

File No. 220969

Committee Item No. 6

Board Item No. 8

# COMMITTEE/BOARD OF SUPERVISORS

## AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee

Date October 19, 2022

Board of Supervisors Meeting

Date October 25, 2022

### Cmte Board

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- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
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- Grant Information Form
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- Application
- Public Correspondence

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

- Fund Distribution
- Work Plan Template
- \_\_\_\_\_
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- \_\_\_\_\_
- \_\_\_\_\_

Completed by: Brent Jalipa

Date October 13, 2022

Completed by: Brent Jalipa

Date October 21, 2022

1 [Accept and Expend Grant and Amend the Annual Salary Ordinance - Retroactive - Centers  
2 for Disease Control and Prevention - Coronavirus Disease 2019 Public Health Crisis  
3 Response and the Public Health Workforce Development Supplemental Funding -  
4 \$1,557,822]

5 **Ordinance retroactively authorizing the Department of Public Health to accept and**  
6 **expend a grant in the amount of \$1,557,822 from the Centers for Disease Control and**  
7 **Prevention, through the California Department of Public Health as a pass-through**  
8 **entity, for participation in a coronavirus disease 2019 (COVID-19)-related program**  
9 **entitled “COVID-19 Public Health Crisis Response and the Public Health Workforce**  
10 **Development Supplemental Funding,” for the period of July 1, 2021, through June 30,**  
11 **2023; and amending Ordinance No. 109-21 (Annual Salary Ordinance, File No. 210644**  
12 **for Fiscal Years 2021-2022 and 2022-2023) to provide for the addition of four grant-**  
13 **funded full-time positions in Class 0931 Manager III (2.5 FTE), Class 2593 Health**  
14 **Program Coordinator III (1.25 FTE), and 2119 Health Care Analyst (1.25 FTE).**

15 NOTE: **Unchanged Code text and uncodified text** are in plain Arial font.  
16 **Additions to Codes** are in *single-underline italics Times New Roman font*.  
17 **Deletions to Codes** are in *strikethrough italics Times New Roman font*.  
18 **Board amendment additions** are in double-underlined Arial font.  
19 **Board amendment deletions** are in ~~strikethrough Arial font~~.  
20 **Asterisks (\* \* \* \*)** indicate the omission of unchanged Code  
21 subsections or parts of tables.

22 Be it ordained by the People of the City and County of San Francisco:

23 **Section 1. Findings.**

24 (a) The Department of Public Health (DPH) was awarded a grant in the amount of  
25 \$1,557,822 by the Centers for Disease Control and Prevention (CDC) through the California  
Department of Public Health (CDPH) as a pass-through entity, for participation in a program,

1 entitled "COVID-19 Public Health Crisis Response and the Public Health Workforce  
2 Development Supplemental Funding."

3 (b) A request for retroactive approval is being sought because DPH received the  
4 award on August 31, 2021, for a project start date of July 1, 2021.

5  
6 **Section 2. Authorization to Accept and Expend Grant Funds.**

7 (a) The Board of Supervisors hereby authorizes DPH to retroactively accept and  
8 expend, on behalf of the City and County of San Francisco, the CDC grant in the amount of  
9 \$1,557,822, through CDPH as a pass-through entity, to support jurisdictional COVID-19  
10 prevention, preparedness, response, and recovery initiatives, including school-based health  
11 programs.

12 (b) The grant funds these activities for the period beginning July 1, 2021 to June 30,  
13 2023 for strategically recruiting, hiring, and training personnel to address projected  
14 jurisdictional COVID-19 response needs, while continuing to distribute and administer vaccine  
15 without discriminating on non-public health grounds within a prioritized group.

16 (c) The DPH budget includes a provision for indirect costs in the amount of  
17 \$252,005.16.

18  
19 **Section 3. Grant funded positions; Amendment to Fiscal Years 2021-2022 and**  
20 **2022-2023 Annual Salary Ordinance**

21 Ordinance No. 109-21 (Annual Salary Ordinance File No. 210644 for FYs 2021-2022  
22 and 2022-2023) is hereby amended to add four full-time positions (1.0 FTE in FY 21-22, 4.0  
23 FTE in FY 22-23) in DPH as follows:

1 Department: DPH (152644) Department of Public Health

2 Program: COVID-19 Public Health Crisis Response and the Public Health

3 Workforce Development Supplemental Funding

4 Fund: 11580

5 Project: 10038774

6  
7  
8

Amendment	No. of Positions	Class	Compensation Schedule	Department
Add in FY 21-22	0.25 FTE	0931 Manager III	\$6,600 Biweekly	Department of Public Health
Add in FY 21-22	0.25 FTE	0931 Manager III	\$6,600 Biweekly	Department of Public Health
Add in FY 21-22	0.25 FTE	2593 Health Program Coordinator III	\$4,892 Biweekly	Department of Public Health
Add in FY 21-22	0.25 FTE	2119 Health Care Analyst	\$4,288 Biweekly	Department of Public Health
Add in FY 22-23	1.0 FTE	0931 Manager III	\$6,600 Biweekly	Department of Public Health
Add in FY 22-23	1.0 FTE	0931 Manager III	\$6,600 Biweekly	Department of Public Health
Add in FY 22-23	1.0 FTE	2593 Health Program Coordinator III	\$4,892 Biweekly	Department of Public Health
Add in FY 22-23	1.0 FTE	2119 Health Care Analyst	\$4,288 Biweekly	Department of Public Health

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1 APPROVED AS TO FORM:  
2 DAVID CHIU, City Attorney

