

File No. 250620

Committee Item No. 13
Board Item No. 30

COMMITTEE/BOARD OF SUPERVISORS

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Committee: Budget and Appropriations Committee **Date** June 12, 2025
Board of Supervisors Meeting **Date** July 8, 2025

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Completed by: Brent Jalipa **Date:** June 5, 2025
Completed by: Brent Jalipa **Date:** July 3, 2025

1 [Accept and Expend Grant - Delegation of Charter, Section 9.118 Authority - Retroactive -
2 SFHP - Housing and Homelessness Incentive Program (“HHIP”) Expanding San Francisco
Department of Public Health Recuperative Care Community Supports - \$2,489,698.63]

3

4 **Resolution retroactively authorizing the Department of Public Health to accept and**
5 **expend a grant in the amount of \$2,489,698.63 from the California Department of Health**
6 **Care Services (DHCS) through San Francisco Health Authority, a local governmental**
7 **entity doing business as the San Francisco Health Plan (“Health Plan” or “SFHP”) for**
8 **participation in a program entitled, “Housing and Homelessness Incentive Program**
9 **(“HHIP”) Expanding San Francisco Department of Public Health Recuperative Care**
10 **Community Supports,” for a term of one year, one month, and sixteen days from May**
11 **15, 2025 to June 30, 2026; and delegating authority under Charter, Section 9.118(a), to**
12 **the Director of Health to approve a Grant Agreement between the City, acting by and**
13 **through the Department of Public Health, and SFHP.**

14

15 WHEREAS, The California Department of Health Care Services (DHCS), through San
16 Francisco Health Plan (SFHP) as a pass-through entity, has agreed to fund the San Francisco
17 Department of Public Health (DPH) in the amount of \$2,489,698.63 for participation in a
18 program entitled, “Housing and Homelessness Incentive Program (“HHIP”) Expanding San
19 Francisco Department of Public Health Recuperative Care Community Supports,” for a term of
20 one year, one month, and sixteen days from May 15, 2025, to June 30, 2026; and

21 WHEREAS, DPH, through its Department of Whole Person Integrated Care and
22 Behavioral Health System, will implement the project entitled, “Housing and Homelessness
23 Incentive Program (HHIP) Expanding San Francisco Department of Public Health
24 Recuperative Care Community Supports”; and

1 WHEREAS, The purpose of this program is to tackle San Francisco's mental health,
2 addiction, and homelessness crisis by moving people quickly from the streets into effective
3 treatment and sustained recovery; and

4 WHEREAS, Expected outcomes include caring for clients in the right setting and thus
5 avoiding unnecessary emergency department utilization and hospital days, expanding
6 Recuperative Care Community Supports and streamlining program delivery; the RESTORE,
7 Eleanora Fagan/Kean, and Hummingbird programs provide recuperative care for Medi-Cal
8 members experiencing homelessness; included in the models of care are referrals to
9 Coordinated Entry, Housing Community Supports, Enhanced Care Management (ECM) and
10 other services to promote physical and behavioral health linkages, recovery, and stabilization;
11 and

12 WHEREAS, This grant is for RESTORE operating expenses and staffing, and for Epic
13 implementation for RESTORE, Eleanora Fagan/Kean, and Hummingbird programs to enable
14 staff to implement Customer Supports (CS) closed loop referrals, documentation, invoicing,
15 reporting, and care coordination; and

16 WHEREAS, Charter, Section 9.118(a), requires Board of Supervisors' approval by
17 Resolution of any contract that when entered into has anticipated revenue of \$1 million dollars
18 or more; and

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

20 WHEREAS, A request for retroactive approval is being sought because DPH received
21 the award letter on May 15, 2025, for a project start date of May 15, 2025; and

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

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

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

3 FURTHER RESOLVED, That the Board of Supervisors hereby delegates authority
4 under Charter, Section 9.118(a), to the Director of Health to approve the Grant Agreement
5 with SFHP for use of these grant funds with a total not to exceed amount of \$2,489,698.63, for
6 a term of one year, one month, and sixteen days from May 15, 2025 to June 30, 2026, for
7 implementation of the project entitled "HHIP Expanding San Francisco Department of Public
8 Health Recuperative Care Community Supports"; and, be it

9 FURTHER RESOLVED, That within 30 days of the Grant Agreement being fully
10 executed by all parties, the Department of Public Health shall submit to the Clerk of the Board
11 of Supervisors a completely executed copy for inclusion in File No. 250620; this requirement
12 and obligation resides with the Department, and is for purposes of having a complete file only,
13 and in no manner affects the validity of approved Grant Agreement.

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File Number: 250620
(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: **Housing and Homelessness Incentive Program (“HHIP”) Expanding San Francisco Department of Public Health Recuperative Care Community Supports**
2. Department: **Department of Public Health
San Francisco Health Network**
3. Contact Person: **Alex Boyder** Telephone: **(628) 206-2400**
4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$2,489,698.63**

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

- 7a. Grant Source Agency: **California Department of Health Care Services**
- b. Grant Pass-Through Agency (if applicable): **San Francisco Health Plan**

8. Proposed Grant Project Summary:

The purpose of this program is to tackle San Francisco's mental health, addiction, and homelessness crisis by moving people quickly from the streets into effective treatment and sustained recovery. Expected outcomes include caring for clients in the right setting and thus avoiding unnecessary emergency department utilization and hospital days. Expanding Recuperative Care Community Supports and streamlining program delivery. The RESTORE, Eleanora Fagan / Kean, and Hummingbird programs provide recuperative care for Medi-Cal members experiencing homelessness. Included in the models of care are referrals to Coordinated Entry, Housing Community Supports, ECM and other services to promote physical and behavioral health linkages, recovery, and stabilization. This grant is for RESTORE operating expenses and staffing, and for Epic implementation for RESTORE /Eleanora Fagan Kean / Hummingbird programs to enable staff to implement Customer Service (CS) closed loop referrals, documentation, invoicing, reporting, and care coordination.

