

Funding Opportunity Number PS13-130604CONT2016
Centers for Disease Control and Prevention
STD Prevention Program National Communication
FY 2016

Response to Technical Review
September 30, 2016 – September 29, 2017

Award #: 1H25PS004258

Name of Grantee: San Francisco Department of Public Health

Technical Review: Awardees must submit a revised budget reflecting the bottom-line funding amount. The awardee must provide additional detail on the hiring process and anticipated timeline for filling positions listed as vacant/TBD and provide budget revisions projecting the actual budget amount for the FTE adjusted by the anticipated vacant period.

Response: Revised budget and justification for \$225,000 funding amount was provided. Additional information on the recruitment process and the adjusted funding level of the vacant 2802 were included in the revised budget and justification.

Technical Review: Provide a detailed plan for improving the completion rate for population component investigations (patient & provider). Completion rate of equal to or exceeding 50% for sampled cases is the target for SSuN.

Response: In our latest quality assurance report for the population component (September report, sent in October), we were informed that our interview success rate has been ~49% over the last six months. We continue to strive to increase that completion rate. We recently added an indicator of the quality of listed phone numbers for selected cases to the assignment details that our interviewer receives. This information reduces the time she spends calling bad phone numbers to locate cases. Our interviewer's ability to make calls during some evenings and weekends explains in large part the higher completion rate we are achieving than in previous cycles. We otherwise continue to improve the process as much as we can to improve the completion rate.

Technical Review: Provide a specific plan to increase their sample by 50% as a requirement population component expansion funding (increasing sample of just in-jurisdiction cases is sufficient).

Response: Based on the rate of completion seen earlier this year, we know our current interviewer is capable of completing a greater number of interviews using a higher sampling rate. To supplement the current interviewer, we will be bringing on a 2nd interviewer from the team that does outreach with youth. We have worked with this team in the past to conduct SSuN interviews. After the new interviewer is trained, we will be monitoring their combined completion rate after increasing the sampling rate to ensure ongoing quality and consistency.



DATE: March 22, 2016

TO: Grants Managers
Colleen Chawla
Valerie Inouye

FROM: *Nelly Lee*
Nelly Lee
Finance Manager

RE: FY 16-17 Indirect Cost Rate (Less MAA Participants)

Effective immediately, the Indirect Cost rate for Population Health & Prevention - Public Health Division is 25.00% of salaries, wages, and fringe benefits. This rate was based on FY 2013-14 costs and includes the COWCAP allocation reported in the OMB A-87 Cost Allocation Plan. Public Health Division Grant Managers should use the maximum capped percentage as instructed per California Department of Public Health (CDPH) on all current grants and new or renewal grant applications, unless the grantor has specified a maximum rate lower than 25.00%.

cc: Christine Siador
Lorna Garrido
Stephanie Cushing
Susan Philip
Joshua Nossiter

A reduced indirect cost rate of 1% of total modified direct costs is approved for use in the STD Surveillance Network (SSuN) Project for the period from 9/30/16-9/29/17.

Anne Okubo

Anne Okubo, Deputy Financial Officer
San Francisco Department of Public Health

4/12/16
Date



KAREN SMITH, MD, MPH
Director & State Health Officer

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



EDMUND G. BROWN JR.
Governor

January 29, 2016

Greg Wagner
Department of Public Health CFO
San Francisco, City and County of
101 Grove Street
San Francisco, CA 94102

Dear Greg Wagner:

Thank you for submitting your Indirect Cost Rate (ICR) documentation to the California Department of Public Health (CDPH). CDPH is excited to have a standardized process that allows each Local Health Department (LHD) to use the negotiated ICR for all contracts, except those otherwise designated by state or federal statute, with CDPH.

For Fiscal Year (FY) 2016-2017, CDPH has accepted the documentation you have provided and, on a one-year basis, will approve your ICR proposal as follows:

25.0% calculated based on Salaries, Wages and Fringe Benefits

Please note, the rate you provided was approved up to the maximum allowed by CDPH policy (up to 25% cap rate for ICR calculated based on Salaries, Wages and Fringe Benefits and up to 15% cap for ICR calculated based on Allowable Total Direct Costs).

We look forward to working with you to document your approved ICR in CDPH contracts with a start date of July 1, 2016 or later.

Thank you,

Jaana H. Brown, FMB-Accounting Section Chief
California Department of Public Health