

Applicant/Recipient San Francisco Department of Public Health, Office of Overdose Prevention		Application/Award Number
Project Title:	Building City-Wide Capacity for Community and Traditional First-Responders in Overdose Response	

	Start Date	End Date	Budget Year
Budget Period:	09/30/2023	09/29/2024	1

For Multi-Year Funded (MYF) awards only
(not applicable to new applications for funding)
 Check the box to select the Incremental Period

COST SHARING AND MATCHING

Matching Required: YES NO

A. Personnel

Line Item #	Position	Name	Key Position per the NOFO	Check if Hourly Rate	Calculation					Personnel Cost	FEDERAL REQUEST
					Hourly Rate	Hours	# of Staff	Annual Salary	% Level of Effort (LOE)		
1	TEX 2589	Grant Director (year 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>			1	\$108,845	100.00%	\$108,845	\$108,845
TOTAL										\$108,845	\$108,845

Line Item #	Personnel Narrative:						
1	TEX 2589	Grant Director (year 1)	Key Personnel	Salary \$108,845	# of Staff 1	LOE 100.00%	Personnel Cost \$108,845
This position will serve as the Grant Director for the duration of the program period. This position will give 100% effort to meeting the deliverables outlined in this grant proposal and the data reporting to SAMHSA.							

Show In-Kind Personnel Table

B. Fringe Benefits

Our organization's fringe benefits consist of the components shown below:

Fringe Component	Rate (%)
Benefits	39.65%
Total Fringe Rate	39.65%

Fringe Benefits Cost

Line Item #	Position	Name	Calculation				FEDERAL REQUEST
			Personnel Cost	Total Fringe Rate (%)	Fixed / Lump Sum Fringe (if any)	Fringe Benefits Cost	
1	TEX 2589	Grant Director (year 1)	\$108,845	39.65%		\$43,157	\$43,157
TOTAL						\$43,157	\$43,157

Fringe Benefits Narrative:

Fringe benefit rates are set at the City based on position type. Fringe benefits listed above cover employer contributions to health plans, insurance plans, social security, and retirement plans.

C. Travel

Trip #	Purpose	Destination	Calculation					FEDERAL REQUEST	
			Item	Cost / Rate per Item	Basis	Quantity per Person	Number of Persons		Travel Cost
1								\$0	\$0
TOTAL								\$0	

Travel Narrative:

1	There will be no travel required for this grant period.	Travel Cost	\$0
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D. Equipment

Line Item #	Item	Check if Item is a Vehicle	Calculation				FEDERAL REQUEST
			Quantity	Purchase or Rental/Lease Cost	Percent Charged to the Project	Equipment Cost	
1		<input type="checkbox"/>				\$0	\$0
TOTAL							\$0

Equipment Narrative:

1	Quantity	Purchase or Rental/Lease Cost	% Charged to the Project	Equipment Cost	\$0
No equipment will be purchased as part of this grant.					

E. Supplies

Line Item #	Item	Calculation					FEDERAL REQUEST
		Unit Cost	Basis	Quantity	Duration	Supplies Cost	
1	Nasal naloxone kits	\$40.00	Per Year	5,500.00	1.00	\$220,000	\$220,000
2	Opioid overdose kit pouch	\$10.95	Per Year	100.00	1.00	\$1,095	\$1,095
3	CPR face shields	\$4.00	Per Year	100.00	1.00	\$400	\$400
4	Nitrile glove boxes	\$20.00	Per Year	100.00	1.00	\$2,000	\$2,000
5	Individual sanitizer wipe boxes	\$15.00	Per Year	100.00	1.00	\$1,500	\$1,500
6	Alcohol pad boxes	\$5.00	Per Year	100.00	1.00	\$500	\$500
7	Nasal naloxone training device boxes	\$20.00	Per Year	110.00	1.00	\$2,200	\$2,200

Line Item #	Item	Calculation					FEDERAL REQUEST
		Unit Cost	Basis	Quantity	Duration	Supplies Cost	
8	Overdose recognition and response palm cards	\$0.10	Per Year	201.00	1.00	\$20	\$20
9	Community SRO first responder ID cards	\$5.00	Per Year	59.00	1.00	\$295	\$295
10	Naloxone vending machines	\$1,000.00	Per Year	2.00	1.00	\$2,000	\$2,000
11	Data collection incentive cards	\$30.00	Per Year	600.00	1.00	\$18,000	\$18,000
TOTAL						\$248,010	\$248,010