APPROVED AS TO CLASSIFICATION  
DEPARTMENT OF HUMAN RESOURCES

3 By: /s/  
4 Henry L. Lifton  
5 Deputy City Attorney

By: /s/  
—  
6 Carol Isen  
7 Human Resources Director

8 APPROVED: /s/  
9 Mayor's Office

10 APPROVED: /s/  
11 Ben Rosenfield  
12 Controller

13 Recommended:

14 /s/  
15 Dr. Grant Colfax  
16 Director of Health

17  
18 n:\legana\as2022\2200399\01597368.docx  
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**File Number:** 220969  
(Provided by Clerk of Board of Supervisors)

**Grant Ordinance Information Form**  
(Effective July 2011)

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

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

1. Grant Title: **Coronavirus Disease 2019 (COVID-19) Public Health Crisis Response and the Public Health Workforce Development Supplemental Funding**

2. Department: **Department of Public Health, Population Health Division**

3. Contact Person: **Susan Philip** Telephone: **628-206-7638**

4. Grant Approval Status (check one):

Approved by funding agency                       Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$1,557,822**

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

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

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

b. Grant Pass-Through Agency (if applicable): **California Department of Public Health**

8. Proposed Grant Project Summary:

**SDFPH will use the funding to support jurisdictional Coronavirus-19 prevention, preparedness, response, and recovery initiatives, including school-based health programs. Funding for these activities is covered for the period beginning July 1, 2021 to June 30, 2023, for strategically recruiting, hiring, and training personnel to address projected jurisdictional Coronavirus -19 response needs while continuing to distribute and administer vaccine without discriminating on non-public-health grounds within a prioritized group.**

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

Start-Date: **07/01/2021**    End-Date: **06/30/2023**

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? **N.A.**

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? \$ **252,005.16**

b2. How was the amount calculated? **25% of Personnel and Fringe Benefit Cost**

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): **N.A.**

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

12. Number of new positions created and funded:

Role	Position
Agency Preparedness Manager	0.25 FTE PCS 0931
Healthcare System Readiness Manager	0.25 FTE PCS 2593
Policy, Communications, and Community Resilience Manager	0.25 FTE PCS 0931
Grants Analyst	0.25 FTE PCS 2119
Agency Preparedness Manager	1.0 FTE PCS 0931
Healthcare System Readiness Manager	1.0 FTE PCS 2593
Policy, Communications, and Community Resilience Manager	1.0 FTE PCS 0931
Grants Analyst	1.0 FTE PCS 2119

13. If new positions are created, explain the disposition of employees once the grant ends?

**After the grant ends in June 2023, the positions will be backfilled by the general fund. These 4 positions (2 - 0931, 1 - 2119, and 1 - 2593) are being submitted as a Department budget request to the Mayor's Office. The positions will support the Public Health Emergency Preparedness and Response (PHEPR) Branch in the Population Health Division. PHEPR recently has been instrumental in leading the public health event/crisis responses for the COVID-19 pandemic and Tenderloin City emergency declarations.**

14. Any other significant grant requirements or comments:

**We respectfully request for approval to accept and expend these funds retroactive to July 01, 2021. The Department received the subaward agreement on August 31, 2021. The CFDA # for this grant is 93.354.**

Award Information	
Centers for Disease Control and Prevention	
Crisis Response Cooperative Agreement:	
<b>COVID-19 Public Health Workforce Supplemental Funding</b>	
Award # 1 NU90TP922174-01-00	
FAIN # NU90TP922174	
Federal Award Date: 05/19/2021	
Recipient: California Department of Public Health	
<b>CFDA # 93.354</b>	
<b>Budget Period Start Date: 07/01/2021 End Date 06/30/2023</b>	
Subrecipient: Local Health Jurisdiction	

**Project Desc: HD EPR PD168 2122 WFD**

**Project: 10038774**

**Dept: 152644**

**Authority: 10001**

**Fund: 11580**

**Activity: 0001**

**Proposal ID: CTR00002916**



**\*\*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: 4/26/2022 | 3:12 PM PDT

DocuSigned by:  
Toni Rucker  
708292F7331F44D...  
(Signature Required)

**Department Head or Designee Approval of Grant Information Form:**

Dr. Grant Colfax  
(Name)

Director of Health  
(Title)

Date Reviewed: 5/2/2022 | 9:52 AM PDT

DocuSigned by:  
Greg Wagner  
2032732473268F...  
(Signature Required)  
Greg wagner, COO for



TOMÁS J. ARAGÓN, M.D., Dr.P.H.  
Director and State Public Health Officer

State of California—Health and Human Services Agency  
California Department of Public Health



GAVIN NEWSOM  
Governor

August 31, 2021

Dr. Susan Philip  
Health Officer  
City & County of San Francisco  
101 Grove Street, Room 308  
San Francisco, CA 94102

**COVID-19 Public Health Crisis Response and the  
Public Health Workforce Development Supplemental  
Funding  
Award Number WFD-038  
City & County of San Francisco**

**Authority:**

Section 311(c)(1) of the Public Health  
Service Act (42 USC 243(c)(1))

American Rescue Plan Act of 2021 (P.L.  
117-2). Subtitle F Public Health Workforce,  
Sec. 2501 Funding for Public Health  
Workforce

Dear Dr. Susan Philip:

This letter covers the Public Health Workforce Development Supplemental funding through the American Rescue Plan Act of 2021, to establish, expand, train, and sustain the STLT public health workforce to support jurisdictional COVID-19 prevention, preparedness, response, and recovery initiatives, including school-based health programs. Funding for these activities is covered for the period beginning July 1, 2021 to June 30, 2023. The California Department of Public Health (CDPH) is allocating **\$1,557,822** to **City & County of San Francisco**. This letter describes the goals and structure of the workforce development strategy, the funding provided, and the expectations.