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

Start-Date: **05/15/2025** End-Date: **06/30/2026**

- 10a. Amount budgeted for contractual services: **\$1,410,000**

- 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? **\$0**

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:

This grant does not require an ASO amendment, does not create net new position(s), and partially reimburses the Department for the positions below:

No.	Class	Job Title	FTE	Start Date	End Date
1	2593	Health Program Coordinator 3	0.50	05/15/2025	06/30/2026
2	2320	Registered Nurse	0.25	05/15/2025	06/30/2026
3	2586	Health Worker II	0.25	05/15/2025	06/30/2026
4	2587	Health Worker III	0.25	05/15/2025	06/30/2026
5	2588	Health Worker IV	0.25	05/15/2025	06/30/2026
6	P103	Special Nurse	0.25	05/15/2025	06/30/2026

We respectfully request for approval to accept and expend these funds retroactive to May 15, 2025. The Department received the award letter on May 15, 2025.

Equipment will not require tracking per grantor and will not need capitalization. Equipment will be owned by Whole Person Integrated Care.

Project Description: HHIP Volume Increases

Project ID: 10042565
 Proposal ID: CTR00004863
 Fund ID: 11580
 Version ID: V101
 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 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:

Toni Rucker, PhD
(Name)

DPH ADA Coordinator
(Title)

Date Reviewed: 5/22/2025 | 1:29 PM PDT

DocuSigned by:

A04292F7331144D...
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Daniel Tsai
(Name)

Director of Health
(Title)

Date Reviewed: 5/23/2025 | 6:18 AM PDT

Signed by:

400FE25DD0B4404...
(Signature Required)

San Francisco Department of Public Health (SFDPH)
 Housing and Homelessness Incentive program Expanding San Francisco
 Department of Public Health Recuperative Care Community Supports
BUDGET JUSTIFICATION

May 15, 2025 to June 30, 2026

A. PERSONNEL (SALARIES/FRINGE)

1	0.50	2593 – Health Program Coordinator 3	
Annual Salary/Fringe		\$203,585 x 0.5 FTE for 12 months =	\$101,793
2	0.25	2320 – Registered Nurse	
Annual Salary/Fringe		\$300,981 x 0.25 FTE for 12 months =	\$75,245
3	0.50	2586 – Health Worker II	
Annual Salary/Fringe		\$261,942 x 0.5 FTE for 12 months =	\$130,971
4	0.50	2587 – Health Worker III	
Annual Salary/Fringe		\$282,888 x 0.5 FTE for 12 months =	\$141,444
5	0.25	2588 – Health Worker IV	
Annual Salary/Fringe		\$162,000 x 0.25 FTE for 12 months =	\$40,500
6	0.10	P103 – Special Nurse	
Annual Salary/Fringe		\$149,595 x 0.1 FTE for 12 months =	\$14,959

TOTAL PERSONNEL: **\$504,912**

B TRAVEL

C EQUIPMENT **\$574,786**

D SUPPLIES

E CONTRACTUAL **\$1,410,000**

F OTHER

TOTAL DIRECT COSTS **\$2,489,699**

G INDIRECT COSTS **\$0**

TOTAL BUDGET: **\$2,489,699**



P.O. Box 194247
San Francisco,
CA 94119

[REDACTED]
FAX
sfhp.org

May 15, 2025

Bernadette Gates
CalAIM Director
1001 Potrero Ave, Bldg 5, 25, 80, 90 & Bldg 5 Ward 1B
San Francisco, CA 94110

RE: Expanding SFDPH Recuperative Care Community Supports Award Letter

Dear Bernadette Gates:

On behalf of San Francisco Health Plan (SFHP), I'm pleased to inform you that San Francisco Department of Public Health (SFDPH) has been approved for a Housing and Homelessness Incentive Program (HHIP) grant in the amount of \$2,489,698.63. The goal of this program is to connect Medi-Cal members with essential housing services and help prevent homelessness in San Francisco. Specifically, the grant funds are to be used to complete the activities outlined in your HHIP grant application and to achieve the objectives listed below:

- By June 30, 2026, Night Navigation staff and Bringing Expanded Access to Medications for Opioid Use Disorder ("BEAM") staff will transport at least 25 clients directly from the street to Community Supports Recuperative Care programs by securing and utilizing 2 transportation vans through one-time funding provided by SFHP.
- By September 30, 2025, RESTORE 1 staff will be able to scale from 35 to 70 rooms by securing and utilizing office furniture, clinical equipment, and technology supplies funded by SFHP.
- By September 30, 2025, RESTORE 1 program staff will be hired to enable recuperative care services to be provided in 70 rooms (key example of services provided includes clients being started on Medications for Opioid Use Disorder (MOUD) while enrolled in the RESTORE 1 program).
- By June 30, 2026, RESTORE 1, Eleanora Fagan/Kean, and Hummingbird Programs will be able to use EPIC for closed loop referrals, documentation, invoicing, reporting, and care coordination aligned with CalAIM Community Supports requirements.

The HHIP grant agreement, which will be sent separately, outlines the responsibilities and expectations of this grant. Once received, please sign the agreement and return it within ten business days of receipt. SFHP will disburse the payment of \$2,489,698.63 within 10 business days.

The progress report is due on or before November 15, 2025. A final report shall be submitted to SFHP no later than July 1, 2026. The report templates are attached for your reference.

San Francisco Health Plan is grateful for all you do to support our members, and we look forward to partnering with you during the coming year.

Sincerely,
Fernando Rico
ECM/Community Supports Senior Manager

Title	FTE	Allowable %		
		revenue generating)	Cost Sal and Fringe 25-26	Cost Requested
Health Program Coordinator 3	1	0.5	\$ 203,585.00	\$ 101,792.50
Registered Nurse	1	0.25	\$ 300,981.20	\$ 75,245.30
Health Worker 2	2	0.25	\$ 261,941.90	\$ 130,970.95
Health Worker 3	2	0.25	\$ 282,888.00	\$ 141,444.00
Health Worker 4	1	0.25	\$ 162,000.00	\$ 40,500.00
P103 (Registered Nurse)	0.4	0.25	\$ 149,594.80	\$ 14,959.48
Community Based Organization (CBO) Case Manager Staff	8	0.25	\$ 150,000.00	\$ 300,000.00
			Sum	\$ 804,912.23

CS Program	Position	FTE	Monthly		
			Cost	Months	Cost / FTE / Month
RESTORE Site 1	Analyst	1	40,000	6	\$ 240,000.00
Eleanora Fagan / Kean	Analyst	1	40,000	6	\$ 240,000.00
Hummingbird	Analyst	1	40,000	6	\$ 240,000.00
All SFDPH CS Programs	Program Manager	1	65,000	6	\$ 390,000.00
				Sum	\$ 1,110,000.00

CalAIM

Start up costs associated with expanding services in shelters.

