File No. 101484 Committee Item No. 3
Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee CITY OPERATIONS AND NEIGHBORHOOD SERVICES Date 12/13/10

Board of Supervisors Meeting Date _____

Cmte	Board	
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OTHER (Use back side if additional space is needed)

☐ ☐ _____
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Completed by: Gail Johnson Date 12/9/10
Completed by: _____ Date _____

An asterisked item represents the cover sheet to a document that exceeds 25 pages.
The complete document is in the file.

FILE NO. 101484 RESOLUTION NO.

[Accept-Expend $249,555 Federal Grant]

Resolution authorizing the Department of the Environment to retroactively accept and expend a grant in the amount of $249,555 from the United States Department of Health and Human Services, Centers for Disease Control and Prevention to support the Bayview Hunters Point Healthy Homes Project by developing policies and services to improve indoor air quality in public housing.

WHEREAS, After a competitive process, the United States Department of Health and Human Services, Centers for Disease Control and Prevention (Centers for Disease Control) has selected the Department of the Environment for the City and County of San Francisco (SF Environment) to implement a REACH for Community Organizations to Respond and Evaluate (CORE) project to identify ways to improve public housing conditions and policies in order to reduce new asthma cases and asthma episodes among tenants; and,

WHEREAS, The selected project, the Bayview Hunters Point Healthy Homes Project, focuses on the Bayview Hunters Point neighborhood, which has both a high prevalence of asthma relative to the country and an age-adjusted Adult and Pediatric Asthma Hospitalization Rate over five times higher than San Francisco's average; and,

WHEREAS, The project focuses specifically on the community's Alice Griffith Public Housing Development, in which 25% of residents have asthma; and,

WHEREAS, In-home assessments in Alice Griffith public housing conducted by SF Environment in 2008-2009 discovered that 38% of the homes had mold, 44% had cockroaches, and 18% had rodents; and,

WHEREAS, The Healthy Homes Project has directly observed the relationship between substandard housing conditions, the use of toxic cleaning and pest control products and adverse health effects related to respiratory and other acute reactions; and,

WHEREAS, While the City of San Francisco has adopted an Integrated Pest Management ordinance which applies to all municipal operations, the San Francisco Housing Authority is not required to comply with the legislation because it is partially funded by the federal Department of Housing and Urban Development ; and,

WHEREAS, The Healthy Homes Project will result in the creation and promotion of better policies for pest management and thus improve indoor air quality in public housing in Bayview Hunters Point; and,

WHEREAS, These policy initiatives and interventions developed for Bayview Hunters Point public housing can be replicated in public housing throughout San Francisco; and

WHEREAS, Funding from this grant will provide for outreach, community and stakeholder training in asthma triggers and control issues and policy development; and,

WHEREAS, The length of the grant is from September 30, 2010 – September 29, 2011; and,

WHEREAS, Additional funding may be provided for the project subject to availability of funds and satisfactory project performance; and,

WHEREAS, The grant includes $32,551 for indirect costs, as allowed by the funding source; and,

WHEREAS, A request for retroactive approval is being sought because the Department of the Environment did not receive the award until September 29, 2010; and,

WHEREAS, This grant does not require an ASO amendment; now, therefore, be it

RESOLVED, That the San Francisco Board of Supervisors authorizes the Director of the Department of the Environment to accept and expend funding in the amount of $249,555.00 from the Centers for Disease Control to support the Bayview Hunters Point Healthy Homes Project.

Recommended:

Melanie Nutter, Executive Director,
Department of the Environment

Approved:_____
Mayor

Approved:_____
Controller, Grant Division

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

FROM: **Department of the Environment**

DATE: **11/12/10**

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

GRANT TITLE: **Bayview Hunters Point Healthy Homes Project**

Attached please find the original and 4 copies of each of the following:

_X_ Proposed grant resolution; original signed by Department, Mayor, Controller

_X_ Grant information form, including disability checklist

_X_ Grant budget

_X_ Grant application

_X_ Grant award letter from funding agency

___ Other (Explain):

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Rachel Buerkle Phone: 355-3704

Interoffice Mail Address: Dept. of Environment, 11 Grove St.

Certified copy required Yes ☐ No **X**

(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).

File Number: _____
(Provided by Clerk of Board of Supervisors)

Grant Information Form
(Effective January 2000)

Purpose: Accompanies resolution including proposed Board authorization to accept and expend grant funds.

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

1. Grant Title: Bayview Hunters Point Healthy Homes Project

2. Department: Department of the Environment

3. Contact Person: Rachel Buerkle Telephone: 415-355-3704

4. Grant Approval Status (check one):

[X] Approved by funding agency [ ] Not yet approved

5. Amount of Grant Funding Approved or Applied for: $ 249,555

6a. Matching Funds Required: None
b. Source(s) of matching funds (if applicable):

7a. Grant Source Agency: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention
b. Grant Pass-Through Agency (if applicable): none

8. Proposed Grant Project Summary:

This grant will help to develop policies and services to improve indoor air quality in Alice Griffith public housing in order to reduce new asthma cases and asthma episodes among tenants, which can be replicated in public housing throughout the City. The policies will address the use of alternatives to toxic chemicals for the control of mold and pests.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:
Start-Date: September 30, 2010 End-Date: September 29, 2011

10. Number of new positions created and funded: None

11. If new positions are created, explain the disposition of employees once the grant ends? N/A.

12a. Amount budgeted for contractual services: $102,770

b. Will contractual services be put out to bid?
Yes, Contracts to consultants will be awarded based on the standard City contracting process of issuing an RFP and selecting contractors based on responses.

c. If so, will contract services help to further the goals of the department's MBE/WBE requirements? Yes

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

13a. Does the budget include indirect costs? [X] Yes [ ] No

b1. If yes, how much? $32,551

b2. How was the amount calculated? 15% of the total direct costs requested -- the amount allowed by the funding agency

c. 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):

14. Any other significant grant requirements or comments:

****Disability Access Checklist*****

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

[X] Existing Site(s)	[X] Existing Structure(s)	[X] Existing Program(s) or Service(s)
[ ] Rehabilitated Site(s)	[ ] Rehabilitated Structure(s)	[ ] New Program(s) or Service(s)
[ ] New Site(s)	[ ] New Structure(s)	

16. The Departmental ADA Coordinator and/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 access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section:

Comments:

Departmental or Mayor's Office of Disability Reviewer: Claudia Molina (Name) _____ (signature)

Date Reviewed: 11/17/10

Department Approval: Melanie Nutter (Name) Director, Department of the Environment (Title)

_____ (Signature)

Executive Summary

San Francisco's Bayview Hunters Point Healthy Homes Project (HHP) will address asthma disparities in the Bayview Hunters Point (BVHP) neighborhood by developing policies and services to improve indoor air quality in Alice Griffith public housing. This will ultimately result in a reduced number of new asthma cases and asthma episodes among tenants. By focusing on BVHP public housing, HHP will directly impact residents of that neighborhood however will ultimately benefit residents of other public housing and low-income developments. Specific policy initiatives and interventions will be generated through an extensive community-driven process and can be replicated in public housing throughout the City and the rest of the nation.

The HHP is a collaborative of the SF Department of the Environment (SF Environment), Greenaction for Health and Environmental Justice, the Alice Griffith Opportunity Center (AGOC), and Californians for Pesticide Reform (CPR). Partners have long-term experience working in Bayview Hunters Point, a predominantly low-income neighborhood situated between two major freeways and thus isolated from the rest of the city. It is the home of over 300 toxic sites, including the Hunters Point Naval Shipyard, a federal Superfund site. It is burdened by myriad social and environmental stressors, including violence, substandard housing, and lack of access to healthy foods. Nearly half of BVHP's 35,000 residents and 76% of residents of BVHP's Alice Griffith Public Housing Development are African American.

Since 2007, the HHP Collaborative has educated residents about pest prevention, safer pest control methods, and using non-toxic cleaning products. Initial field research revealed that many families in public housing have pest and mold problems, live in homes with structural damage that contributes to infestation, and depend on poisonous consumer products that do not address the root causes of the problems. Many of the residents who participated in the HHP's home assessments also suffer from asthma. In 2008, HHP evaluated the ingredients in consumer pest control products available in BVHP stores for their potential to cause respiratory irritation and permanent damage and found ingredients that can trigger and even cause asthma.