Line Item #	Supplies Narrative:					
1	Nasal naloxone kits	Unit Cost \$40.00	Basis Per Year	Quantity 5,500.00	Duration 1.00	Supplies Cost \$220,000
	Naloxone kits will be purchased by SFDPH and distributed to SROs and through a community distribution process overseen by the established Advisory Committee.					
2	Opioid overdose kit pouch	Unit Cost \$10.95	Basis Per Year	Quantity 100.00	Duration 1.00	Supplies Cost \$1,095
	Overdose pouches will be used to create resource packs for our community first responders in SRO outreach.					
3	CPR face shields	Unit Cost \$4.00	Basis Per Year	Quantity 100.00	Duration 1.00	Supplies Cost \$400
	Face shields will be included in the resource packs created for community first responders to encourage an increase in rescue breathing.					
4	Nitrile glove boxes	Unit Cost \$20.00	Basis Per Year	Quantity 100.00	Duration 1.00	Supplies Cost \$2,000
	Nitrile gloves will be included in the resource packs created for community first responders.					
5	Individual sanitizer wipe boxes	Unit Cost \$15.00	Basis Per Year	Quantity 100.00	Duration 1.00	Supplies Cost \$1,500
	Sanatizer wipes will be included in the resource packs created for community first responders.					
6	Alcohol pad boxes	Unit Cost \$5.00	Basis Per Year	Quantity 100.00	Duration 1.00	Supplies Cost \$500
	Alcohol pads will be included in the resource packs created for community first responders.					
7	Nasal naloxone training device boxes	Unit Cost \$20.00	Basis Per Year	Quantity 110.00	Duration 1.00	Supplies Cost \$2,200
	Naloxone training devices will be included in the resource packs created for community first responders so individuals can train their neighbors and peers on how to administer naloxone and for demonstrations in the training programming.					
8	Overdose recognition and response palm cards	Unit Cost \$0.10	Basis Per Year	Quantity 201.00	Duration 1.00	Supplies Cost \$20
	Palm cards will be distributed through the resource packs for community first responders, as well as provided to SRO staff to give out to residents and EMS workers to provide, when appropriate.					
9	Community SRO first responder ID cards	Unit Cost \$5.00	Basis Per Year	Quantity 59.00	Duration 1.00	Supplies Cost \$295
	SRO residents who complete the cohort-based training will receive community first responder ID badges to help identify them as trained in overdose response and recognition.					
10	Naloxone vending machines	Unit Cost \$1,000.00	Basis Per Year	Quantity 2.00	Duration 1.00	Supplies Cost \$2,000
	At least two naloxone vending machines will be purchased and placed in areas identified through a community assessment process as high-risk and high-overdose burden.					
11	Data collection incentive cards	Unit Cost \$30.00	Basis Per Year	Quantity 600.00	Duration 1.00	Supplies Cost \$18,000
	\$30 incentive cards will be provided to SRO residents who complete the post-training activity data collection surveys.					

F. Contractual

Summary of Contractual Costs

Agreement #	Name of Organization or Consultant	Type of Agreement	Contractual Cost	FEDERAL REQUEST
1		Subaward	\$0	\$0
TOTAL			\$0	\$0

Contractual Details for

Agreement #	Services and Deliverables Provided
1	

- | | | | |
|--|------------------------------------|-----------------------------------|---|
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Travel | <input type="checkbox"/> Supplies | <input type="checkbox"/> Indirect Charges |
| <input type="checkbox"/> Fringe Benefits | <input type="checkbox"/> Equipment | <input type="checkbox"/> Other | |

Contractual Total Direct Charges for

TOTAL DIRECT CHARGES FOR THIS AGREEMENT	TOTAL FEDERAL REQUEST
	\$0

Contractual Total Cost for

TOTAL COST	TOTAL FEDERAL REQUEST
\$0	\$0

G. Construction: Not Applicable

H. Other

Line Item #	Item	Check if Minor A&R	Calculation					FEDERAL REQUEST
			Unit Cost / Rate	Basis	Quantity	Duration	Other Cost	
1	SFFD EMS/Paramedic Training	<input type="checkbox"/>	\$1,400.00	Per Year	71.42	1.00	\$99,988	\$99,988
TOTAL							\$99,988	\$99,988