ESTIMATE

Items	Qty	Cost	Total	Tax /100	8.25
Power100+ Power Exam					
Table with Power Hi-Lo,					
Power Back, and Foot					
Control					
	6	\$ 8,019.00	\$ 48,114.00	\$ 481.14	\$ 3,969.41
			\$ 48,114.00		\$ 3,969.41
					\$ 52,083.41
Office Furniture	Qty	Cost	Total	Tax /100	8.25
Desk,					
Ford Desk with Return -					
White	7	\$ 2,609.00	\$ 18,263.00	\$ 182.63	\$ 1,506.70
Chairs					
Soji Office Chair	5	\$ 600.00	\$ 3,000.00	\$ 30.00	\$ 247.50
Blickman Hand Operated					
Pneumatic Exam Stool					
with 5-Leg Aluminum					
Base and Backrest	5	\$ 500.00	\$ 2,500.00	\$ 25.00	\$ 206.25
Welch Allyn Green Series					
777 Integrated Wall					
System	5	\$ 2,250.00	\$ 11,250.00	\$ 112.50	\$ 928.13
Welch Allyn 6500 Connex					
Vital Signs Monitor -					
65NTXX - Accessories,					
Stand Inc.	5	\$ 1,995.00	\$ 9,975.00	\$ 99.75	\$ 822.94
Waldmann HALUX N30-1					
P.SV LED Exam Light with					
38.6" Gooseneck Arm,					
Side Mount	5	\$ 604.00	\$ 3,020.00	\$ 30.20	\$ 249.15
Lights					
Collaborative Spaces					
Logo					
Twist-U Series					
Adjustable Desk Light					
with USB	5	\$ 250.00	\$ 1,250.00	\$ 12.50	\$ 103.13
			\$ 49,258.00		\$ 4,063.79
					\$ 49,361.13
Refrigerators	Qty	Cost	Total	Tax /100	8.25
Refrigerators	1	\$ 2,800.00	\$ 2,800.00	\$ 28.00	\$ 231.00
Premier ADA Built-In					
Under-Counter					
Refrigerators		\$ -	\$ -		
			\$ 2,800.00		\$ 231.00
					\$ 3,031.00
Cell Phone	Qty	Cost	Total	Tax /100	8.25
Phone Avg Line Cost					
59.00	5	\$ 59.00	\$ 295.00	\$ 2.95	\$ 24.34
Phone FY For Shelter					
health	5	\$ 75.00	\$ 375.00	\$ 3.75	\$ 30.94

Laptop/ Desktop
OptiPlex All-in-One Plus

7	\$1,509.00	\$ 10,563.00	\$ 105.63	\$ 871.45
		\$ 11,233.00	\$ 926.72	
			\$ 12,159.72	

Other office Supplies	Qty	Cost	Total	Tax /100	8.25
ALL Extra =(items)	5	\$ 1,000.00	\$ 5,000.00	50.00	412.50

	\$ 5,000.00	\$ 420.75
		\$ 5,420.75

Total Sum:	\$211,577	\$1,114	\$ 17,411.66
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Total+TAX	\$228,989
Tariffs TBD	\$45,797.73

\$274,786.40

HHIP Supplemental Documentation_Expanding Recuperative Care Community Supports

#5. Bernadette Gates, # [REDACTED]

#9. San Francisco Department of Public Health (SFDPH) is comprised of 3 divisions:

1. San Francisco Health Network (SFHN) which includes Zuckerberg San Francisco General Hospital (ZSFG), Laguna Honda Hospital and Rehabilitation Center (LHH), and more than 14 primary care clinics. Direct health care is provided to more than 125,000 insured and uninsured San Franciscans annually.
2. Behavioral Health Services, which is the largest provider of mental health and substance use prevention, early intervention, and treatment services in San Francisco (SF).
3. Population Health, which provides core public health services to all of SF.

#11. SFDPH is contracted with SFHP to provide:

1) ECM via 10 teams serving the following populations of focus: adults, families, and children/youth experiencing homelessness, adults and youth at risk for avoidable hospitalization/ED utilization, Adults/Youth with SMI/SUD, Adults at risk of institutionalization, Nursing facility residents transitioning to the community, adults transitioning from incarceration, adult/youth birth equity, children/youth enrolled in CCS, Children/Youth with child welfare, children/youth with intellectual or development disability;

2) Community Supports: Recuperative Care (Medical Respite and Managed Alcohol Program), Sobering Centers (Sobering Center and SoMa RISE), Housing Navigation Transition, Housing Deposits, Housing Tenancy & Sustaining

3) Hospital/facility contract for inpatient, including acute and distinct-part skilled nursing facility, and outpatient services.

#12. PATH CITED and PATH Justice funding has been received but not for the Recuperative Care Community Supports costs that this application is requesting; therefore, this request is not duplicative of any funding received through PATH. Refer to "Funding Dashboard" for details.

#13. HHIP and IPP funding have been received but not for the Recuperative Care Community Supports funding this application is requesting. Refer to "Funding Dashboard" for details.

#20. RESTORE 1, Eleanora Fagan / Kean, and Hummingbird are aligned with DHCS Recuperative Care Community Supports. Operationalizing these programs as CS will expand housing-related Community Supports capacity. Implementing Epic for these teams will enable data sharing, care coordination, and closed loop referrals with SFHP as well as health care agencies and community-based organizations who have access to Epic, Epic CareLink, and/or Findhelp.