However, while residents can be educated on these issues, the primary problem is that the San Francisco Housing Authority (SFHA) is not required to practice Integrated Pest Management (IPM), an effective and environmentally sensitive approach to pest management that relies on a combination of common-sense practices rather than the use of toxic chemicals. Thus, this project will target the creation and adoption of better policies for those overseeing public housing. Through a CDC REACH CORE grant, the Collaborative will identify and convene a diverse group of stakeholders to utilize the HHP's findings to identify ways to improve public housing conditions and policies in order to reduce new asthma cases and asthma episodes among tenants. Greenaction and AGOC are perfectly positioned to identify and recruit those community members interested in participating in the MAPP process and assuming an advocacy role. Potential project stakeholders include the HHP partners, SF Asthma Task Force, Department of Public Health staff, public housing tenants, BVHP community leaders, Housing Rights organizations, and toxics reduction, green building, and IPM experts. Stakeholders will gather broad community input to develop policies and interventions to improve indoor air quality in public housing. The HHP will also raise awareness about the relationship between housing conditions, indoor air quality, the use of toxic products, and asthma by hiring and training community residents to conduct door to door outreach, producing an Indoor Air Quality Fair and community workshops, participating in other neighborhood events.

Needs Statement

In 2008 – 2009, SF Environment (SFE) collaborated with community groups to address asthma in the Bayview Hunters Point (BVHP) neighborhood by educating residents on indoor air quality and possible asthma triggers in the home and encouraging the use of safer cleaning and pest control methods. Many pesticides and cleaning products not only trigger asthma in asthma sufferers, but they can also cause asthma. They contain chemical ingredients that are suspected to be severe respiratory irritants or are even classified as asthmagens, or asthma-causing substances. The project had three components: 1) "Train the Trainer"; 2) in-home assessments/educational visits; and 3) community workshops.

Thirteen trained community outreach workers conducted pre- and post- home visits to 179 homes in the Alice Griffith public housing development. Pre-home visits consisted of an interview to gather baseline information on current conditions in the home with respect to the presence of pests, mold and other asthma triggers, as well as cleaning and pest control product use and habits. Outreach workers provided initial recommendations on reducing asthma triggers, emphasizing safer cleaning and pest control. SFE discovered that 25% of the Alice Griffith residents, half of whom are children, have asthma and an overwhelming number of the homes had mold (38%), cockroaches (44%), and rodents (18%). While mold, roaches, and rodents are all contributors to poor indoor air quality, the problem is exacerbated by the use of toxic products to combat these problems. For example, alarmingly, home assessments indicated that 82% of the residents use bleach, a known asthma trigger. Hence, each participant received a safer cleaning and pest control toolkit with products and educational materials and was encouraged to try the recommendations and assess effectiveness.

Community Outreach Workers returned to each home to conduct a post-visit to assess the use and effectiveness of toolkit contents and estimate their effects on indoor air quality and respiratory health. The majority of residents implemented recommendations provided by outreach workers and try the safer toolkit alternatives. 89% of the residents reported a change in cleaning habits after outreach and 79% observed that the air quality in their homes had improved, many attributed this improvement to reduced fumes from reduced cleaning product use.

Some of the most hazardous allergens implicated in asthma development and recurrent attacks are prominent in the home environment.i,ii,iii Low-income children are more than twice as likely to be exposed to cockroaches than those living at or above 300% Federal Poverty Level.iv Strong evidence that cockroaches trigger asthma1 and some evidence indicate they can cause asthma. It is estimated that 21% of asthma cases in the U.S. are attributable to dampness and mold exposure.v From 2004-2007, SF Department of Public Health responded to 58 code violation complaints from BVHP residents for Visible or Demonstrable Mold.

HHP directly observed the relationship between substandard housing conditions, the use of toxic cleaning and pest control products, and adverse health effects related to respiratory and other acute reactions. As evidenced by the home assessment results, safer pest prevention and control and cleaning without the use of toxic chemical products are critical to reducing asthma triggers in public housing. However, while some housing conditions are related to a tenant's housekeeping practices, in many cases conditions were related to structural or building conditions and thus outside of the tenant's control. In general, public housing residents do not report these problems to the Housing Authority for fear of eviction or being charged. Also, many residents believe the SFHA is unwilling to invest in repairs for units that are scheduled to be demolished in the next 5 years. Residents have reported that SFHA has also indicated that it does not have the funding for the required repairs.

While the City of San Francisco has adopted an IPM ordinance which applies to all

municipal operations, SFHA is not required to comply with the legislation because it is partially funded by the federal Department of Housing and Urban Development (HUD). Although HUD has provided guidelines, IPM remains a voluntary program for SFHA. Some residents have reported that SFHA has attempted to use foggers and/or bombs to control a pest infestation, two pest control methods that can be potentially dangerous to asthmatics. Thus, while the HHP initially focused on training residents, it has become apparent that the issue must be addressed as a policy issue as well, through the adoption of appropriate IPM policies.

Focus on African American Community

Located in the southeast corner of San Francisco, BVHP is isolated from the rest of the city by two major freeways. The neighborhood has been a hub for San Francisco's African American community since the 1940s, when thousands of families migrated from the South to take advantage of jobs at the then-thriving naval shipyard. The gradual closing of the shipyards impacted BVHP working-class families and the neighborhood has never quite recovered.

According to U.S. 2000 census data, 35,000 or 4% of the population of the City's residents live in BVHP— 48% are African American, 23% are Asian and Pacific Islanders, 17% are Hispanic, 10% are Caucasian, and 1.3% are American Indian. A 2008-2009 survey at Alice Griffith Public Housing revealed that 76% of residents are African American, 6% are Samoan or Polynesian, 5% are Latino, 1% are Asian, and 1% are Caucasian. Thus while other groups will benefit, the project focuses on predominately African Americans.
Environmental and Social Determinants of Health

BVHP is home to almost all of the city's polluting industries, including a federal Superfund cleanup site, the former Hunters Point Naval Shipyard, where the military once experimented with radiation; a sewage treatment plant that handles 80% of the City's solid wastes; 100 Brownfield sites; 187 leaking underground fuel tanks; and more than 124 hazardous waste handlers regulated by the USEPA. In addition to the more than 500 heavy and light industrial companies, retail stores, and commercial establishments in BVHP, its main artery, Third Street, is one of the primary trucking corridors in the City and the neighborhood sees an inordinate amount of diesel traffic, which affects the outdoor air quality. Residents have to cope with poor indoor air quality as a result of mold, mildew, and pests; a direct consequence of substandard housing. Most public housing units in BVHP are slated for redevelopment, making structural repairs at existing older units a low priority for the SF Housing Authority.

The Mayor's Office of Community Development (2005) reports that BVHP has one of the lowest levels of educational attainment, 36.6% of BVHP residents have no high-school diploma compared to 18.8% citywide, and 11.6% having a Bachelors Degree, compared to 45% citywide. Income levels are significantly lower, and unemployment rates significantly higher for BVHP, than for San Francisco as a whole. BVHP's median income is 48% lower than the city's average with 21% of the neighborhood living below poverty level.2

BVHP has both a high prevalence of asthma relative to the country and higher hospitalization rates for asthma than other neighborhoods in San Francisco. Prevalence data for BVHP was obtained via a 1999 community survey, which found that 10% of the total population suffers from asthma, including 15.5% of children and youth in the area. BVHP's hospitalization discharge for asthma in years 2001 to 2003 was 24.9 per 10,000, as compared to the Healthy People 2010 goal of 9.3 people per 10,000 and to San Francisco's overall rate of 9.66 per 10,000 in 2003. The age-adjusted Adult and Pediatric Asthma Hospitalization Rate for BVHP is 35.7 per

1,000 (Pooled 2003-2005 Discharge Data) which is over five times higher than the city's average.3 Asthma rates at Alice Griffith appear to be even worse: The 2008-2009 study revealed that 25% of Alice Griffith residents have asthma, half of whom are children.

