/2023 | 1:37 PM PDT
E6446AFE731D457...
Kim Meredith
Chief Executive Officer

By: DocuSigned by:
Greg Wagner
11/8/2023 | 1:54 PM PST
28527524752940F...
Grant Colfax, MD
Director of Health

APPROVED AS TO FORM:

David Chiu
City Attorney

By: DocuSigned by:
Louise Simpson
11/6/2023 | 12:05 PM PST
BD54168A4C3B452...
Louise Simpson
Deputy City Attorney



SAN FRANCISCO
GENERAL HOSPITAL
FOUNDATION

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:

	Acct #		Acct #
Salaries & benefits**	7500	Installation/Maintenance	7531
Consultants	7510	Permits/Fees/Inspection	7532
Graphic Design	7511	Bank Service Charges	7533
Translation Services	7512	Meals/Refreshment	7540
Supplies	7520	Rent	7550
Incentives	7521	Transportation & Lodging	7560
Stipend	7522	Conference & Training Fee	7570
Printing	7523	Training	7571
Software	7524	Patient Assistance	7580
Equipment/Remodeling	7530		

***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.

****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.

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:

1. Email to accounting@sfgfhf.org
2. Interoffice mail
3. Dropped off at Foundation office location
4. 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.



SAN FRANCISCO
GENERAL HOSPITAL
FOUNDATION

Thank you for your support of the San Francisco General Hospital Foundation. In order to comply with Mayor London Breed's September 2020 directive and San Francisco's voter-approved Sunshine Ordinance (listed below), which was crafted to ensure transparency when donations are made that benefit City institutions like Zuckerberg San Francisco General Hospital, San Francisco General Hospital Foundation is obligated by the City of San Francisco to request that you please complete and confirm the following information:

Contributor & Contribution Information:

Name: San Francisco Public Health Foundation
Address: 1 Hallidie Plaza Suite 808
San Francisco, CA 94102
Value and Date: \$524,808.33 on 12/4/17 and previous
contributions for the last 10 years totaling \$511,398.69

Phone: 415-504-6738
Money, Goods, Services (description):
Money for SFHP - Children Health Center
Family Health Center, SFGH General Medicine
Clinic

The above address is a: Business Residence

Financial Interest:

Please check the appropriate box(es) that describe your financial interest with the City.

- No Financial Interest
- Contract with the City (Please describe): Multiple contracts with City to provide
- Grant from the City (Please describe): administrative svcs
- Lease of Space to or from the City (Please describe): 10/1/2013 to 8/1/2019
- City License, Permit, or Entitlement for Use (Please describe): _____
- Other Financial Interest (Please describe): _____
- Pending Financial Interest (Please describe): _____

San Francisco Administrative Code Chapter 67 section 67.29-6 (Sources of Outside Funding) provides:

No official or employee or agent of the City shall accept, allow to be collected, or direct or influence the spending of, any money, or any goods or services worth more than one hundred dollars in aggregate, for the purpose of carrying out or assisting any City function unless the amount and source of all such funds is disclosed as a public record and made available on the website for the department to which the funds are directed. When such funds are provided or managed by an entity, and not an individual, that entity must agree in writing to abide by this ordinance. The disclosure shall include the names of all individuals or organizations contributing such money and a statement as to any financial interest the contributor has involving the City.

Penny Eardley

Signature

February 22, 2023
Date

Please return this form at your earliest convenience to bferreira@sfgfh.org or mail to San Francisco General Hospital Foundation, Attn: Gift Compliance, PO Box 410836, San Francisco, CA 94141-0836.

Please contact bferreira@sfgfh.org should you have any questions. Thank you once again for your generous support.