#21. This request will enable SFDPH to expand our capacity to provide Community Supports, specifically for Recuperative Care, by operationalizing RESTORE 1, Eleanora Fagan / Kean, and Hummingbird programs as Community Supports. The programs' bed capacities are estimated as follows:

RESTORE 1 = 80

Eleanora Fagan / Kean = 76

Hummingbird = 59

HHIP Supplemental Documentation_Expanding Recuperative Care Community Supports

#23. Providers are trained on housing first, housing focused, harm reduction and trauma informed care and consistently incorporate those best practices into client interactions and services provided. SFDPH providers are able to access SF's One System (HMIS) and refer clients to Coordinated Entry. Additionally, Epic implementation for these programs will enable providers to view key housing information from the ONE System, as data from the One System gets pushed into Epic. This will enhance care coordination between healthcare and housing providers.

#25.

Objective #1 By June 30, 2026, Night Navigation staff and Bringing Expanded Access to Medications for Opioid Use Disorder ("BEAM") staff will transport at least 25 clients directly from the street to Community Supports Recuperative Care programs by securing and utilizing 2 transportation vans through one-time funding provided by SFHP.

Major Activities	Measurable Outcomes	Target Completion Date
Identify at least two vendors to procure vans.	Confirmation that the identified vendor can be utilized for purchase by SFDPH.	9/30/2025
Staff trained on standard operating procedures for client transportation in vans.	At least 25 clients are transported in the vans from the street to Community Supports programs.	6/30/2026
Increase access to opioid medication.	At least 25 CS members are connected to medication for opioid use disorder.	6/30/2026

← Formatted Table

Evaluation Methods: How will your outcomes be measured?

Confirmation that the identified vendor can be utilized for purchase by SFDPH will be measured by comparison of vendor against DPH list of approved vendors with a positive match as the requirement.

2 purchased vans are incorporated into SFDPH Fleet will be measured by receipt of purchased vans and documentation of incorporation into SFDPH Fleet.

Achievement of at least 25 clients being transported directly from the street to Community Supports programs will be measured via documentation in Epic with system reporting.

At least 25 CS members are connected to [medication for](#) opioid use disorder.

Objective #2 By September 30, 2025, RESTORE 1 staff will be able to scale from 35 to 70 rooms by securing and utilizing office furniture, clinical equipment, and technology supplies funded by SFHP.

Major Activities	Measurable Outcomes	Target Completion Date
Vendors for office furniture, clinical equipment, and technology supplies are identified.	Confirmation that the identified vendors can be utilized for purchase by SFDPH by 6/30/2025.	6/30/2025.

HHIP Supplemental Documentation_Expanding Recuperative Care Community Supports

Purchase of office furniture, clinical equipment, and technology supplies (refer to "CalAIM RESTORE 1 Operating Expenses" spreadsheet)	Purchase of equipment will furnish RESTORE 1 Recuperative Care site that has a capacity of 70 rooms.	9/30/2026
Staff trained on proper use of office furniture, clinical equipment and technology supplies (refer to "CalAIM RESTORE 1 Operating Expenses" spreadsheet)	100% of designated staff will be properly trained to use clinical equipment and technology supplies.	9/30/2026

Evaluation Methods: How will your outcomes be measured?

Confirmation that the identified vendors can be utilized for purchase by SFDPH will be measured by comparison of vendor against DPH list of approved vendors with a positive match as the requirement.

Office furniture, clinical equipment, and technology supplies purchased will be measured by receipt.

RESTORE 1 Recuperative Care Capacity for 70 rooms will be measured by observation and documentation of each room meeting requirements for client use.

RESTORE 1 Recuperative Care being operational for 70 rooms will be measured by documentation of care and services provided for clients in 70 rooms through Epic system reporting.

Excel spreadsheet will be provided to SFHP to detail training on clinical and technology supplies.

Objective #3 By September 30, 2025, RESTORE 1 program staff will be hired to enable recuperative care services to be provided for 70 rooms (key example of services provided includes clients being started on Medications for Opioid Use Disorder (MOUD) while enrolled in the RESTORE 1 program).

Commented [YP1]: Should this be "RESTORE 1"? Please confirm

Major Activities	Measurable Outcomes	Target Completion Date
RESTORE 1 program staffing model identified.	Documented list of service providers and FTE's.	5/13/2025
RESTORE 1 program staff hired.	Hiring is completed and documented.	9/1/2025
RESTORE 1 program staff onboarded and trained in care and service delivery workflows including MOUD.	RESTORE staff provide care and services to clients so that clients started on MOUD clients will increase from 75% to 80% by 9/30/2025	9/30/2025
RESTORE 1 program staff onboarded and trained in care and service delivery workflows including Community Supports requirements.	100% of RESTORE 1 program staff trained on Community Supports requirements and workflows.	9/30/2025

Commented [YP2]: Please confirm "RESTORE" titles throughout the documents(s).

Commented [GB3R2]: My apologies; completed.

Commented [GB4]: I have a strong practice and preference of using person-first language. Is it necessary to refer to individuals as "MOUD clients" or can I keep person-first language of "Clients started on MOUD"?

Commented [PD5R4]: Defer to others but I also like the suggested term you use, Bernadette

Commented [GB6R4]: Per agreement with Fernando and Yadiel, "Members receiving MOUD services" is agreed upon.

HHIP Supplemental Documentation_Expanding Recuperative Care Community Supports

Evaluation Methods: How will your outcomes be measured?

Documented list of service providers and FTE's will be measured via documentation review (refer to "CalAIM Recuperative Care Staffing" spreadsheet).

Hiring is completed and documented through standard DPH hiring processes with all required forms completed and signed.

RESTORE [1](#) staff will provide services to clients with the goal on increasing the percentage of clients initiated on MOUD from 75% to 80%. This outcome will be tracked through EPIC systems reporting.

RESTORE [1](#) staff will document all services delivered to clients enrolled in the program and will submit invoices for clients through EPIC systems reporting.

A reduction in the use of acute care/crisis services following participation in RESTORE [1](#) will be a targeted outcome with measurable indicators that will be tracked in EPIC.

Objective #4 By June 30, 2026 RESTORE [1](#), Eleanora Fagan / Kean, and Hummingbird Programs will be able to use Epic for closed loop referrals, documentation, invoicing, reporting, and care coordination aligned with CalAIM Community Supports requirements.