Studies show that in addition to elevated rates of asthma, BVHP residents face higher diabetes and cervical and breast cancer rates and have a lower life expectancy than other City residents. Its infant mortality rate is one more striking statistic revealing disparity. BVHP accounts for 4% of San Francisco's population, but it has 15% of its infant deaths. Babies are 2.5 times more likely to die in their first year than those in other areas of the City.4

Utilizing the Mobilizing for Action through Planning and Partnership (MAPP) Process

As the Central Coordinating Organization (CCO), SFE will be responsible for facilitating and completing each of the six components of the MAPP process:
1) Organizing for Success SFE will create a core support team to prepare for the MAPP process which will consist of staff representatives from SFE, Greenaction, and AGOC. The core support team will recruit additional participants who will include members of the SF Asthma Task Force, Department of Public Health staff, public housing tenants, BVHP residents and community leaders, Housing Rights organizations, and toxics reduction, green building, and IPM experts. As community-based organizations in BVHP, Greenaction and AGOC will identify and recruit community members interested in participating in the MAPP process and assuming an advocacy role. SFE will recruit from the government sector and subject-matter experts. The core support team will decide on the appropriateness of SF Housing Authority (SFHA) participation in the MAPP process. While SFHA may be able to provide the MAPP Committee with vital information about its plans, the Committee may view its participation as a conflict of interest.

To prepare for the MAPP process, SFE and the core support team will assess resource needs, such as a meeting space, materials and supplies, report production and printing, travel costs, consultant fees for participating in the process, and stipends for community residents. It will develop a MAPP work plan and timeline, which will clarify the roles and responsibilities of various participants and outline the various phases of the MAPP process. Greenaction and AGOC will develop an outreach plan to elicit broad community involvement in the MAPP. Outreach strategies that have been successful include announcements at community and tenants' association meetings, churches, the local Library, and community centers.
2) Visioning After recruiting participants, the core team will organize a visioning session for the group, where participants will discuss current public housing conditions, health issues, and other community concerns before coming up with a shared community vision for the future. It will hire a facilitator to organize the discussion and extract an overarching goal for the community and a vision statement. An example of a vision that may come out of this process is: Every resident lives in a home that does not negatively impact his or her health.

3) The Assessments MAPP participants will conduct four assessments:

1. Community Themes and Strengths Assessment – HHP will use focus groups to survey residents on issues important to them and what resources and assets are in place to address those issues and improve community health. In some cases, residents may not be aware of the resources and assets that are already available. In other cases, the MAPP Committee may learn of resources through residents. It will compile focus group results and previous community assessments to develop a list of community issues, potential solutions, and assets.
2. Local Public Health System Assessment – In order to assess the activities and

capacities of the local public health system to address asthma, MAPP participants will interview member organizations of the SF Asthma Task Force about its services. The SFATF has 15 voting members appointed by the Board of Supervisors, representing both community and health professionals, especially those working with low-income and vulnerable populations. Through dialogue, the MAPP Committee will identify areas that need improvement, activities that should be maintained at current levels, and areas where efforts can be decreased to free up resources.

3. Community Health Status Assessment – BVHP has been recognized by the local government as a neighborhood that has experienced health disparities. SF Dept of Public Health has conducted many health status assessments and there is overwhelming data that illustrates that the poor health status of the community, with relation to asthma, cancer, diabetes, and other diseases. The MAPP team will examine the data and establish a system to monitor the indicators and modify or add to them periodically, as new information arises from other MAPP phases.
4. Forces of Change Assessment; The MAPP Committee and participants will develop a comprehensive list of forces of change that affect the health of the community or local public health system, as well as potential threats and opportunities for each force. These include:

- Redevelopment of Public Housing - To result in new construction that will not have the same structural problems that the current, dilapidated housing developments have. However, the construction may not be completed for several years and repairs are desperately needed now. With SFHA's budgetary constraints, a challenge that may arise is lack of commitment to make major structural renovations that are necessary for particular units with the worst pest and/or mold problems as SFHA plans to redevelop most of the major public housing developments and may not desire to invest in existing units that will eventually be torn down.
- Code Enforcement – In cases where SFHA fails to make required repairs, tenants can involve Code Enforcement agencies. One potential threat, however, is that residents may be reluctant to report structural damage that has resulted in the presence of mold or pests due to fear of retaliation from SFHA. A solution to this potential challenge is to refer residents to Bay Area Legal Aid and the San Francisco Housing Rights Committee.
- Legislation – Legislation is possibly the strongest force of change, however HHP may face resistance from the SFHA. Due to the fact that they are exempt from most laws that apply to City Government, including the City's Integrated Pest Management Ordinance, they may not be willing to entertain any policy recommendations that come out of the MAPP process. If so, HHP will apply political pressure by working with the SF Commission on the Environment and Board of Supervisors to pass resolutions that urging SFHA to adopt the policies, as well as urging HUD to require SFHA and other Housing Authorities to adopt health-protective public housing policies, such as an IPM.

4) Strategic Issues

The visioning session and the four MAPP assessments will yield a list of fundamental policy choices or critical challenges to be addressed for the BVHP community to achieve its vision. The team will consider the urgency of each issue and vote to rank each issue in order of importance. This list of strategic issues will then be pared down to the top 5 issues.

5) Goals/Strategies

With assistance of a seasoned facilitator, the MAPP Committee will formulate goals and strategies related to the top 5 strategic issues. It will consider barriers to implementation, such as resistance from SFHA or lack of community support, and identify specific actions to reduce the barriers. Strategies will take into consideration the resources required, the individuals and organizations that would need to be involved, and the timeline for implementation. Along with adopting formal goals, the MAPP Committee will develop a detailed Action Plan which outlines the objectives, resources required, specific tasks and activities, outputs, short and long-term outcomes, and the timetable for implementation.
6) Action Cycle Though this 2-year REACH CORE grant does not include the implementation phase, the MAPP Committee will be prepared for implementation by the time of the 3-year implementation period. The core support team will be responsible for preparing for implementation and overseeing all implementation activities. The core team will identify all responsible parties, including core members, and establish an action plan for each party. These individualized action plans will be a subset of the overall Action Plan for the project (as described above). Based on the level of responsibilities, SFE may subcontract funds to specific parties for completing their tasks. For example, if one of the action items includes the development of an SFHA IPM Policy, SFE and partners may choose to hire an IPM consultant or bring in someone from the Boston Housing Authority, which has successfully implemented IPM, to advise on the development of the policy. Also, to ensure community involvement, SFE will provide stipends to community residents who assist with implementation activities. SFE will monitor the progress of the action plans by meeting monthly with responsible parties.

While an evaluation consultant will help develop a detailed evaluation plan, the MAPP Committee and stakeholders will work with the evaluation consultant from the beginning to identify evaluation questions, the process for answering the questions, the methodology for implementing the evaluation plan, and a plan for disseminating the results. Both qualitative and quantitative data will be used for measuring success. Ongoing evaluation will support refinement of the goals, strategies, and CAP and provide a feedback loop to reach objectives.
Community Action Plan (CAP)

As described, the MAPP Committee will undergo an extensive strategic planning process to develop a comprehensive Community Action Plan (CAP). SFE will develop a Memorandum of Understanding or subcontract with all parties that are responsible for implementing components of the CAP. In cases where a consultant or contractor will be hired, SFE will issue a Request for Proposals (RFP) to select the qualified service provider and enter into a contractual agreement that clearly defines the scope of work. Though the CAP will not be developed without undergoing the MAPP process, HHP partners have determined the overarching purpose of REACH CORE support to be: By the end of year 7 of the project there will be a reduction of asthma episodes and their severity as a result of improved indoor air quality.

Based on findings of the aforementioned home assessment at Alice Griffith Public Housing, potential priorities and practice-based interventions include: creating effective policies, educating SFHA staff, empowering residents, and providing direct service to residents.
1) Develop health-protective public housing policies. SFE and other MAPP participants, including public housing tenants and community leaders, will work with City agencies, housing rights groups, and IPM experts to craft IPM policy and encourage its adoption by the SFHA for existing public housing. It will provide IPM language for inclusion in SFHA Pest Control contracts, and develop IPM guidelines to build out pests in new housing construction projects.

The HHP will advocate that such policy be adopted as binding (not voluntary) procedure. CPR's extensive experience promoting IPM in disproportionately affected communities and SFE's experience in creating mandatory IPM policy for all City operations put the two organizations in a good position to lead the MAPP participants in the development of the policy and guidelines. In addition, SFE's relationships with the SF Commission on the Environment and Board of Supervisors provides the team access to the local policy-makers.