CDPH was awarded \$173 million and will allocate \$64 million to LHDs for strategically recruiting, hiring, and training personnel to address projected jurisdictional COVID-19 response needs while continuing to distribute and administer vaccine without discriminating on non-public-health grounds within a prioritized group.

**Funding:**

The funding term is July 1, 2021 to June 30, 2023. CDPH will evaluate spending at the local level in June 2022. CDPH, in consultation with the California Conference of Local Health Officers and California Health Executives Association of California, will consider options for possible redirection of funds at that time.

CDPH Emergency Preparedness Office, MS 7002 • P.O. Box 997377 • Sacramento, CA  
95899-7377

(916) 650-6416 • (916) 650-6420 FAX  
Internet Address: [www.cdph.ca.gov](http://www.cdph.ca.gov)



### **Allowable Costs:**

Funding can be used to hire personnel for roles that may range from senior leadership positions to early career or entry-level positions and may include, but is not limited to:

- Permanent full-time and part-time staff
- Temporary or term-limited staff
- Fellows
- Interns
- Contractors or contracted employees

For a detailed listing of allowable costs and activities, please refer to the funding guidance document, Attachment 4.

### **Unallowable Costs:**

The funding associated with the Public Health Workforce grant cannot be used for the following costs:

- Research.
- Clinical care (except as otherwise noted in Domain 5 and as may be provided in further guidance from CDC).
- Publicity and propaganda (lobbying):
  - Other than for normal and recognized executive-legislative relationships, no funds may be used for:
    - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.
    - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

### **Submission Requirements:**

1. Complete a Workplan and Budget by **September 30, 2021** and submit to CDPH at: [LHBTProg@cdph.ca.gov](mailto:LHBTProg@cdph.ca.gov). See *Attachments 1 and 2*. Your Agency should consider the following when developing your Workplan and Budget:

- Develop approximate goals and metrics regarding diversity of staff hired and equity and inclusion activities. Report on progress against those measures will be required.

- Because overtime costs are a very likely and reasonable expense during the response to COVID-19, CDC is allowing budgets to include projected overtime costs. Overtime costs should be estimated based on current real-time needs.
- It is recommended that your Agency fund an administrative position to ensure fiscal accountability and reporting requirements of this grant.
- Your Agency must work in coordination with tribal governments, community-based organizations, and faith-based organizations, particularly those with experience with high-risk populations based upon county COVID-19 surveillance data. There is no explicit cap or percentage that must go to these partners; however, you must reach out to them and enlist their help where it makes sense (i.e. outreach, testing strategy, education, or housing, etc.).
- Your Agency is encouraged to recruit and give hiring preference to unemployed workers, underemployed workers, and applicants from local communities disproportionately affected by COVID-19, who are qualified to perform the work. In addition, you are encouraged to work with applicants from your community when executing contracts and other services.

**Reporting Requirements:**

As a subrecipient of the Public Health Workforce Development Supplemental Funding, the CDC requires submission of the following reporting documents. For your convenience, your Contract Manager will issue reminders as these dates get closer.

1. Quarterly progress reports on status of timelines, goals, and objectives.
  - Progress reports must include status in meeting hiring goals. Progress toward meeting hiring goals including types of staff hired and the general roles they hold.
2. Quarterly fiscal reports summarizing progress in obligating and spending the allocated funds.

Progress reports must be submitted to CDPH following the schedule below. Note, if your workplan or budget is under review by CDPH and has not been approved by the progress report due date, you are still required to submit your progress report to CDPH.

<b>Year/Quarter</b>	<b>Reporting Period</b>	<b>Due Date</b>
Year 1/Q1	July 1, 2021 – September 30, 2021	October 31, 2021
Year 1/Q2	October 1, 2021 – December 31, 2021	January 31, 2022
Year 1/Q3	January 1, 2022 – March 31, 2022	April 30, 2022
Year 1/Q4	April 1, 2022 – June 30, 2022	July 31, 2022
Year 2/Q1	July 1, 2022 – September 30, 2022	October 31, 2022
Year 2/Q2	October 1, 2022 – December 31, 2022	January 31, 2023
Year 2/Q3	January 1, 2023 – March 31, 2023	April 30, 2023
Final	April 1, 2023 – June 30, 2023	July 31, 2023

### **Reimbursement/Invoicing:**

CDPH will reimburse your Agency upon receipt of invoice. In order to receive your reimbursements, please complete and submit your invoice(s) to: [LHBTProg@cdph.ca.gov](mailto:LHBTProg@cdph.ca.gov). See *Attachment 3*.

1. First Quarter Payment: CDPH will issue a warrant (check) to your Agency for 25% of your total allocation, this will be issued as an advance payment.
2. Future payments will be based on reimbursement of expenditures once the 25% advance payment has been fully expended. In order to receive future payments, your Agency must complete and submit reporting documentation within Attachments 1 and 2 following the due dates above within Reporting Requirements.
3. Your Agency must maintain supporting documentation for any expenditures invoiced to CDPH against this source of funding. Documentation should be readily available in the event of an audit or upon request from CDPH. Documentation should be maintained onsite for five years.

Thank you for the time your Agency has and will continue to invest in this response. We are hopeful that this additional funding can support the needs of your local health jurisdiction and that it provides solutions that allow for a more sustained workforce. If you have any questions or need further clarification, please reach out to [LHBTProg@cdph.ca.gov](mailto:LHBTProg@cdph.ca.gov).