Major Activities	Measurable Outcomes	Target Completion Date
Epic Program Manager and Analyst will be hired for Epic build and associated project management.	RESTORE 1 Epic build will be completed.	8/31/2025
RESTORE 1 program staff will be trained on use of Epic for documentation, invoicing, reporting, and care coordination.	RESTORE 1 Program staff will document on Epic for 100% of clients enrolled in the program. Staff will also submit invoices on Epic for all SFHP members.	9/30/2025
2 Analysts are hired for Epic build.	Eleanora Fagan/Kean Epic build is completed.	4/30/2026
Eleanora Fagan / Kean program staff are trained on use of Epic for documentation, invoicing, reporting, and care coordination.	Eleanora Fagan/Kean program staff will document on Epic for 100% of clients enrolled in the program. Staff will also submit invoices on Epic for all SFHP members.	6/30/2026
Hummingbird program staff will be trained on use of Epic for documentation, invoicing, reporting, and care coordination.	Hummingbird program staff will document on Epic for 100% of clients enrolled in the program. Staff will also submit invoices on Epic for all SFHP members.	6/30/2026

HHIP Supplemental Documentation_Expanding Recuperative Care Community Supports

Evaluation Methods: How will your outcomes be measured?

RESTORE [1](#) Epic build is completed by 8/31/25 will be measured via Epic project plan to completion with build in Epic production.

RESTORE [1](#) Program staff will document on Epic for 100% of clients enrolled in the program. Staff will also submit invoices on Epic for all SFHP members. [This](#) will be measured by Epic systems reporting.

Eleanora Fagan / Kean Epic build is completed by 4/30/2026 will be measured via Epic project plan to completion with build in Epic production.

Eleanora Fagan/Kean program staff will document on Epic for 100% of clients enrolled in the program. Staff will also submit invoices on Epic for all SFHP members. [This](#) will be measured by Epic systems reporting.

Hummingbird program staff will document on Epic for 100% of clients enrolled in the program. Staff will also submit invoices on Epic for all SFHP members. This will be measured by Epic systems reporting.

Additionally:

- Once Findhelp is in use for ECM and Community Supports referrals, ECM and Community Supports referrals placed by RESTORE 1, Eleanora Fagan/Kean, and Hummingbird programs can be tracked through Findhelp/Epic.
- Hospitalization days and Emergency Services / Psych Emergency Services utilization can also be tracked given the programs' aim of reduction in unnecessary hospitalization days / Emergency Services / Psych Emergency Services. Details are forthcoming and can be provided upon request.

SFHP Housing and Homelessness Incentive Program Application



Date of Application 05/13/2025

Applicant and Organization Information

1. Organization Name San Francisco Department of Public Health
2. Mailing Address 1001 Potrero Ave, Bldg 5, 25, 80, 90 & Bldg 5 Ward 1B, SF, CA 94110
3. Website <https://www.sf.gov/departments--department-public-health>
4. Name of Executive Director/CEO
Phone Number, and Email [REDACTED]
5. Contact Person (if not Executive Director) Bernadette Gates, CalAIM Director - see supplemental documentation
Name, Title, Phone Number, and Email
6. Organization Type

501(c)(3) Non-Profit Government Entity For-Profit Corporation Other
7. TIN 94-6000417
8. Organization Mission Statement:
To protect and promote the health of all San Franciscans.
9. Briefly describe your organization's current programs and services.
Refer to supplemental documentation.
10. Total organizational budget (for the current year) \$3,000,000,000
11. Network Status – Is your organization currently contracted with SFHP to provide services?

ECM	<input checked="" type="checkbox"/> Yes	No	
CS	<input checked="" type="checkbox"/> Yes	No	
Other	<input checked="" type="checkbox"/> Yes	No	

If yes, please describe what services your organization is currently contracted to provide:

Refer to supplemental documentation.

SFHP Housing and Homelessness Incentive Program Application



12. Has your organization applied for or received funding through other CalAIM programs or related initiatives such as PATH, HCBS spending plan, etc.?

■ Yes No

If yes, briefly describe the funding request and how it is not duplicative of this request:

Refer to supplemental documentation.

13. Has your organization applied for or received HHIP or IPP funding from other health plans or participating entities?

Anthem Yes No

Other Yes No

If yes, briefly describe the funding request and how it is not duplicative of this request:

Refer to supplemental documentation.

Proposal Details

14. Project Title	Expanding SFDPH Recuperative Care Community Supports
15. Amount Requested	\$2,489,698.63
16. Estimated Total Project Costs	2489,698.63
17. Proposed Start and End Dates	5/15/2025 - 6/30/2026
18. Project Overview: Please describe your funding request and need for funding, including how the request will help your organization address gaps or expand capacity to connect Medi-Cal members to housing services and/or reduce and prevent homelessness in San Francisco. (200 words)	

SFDPH aims to tackle San Francisco's mental health, addiction, and homelessness crisis by moving people quickly from the streets into effective treatment and sustained recovery. Additionally, caring for clients in the right setting and avoiding unnecessary emergency department utilization and hospital days are also primary SFDPH goals. Key strategies to these goals are to expand Recuperative Care Community Supports and streamline program delivery. The RESTORE, Eleanora Fagan / Kean, and Hummingbird programs provide recuperative care for Medi-Cal members experiencing homelessness. Included in the models of care are referrals to Coordinated Entry, Housing Community Supports, ECM and other services to promote physical and behavioral health linkages, recovery, and stabilization. This funding request is for RESTORE operating expenses and staffing, and for Epic implementation for RESTORE /Eleanora Fagan Kean / Hummingbird programs to enable staff to implement CS closed loop referrals, documentation, invoicing, reporting, and care coordination.

