

**File Number:** 240478  
(Provided by Clerk of Board of Supervisors)

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

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

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

- 1. Grant Title: **Targeted HIV/TB Strategic Information Technical Assistance for President's Emergency Plan for AIDS Relief (PEPFAR) and Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) Countries**
- 2. Department: **Department of Public Health  
Population Health Division**
- 3. Contact Person: **William McFarland** Telephone: **415-533-9882**

4. Grant Approval Status (check one):

Approved by funding agency                       Not yet approved

- 5. Amount of Grant Funding Approved or Applied for: **\$107,707**
  - (Year 1 Oct 01, 2019 – Dec 31, 2019: **\$7,013**
  - Year 1 Jan 01, 2020 – Jun 30, 2020: **\$14,391**
  - Year 2 Sept 30, 2020 – Sept 29, 2021: **\$14,391**
  - Year 3 Sept 30, 2021 – Sept 29, 2022: **\$22,811**
  - Year 4 Sept 30, 2022 – Sept 29, 2023: **\$31,085**
  - Year 5 Sept 30, 2023 – Sept 29, 2024: **\$18,016**

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

- 7a. Grant Source Agency: **Centers for Disease Control and Prevention**
- b. Grant Pass-Through Agency (if applicable): **The Regents of the University of California, San Francisco**

8. Proposed Grant Project Summary:

**The San Francisco Department of Public Health (DPH) has a well-established reputation in conducting state of the art surveillance in human immunodeficiency virus/ acquired immunodeficiency syndrome (HIV/AIDS) and is a world leader in second and third generation human immunodeficiency virus (HIV) surveillance methodologies with extensive experience in implementing these methodologies and providing training in this field. William McFarland, Director of Surveillance, has many years of experience working on surveillance in general and key populations, in both domestic and international settings. He will provide high-level technical assistance on surveillance strategy.**

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

Approved Year one project: Start-Date: **10/01/2019** End-Date: **06/30/2020**  
Approved Year two project: Start-Date: **09/30/2020** End-Date: **09/29/2021**

Approved Year three project: Start-Date: **09/30/2021** End-Date: **09/29/2022**  
Approved Year four project: Start-Date: **09/30/2022** End-Date: **09/29/2023**  
Approved Year five project: Start-Date: **09/30/2023** End-Date: **09/29/2024**

10a. Amount budgeted for contractual services: **\$0**

b. Will contractual services be put out to bid? **N/A**

c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **N/A**

d. Is this likely to be a one-time or ongoing request for contracting out? **N/A**

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

b1. If yes, how much? **\$13,176** b2. How was the amount calculated? **13.94% of Total Personnel Cost**

c1. If no, why are indirect costs not included? **N.A.**

Not allowed by granting agency

To maximize use of grant funds on direct services

Other (please explain):

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

12. Any other significant grant requirements or comments:

**We respectfully request for approval to accept and expend these funds retroactive to September 30, 2023. The Department received the grant increase of \$18,016 on January 24, 2024, for the period of September 30, 2023, to September 29, 2024. The AL # for this grant is 93.279.**

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

No.	Class	Job Title	FTE	Start Date	End Date
1	2233	Senior Physician Specialist	0.05	09/30/2023	09/29/2024

**Project Description: HD HIV PD121 2324 UCSF 11644sc**  
**Project ID: 10039391**  
**Proposal ID: CTR00003194**  
**Fund: 11580**  
**Version ID: V101**  
**Authority ID: 10001**  
**Activity ID: 001**

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

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

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s)      | <input type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s)       | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s)      |
| <input type="checkbox"/> New Site(s)                 | <input type="checkbox"/> New Structure(s)           |  |

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

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

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

Comments:

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

Toni Rucker, PhD  
(Name)

DPH ADA Coordinator  
(Title)

Date Reviewed: 4/29/2024 | 10:24 AM PDT

DocuSigned by:  
*Toni Rucker*  
401292F7A31F84D...  
(Signature Required)

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

Dr. Grant Colfax  
(Name)

Director of Health  
(Title)

Date Reviewed: 4/30/2024 | 12:45 PM PDT

DocuSigned by:  
*Susan Philip*  
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Susan Philip, Director