Sincerely,

*Melissa Relles*

Melissa Relles  
Assistant Deputy Director  
Emergency Preparedness Office  
California Department of Public Health

### **Attachments**

Attachment 1: Workplan and Progress Report  
Attachment 2: Budget and Expenditure Report  
Attachment 3: Invoice Template  
Attachment 4: Public Health Workforce Supplemental Funding Guidance  
Attachment 5: Local Allocations



**Local Health Jurisdiction (LHJ) Funding Distribution  
For the Public Health Workforce Development Grant  
Funding Formula: \$450k Base + Population**

Local Health Jurisdiction	Population	Allocation	Local Health Jurisdiction	Population	Allocation
Alameda (Minus Berkeley)	1,539,830	\$2,399,529	Orange	3,153,764	\$4,442,879
Alpine	1,135	\$451,439	Placer	404,994	\$962,750
Amador	37,377	\$497,322	Plumas	18,116	\$472,936
Berkeley	116,761	\$597,827	Riverside	2,454,453	\$3,557,504
Butte	202,669	\$706,593	Sacramento	1,561,014	\$2,426,350
Calaveras	45,036	\$507,019	San Benito	63,526	\$530,428
Colusa	22,248	\$478,167	San Bernardino	2,175,909	\$3,204,849
Contra Costa	1,153,854	\$1,910,858	San Diego	3,315,404	\$4,647,527
Del Norte	26,949	\$484,119	San Francisco	875,010	\$1,557,822
El Dorado	195,362	\$697,342	San Joaquin	783,534	\$1,442,007
Fresno	1,026,681	\$1,749,848	San Luis Obispo	271,172	\$793,322
Glenn	29,679	\$487,576	San Mateo	765,245	\$1,418,852
Humboldt	130,851	\$615,666	Santa Barbara	441,172	\$1,008,554
Imperial	186,034	\$685,532	Santa Clara	1,934,171	\$2,898,792
Inyo	18,563	\$473,502	Santa Cruz	261,115	\$780,589
Kern	914,193	\$1,607,430	Shasta	177,797	\$675,103
Kings	152,543	\$643,130	Sierra	3,189	\$454,037
Lake	63,940	\$530,952	Siskiyou	44,330	\$506,125
Lassen	27,572	\$484,908	Solano	438,527	\$1,005,205
Madera	158,474	\$650,639	Sonoma	484,207	\$1,063,039
Marin	257,774	\$776,359	Stanislaus	555,968	\$1,153,893
Mariposa	18,037	\$472,836	Sutter	101,289	\$578,239
Mendocino	86,669	\$559,729	Tehama	65,354	\$532,743
Merced	284,836	\$810,622	Trinity	13,535	\$467,136
Modoc	9,491	\$462,016	Tulare	481,733	\$1,059,907
Mono	13,295	\$466,832	Tuolumne	53,465	\$517,690
Monterey	437,318	\$1,003,674	Ventura	835,223	\$1,507,449
Napa	137,637	\$624,258	Yolo	217,500	\$725,370
Nevada	97,466	\$573,399	Yuba	79,407	\$550,535

<b>Total Allocation</b>	<b>\$63,350,755</b>
<b>Minimum Allocation</b>	<b>\$451,439</b>
<b>Maximum Allocation</b>	<b>\$4,647,527</b>

**Award Information**

Centers for Disease Control and Prevention

Crisis Response Cooperative Agreement:

**COVID-19 Public Health Workforce Supplemental Funding**

Award # 1 NU90TP922174-01-00

FAIN # NU90TP922174

Federal Award Date: 05/19/2021

Recipient: California Department of Public Health

**CFDA # 93.354**

**Budget Period Start Date: 07/01/2021 End Date 06/30/2023**

Subrecipient: Local Health Jurisdiction

**Budget Summary Instructions: The numbers below correspond to the numbers listed on the Budget Summary Tab.**

1. Local Entity Name: Enter Local Health Department name
  2. Date: Enter the date of the budget.
  3. Allocation: Enter the Total Allocation.
  4. If applicable, EPO will deduct costs charged to CDPH contract for services conducted on behalf of the LHJ (i.e. vaccinators). Date, Contract Name and Amount are entered by EPO.
  5. Balance: This cell has a formula that calculates the Balance; Balance equals the Allocation minus Deductions, if applicable, see number 4.
  6. Select Indirect Costs rate method (Personnel or Direct Costs) based on Local Entity's approved Indirect Cost Rate from CDPH.
  7. Enter the Indirect Cost rate percentage.
- All other sections on this tab are driven by formula and do not require Local Entity data entry.

**Budget FY21-22 and FY22-23 Instructions:**

**Personnel**

1. Enter name of Person (Last Name, First) or TBD.
  2. Enter position title (this needs to be spelled out).
  3. Select position type from the drop down menu.
  4. Enter justification, must be specific to role and include how it supports COVID-19 activities.
  5. Enter annual salary of the person, for Year 1.
  6. Enter FTE, percent of time to work, for example, a full-time employee is 100%. For Year 1.
  7. Enter number of months to work, a number 1 through 12. For Year 1.
- Enter total amount of Fringe for this person, it must reflect the percentage in the Justification.
- 8-10. Repeat steps 5-7, for Year 2.
- Additional rows are hidden, unhide the amount of rows needed.

**Operating Expenses**

11. Enter the Expenses Name/Topic.
12. Select the position the Operating Expenses support from the drop down menu.
13. Enter the justification for the Operating Expenses.
- 14-15. Enter the Total Costs for Year 1 and Year 2.

**Equipment**

Follow the steps above, include the quantity of each equipment item to be purchased.

**Travel In State**

Similar steps to above, include the name of traveler and destination.

**Travel Out of State**

Follow the steps above.

**Other Costs**

Similar to the steps for Operating Expenses.

**Contracts**

1. Enter name of Contract or TBD.
2. Enter position title this contract supports.
3. Select position type from the drop down menu.
4. Enter justification, must be specific to role and include how it supports COVID-19 activities.
5. Enter annual salary of the person, for Year 1.