SFHP Housing and Homelessness Incentive Program Application



19. What are the overall goals for the project? (200 words)

The overall goals for this project are to expand housing-related Community Supports capacity by operationalizing critical DPH programs as Recuperative Care Community Supports, and improve coordination and referrals by enabling these DPH CS Programs to use Epic for closed loop referrals and care coordination. RESTORE aims to rapidly connect people experiencing homelessness to substance use treatment, provide a safe place to stabilize while clients begin a recovery journey, reduce distressing street behaviors by facilitating exit from the program to a safe location, and reduce fatal overdoses through starting lifesaving medication and linking to ongoing care. Eleanora Fagan / Kean seeks to provide stability, recovery, and a path out of homelessness by addressing urgent health issues, providing behavioral health support, and providing treatment for substance use for individuals experiencing homelessness with mental health needs. Hummingbird is a psychiatric respite center and interim housing site that provides individuals experiencing homelessness, mental health crises and substance use disorders recuperative care as an alternative to hospitalization.

20. Describe how your project aligns with SFHP's HHIP goals and funding strategies. Please select the specific goal your project supports.

Advancing housing equity	Enhancing street medicine
■ Optimizing data sharing and coordination	■ Expand housing-related Community Supports capacity
Enhancing home-based care	■ Improving coordination and referrals
Other (please describe):	

Refer to supplemental documentation.

SFHP Housing and Homelessness Incentive Program Application



21. If you are currently contracted or planning to contract with SFHP to be an Enhanced Care Management (ECM) or Community Supports (CS) provider:

- Please describe how this request will help your organization expand its capacity to provide Community Supports, and please indicate for which service(s).

Housing Transition Navigation Services	Housing Deposits
Housing Tenancy and Sustaining Services	Short-Term Post-Hospitalization Housing
■ Recuperative Care (Medical Respite)	■ N/A – This request is not focused on expanding these services
Other (please describe):	

Refer to supplemental documentation.

- If this request will help increase ECM enrollment or capacity, please indicate which CalAIM Populations of Focus you are currently serving or will be served by your organization as a result of this project. Check all that apply.

Individuals experiencing or at risk of homelessness	Individuals who are at risk for avoidable hospital or emergency department
Individuals with serious mental health and/or substance use disorder needs	Individuals living in the community and at risk for long-term care institutionalization
Adult nursing facility residents transitioning to the community	Children/youth with complex medical needs
Adults and youth who are transitioning from incarceration	Pregnant and postpartum individuals; birth equity population of focus
■ N/A – This request is not focused on expanding these services	

SFHP Housing and Homelessness Incentive Program Application



22. Describe the population(s) that will be served through this project, including the estimated number of Medi-Cal members expected to be served annually.

- If the project targets specific populations, provide a detailed demographic breakdown (e.g., race/ethnicity, gender, age, etc.) below.

Population(s) Served	Current # of Medi-Cal Members Served	Estimated # of Additional Members Served	Total # of Members to be Served (Current + Additional)
Refer to "Populations Served"			0
			0
			0
			0
			0
			0

23. Please describe how your project will support/incorporate the following best practices:

- Housing First, Housing Focused, and Harm Reduction
- Trauma Informed Care
- Use of San Francisco's One System (HMIS) and Coordinated Entry System (CES)

Refer to supplemental documentation.

24. Describe how this project will support increased housing placements and/or expand housing capacity in San Francisco.

Clients who are enrolled in these recuperative care programs will be provided care management (for example, Enhanced Care Management and/or Intensive Care Management) which will be a vehicle to support increased housing placements. Clients will be referred to Coordinated Entry to access SF Homelessness and Supportive Housing (HSH) Department's Community Supports programs, or directly to SFHP to access Housing Community Supports programs offered by non-HSH entities. Additionally, clients will be connected to programs such as therapeutic community living and residential treatment. By providing funding for RESTORE operating expenses and staffing, the model is positioned to scale from 25 to 80 beds. The Eleanora Fagan / Kean site is currently an unoccupied hotel with space for 76 beds. As these recuperative care models become operational as CS and implement Epic, there is potential to stand up new sites to further expand housing capacity in SF.

SFHP Housing and Homelessness Incentive Program Application



25. Project Objectives and Performance Measurement

Use the tables below to describe the project objectives, major activities, and how you will measure success. Please limit the number of objectives to no more than four. Please make sure that your objectives are Specific, Measurable, Achievable, Relevant, and Time-Framed (SMART). Elements to include: By (dates), (applicant) will (what, where, how and for whom) in order to (impact, by how much).

Objective #1 Refer to supplemental documentation.

Major Activities	Measureable Outcome	Target Completion Date

Evaluation Methods: How will your outcomes be measured?

Objective #2 Refer to supplemental documentation.

Major Activities	Measureable Outcome	Target Completion Date

Evaluation Methods: How will your outcomes be measured?

SFHP Housing and Homelessness Incentive Program Application



Objective #3 Refer to supplemental documentation.

Major Activities	Measureable Outcome	Target Completion Date

Evaluation Methods: How will your outcomes be measured?

Objective #4 Refer to supplemental documentation.

Major Activities	Measureable Outcome	Target Completion Date

Evaluation Methods: How will your outcomes be measured?

26. Describe how the project will be sustained after the grant period ends.

RESTORE operating expenses are one time funding; any ongoing maintenance fees will be absorbed by DPH budget. RESTORE staff costs will be sustained through direct CalAIM Medi-Cal billing as a Recuperative Care Community Support program. Epic staff costs are one time only.

SFHP Housing and Homelessness Incentive Program Application



27. Please complete the budget template and justification below. For each line item, please identify which project objective it supports.

Budget Justification (200 words)

Personnel was calculated based on RESTORE pilot program and prior Community Supports Epic builds. Vans and operating expenses calculated based on pricing research and prior purchases. All costs are either one-time or have sustainability plans for ongoing costs.

Population(s) Served	Current # of Medi-Cal Members Served	Estimated # of Additional Members Served	Total # of Members to be Served (Current + Additional)	Notes
Individuals experiencing or at risk of homelessness	#REF!	#REF!	#REF!	Total number of clients - same clients as row below.
Individuals with serious mental health and/or substance use disorder needs	#REF!	#REF!	#REF!	Total number of clients - same clients as row above.
Pregnant and postpartum individuals; birth equity population of focus	#REF!	#REF!	#REF!	These clients are a subset of total clients.
Adults and youth who are transitioning from incarceration	#REF!	#REF!	#REF!	These clients are a subset of total clients.
Individuals who are at risk for avoidable hospital or emergency department	#REF!	#REF!	#REF!	These clients are a subset of total clients.



