

File Number: _____
(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: **Hepatitis C Virus (HCV) Testing and Linkages to Care Demonstration Projects**

2. Department: **San Francisco Department of Public Health
Community Health Equity and Promotion (CHEP)**

3. Contact Person: **Dara Geckeler** Telephone: **415-437-6203**

4. Grant Approval Status (check one):

Approved by funding agency

Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$456,000**

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

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

7a. Grant Source Agency: **The California Department of Public Health**

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

8. Proposed Grant Project Summary:

Goal 2: Hepatitis C Testing and Linkage to Care (LTC)

Description: SFDPH will partner with community-based organization Glide Foundation to increase HCV testing services for at-risk community members at several San Francisco venues including syringe access programs, homeless drop-in centers, and methadone programs. Glide Foundation staff will also provide linkage and medical case management services to San Franciscans living with hepatitis C who are currently not actively engaged in primary care. The goal of these services is to engage these clients in primary care so they can be assessed and treated for HCV if they are appropriate treatment candidates. SFDPH will also fund a part-time data entry staff to enter and manage the city-wide community-based HCV screening data.

Goal 3: Hepatitis C Care Coordination

Description: Given San Francisco's HCV epidemiology, the SFDPH CV Treatment Initiative is specifically designed to reach people who inject drugs (PWIDs) in San Francisco – particularly African Americans – as those are the residents most likely to have undiagnosed HCV. The program involves expanding primary care HCV screening and treatment capacity in the San Francisco Health Network by training providers at primary care clinics to improve competency for clinical management of HCV and implementing an e-Referral system for primary care providers to easily access clinical consultations for HCV care. SFDPH will also utilize primary care/methadone partnerships to increase screening and treatment, by pairing Bayview Hunters Point Foundation and Opiate Treatment Outpatient Program (OTOP) clinics with nearby primary care clinics to facilitate linkage between both services, including directly observed therapy (DOT) at the methadone clinics for primary clinic patients living with HCV and also on methadone maintenance.

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

Start-Date: **03/01/16**

End-Date: **06/30/18**

Yr1: 03/01/16-06/30/16 - \$456,000 (goal 2 \$228,000, goal 3 \$228,000)

Yr2: 07/01/16-06/30/17- \$456,000 (goal 2 \$228,000, goal 3 \$228,000)

Yr3: 07/01/17-06/30/18- \$456,000 (goal 2 \$228,000, goal 3 \$228,000)

10a. Amount budgeted for contractual services: **\$305,735 (yr1)**

b. Will contractual services be put out to bid? **yes**

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? On-going

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

b1. If yes, how much? **\$21,724 (yr1)**

b2. How was the amount calculated? **25% of total personnel 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):

c2. If no indirect costs are included, what would have been the indirect costs? **n/a**

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive to March 01, 2016. The Department received the letter of funding allocation on December 31, 2015.

Grant Code: HCD139/1600

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

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

Existing Site(s)

Existing Structure(s)

Existing Program(s) or Service(s)

Rehabilitated Site(s)

Rehabilitated Structure(s)

New Program(s) or Service(s)

New Site(s)

New Structure(s)

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

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

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

Comments:

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

Ron Weigelt

(Name)

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

(Title)

Date Reviewed: _____

(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Barbara A. Garcia, MPA

(Name)

Director of Health

(Title)

Date Reviewed: _____

(Signature Required)