**Reporting**

The reporting worksheet is setup for quarterly reporting, each expenditure column header includes the time period and the date the report is due. The budget column is pulled directly from the Budget Summary. Enter expenditures under the appropriate

→ Enter expenditures under the appropriate quarter report column and row that aligns with the budget category.

→ PERSONNEL - Enter the Start date and End date for each of the personnel budgeted.

→ CONTRACT Personnel - Enter the FTE, Start date and End date for each of the Contract staff budgeted.

Submit this entire spreadsheet to [LHBTProg@cdph.ca.gov](mailto:LHBTProg@cdph.ca.gov) by no later than the due date listed in the Direct Allocation Letter and on the reporting tab.



**Workforce Development Funding  
Local Budget and Reporting**

1) <b>Local Entity Name:</b>	<b>San Francisco</b>
3) <b>Allocation:</b>	<b>\$1,557,822</b>
4)	
5) <b>Balance:</b>	<b>\$1,557,822</b>
6) <b>Indirect Cost based on:</b>	<b>Personnel Costs</b>
7) <b>Personnel Costs Rate:</b>	<b>25%</b>

2) Date:

Deductions, if applicable

Budget Category	Total	% Allocation
Personnel	\$746,681.96	48%
Fringe	\$261,338.69	17%
Operating Expenses	\$210,796.19	14%
Equipment	\$0.00	0%
In State Travel	\$20,000.00	1%
Out of State Travel	\$12,000.00	1%
Contracts	\$0.00	0%
Other Costs	\$55,000.00	4%
<b>Total Direct</b>	<b>\$1,305,816.84</b>	<b>84%</b>
<b>Total Indirect Cost</b>	<b>\$252,005.16</b>	
<b>Total Budget</b>	<b>\$1,557,822.00</b>	
Balance	\$0.00	

Workforce Development (WFD) Budget Detail				Fiscal Year 2021-22 Year 1					Fiscal Year 2022-23 Year 2					TOTAL YEARS 1 & 2	
PERSONNEL (Salaries & Fringe)															
No.	<sup>1</sup> Name of Personnel (or TBD)	<sup>2</sup> Position Title (Non-Contractual)	<sup>3</sup> Position Type	<sup>4</sup> Justification (include fringe percentage)	<sup>5</sup> Annual Salary (Year 1)	<sup>6</sup> FTE (Year 1)	<sup>7</sup> No. of Months (Year 1)	Fringe (Year 1)	Salary (Year 1)	<sup>8</sup> Annual Salary (Year 2)	<sup>9</sup> FTE (Year 2)	<sup>10</sup> No. of Months (Year 2)	Fringe (Year 2)	Salary (Year 2)	Total of Years 1 & 2 Personnel
WFDP001	TBD	Agency Preparedness Manager (0931)	Program Management Staff	The COVID-19 Pandemic has demonstrated many gaps in our Public Health Preparedness, as well as the silos that exist within the City and County of San Francisco (CCSF). This manager-level position will be tasked with overseeing the updating of current plans based on lessons learned from the pandemic, as well as modification of current plans as new variants are introduced, as well as coordinating across city departments to ensure a robust-unified response to future disasters and health threats.	\$155,638	100.00%	4.00	\$18,158	\$51,879	\$168,323	100.00%	12.00	\$58,913	\$168,323	\$297,273
WFDP002	TBD	Healthcare System Readiness Manager (2593)	Program Management Staff	Prior to the pandemic, CCSF Public Health Emergency Preparedness and Response (PHEPR) maintained relationships with external healthcare entities to keep them apprised in times of crisis. However, the COVID-19 pandemic demonstrated the acute need for better coordination, as well as improved support to maintain facility preparedness. This position will allow for improved coordination with healthcare partners, as well as improved ability to provide guidance to facilities in need.	\$115,362	100.00%	4.00	\$13,459	\$38,454	\$124,741	100.00%	12.00	\$43,659	\$124,741	\$220,314
WFDP003	TBD	Policy, Communications, and Community Resilience Manager 0931	Program Management Staff	The Policy, Communications, and Community Resilience Manager will help to fill a gap demonstrated by the COVID pandemic. We have essentially no outreach capability to the community, and we know that in the first phases of a disaster, community often leads the response itself and community preparedness, as well as strong relationships with disaster management officials, is absolutely key to a successful response. This manager will oversee community outreach efforts, build relationships at a neighborhood level, oversee training and exercise development to improve community preparedness, and support community messaging and outreach both through liaising DPH communications, the city-wide JIC, and the communities themselves.	\$155,638	100.00%	4.00	\$18,158	\$51,879	\$168,323	100.00%	12.00	\$58,913	\$168,323	\$297,273
WFDP004	TBD	Grants Analyst (2119)	Administrative Support Staff	This staff member will help to ensure that we meet deliverables and reporting requirements for this Workforce Grant, as well as supporting further funding options.	\$101,140	100.00%	4.00	\$11,800	\$33,713	\$109,370	100.00%	12.00	\$38,279	\$109,370	\$193,162
WFDP005					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP006					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP007					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP008					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP009					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP010					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP011					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP012					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP013					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP014					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP015					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP016					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP017					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP018					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP019					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP020					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP021					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP022					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP023					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP024					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP025					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP026					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP027					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP028					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP029					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
WFDP030					\$0	0.00%	0.00	\$0	\$0	\$0	0.00%	0.00	\$0	\$0	\$0
<b>TOTALS</b>					<b>\$527,778.00</b>	<b>4.00</b>	<b>16.00</b>	<b>\$61,574.10</b>	<b>\$175,926.00</b>	<b>\$570,755.96</b>	<b>4.00</b>	<b>48.00</b>	<b>\$199,764.59</b>	<b>\$570,755.96</b>	<b>\$1,008,020.65</b>