San Francisco Department of Public Health

Daniel Tsai
Director of Health

City and County of San Francisco
Daniel Lurie
Mayor

Memorandum

To: Honorable Members of the Board of Supervisors

From: San Francisco Department of Public Health

Date: Friday, June 20, 2025

RE: **Retroactivity re: File 250620**

This Resolution seeks authorization for the Department of Public Health (DPH) to retroactively accept and expend a grant in the amount of \$2,489,698.63 from the California Department of Health Care Services (DHCS) through the San Francisco Health Authority for participation in the Housing and Homelessness Incentive Program (HHIP).

This accept and expend grant is retroactive because DPH received the notice of the grant on the pre-determined project start date. DPH received the award letter on May 15, 2025, for a project start date of May 15, 2025. Upon receiving the notice of award, DPH put together the accept and expend packet and forwarded it to the Controller's Office for review on May 19, 2025. The Controller's Office forwarded the packet to the Mayor's Office for review on May 23, 2025, for introduction on June 3, 2025. We respectfully request retroactive authorization for this item.

Please contact Christina Chiong, SFDPH Accept & Expend Unit Manager, at christina.chiong@sfdph.org for any questions about this request for retroactive authorization.

City and County of San Francisco**Department of Public Health**

Daniel Lurie
Mayor

TO: **Angela Calvillo, Clerk of the Board of Supervisors**

FROM: **Daniel Tsai**
Director of Health

DATE: **5/22/2025**

SUBJECT: **Grant Accept and Expend**

GRANT TITLE: **Housing and Homelessness Incentive program (“HHIP”)
Expanding San Francisco Department of Public Health
Recuperative Care Community Supports - \$2,489,698.63**

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
- 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



To: Angela Calvillo, Clerk of the Board of Supervisors
From: Sophia Kittler, Mayor's Budget Director
Date: May 30, 2025
Re: Mayor's FY 2025-26 and FY 2026-27 Budget Submission

RECEIVED **AK**
BOARD OF SUPERVISORS
SAN FRANCISCO
2025 MAY 30 PM04:18

Madam Clerk,

In accordance with City and County of San Francisco Charter, Article IX, Section 9.100, the Mayor's Office hereby submits the Mayor's proposed budget by May 30th, corresponding legislation, and related materials for Fiscal Year (FY) 2025-26 and FY 2026-27.

In addition to the Mayor's Proposed FY 2025-26 and FY 2026-27 Budget Book, the following items are included in the Mayor's submission:

- Proposed *Interim* Budget and Annual Appropriation Ordinance (AAO)
- Proposed *Interim* Annual Salary Ordinance (ASO)
- Proposed Budget and Annual Appropriation Ordinance (AAO)
- Proposed Annual Salary Ordinance (ASO)
- Administrative Provisions for both, but separate documents of the AAO and ASO, in tracked changes, and on pleading paper
- Proposed Budget for the Office of Community Investment and Infrastructure
- A Transfer of Function letter detailing the transfer of positions from one City department to another
- An Interim Exception letter to the ASO
- PUC Capital Amendment and Debt Authorization
- Prop J Certification Letters
- A letter addressing funding levels for consumer price index increases for nonprofit corporations or public entities for the coming two fiscal years
- 40 pieces of trailing legislation
- Memo to the Board President requesting for 30-day rule waivers on ordinances

Please note the following:

- Technical adjustments to the June 1 budget are being prepared, but are not submitted with this set of materials.

Sincerely,

A handwritten signature in blue ink that appears to read "SOPHIA KITTNER".

Sophia Kittler
Mayor's Budget Director

cc: Members of the Board of Supervisors
Budget & Legislative Analyst's Office
Controller

No	DEPT	Item	Description	Type of Legislation	File #
1	ADM	Code Amendment	Amending the Administrative Code to modify the fees for the use of City Hall	Ordinance	250591
2	ADM	Code Amendment	Amending the Administrative Code to transfer responsibilities for oversight of the collection of sexual orientation and gender identity data from the City Administrator to the Human Rights Commission and removing obsolete reporting requirements	Ordinance	250593
3	ADM	Code Amendment	Amending the Administrative Code to clarify the status of the Treasure Island Development Authority ("TIDA") as a City department	Ordinance	250594
4	ADM	Continuing Prop J	Convention Facilities Management	Resolution	250615
5	ADM	Continuing Prop J	Security Services for RED Buildings	Resolution	250615
6	ADM	Continuing Prop J	Custodial Services for RED Buildings	Resolution	250615
7	ADM	Continuing Prop J	Security Guard Service at Central Shops	Resolution	250615
8	BOS	Continuing Prop J	Budget and Legislative Analyst Services	Resolution	250615
9	CON	Access Line Tax	Resolution concurring with the Controller's establishment of the Consumer Price Index for 2025, and adjusting the Access Line Tax by the same rate.	Resolution	250612
10	CON	Code Amendment	Amending the Administrative Code to eliminate the Budget Savings Incentive Fund	Ordinance	250595
11	CON	Neighborhood Beautification and Graffiti Clean-up Fund Tax	Adopting the Neighborhood Beautification and Graffiti Clean-up Fund Tax designation ceiling for tax year 2025	Ordinance	250596
12	DBI	DBI Fee Changes	Amending the Building, Subdivision, and Administrative Codes to adjust fees charged by the Department of Building Inspection and to establish Subfunds within the Building Inspection Fund; and affirming the Planning Department's determination under the California Environmental Quality Act	Ordinance	250592
13	DEC	Early Care and Education	Modifying the baseline funding requirements for early care and	Ordinance	250597