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Existing Housing - Create asthma-safe, indoor air quality guidelines that prevent pest entry and infestation, eliminate the use of asthma-causing and triggering pesticides, promote tenant cleanliness, and improve inspection and remediation practices to address the source of pest problems. SFE will also provide IPM contract language for SFHA-contracted (or retainer) Pest Control Operators (PCO). MAPP participants and consultants will create and work to pass a City Resolution urging the SF Housing Authority to adopt IPM as a policy in existing and new housing developments. Greenaction and AGOC will identify tenants affected by pest infestation and encourage them to advocate for IPM policy to improve indoor air quality. These residents will be provided a small stipend to pay for childcare or transportation to attend Commission on the Environment and Board of Supervisor hearings dedicated to the proposed IPM in Public Housing Resolution. In addition to working through local government channels to gain approval of the policy initiatives, the team will explore options to get the federal Department of Housing and Urban Development (HUD) to make IPM mandatory for all Housing Authorities that receive its financial support.

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New Construction – SFE was recently awarded funding from the EPA to create guidelines for "building out pests" in new construction. There are many pest prevention measures that could be included when constructing new units. For example, weather-stripping and sealing around utility pipes are IPM measures to be included. These guidelines will be disseminated to the Mayor's Office of Housing (MOH), SFHA and the developers responsible for redeveloping the public housing. Many of the public housing units in BVHP, including the Alice Griffith Public Housing Development, are slated for redevelopment. The redevelopment of public housing will result in new construction that will not have the same structural problems that the current, dilapidated housing developments have. However, there will need to be a concerted effort to ensure the new construction employs these techniques.
2) Educate SFHA staff about pest prevention and safer cleaning and pest control methods.

Due to the fact that they are exempt from most laws that apply to City Government, including the City's IPM Ordinance, SFHA may not be willing to entertain policy recommendations. One strategy will be to take a soft approach by forming relationships with the on-the-ground maintenance staff and site managers educate them about IPM by conducting trainings at Alice Griffith. CPR and SFE staff specializing in IPM will provide training and materials to educate staff on how to apply IPM methods in common areas as well as individual tenants' units. To complement this training, hands-on demonstrations will be offered to help the staff pilot IPM methods in specific homes. This approach has proven to be successful a similar the City's Sunnydale public housing site. Demonstrating that IPM can work at two of their properties (Sunnydale and Alice Griffith) may make SFHA open to adopting IPM practices.

3) Build community capacity by educating residents and empowering them to advocate for change.

Another critical component of this project is tenant education and advocacy. The HHP Collaborative will raise awareness in the community about the relationship between housing

conditions, the use of toxic products, indoor air quality and asthma. With the help of its community partners, Greenaction and Alice Griffith Opportunity Center, public housing residents will be hired and trained to conduct outreach about the issues. Trainees will be able to utilize the knowledge and skills gained though this training well into the future. The message will continue to spread as they continue their outreach efforts in the future and as those who are served educate their families, friends, and neighbors.

Once trained, community outreach workers will conduct door to door outreach, organize community workshops, and present at public meetings. We will employ culturally and socially-appropriate outreach strategies, such as translating educational materials into Spanish, translating technical documents into plain English, and reaching out to people at places of worship. Due to the long history of environmental and social injustice in BVHP, there has been a distinct lack of trust between the tenants and SFHA staff. This distrust also applies to tenants' perceptions of local government agencies. Hence, especially in this community, the most culturally-appropriate form of outreach is neighbor-to-neighbor communication. As community members themselves, trainees will be able to gain tenant trust and participation. This trust is a critical to ensuring the success of the project. Greenaction and the Alice Griffith Opportunity Center have already developed a track record of providing a variety of services to residents of Alice Griffith and other public housing developments in BVHP and have gained their trust as a result.

SFE will also utilize trainees from its Environment Now Program, an innovative workforce development program which is creating a new face of the environmental movement; one that includes those from underserved neighborhoods and others who never saw themselves as activists or change agents. Environment Now staff are currently employed by San Francisco through JobsNow federal stimulus package dollars. Participants must be parents and meet certain income requirements. Many Environment Now participants are from BVHP and live in public housing. SF Environment Now prepares participants for a new green economy and achieves city wide behavior change by promoting San Francisco's environmental services, programs and policies. Participants perform face-to-face community based social marketing activities, including door-to-door outreach, tabling and speaking at events, and making presentations. In addition to on the job training, participants receive extensive environmental, ecoliteracy, leadership and soft skills training. In the 10 months that Environment Now has been in operation, over 40 participants have hit the streets to promote services and programs that support residents and businesses in living more sustainably and protecting their health. Invariably participants adopt behaviors and make an internal commitment to the environment and with that commitment they begin to speak from the heart about these things that have become so important to them—environmental justice, clean air, a toxic free environment. The program has developed a new mechanism to create environmental stewards and increase diversity of the grassroots movement. It has been more successful than anyone could have imagined and the City has made a firm commitment to ensure the program's vitality when stimulus package funding ends. The program is truly changing lives—both inside SFE and out on the streets. For this project, SFE will leverage this tremendous resource to conduct outreach on the relationship between housing conditions, the use of toxic products, indoor air quality and asthma and engage residents in the planning, implementation and evaluation of interventions.

HHP Collaborative partners will organize an Indoor Air Quality Fair to educate residents about asthma triggers in the home, with an emphasis on safer cleaning and pest control. It will invite other organizations to participate. Community partners will be responsible for notifying residents about the fair, as well as opportunities to participate in public hearings pertaining to healthy public housing, and recruit residents to advocate for health-protective policies at hearings. In addition, the HHP Collaborative will participate in the City's Summer of Unity

events that take place in public housing around the City. Greenaction and AGOC will cultivate community leaders interested in assuming an advocacy role and help residents prepare public comments for the hearings. Engaging tenants and arming them with the knowledge about the relationship between substandard housing and indoor air quality will empower them to be stronger advocates and spokespersons for air quality improvement policies and tenant rights.
4) Provide follow-up to public housing residents with severe pest, mold, and structural problems.

SFE and its partners will review home assessment data collected from the Alice Griffith Public Housing units that were assessed in 2008 to identify homes with severe pest, mold, and/or structural problems. It will employ Alice Griffith Opportunity Center staff as well as Greenaction for Health and Environmental Justice staff to provide follow-up assistance to these tenants and encourage their participation. The Opportunity Center and Greenaction will continue to act as liaisons between the MAPP Committee and tenants to ensure that SFHA has addressed their problems. The team will also educate the tenants about pest prevention and safer pest control methods and solicit follow up information on behalf of the MAPP committee about what types of pest or mold control methods SFHA uses in their unit.

An EcoWise or Green Shield-certified IPM consultant will be secured to evaluate units and provide recommendations to prevent future infestations by addressing structural housing problems. HHP will partner with tenants to approach the SFHA and provide recommendations. If SFHA does not address code violations, the core support team will work with Code Enforcement divisions of the Departments of Public Health and Building Inspection to ensure compliance.

To properly address severe mold problems, HPP collaborators will train SFHA staff to use thermographic cameras purchased by the SF Asthma Task Force specifically for use in public housing. These cameras detect moisture that is difficult or impossible to observe with the naked eye. In many cases, mold is wiped away from the surface, but resurfaces because there is moisture trapped inside the wall and thermographic cameras provide evidence to help determine what types of structural repairs might be necessary to thoroughly address mold. HPP will then work with the SFHA Area Manager to ensure proper follow-up work has been completed.

CAP Goals and Objectives
Overarching outcome: Reduction in asthma episodes or their severity.
Goal I: Empower community residents to address asthma (Years 1-7)

Objectives Activities Timeline
Objective A: Recruit stakeholders to participate
in MAPP process (Years 1-2), development of
Action 1: Conduct outreach at community meetings, tenants association meetings, churches, BVHP Library, and community gathering places.
Y1-7
CAP (Year 2), project implementation (Years 35),
and evaluation plans (Years 1-7).
Action 2: Meet with Housing Rights groups and Code Enforcement agencies to determine their level of involvement and get recommendations for potential stakeholders.
Y1

Action 3: Hire Greenaction and AGOC to recruit and employ public housing tenants and other community residents
Y1