OPERATING EXPENSES				Year 1	Year 2	Total of Years 1 & 2 Operating Expense
No.	<sup>11</sup> Expense Name/Topic	<sup>12</sup> Position(s) Operating Expense Supports	<sup>13</sup> Justification	<sup>14</sup> Total	<sup>15</sup> Total	

WFDOE01	Uniforms	All Positions	PHEPR responds to communicable disease outbreaks (i.e. tuberculosis, Hepatitis A, Covid). Having a uniform helps with identification of the responders, which increases safety for both the responder and for the site they are responding to. Responder safety is a priority objective within emergency management.	\$3,500	\$3,500	\$7,000.00
WFDOE02	Office and Operating Supplies	All Positions	Office and operating supplies to include computers, laptops, file cabinets, printers, pens, pencil, paper, notepads, clips, folders, binder, staples, post-it notes, toner cartridges, etc. for WFD funded staff	\$14,000	\$2,000	\$16,000.00
WFDOE03	Rents	All Positions	Office space rents for WFD funded staff	\$46,949	\$140,847	\$187,796.19
WFDOE04				\$0	\$0	\$0.00
WFDOE05				\$0	\$0	\$0.00
WFDOE06				\$0	\$0	\$0.00
WFDOE07				\$0	\$0	\$0.00
WFDOE08				\$0	\$0	\$0.00
WFDOE09				\$0	\$0	\$0.00
WFDOE10				\$0	\$0	\$0.00
<b>TOTALS</b>				\$64,449.05	\$146,347.14	\$210,796.19

EQUIPMENT				Year 1			Year 2			Total of Years 1 & 2 Equipment
No.	Equipment Name	Position(s) Equipment Supports	Justification	Cost	Quantity	Total	Cost	No	Total	
WFDE001				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE002				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE003				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE004				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE005				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE006				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE007				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE008				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE009				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
WFDE010				\$0	0	\$0.00	\$0	0	\$0.00	\$0.00
<b>TOTALS</b>				\$0.00	0	\$0.00	\$0.00	0	\$0.00	\$0.00

TRAVEL				Year 1	Year 2	Total of Years 1 & 2 Travel In State
No.	Travel - In State (Name(s) and destination)	Position of Traveler	Justification	Total	Total	
WFDTI01	Various in-state travels	All Positions	This is for WFD staff to attend various in-state travels which are fulfilling all Functions and Capabilities within the grant.	\$2,000	\$18,000	\$20,000.00
WFDTI02				\$0		\$0.00
WFDTI03				\$0		\$0.00
WFDTI04				\$0		\$0.00
WFDTI05				\$0		\$0.00
WFDTI06				\$0		\$0.00
WFDTI07				\$0		\$0.00
WFDTI08				\$0		\$0.00
WFDTI09				\$0		\$0.00
WFDTI10				\$0		\$0.00
<b>TOTAL</b>				\$2,000.00	\$18,000.00	\$20,000.00

TRAVEL - Out of State				Year 1	Year 2	Total of Years 1 & 2 Travel Out of State
No.	Travel - Out of State (Name(s) and destination)	Position of Traveler	Justification	Total	Total	
WFDTO01	PHP Summit 2023	All Positions	5-days PHP Summit which provides a national forum for staff to learn best practices that can be applied to local programs. Cost includes return flight, hotel and food.	\$0	\$12,000	\$12,000.00
WFDTO02				\$0		\$0.00
WFDTO03				\$0		\$0.00
WFDTO04				\$0		\$0.00
WFDTO05				\$0		\$0.00
WFDTO06				\$0		\$0.00
WFDTO07				\$0		\$0.00
WFDTO08				\$0		\$0.00
WFDTO09				\$0		\$0.00
WFDTO10				\$0		\$0.00
<b>TOTAL</b>				\$0.00	\$12,000.00	\$12,000.00

OTHER				Year 1	Year 2	Total of Years 1 & 2 Other
No.	Other Expenses (Training, Exercises and Materials)	Position(s) Expense Supports	Justification	Total	Total	
WFD001	Various trainings	All Positions	This is for WFD staff to attend various trainings which are fulfilling all Functions and Capabilities within the grant.	\$5,000	\$50,000	\$55,000.00
WFD002				\$0		\$0.00
WFD003				\$0		\$0.00

WFDO04			\$0	\$0	\$0.00
WFDO05			\$0	\$0	\$0.00
WFDO06			\$0	\$0	\$0.00
WFDO07			\$0	\$0	\$0.00
WFDO08			\$0	\$0	\$0.00
WFDO09			\$0	\$0	\$0.00
WFDO10			\$0	\$0	\$0.00
<b>TOTAL</b>			<b>\$5,000.00</b>	<b>\$50,000.00</b>	<b>\$55,000.00</b>

<b>CONTRACTS</b>						<b>Year 1</b>	<b>Year 2</b>	<b>Total of Years 1 &amp; 2 Contracts</b>
<b>No.</b>	<b>Contractor Name</b>	<b>Position(s) Contract Supports</b>	<b>Position(s) Type Supplied</b>	<b>Justification (Contractors will be required to provide the same level of staffing detail)</b>	<b>Community Based Organizations (Identify the specific communities the organization supports.)</b>	<b>Total</b>	<b>Total</b>	
WFDC001						\$0	\$0	\$0.00
WFDC002						\$0	\$0	\$0.00
WFDC003						\$0	\$0	\$0.00
WFDC004						\$0	\$0	\$0.00
WFDC005						\$0	\$0	\$0.00
WFDC006						\$0	\$0	\$0.00
WFDC007						\$0	\$0	\$0.00
WFDC008						\$0	\$0	\$0.00
WFDC009						\$0	\$0	\$0.00
WFDC010						\$0	\$0	\$0.00
WFDC011						\$0	\$0	\$0.00
WFDC012						\$0	\$0	\$0.00
WFDC013						\$0	\$0	\$0.00
WFDC014						\$0	\$0	\$0.00
WFDC015						\$0	\$0	\$0.00
WFDC016						\$0	\$0	\$0.00
WFDC017						\$0	\$0	\$0.00
WFDC018						\$0	\$0	\$0.00
WFDC019						\$0	\$0	\$0.00
WFDC020						\$0	\$0	\$0.00
<b>TOTAL</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>