Line Item #	Other Narrative:
1	<p>SFFD EMS/Paramedic Training Unit Cost/Rate \$1,400.00 Basis Per Year Quantity 71.42 Duration 1.00 Other Cost \$99,988</p> <p>Given this is an agreement between San Francisco city agencies, there will be no contractual costs associated with the agreement. The average daily cost to staff a SFFD paramedic is \$1,400 (represents a 12 hour shift). The SFFD currently employees over 350 paramedics, and intends to employ 400 during this grant program. These funds will be used to cover the equivalent of 71 "shifts" for paramedics to do site trainings, shadow opportunities, and complete training modules developed through this grant program. Funds will be used to backfill the staff necessary to allow SFFD units to participate in these training opportunities while maintaining 9-11 system integrity.</p>

I. Total Direct Charges

TOTAL DIRECT CHARGES	TOTAL FEDERAL REQUEST
	\$500,000

J. Indirect Charges

Type of IDC Rate / Cost Allocation Plan

We will not charge IDC to the award

Indirect Charges

End Date of Effective Period of Approved IDC Rate Agreement	Calculation			FEDERAL REQUEST
	Approved IDC Rate (%)	Approved Base	IDC	
N/A	0.00%	\$0	\$0	\$0
TOTAL			\$0	\$0

Indirect Charges Narrative:

REVIEW OF COST SHARING AND MATCHING

Cost sharing or matching is not required for this grant.

BUDGET SUMMARY: YEAR 1

BUDGET CATEGORY	FEDERAL REQUEST
A. Personnel	\$108,845
B. Fringe Benefits	\$43,157
C. Travel	\$0
D. Equipment	\$0
E. Supplies	\$248,010
F. Contractual	\$0
G. Construction (N/A)	\$0
H. Other	\$99,988
I. Total Direct Charges (sum of A to H)	\$500,000
J. Indirect Charges	\$0
Total Projects Costs (sum of I and J)	\$500,000

BUDGET SUMMARY FOR REQUESTED FUTURE YEARS

	Year 2	Year 3	Year 4	Year 5
Budget Category	FEDERAL REQUEST	FEDERAL REQUEST	FEDERAL REQUEST	FEDERAL REQUEST
A. Personnel	\$108,845	\$108,845	\$108,845	
B. Fringe Benefits	\$43,157	\$43,157	\$43,157	
C. Travel				
D. Equipment				
E. Supplies	\$248,010	\$248,010	\$248,010	
F. Contractual				
G. Construction	\$0	\$0	\$0	\$0
H. Other	\$99,988	\$99,988	\$99,988	
I. Total Direct Charges (sum A to H)	\$500,000	\$500,000	\$500,000	\$0
J. Indirect Charges				
Total Project Costs (sum of I and J)	\$500,000	\$500,000	\$500,000	\$0

Budget Summary Narrative:

FUNDING LIMITATIONS / RESTRICTIONS

Funding Limitation/Restriction

	Year 1	Year 2	Year 3	Year 4	Year 5	Total for Budget Category
A. Personnel						
B. Fringe Benefits						
C. Travel						
D. Equipment						
E. Supplies						
F. Contractual						
H. Other						
I. Total Direct Charges (sum A to H)						
J. Indirect Charges						
TOTAL for the Budget Year						

Percentage of the Budget	0.000%	0.000%	0.000%	0.000%	
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Funding Limitation/Restriction Narrative:

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006
Expiration Date: 02/28/2022

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. TI-23-012	93.243			\$500,000	\$0	\$500,000
2.						
3.						
4.						
5. Totals				\$500,000	\$0	\$500,000

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) TI-23-012	(2)	(3)	(4)	
a. Personnel	\$108,845		\$0		\$108,845
b. Fringe Benefits	\$43,157		\$0		\$43,157
c. Travel	\$0		\$0		\$0
d. Equipment	\$0		\$0		\$0
e. Supplies	\$248,010		\$0		\$248,010
f. Contractual	\$0		\$0		\$0
g. Construction	\$0		\$0	\$0	\$0
h. Other	\$99,988		\$0		\$99,988
i. Total Direct Charges (sum of 6a-6h)	\$500,000		\$0		\$500,000
j. Indirect Charges	\$0		\$0		\$0
k. TOTALS (sum of 6i and 6j)	\$500,000		\$0		\$500,000
7. Program Income					

Authorized for Local Reproduction

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8. TI-23-012				
9.				
10.				
11.				
12. TOTAL (sum of lines 8-11)				

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$500,000	\$125,000	\$125,000	\$125,000	\$125,000
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$500,000	\$125,000	\$125,000	\$125,000	\$125,000

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16. TI-23-012	\$500,000	\$500,000	\$500,000	\$0
17.				
18.				
19.				
20. TOTAL (sum of lines 16 - 19)	\$500,000	\$500,000	\$500,000	\$0

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	22. Indirect Charges:
23. Remarks:	