Objective B: Train 10 public housing residents to develop skills in program planning, conducting outreach, participating in the development of public policy, implementing interventions, and evaluating the program (Years 1-7)
Action 1: Conduct a training, with assistance from DPH and consultants, on toxics reduction, IPM, asthma triggers, and indoor air quality. Training will include soft skills such as public speaking and how to conduct surveys.
Y1-Y2
Action 2: Hire a trained facilitator and trained evaluation consultant to work with community stakeholders to design program and evaluation plan that is community based and participatory. Program plans will be refined an ongoing basis, based on evaluation.
Y1-Y2 ;
Ongoing
eval Y1Y7
Objective C: Recruit residents to participate in public hearings and advocate for health-protective housing (Years 2-5)
Action 1: Greenaction and AGOC conduct a workshop to help residents prepare comments for public hearings. Residents will receive small stipends to attend the hearings.
Y2
Objective D: Involve residents in Indoor Air Quality (IAQ) Fair and other opportunities to
Action 1: Organize a one-day IAQ Fair at Alice Griffith; invite CBOs, government agencies, health organizations, and Housing Rights committees to table at the fair.
Y2-Y3
educate their peers (Years 3-5) Action 2: Trainees (community outreach workers) will make presentations at community
meetings, workshops, and churches and will conduct door-to-door outreach.
Y2-Y5

Goal II: Support tenants' rights to healthy indoor air quality (Years 1-7)

Objective A: Convene a group of stakeholders who share the same goal, including Housing Rights organizations, code enforcement agencies, tenant associations, community based organizations, and residents (Year 1)
Action 1: SFE will contact City agencies and Housing Rights organizations. Greenaction will recruit CBOs, residents, and tenants groups.
Y1

Objective B: Develop a policy for SFHA to implement Integrated Pest Management (IPM) at new and existing sites and incorporate IPM
Action 1: Review existing IPM policy for City & County of San Francisco and research other policies throughout the nation, including that of the Boston Housing Authority, to determine best practices.
Y1-Y2
language into contracts with Pest Control

Operators (Year 2)
Action 2: Review existing contracts for SFHA's Pest Control Operators (PCOs). Contact SFHA's retainer PCO's to determine pest control methods and products being used.
Y2
Action 3: Hire Eco Wise pest control operator/consultant and Californians for Pesticide Reform to assist with the development of the policy.
Y2
Action 4: Work with SFHA to ensure that redevelopment plans for public housing developments include methods to prevent pests (Years 3-7)
Y3-Y7
Objective C: Work with SFHA to ensure that
problems are addressed at homes with the worst
pest, mold, and structural problems (Years 3-5)
Action 1: Review SFE's 2008-2009 home assessment results to identify homes with severe problems. Contact Housing Rights agencies for referrals.
Y3
Action 2: Contract out to AGOC to recruit these tenants to our program. Y3
Action 3: Hire EcoWise certified PCO/consultant to evaluate the units and provide recommendations on what should be done to address the problems
Y3-Y4
Action 4: Provide recommendations to SFHA, including the use of thermographic cameras in cases where tenants have complained about mold.
Y3-Y4
Objective D: Utilize Code Enforcement Action 1: Provide consultant's recommendations to Code Enforcement Agencies. Y3-Y4
agencies in cases where SFHA does not address
code violations (Years 3-5)
Action 2: AGOC will follow up with tenants to monitor whether repairs have been made. Y3-Y5

Goal III: Raise community awareness about the relationship between housing conditions, the use of toxic pest control and
cleaning products, and asthma. Encourage residents to stop using toxic products. (Years 1-7)

Objective A: Educate residents and their
families through an Indoor Air Quality Fair,
door to door outreach, workshops and
educational materials (Years 1-7)
Action 1: Environment Now staff and community outreach workers (trainees) will table at IAQ Fair; conduct outreach at churches, public meetings, and workshops; and make presentations to community groups.
Y1-Y7
Objective B: Provide residents with alternatives
to toxic products, including information and
samples of products (Years 1-5)
Action 1: At fair, residents will be able to trade out toxic products for samples of alternative products. We will also provide informational materials related to safer cleaning and pest control.
Y1-Y5

Goal IV: Empower SFHA staff to implement IPM (Years 3-5)

Objective A: Conduct a training to educate SFHA
staff on IPM methods (Years 3-5)
Action 1: Hire IPM consultant and Californians for Pesticide Reform to develop
training curriculum and conduct demonstrations.
Y3-Y5
Objective B: Work with SFHA to pilot IPM at
Alice Griffith Public Housing Development (Y 3-5)
Action 1: Send IPM consultant to a few units with SFHA to provide on-the-job training Y3-Y5
Objective C: Conduct outreach to residents to urge
them to request that SFHA use IPM when
addressing their pest complaints (Y 3-5)
Action 1: AGOC and Greenaction will maintain logs of residents who have reported
pest infestations and will discuss IPM options with those residents.
Y3-Y5

Leadership and Management (see attached resumes)

SF Environment (SFE) will serve as the Central Coordinating Organization for the project, will assume all financial and administrative responsibility and will be accountable for project delivery. SFE is the municipal department charged with providing environmental policy direction for the SF Mayor and Board of Supervisors and delivering service programs for residents and businesses in the areas of Environmental Justice, Toxics Reduction, Clean Air, Zero Waste, Renewable Energy, Energy Efficiency, and Urban Forestry. SFE's Environmental Justice (EJ) Program focuses on improving the quality of life for San Franciscans who bear a disproportionate burden of environmental contamination and social stressors, primarily low-income and high-risk minority populations. Staff participate in the City's Asthma Task Force and have managed projects that address asthma, including outdoor and indoor air quality projects, ranging from the promotion of biodiesel fuel as a diesel alternative to air quality monitoring to the promotion of safer cleaning and pest control. The Program has partnered with myriad community-based organizations to support grass roots efforts in EJ communities. SFE has extensive experience supporting capacity building in small, community-based organizations. In many cases, these partners initially lacked the capacity to properly manage their projects and SFE has provided technical assistance as well as programmatic support. Examples of SFE's projects that mirror the size and scope of this CDC project include: a $500,000 project to conduct an extensive community needs assessment for the expansion of the Southeast Health Center in BVHP; a $500,000 project to conduct food security assessments in BVHP and open a farmers' market; the disbursement of $2M in energy related funding for projects that directly reduced the City's energy consumptions and thus its reliance on the antiquated and polluting BVHP Power Plant. It was a primary player in a grassroots effort to advocate for its shutdown. As noted, SFE has developed an ongoing partnership with several groups for the home assessment project.

SFE's Environment Now Program is an innovative workforce development project focused on developing a new mechanism to create environmental stewards and increase diversity of the grassroots movement. These efforts have been largely responsible for long-term outcomes such as the shutdown of the Power Plant and the Southeast Food Access Working Group.

SFE receives no funding from the City's General Fund and relies on aggressive fundraising activities to meet its goals. Much of its $15M annual budget is derived from federal and state grants and contracts. For all grants, SFE has maintained accurate, timely financial and

programmatic reporting in compliance with each particular assistance agreement.

Greenaction for Health and Environmental Justice is a diverse, multiracial organization engaged in community-based campaigns for health and environmental justice. Founded in 1997 by leading grassroots environmental justice leaders from California and Arizona, its mission is to mobilize community power to change government and corporate policies and practices to protect the health of communities and promote environmental justice. It has a decade of experience working in diverse communities, including BVHP and Southeast San Francisco on environmental health and justice. It has a documented track record of success, including playing a leading role in achieving the shutdown of the BVHP power plant.

In 2006, Greenaction successfully completed the "Southeast San Francisco Air Quality Improvement Project". While broader in scope addressing indoor as well as outdoor air quality in Southeast San Francisco, it was quite similar to the HHP. Marie Harrison was Greenaction's lead organizer on that project, which included outreach to residents in their homes, with a focus on reducing asthma triggers and use of toxic chemicals in the homes. Ms. Harrison will serve as Greenaction's Community Liaison for this project and will work with partners to strategize the outreach. She will use existing relationships with the BVHP Mothers Committee and tenants groups in public and public/private housing to facilitate door-to-door outreach.

Alice Griffith Opportunity Center operates out of Alice Griffith Public Housing and provides direct access to local residents. It provides resources to tenants, including a computer center, job referrals, classes, and activities for children. Sister Stephanie, who runs the Center, will serve as the primary project staff. A resident of Alice Griffith, she knows most of the other residents and has gained their trust. She will serve as a liaison between SFE, Greenaction, CPR, MAPP stakeholders, and Alice Griffith tenants. The Center will organize the Indoor Air Quality Fair, conduct outreach, and recruit tenants to participate in all aspects of the project, from planning to implementation to evaluation.