Administrative Support Staff  
Professional or Clinical Staff  
Disease investigation Staff  
Program Management Staff  
School Health Staff

All Positions  
Mainly Administrative Support Staff  
Mainly Professional or Clinical Staff  
Mainly Disease investigation Staff  
Mainly Program Management Staff  
Mainly School Health Staff  
Administrative Support Staff  
Professional or Clinical Staff  
Disease investigation Staff  
Program Management Staff  
School Health Staff

Personnel Costs  
Direct Costs

## CDC - Coronavirus-19 Public Health Workforce Development Funding (American Rescue Plan Act of 2021)

**1. Local Health Jurisdiction Name:**

**Grant Number:** 1 NU90TP922174-01-00

**2. EPO has provided the State's overall workplan for the PH Workforce Development funding which includes 8 Goals.**

**Local Health Juridictions should review the State's Objectives, Outcomes and Activities for each of the 8 Goals and then insert the LHJs Objectives, Outcomes and Activities that differ from the State's.**

**Over the past couple of months, CDPH partnered with LHDs to outline the infrastructure needs to address COVID-19 suppression and recovery for the year after June 15th, developing a plan entitled 2021 Beyond the Blueprint. Building on that planning effort, specific scenarios were outlined that described possible changes to the scope of the COVID-19 response which could be used to prepare CDPH and other Departments. Eight strategic planning goals are outlined in this workplan.**

**GOAL 1: Deploy effective communications and engagement strategy for ALL Californians that aims to reduce transmission by addressing vaccine hesitancy and employs a harm reduction strategy with a focus on hardest to reach populations and communities at risk.**

Objectives	Outcomes	State Activities
<p>Continue and expand comprehensive communications plan through the following objectives:</p> <ol style="list-style-type: none"> <li>1. Use surveillance data to inform and update communication messages and modalities.</li> <li>2. Focus public education &amp; engagement efforts to bolster vaccine confidence and uptake.</li> <li>3. Enhance public education to employ harm reduction model for ALL Californians.</li> <li>4. Coordinate community engagement efforts and focus on key messages that support communications objectives for bolstering vaccine confidence, employing harm reduction strategies, and providing direct appointment assistance.</li> </ol>	<ol style="list-style-type: none"> <li>1. Shift the proportion of undecided by at least 5% from the 15% undecided in June 2021 to Supporters (vaccinated or plan to vaccinate) by 9/1/21.</li> <li>2. Decrease proportion of populations that have negative perceptions of vaccine efficacy.</li> <li>3. Increase proportion of unvaccinated people wearing masks indoors by at least 5% by August (based on results of planned survey).</li> </ol>	<ol style="list-style-type: none"> <li>1. Develop a department-wide data governance, facilitating a department-wide data strategy, and developing and deploying a unified technology platform that will establish interoperability between diverse data sets in CDPH programs.</li> <li>2. Implement a Policy and Guidance team to work with policy makers in Agency and the Governor's Office to develop content that is in line with existing and upcoming science and policies.</li> <li>3. Provide LHDs with current state information and help ensure Californians are prepared for and know how to prevent the virus, plus improve and expand upon existing communications structure.</li> <li>4. Enhancements to media response, outreach and education, social media, web communications and multimedia communications.</li> </ol>



**Local Objectives:** *Coordinate community engagement efforts and focus on key messages that support communications objectives for bolstering vaccine confidence and employ harm reduction strategies.*

**Local Outcomes:** *Increase proportion of the eligible population that has received the vaccine by at least 5% in our 10 most highly impacted communities by June 2023*

**Local Activities:** *Establish strong relationships with communities highly impacted by COVID through consistent staff presence in those communities in order to facilitate prevention and mitigation communications.*

**GOAL 2: Achieve community immunity through effective vaccination strategy.**

Objectives	Outcomes	State Activities
<p>1. Plan to administer booster based on CDC recommendation – either J&amp;J requires mRNA booster and/or a third dose of the mRNA vaccine is needed due to waning immunity.</p> <ul style="list-style-type: none"> <li>a. Ensure effective communications to public.</li> <li>b. Ensure easy access by expanding provider network.</li> <li>c. Scale support to LHDs and providers with staffing, mobile clinics, communications, and other distribution resources if needed.</li> <li>d. Stand up Allocation team if needed for equitable prioritization and distribution of boosters.</li> <li>e. Ensure long-term care facilities have access to boosters.</li> <li>f. Develop planning and technical assistance for school-based clinics.</li> </ul>	<p>1. Outcome 1: Increase percent of 12-17-year-olds vaccinated with at least one dose to at least 50% by August 30, 2021 and at least 80% by November 30, 2021.</p> <p>2. Outcome 2: Increase percent of all Californians with at least one dose to 80% by November 30, 2021(if vaccination of &lt;12-year-olds approved by then).</p> <p>3. Outcome 3: Reduce race/ethnicity disparities in vaccination rates &amp; increase vaccination amongst African Americans by 10% by October 31, 2021 date.</p> <p>4. Outcome 4: Reduce disparities in at least one dose vaccination rate for 12-years and older HPI Quartile 1 population from 60% to 70% by September 1, 2021.</p>	<p>1. Review publications and other external data regarding vaccine effectiveness.</p>