		Commercial Rents Tax Baseline	education programs in Fiscal Years (FYs) 2025-2026 and 2026-2027, to enable the City to use the interest earned from the Early Care and Education Commercial Rents Tax for those baseline programs		cont'd 250597
14	DPH	State Recurring Grants FY25-36	Authorizing the acceptance and expenditure of Recurring State grant funds by the San Francisco Department of Public Health for Fiscal Year (FY) 2025-2026	Resolution	250618
15	DPH	CCE Expansion Grant	Grant Agreement - California Department of Social Services - Community Care Expansion Program - Anticipated Revenue to the City \$9,895,834	Resolution	250619
16	DPH	Code Amendment	Various Codes - Environmental Health Permit, Fee, and Penalties Revisions	Ordinance	250606
17	DPH	HHIP Grant	Delegation of 9.118 Authority - Accept and Expend Grant - San Francisco Health Authority, a local governmental entity doing business as the San Francisco Health Plan ("Health Plan" or "SFHP") - Housing and Homelessness Incentive Program ("HHIP") Expanding San Francisco Department of Public Health Recuperative Care Community Supports - \$2,489,698.63	Resolution	250620
18	DPH	IPP Grant	Delegation of 9.118 Authority - Accept and Expend Grant - San Francisco Health Authority, a local governmental entity doing business as the San Francisco Health Plan ("Health Plan" or "SFHP") - Incentive Payment Program ("IPP") San Francisco Department of Public Health Epic Enhancement Implementation Project - \$6,000,000	Resolution	250621
19	DPH	Patient Revenues	Amending the Health Code to set patient rates for services provided by the Department of Public Health (DPH), for Fiscal Years 2025-2026 and 2026-2027; and authorizing DPH to waive or reduce fees to meet the needs of low-income patients through its	Resolution Ordinance	250607

			provision of charity care and other discounted payment programs		cont'd 250607
20	DPH	Continuing Prop J	Healthcare Security at Primary Care Clinics	Resolution	250615
21	DPW	DPW Fee Changes	Public Works, Subdivision Codes - Fee Modification and Waiver	Ordinance	250608
22	DPW	Continuing Prop J	Yard Operations and Street Tree Nursery	Resolution	250615
23	HOM	Continuing Prop J	Security Services	Resolution	250615
24	HOM	Continuing Prop J	Homelessness and Supportive Housing security services	Resolution	250615
25	HOM	Homelessness and Supportive Housing Fund	Approving the FYs 2025-2026 and 2026-2027 Expenditure Plan for the Department of Homelessness and Supportive Housing Fund	Resolution	250613
26	HOM	Our City, Our Home Homelessness Gross Receipts Tax	Funding Reallocation - Our City, Our Home Homelessness Gross Receipts Tax - Services to Address Homelessness - \$88,495,000 Plus Future Revenue Through FY 2027-28	Ordinance	250609
27	LIB	Friends of the Library A&E	Annual Accept & Expend legislation for the SFPL's Friends of the Library Fund	Resolution	250614
28	MOHCD	Continuing Prop J	Treeline Security Inc services for City-owned properties in predevelopment for affordable housing sites	Resolution	250615
29	OCII	OCII Budget Resolution	Office of Community Investment and Infrastructure, operating as Successor Agency to the San Francisco Redevelopment Agency, Fiscal Year 2025-26 Budget	Resolution	250611
30	OCII	OCII Interim Budget Resolution	Office of Community Investment and Infrastructure, operating as Successor Agency to the San Francisco Redevelopment Agency, Fiscal Year 2025-26 Interim Budget	Resolution	250610
31	PDR	Crankstart Foundation Grant A&E	Accept and Expend Grant - Retroactive - Immigration Defense Unit - Crankstart Foundation - Amendment to the Annual Salary Ordinance for FYs 2024-25 and 2025-26 - \$3,400,000	Ordinance	250598
32	POL	Code Amendment	Registration Fees and Fingerprint ID Fund	Ordinance	250599
33	PUC	Fixed Budget Amendment	Continues waiving certain small business first-year permit, license, and business registration fees	Ordinance	250602

34	REC	Bobo Estate A&E	Accept and Expend Bequest - Estate of William Benjamin Bobo - Benches, Park Furnishings and Park Improvements Across San Francisco - \$3,600,000	Resolution	250616
35	REC	Code Amendment	Amending the Park Code to authorize the Recreation and Park Department to charge fees for reserving tennis/pickleball courts at locations other than the Golden Gate Park Tennis Center; and affirming the Planning Department's determination under the California Environmental Quality Act	Ordinance	250603
36	REC	Authorizing Paid Parking in Golden Gate Park	Authorizing the Municipal Transportation Agency (SFMTA) to set parking rates in Golden Gate Park in accordance with Park Code provisions that authorize SFMTA rate-setting on park property; and affirming the Planning Department's determination under the California Environmental Quality Act	Resolution	250617
37	REC	Code Amendment	PUC Cost Recovery Fee	Ordinance	250604
38	REC	Code Amendment	Scholarship Recovery Fee	Ordinance	250605
39	REG	Continuing Prop J	Assembly and mailing of vote-by-mail ballot packets	Resolution	250615
40	SHF	Continuing Prop J	Jail Food Service	Resolution	250615



RECEIVED **AK**
BOARD OF SUPERVISORS
SAN FRANCISCO
2025 MAY 30 PM04:26

To: Angela Calvillo, Clerk of the Board of Supervisors
From: Sophia Kittler, Mayor's Budget Director
Date: May 30, 2025
Re: Delegation of 9.118 Authority - Accept and Expend Grant - San Francisco Health Authority, a local governmental entity doing business as the San Francisco Health Plan ("Health Plan" or "SFHP") - Housing and Homelessness Incentive Program ("HHIP") Expanding San Francisco Department of Public Health Recuperative Care Community Supports - \$2,489,698.63

Resolution retroactively authorize the Department of Public Health to accept and expend a grant in the amount of \$2,489,698.63 from the California Department of Health Care Services (DHCS) through San Francisco Health Plan (SFHP) for participation in a program entitled, "Housing and Homelessness Incentive Program ("HHIP") Expanding San Francisco Department of Public Health Recuperative Care Community Supports," for a term of one year, one month, and sixteen days from May 15, 2025 to June 30, 2026; and delegating authority under Charter Section 9.118(a) to the Director of Health to approve a Grant Agreement between the City, acting by and through the Department of Public Health, and SFHP.

Should you have any questions, please email Adam Thongsavat at adam.thongsavat@sfgov.org.