SAN FRANCISCO
GENERAL HOSPITAL
FOUNDATION

Thank you for your support of the San Francisco General Hospital Foundation. In order to comply with Mayor London Breed's September 2020 directive and San Francisco's voter-approved Sunshine Ordinance (listed below), which was crafted to ensure transparency when donations are made that benefit City institutions like Zuckerberg San Francisco General Hospital, San Francisco General Hospital Foundation is obligated by the City of San Francisco to request that you please complete and confirm the following information:

Contributor & Contribution Information:

Name: San Francisco Public Health Foundation
Address: 1 Hallidie Plaza Suite 808
San Francisco, CA 94102
Value and Date: \$524,808.33 on 12/4/17 and previous
contributions for the last 10 years totaling \$511,398.69

Phone: 415-504-6738
Money, Goods, Services (description):
Money for SFHP - Children Health Center
Family Health Center, SFGH General Medicine
Clinic

The above address is a: Business Residence

Financial Interest:

Please check the appropriate box(es) that describe your financial interest with the City.

- No Financial Interest
- Contract with the City (Please describe): Multiple contracts with City to provide
- Grant from the City (Please describe): _____ administrative svcs
- Lease of Space to or from the City (Please describe): 10/1/2013 to 8/1/2019
- City License, Permit, or Entitlement for Use (Please describe): _____
- Other Financial Interest (Please describe): _____
- Pending Financial Interest (Please describe): _____

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San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

City and County of San Francisco
London N. Breed
Mayor

Memorandum

To: Honorable Members of the Board of Supervisors

From: San Francisco Department of Public Health

Date: Thursday, February 29, 2024

Re: Accept and Expend California Department of Public Health – Children’s Health Center’s HealthySteps - \$373,084.11

This Resolution seeks authorization for the Department of Public Health to retroactively accept and expend funds in the amount of \$373,084.11 from the San Francisco General Hospital Foundation (SFGHF).

This item is retroactive because DPH received notice of the award from SFGHF eleven days prior to the pre-determined project start date. We received the notice of award from SFGHF on October 20, 2023, for a project start date of November 1, 2023. The project start date was predetermined by the grantor. Upon receiving the grant, DPH put together the accept and expend packet and forwarded to the Controller’s Office for review on November 7, 2023. After discussing project term details, the Controller’s Office approved the accept and expend and forwarded the signed package to the Mayor’s Office on December 11, 2023 for introduction on January 23, 2024. We humbly request retroactive authorization for this item.

Please contact Greg Wong, grants analyst, at greg.wong@sfdph.org for any questions about this request for retroactive authorization.



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102

Phone: 415.252.3100 . Fax: 415.252.3112

ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 240060

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
office of the clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
GREGORY WONG	415-554-2521
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	greg.wong@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR UCSF Department of Pediatrics at ZSFG	TELEPHONE NUMBER (628) 206-8361
STREET ADDRESS (including City, State and Zip Code) 1001 Potrero Avenue San Francisco, CA 94110	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 240060
DESCRIPTION OF AMOUNT OF CONTRACT \$373,084.11		
NATURE OF THE CONTRACT (Please describe) Funding will be used for UCSF personnel for Children's Health Center's Healthysteps Program at ZSFG.		

7. COMMENTS
This contract will go through the Affiliation Agreement with UCSF and ZSFG.

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	King	Talmadge	Other Principal Officer
2	Afflick-Fuentes	Elena	Other Principal Officer
3	Chen	Esther	Other Principal Officer
4	Knight	Starr	Other Principal Officer
5	Damiano	Margaret	Other Principal Officer
6	Mohamed	Roger	Other Principal Officer
7	Campbell	Ron	Other Principal Officer
8	Blackshear	Jake	Other Principal Officer
9	Fernandez	Grace	Other Principal Officer
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor’s board of directors; (B) the contractor’s principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor’s board of directors; (B) the contractor’s principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
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City and County of San Francisco

Department of Public Health



**London N. Breed
Mayor**

TO: Angela Calvillo, Clerk of the Board of Supervisors
**FROM: Dr. Grant Colfax
Director of Health**
DATE: 12/6/2023
SUBJECT: Grant Accept and Expend
GRANT TITLE: Children’s Health Center’s HealthySteps - \$373,084.11

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 (greg.wong@sfdph.org) Phone: 554-2521

Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108

Certified copy required Yes

No