Californians for Pesticide Reform (CPR), under the fiscal sponsorship of Pesticide Action Network North America, is a coalition of 185 organizations whose mission is to protect public health, improve environmental quality and promote sustainable, safe and just pest management in both agriculture and non-agriculture settings, by building a diverse movement across California to change statewide and local pesticide policies and practices. It will advise the HHP Collaborative on the development of IPM policy and IPM interventions and will assist in the development of training materials for SFHA staff. CPR It has published 19 reports and action guides and passed several pieces of legislation, including the landmark Healthy Schools Act, the Healthy Day Care Act, and the Pesticide Drift Exposure Response Act. CPR has worked in SF on pest management for low income housing for three years, including helping promote IPM in the Sunnydale public housing development and education in BVHP units. The coalition has extensive experience in LA providing pest management training and developing a program to implement model IPM examples in private low-income housing.

SFE works closely with The San Francisco Asthma Task Force (SFATF), legislated in 2001. At that time it was the only known legislated task force of its kind in the nation. The task force grew out of the work of BVHP community advocates who built the will and capacity to address asthma in their district, and advocated to the Board of Supervisors to create a citywide Task Force. It has 15 voting members appointed by the Board, representing community and health professionals working with vulnerable populations. Its Environmental Committee, chaired by SFE staff, addresses housing conditions and air quality problems that impact asthma. The

Committee is engaged in toxic use reduction strategies for consumers in general, particularly in their homes and multi-unit housing. It will serve as an advisory body to the HHP Collaborative. SFE and partners will engage community based organizations, including the BVHP Health and Environmental Resource Center, Southeast Health Center, and tenants' associations.
Key Project Staff

Sraddha Mehta is the Senior Environmental Justice Coordinator at SFE (see attached resume) and will serve as the Project Director for the HHP project. She has managed a variety of projects in BVHP over the last ten years, which range from the installation of solar panels on low-income homes to the creation of a farmers' market to increase access to healthy foods. Many of her projects, including the 08/09 home assessments, focus on reducing asthma disparities. She will manage the entire project, including the hiring and management of subcontractors, coordination of the MAPP process, development of the CAP, implementation, evaluation and reporting. She will also coordinate with SFE fiscal staff on all financial matters.

SFE's Toxics Reduction staff will provide in-kind support. Staff members have created several initiatives to encourage the reduced use of harmful cleaning and pest control products in the home and promote IPM in City operations, as well as overseeing the recently funded development of "Building Out Pests" guidelines. Toxics Reduction staff will work with CPR to create policy recommendations for government entities. SFE will provide additional in-kind support by utilizing its Environment Now workforce who will conduct door-to-door outreach, table at events, and make presentations to community groups and residents.

Evaluation

The HHP Collaborative will hire an evaluation consultant at the beginning of the project to work with stakeholders to develop a detailed evaluation plan, including a list of indicators of success. It will use the attached draft evaluation framework and will track qualitative and quantitative data and community involvement. Data will be collected from DPH, observations, focus groups, interviews with tenants and SFHA staff, surveys, sign-in sheets, and records of comments at public hearings. Throughout this project, local community residents will participate in the evaluation process and the program will be refined based on findings. Community residents hired will assist with satisfaction surveys from those tenants selected for follow-up action. They will assist with tracking resident participation in all project activities. Resident feedback will also be critical to determine if SFHA implements IPM after trainings. Improved indoor air quality will aid in preventing asthma episodes or reducing their severity in a population that has been disproportionately impacted by environmental and social factors.
Sustainability

Sustainability is built into the project through the attainment of project objectives, such as promoting policies that improve housing conditions that are outside of an individual's control; a necessary step toward creating long-term solutions that improve indoor air quality and address asthma. With an IPM policy in place and staff training, SFHA will be required to practice IPM, as will its contractors. Also, engaging tenants and educating them about the relationship between substandard housing, indoor air quality, and asthma will empower them to be stronger advocates.

SFE will continue to fundraise to support this work and build on the collaborative and continue to leverage SFE programmatic resources.

Translation and Dissemination

Exportability/transferability of the products and/or activities

SFE has vast experience serving it multi-lingual, multi-cultural residents and generally translates all materials into other languages. This project and materials can be replicated throughout the country. Like San Francisco, many City's public housing developments feature old, dilapidated, and substandard housing. SFE will disseminate its draft policies to Housing Authorities and government officials in other cities through its participation in Green Cities CA and other organizing groups. With enough Housing Authorities adopting IPM, it is anticipated that HUD will come to require IPM, rather than making it voluntary program for those who receive its funding. The dissemination plan includes creating case studies to distribute through local and national EJ listservs/organizations, Housing Rights groups, the EPA, and community-based health centers and agencies. It will publish findings in tenant newsletters and through SFE's and partner websites. It will present at EJ and green building conferences, as well as community meetings and workshops. SFE's Outreach Program will alert media and attract attention to the policy initiatives through a press releases and events at the public hearings. SFE will employ new-age media strategies, such as Twitter, Facebook, and blogging to inform the public about the project.

i Rosenstreich DL. "Role of cockroach allergy and exposure to cockroach allergen in causing morbidity among inner-city children with asthma." N Engl J Med. 1997 May 8;336(19):1356-63.
ii Sporik R et al. "Mite, cat, and cockroach exposure, allergen sensitization, and asthma in children: a case-control study of three schools," Thorax. 1999 Aug;54(8):675-80.
iii Eggleston PA, et al. "Relationship of indoor allergen exposure to skin test sensitivity in inner-city children with asthma," J Allergy Clin Immunol. 1998 Oct;102(4 Pt 1):563-70.
iv Babey, S. "Low-Income Children Bear Unequal Burden of Asthma" UCLA, 2007
v Berkeley Lab "EPA Studies Confirm Large Public Health And Economic Impact of Dampness and Mold" http://www.yubanet.com/artman/publish/article_57697.shtml accessed 5/29/07

BVHP Healthy Homes Project					
			EPA	Match	TOTAL Project
Personnel					
	Environmental Justice Sr. Environmental Specialist 5642	.5 FTE Manage project. Secure and oversee contractors, reporting, evaluation, coordinate with CDC	$ 45,851		$ 45,851
	Program Manager Sr Environmental Specialist 5644	.1 FTE Overall oversight and integration with other EJ activities.		$ 10,000	$ 10,000
	SFE Toxics staff	.05 FTE Provide technical assistance in IPM policy development and trainings. Match is being provided in the form of regular staff duties		$ 3,000	$ 3,000
	SFE Green Building staff	.05 FTE Provide "Building Out Pesticides" Project and recommendations.		$ 3,500	$ 3,500
	Total Personnel		**$ 45,851**	**$ 16,500**	**$ 62,351**
Fringe Benefits		**at 25 %**	**$ 11,463**	**$ 4,125**	**$ 15,588**
Travel					
	Attendance at CDC sponsored conferences	A requirement of the grant. Based on 4 RT fare plus per diem, hotel and conference fees	$ 3,820		$ 3,820
	Total Travel		**$ 3,820**		**$ 3,820**
Supplies					
		Outreach and Training Materials & Office Supplies	$ 11,900	$ 2,000	$ 13,900
					$ -
	Total Supplies		**$ 11,900**	**$ 2,000**	**$ 13,900**
Contractor					
	Non-Profit Community Based Organizations such as: Alice Griffith Opportunity Center, GreenAction, Californians for Pesticide Reform	Recruit community members into process and liason between community groups; Recruiting, training, and supervision of community residents; Conduct IPM trainings, develop materials, and develop policies and guidelines. Provide stipends for outreach residents serving as outreach workers. These will be secured using standard City granting procedures	$ 85,270		$ 85,270
	Specialist such as: Eco-Wise Certified Pest Control Operator	Consultant to assess specific housing units and provide recommendations. Provide policy recommendations. Service will be secured using standard City RFP/procurement process	$ 30,000		$ 30,000
	Boston Housing Authority Staff	Present and train on the model Boston Housing Authority IPM program. This is the only group that can provide this service, as BHA is the only one with this comprehensive program	$ 1,200		$ 1,200
	Media Outreach and Consulting	to assist with dissemination plan. Service will be secured using standard City RFP/procurement process	$ 2,500		$ 2,500
	Professional Facilitator	Formal facilitation for strategic planning sessions. Service will be secured using standard City RFP/procurement process	$ 8,000		$ 8,000
	Evaluation Consultant	Formal evaluation consultant to develop evaluation plan and process. Service will be secured using standard City RFP/procurement process	$ 12,000		$ 12,000
	Total Contractor		**$ 138,970**	**$ -**	**$ 138,970**
Other					
	Facilities Rental	for community planning, trainings, evaluation component of program	$ 5,000		$ 5,000
					$ -
	Total Other		**$ 5,000**		**$ 5,000**
	TOTAL PROJECT DIRECT		**$ 217,004**	**$ 22,625**	**$ 239,629**
Total Indirect costs					
	At 15%	0.15	$ 32,551	$ 3,394	$ 35,944
TOTAL PROJECT COST			**$ 249,554**	**$ 26,019**	**$ 275,573**