**Local Objectives:** *Ensure effective communications to the public about vaccines to improve uptake of vaccine.*

**Local Outcomes:** *Achieve 80% vaccination rates for 5-11 year olds once vaccine is approved.*

**Local Activities:** *Targeted community messaging and education to encourage confidence in vaccines through dedicated community engagement staff.*

**GOAL 3 and Goal 5: Achieve suppression of SARS-CoV2 transmission and COVID-19 outcomes and Goal 5: Mitigate the impact of variants of concern and high consequence (combined)**

Objectives	Outcomes	State Activities
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<ol style="list-style-type: none"> <li>1. Surveillance for monitoring, early detection, investigation, and response. <ol style="list-style-type: none"> <li>a. Maintain dashboard of cases, hospitalizations, death, and testing positivity, including race/ethnicity and add data by vaccination status as feasible.</li> <li>b. Continue ongoing modeling of proposed scenarios and policy impact</li> <li>c. Monitor spread of existing variants of concern (VOCs).</li> <li>d. Measure emergence of increased transmissibility and/or virulence of VOCs.</li> </ol> </li> <li>2. Develop multi-disciplinary field strike teams (“Cluster Busters”) framework to support Local Health Jurisdictions in managing case outbreak response and increased prevalence of variants. <ol style="list-style-type: none"> <li>a. Utilize existing Testing Strike Team &amp; Contact Tracing structure and adapt to incorporate “Cluster Buster” Framework for deploying contact tracing, testing, and vaccination (including halo) resources jointly.</li> <li>b. Epidemiological support for Local Health Jurisdictions. <ol style="list-style-type: none"> <li>i. Develop epidemiological strike team program to support LHJs/state agencies with investigation and management of outbreaks.</li> <li>ii. HAI Program Infection Preventionist (IP) team to continue to serve as a resource for deployment to healthcare and congregate residential non-healthcare settings (e.g., homeless or evacuation shelters, correctional facilities).</li> <li>iii. Coordinate with Contact Tracing program in launching a link to a virtual agent to distribute contact tracing surveys to individuals who test PCR+, to improve Isolation &amp; Quarantine practices.</li> </ol> </li> <li>c. Coordination across teams <ol style="list-style-type: none"> <li>i. Local Coordination Team will coordinate communication with LHJ leadership to identify and confirm the mix of multi-disciplinary teams needed to deploy or engage for technical assistance/resourcing, e.g. Testing, Vaccination, Epidemiological, HAI Program, Contact Tracing.</li> <li>ii. Connect with assigned local coordinator to identify any additional contextual or historical information to increase situational awareness.</li> </ol> </li> </ol> </li> <li>3. Deploy mitigation policy and guidance framework.</li> <li>4. Monitor burden of COVID-19 in children.</li> </ol>	<ol style="list-style-type: none"> <li>1. Maintain low to moderate levels of community transmission (per CDC levels).</li> <li>2. Decrease disparities in outcomes between HPI quartiles and race/ethnicity.</li> <li>3. Maintain relatively lower cumulative death rates per capita in California (e.g.: &lt;10% lower than other large states).</li> </ol>	<ol style="list-style-type: none"> <li>1. Enhancing the ability to measure the pandemic recovery in near real-time through dashboards and reporting, automated monitoring to increase the COVID applications performance, and streamline message the data exchange and sharing.</li> <li>2. Continue the work of redirected staff for the last 17 months (since April 2020) to serve as the single point of contact for all Local Health Jurisdiction leadership and key COVID-19 response leads at the city/county level.</li> </ol>
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**Local Objectives:** *Improve access to testing, vaccinations, and community messaging in highly impacted communities. Maintain COVID response structure and readiness to implement aggressive prevention messaging and measures if cases increase.*

**Local Outcomes:** *Maintain moderate levels of community transmission (per CDC levels). Scale up COVID Task Force response capabilities if cases exceed 30 cases/100,000 population per day.*

**Local Activities:** *Maintain response readiness within the COVID Task Force, as well as readiness for other emergencies and monitor local metrics. Conduct trainings to maintain disaster service worker readiness. Assist with the integration of COVID response work into existing public health structures. Provide training for staff to improve effectiveness of the response.*

**GOAL 4: Reduce and drive to eliminate racial/ethnic and sociographic inequities amongst all age groups across the key COVID-19 outcomes listed below.**



London N. Breed  
Mayor

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

**FROM:** Dr. Grant Colfax  
Director of Health

**DATE:** 9/14/2022

**SUBJECT:** Accept and Expend Ordinance for Subject Grant

**GRANT TITLE:** Accept and Expend Ordinance - Coronavirus Disease 2019 (COVID-19) Public Health Crisis Response and the Public Health Workforce Development Supplemental Funding- \$1,557,822

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Attached please find the original\* and one copy of each of the following:

X Proposed grant ordinance; original\* signed by Department, Mayor, Controller, Human Resources, City Attorney

X Grant information form, including disability checklist

X Grant budget

N.A. Grant application

X Letter of Intent or grant award letter from funding agency

N.A. Ethics Form 126 (if applicable)

N.A. Contracts, Leases/Agreements (if applicable)

X Other (Explain): Allocation letter, Allocation Table, Work Plan Template

**Special Timeline Requirements: Requesting approval before June 30, 2022**

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

Name: Gregory Wong Phone: 415-554-2521

Interoffice Mail Address: 101 Grove St #110 San Francisco CA 94102

Certified copy required Yes  No

(Note: certified copies have the seal of the City/County affixed and are occasionally required by funding agencies. In most cases ordinary copies without the seal are sufficient).