Notice of Award

COOPERATIVE AGREEMENTS
Department of Health and Human Services
Centers for Disease Control and Prevention
NATIONAL CENTER FOR CHRONIC DISEASE PREV AND HEALTH PROMO

Issue Date: 09/29/2010

Grant Number: 1U58DP002990-01

Principal Investigator(s):
SRADDHA MEHTA

Project Title: REACH for Comm. Organizations to Respond & Evaluate (REACH CORE)

David Assmann
ACTING DIRECTOR
DEPT OF ENVIRONMENT-CCSF
11 GROVE STREET
SAN FRANCISCO, CA 94102

Budget Period: 09/30/2010 – 09/29/2011
Project Period: 09/30/2010 – 09/29/2011

Dear Business Official:

The Centers for Disease Control and Prevention hereby awards a grant in the amount of $249,555 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to DEPT OF THE ENVIRONMENT CITY & COUNTY OF SAN FRANCISCO in support of the above referenced project. This award is pursuant to the authority of 301A,311BC,317K2(42USC241A,243BC247BK2) and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

Hector Buitrago
Grants Management Officer
Centers for Disease Control and Prevention

Additional information follows

SECTION I – AWARD DATA – 1U58DP002990-01

Award Calculation (U.S. Dollars)

Salaries and Wages	$45,851
Fringe Benefits	$11,463
Personnel Costs (Subtotal)	$57,314
Supplies	$11,900
Travel Costs	$3,820
Other Costs	$41,200
Consortium/Contractual Cost	$102,770
Federal Direct Costs	$217,004
Federal F&A Costs	$32,551
Approved Budget	$249,555
Federal Share	$249,555
TOTAL FEDERAL AWARD AMOUNT	$249,555
AMOUNT OF THIS ACTION (FEDERAL SHARE)	$249,555

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

02 $249,555

Fiscal Information:

CFDA Number:	93.283
EIN:	1946000417C5
Document Number:	UDP002990A

IC	*CAN*	*2010*	*2011*
DP	9210826	$249,555	$249,555

SUMMARY TOTALS FOR ALL YEARS		
YR	**THIS AWARD**	**CUMULATIVE TOTALS**
1	$249,555	$249,555
2	$249,555	$249,555

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

CDC Administrative Data:
PCC: / **OC**: 4151

SECTION II – PAYMENT/HOTLINE INFORMATION – 1U58DP002990-01

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.

SECTION III – TERMS AND CONDITIONS – 1U58DP002990-01

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

a. The grant program legislation and program regulation cited in this Notice of Award.
b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Additional Costs

SECTION IV – DP Special Terms and Conditions – 1U58DP002990-01

ADDITIONAL TERMS AND CONDITIONS OF THIS AWARD

Note 1. INCORPORATION. Funding Opportunity Announcement Number DP10-1014 titled, REACH for Community Organizations to Respond & Evaluate (REACH CORE), as amended, additional requirements and, the application dated 7/21/2010 are made a part of this award by reference.

Note 2. RESPONSE TO SUMMARY STATEMENT: Attached to this Notice of Award is a Summary Statement of the application. A response to the Recommendations and Weaknesses within the Technical Review must be submitted to the Grants Management Specialist no later than October 31, 2010. Failure to respond to could result in enforcement actions, including withholding of funds or termination. Copy of Indirect Cost Rate Agreement is required, submit with responses to the Summary Statement.

Note 3. APPROVED FUNDING: Funding in the amount of $ 249,555 is approved for the Year 01 budget period, which is September 30, 2010, through September 29, 2011. All funding for future years will be based on satisfactory programmatic progress and the availability of funds.

Note 4. INDIRECT COSTS. are approved for this award, however, a copy of the Indirect Cost Rate Agreement is required. Submit with Responses to the Summary Statement.

Note 5. REPORTING REQUIREMENTS.

a.) Annual Financial Status Report (FSR, SF 269 or SF 269A), The FSR for this budget period is due to the Grants Management Specialist by December 30, 2011 Reporting timeframe is September 30, 2010 through September 29, 2011. The FSR should only include those funds authorized and disbursed during the timeframe covered by the report. If the FSR is not finalized by the due date, an interim FSR must be submitted, marked not final, and an amount of unliquidated obligations should be annotated to reflect unpaid expenses. Electronic versions of the form can be downloaded into Adobe Acrobat and completed on-line by visiting, http//www.whitehouse.gov/omb/grants/sf269a.pdf (short form) or http//www.whitehouse.gov/omb/grants/sf269.pdf (long form).

Failure to submit the required information in a timely manner may adversely effect the future funding of this project. If the information cannot be provided by the due date, you must submit a letter explaining the reason and state the date by which the Grants Officer will receive the information.

b.) Progress Reporting. SEMI-ANNUAL PROGRESS REPORTING. Semi-annual progress reports are a requirement of this program.

i. The Interim Progress Report (IPR) will serve as the non-competing continuation application. IPR reporting timeframe is September 30, 2010 ?March 30, 2011. A due date and specific IPR guidance will be provided at a later date.

ii. The Annual Progress Report (APR) will be due 30 days after the end of the budget period, October 31, 2011. APR programmatic guidance will be provided at a later date. Reporting timeframe is April 1, 2011 ? September 29, 2011.

Note 6. HIV PROGRAM REVIEW PANEL REQUIREMENT. Not applicable.

Note 7. CORRESPONDENCE. ALL correspondence (including emails and faxes) regarding this award must be dated and, identified with the AWARD NUMBER.

Note 8. PRIOR APPROVAL. All requests, that require prior approval, must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director named on this notice of award. The request must be postmarked no later than 120 days prior to the end date of the current budget period. Any requests received that reflect only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include an itemized budget and a narrative justification of the request. Refer to the HHS Grants Policy Statement, http://www.hhs.gov/grantsnet/adminis/gpd/

Note 9. INVENTIONS. Acceptance of grant funds obligates recipients to comply with the standard patent rights clause in 37 CFR 401.14.

Note 10. PUBLICATIONS. Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, such as,

This publication (journal article, etc.) was supported by the Cooperative Agreement Number above from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

Note 11. CANCEL YEAR. 31 U.S.C. 1552(a) Procedure for Appropriation Accounts Available for Definite Periods states the following, On September 30th of the 5th fiscal year after the period of availability for obligation of a fixed year appropriation account ends, the account shall be closed and any remaining balances (whether obligated or unobligated) in the account shall be canceled and thereafter shall not be available for obligation or expenditure for any purpose. An example is provided below:

FY 2005 funds will expire September 30, 2010. All FY 2005 funds should be drawn down and reported to Payment Management System (PMS) prior to September 30, 2010. After this date, corrections or cash requests will not be permitted.

Note 12. MATCHING FUNDS REQUIREMENT. Not applicable.

Note 13. MAINTENANCE OF EFFORT (MOE) REQUIREMENT. Not applicable.

Note 14. CONFERENCE DISCLAIMER AND USE OF LOGOS.

Disclaimer. Where a conference is funded by a grant or cooperative agreement, a subgrant or a contract the recipient must include the following statement on conference materials, including promotional materials, agenda, and Internet sites,

Funding for this conference was made possible (in part) by the cooperative agreement award number above from the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government

Logos. Neither the HHS nor the CDC logo may be displayed if such display would cause confusion as to the source of the conference or give the false appearance of Government endorsement. A non-federal entity unauthorized use of the HHS name or logo is governed by U.S.C. 1320b-10, which prohibits the misuse of the HHS name and emblem in written communication. The appropriate use of the HHS logo is subject to the review and approval of the Office of the Assistant Secretary for Public affairs (OASPA). Moreover, the Office of the Inspector General has authority to impose civil monetary penalties for violations (42 C.F.R. Part 1003). Neither the HHS nor the CDC logo can be used on conference materials, under a grant, cooperative agreement, contract or co-sponsorship agreement without the expressed, written consent of either the Project Officer or the Grants Management Officer. It is the responsibility of the grantee (or recipient of funds under a cooperative agreement) to request consent for the use of the logo in sufficient detail to assure a complete depiction and disclosure of all uses of the Government logos, and to assure that in all cases of the use of Government logos, the written consent of either the Project Officer or the Grants Management Officer has been received.

Note 15. EQUIPMENT AND PRODUCTS. To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. CDC defines equipment as Tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of more than one year AND an acquisition cost of $5,000 or more per unit. However, consistent with recipient policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organization policy.

To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. CDC defines equipment as Tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of two or more years AND an acquisition cost of $5,000 or more per unit. However, consistent with recipient policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organization policy.

The grantee may use its own property management standards and procedures provided it observes the provisions of the following sections in the Office of Management and Budget (OMB) Circular A-110 and 45 CFR Part 92:

i. Office of Management and Budget (OMB) Circular A-110, Sections 31 through 37 provides the uniform administrative requirements for grants and agreements with institutions of higher education, hospitals, and other non-profit organizations
http://www.whitehouse.gov/omb/circulars/a110/a110.html

ii. 45 CFR Parts 92.31 and 92.32 provides the uniform administrative requirements for grants and cooperative agreements to state, local and tribal governments.
http://www.access.gpo.gov/nara/cfr/waisidx_03/45cfr92_03.html

Note 16. TRAFFICKING IN PERSONS. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term and condition, go to
http,//www.cdc.gov/od/pgo/funding/grants/Award_Term_and_Condition_for_Trafficking_in_Persons.shtm

Note 17. ACKNOWLEDGMENT OF FEDERAL SUPPORT, When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.

Note 18. PAYMENT INFORMATION:

Automatic Drawdown:
PAYMENT INFORMATION: Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). The Division of Payment Management; Program Support Center, administers PMS, HHS administers PMS. PMS will forward instructions for obtaining payments.

A. PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows:

Director, Division of Payment Management, OS/ASAM/PSC/FMS/DPM
P.O. Box 6021
Rockville, MD 20852

Phone Number: (877) 614-5533
Fax Numbers:
University and Non-Profit Payment Branch (301) 443-2672
Governmental and Tribal Payment Branch (301) 443-2569
Cross Servicing Payment Branch: (301) 443-0377
General Fax: (301) 443-8362

Email PMSSupport@psc.gov
Website: http://www.dpm.psc.gov/grant_recipient/shortcuts/shortcuts.aspx?explorer.event=true

B. If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows:

Division of Payment Management
FMS/PSC/HHS
Rockwall Building #1, Suite 700
11400 Rockville Pike
Rockville, MD 20852

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

Manual Drawdown (Optional if the grantee is high risk):
Payment under this award will be on the MANUAL payment method. For those recipients placed on manual drawdown, the CDC Grants Management Officer will monitor and control all payment advances for the award. A Standard Form (SF) 270 must be submitted monthly, accompanied by a monthly disbursement plan that reflects the costs associated with this award. In Block 10 of the SF270, an original (no rubber stamp or other facsimile signatures) signature is required of someone in the organization authorized to request and approve funds, date signed, and all items completed in this Block. This signature replaces the one for Block 13. Send the completed SF270 and monthly budget disbursement plan (overnight courier is recommended but not required, faxes or emails not accepted) to

Centers for Disease Control and Prevention (CDC)
Acquisition and Assistance Branch III
Attention: Deborah Rogers Mercy, Grants Management Specialist
2920 Brandywine Road, Mail Stop E-09
Atlanta, GA 30341

For more information and to obtain your agency point of contact at the Payment Management System, visit the following website, http,//www.dpm.psc.gov/contacts/dpm/dpm.aspx?cms_branchevent=/contacts/dpm/univ_nonprofit/univ_nonprofit.object

Note 19. CERTIFICATION STATEMENT: By drawing down funds, Awardee certifies that proper financial management controls and accounting systems to include personnel policies and procedures have been established to adequately administer Federal awards and funds drawn down are being used in accordance with applicable Federal cost principles, regulations, and the President?s Budget and Congressional intent.

Note 20. AUDIT REQUIREMENT: An organization that expends $500,000 or more in a year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of OMB Circular A-133, Audit of States, Local Governments, and Non-Profit Organizations. The audit must be completed along with a data collection form, and the reporting package shall be submitted within the earlier of 30 days after receipt of the auditors report(s), or nine months after the end of the audit period. The audit report must be sent to:

Federal Audit Clearing House
Bureau of the Census
1201 East 10th Street
Jeffersonville, IN 47132

Should you have questions regarding the submission or processing of your Single Audit Package, contact the Federal Audit Clearinghouse at: (301) 763-1551, (800) 253-0696 or email: govs.fac@census.gov

The grantee is to ensure that the sub-recipients receiving CDC funds also meet these requirements (if total Federal grant or grant funds received exceed $500,000). The grantee must also ensure that appropriate corrective action is taken within six months after receipt of the sub-recipient audit report in instances of non-compliance with Federal law and regulations. The grantee is to consider whether sub-recipient audits necessitate adjustment of the grantees own accounting records. If a

sub-recipient is not required to have a program-specific audit, the Grantee is still required to perform adequate monitoring of sub-recipient activities. The grantee is to require each sub-recipient to permit independent auditors to have access to the sub-recipients records and financial statements. The grantee should include this requirement in all sub-recipient contracts.

STAFF CONTACTS

Grants Management Specialist: Deborah R Mercy
Centers for Disease Control and Prevention (CDC)
Procurment and Grants Office
Koger Center, Colgate Building
2920 Brandywine Road, MS E- E09
Atlanta, GA 30341
Email: dmercy@cdc.gov **Phone**: (404) 639-8265 **Fax**: (404) 639-8095

Grants Management Officer: Hector Buitrago
Centers for Disease Control and Prevention
Procurement and Grants Office
Koger Center, Colgate Building
2920 Brandywine Road, Mail Stop E-09
Atlanta, GA 30341
Email: gmf2@cdc.gov **Phone**: 770-488-2921 **Fax**: 770-488-2777

SPREADSHEET SUMMARY
GRANT NUMBER: 1U58DP002990-01

INSTITUTION: CITY AND COUNTY OF SAN FRANCISCO

Budget	*Year 1*	*Year 2*
Salaries and Wages	$45,851	
Fringe Benefits	$11,463	
Personnel Costs (Subtotal)	$57,314	
Supplies	$11,900	
Travel Costs	$3,820	
Other Costs	$41,200	
Consortium/Contractual Cost	$102,770	
TOTAL FEDERAL DC	$217,004	$217,004
TOTAL FEDERAL F&A	$32,551	$32,551
TOTAL COST	$249,555	$249,555

SUMMARY STATEMENT

Division of Adult and Community Health
Centers for Disease Control and Prevention (CDC) FY 2010

Objective Review: CDC-RFA-DP10-1014
Racial and Ethnic Approaches to Community Health for Communities Organized to Respond and Evaluate (REACH CORE)

Date Reviewed: August 18, 2010

Applicant/Application #: Dept of the Envir.City and Co. of San Francisco/2990

Principal Investigator/Program Director: Ms. Sraddha Mehta

Requested Amount: $ 200,000

Recommendation:
__X__ Approved _____ Disapprove

Final Score: 91.2

Human Subjects Issues: - Not Applicable

Resume and Summary of Discussion

The Department of the Environment, City and County of San Francisco requests $499,109 to address asthma disparities in the Bayview Hunters Point neighborhood by developing policies and services to improve indoor air quality in Alice Griffith public housing. The health priority area targeted by this project is asthma. African Americans over age 50 years are the focus population.

Summary of Major Strengths

- Clear and concise description of how the Central Coordinating Organization (CCO) will facilitate and complete each component of the Mobilizing for Action through Planning and Partnership (MAPP) process i.e., community themes and strengths assessment, local health system assessment, community health status assessment, and forces of change assessment.

- Thorough description of the environmental conditions contributing to asthma.

- Clear and concise description of how the MAPP process will inform development of Community Action Plan (CAP).

- Highly detailed logic model and framework with questions aligned with indicators.
- Strong skills and expertise of staff.
- Clearly defined roles and responsibilities.
- Proven track record of community workers working in community to reduce asthma.

Summary of Major Weaknesses

- Some objectives need to be more specific (they're not SMART).
- Does not describe how the CCO will document implementation processes or early outcomes.
- CDC's Evaluation Framework is not described or even mentioned in the text.
- No mention of how the final report will be structured.

Recommendations

None noted

Other Relevant Comments

None noted

Budget Issues/Concerns

None noted