

File No. 241123

Committee Item No. 10

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date December 4, 2024

Board of Supervisors Meeting Date _____

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| | | • Budget Justification |
| | | • Budget Narratives |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Form 126 – Ethics Commission |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Project Workspace Form</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
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Completed by: Brent Jalipa Date November 26, 2024

Completed by: Brent Jalipa Date _____

1 [Accept and Expend Grant - Retroactive - Health Resources and Services Administration -
2 Community Project Funding/Congressionally Directed Spending - Construction - \$1,000,000]

3 **Resolution retroactively authorizing the Department of Public Health to accept and**
4 **expend a grant in the amount of \$1,000,000 from the Health Resources and Services**
5 **Administration for participation in a program entitled, “Community Project**
6 **Funding/Congressionally Directed Spending - Construction,” for the period of**
7 **September 30, 2024, through September 29, 2027.**

8
9 WHEREAS, The Health Resources and Services Administration (HRSA) has agreed to
10 fund the Department of Public Health (DPH) in the amount of \$1,000,000 for participation in a
11 program, entitled “Community Project Funding/Congressionally Directed Spending -
12 Construction,” for the period of September 30, 2024, through September 29, 2027; and

13 WHEREAS, The grant will support the renovation of the old Southeast Health Center
14 and allow the center to house two outpatient behavioral health programs currently located at
15 separate sites - Southeast Child Family Therapy Center (SECFTC) and Families Rising
16 (FaR); and

17 WHEREAS, The renovation includes the interior renovation, limited exterior façade
18 work and small landscape work; and

19 WHEREAS, The grant does not require an Annual Salary Ordinance Amendment; and

20 WHEREAS, A request for retroactive approval is being sought because DPH received
21 the award letter on August 23, 2024, for a project start date of September 30, 2024; and

22 WHEREAS, The Department proposes to maximize use of available grant funds on
23 program expenditures by not including indirect costs in the grant budget; now, therefore, be it

24 **RESOLVED**, That the Board of Supervisors hereby waives inclusion of indirect costs in
25 the grant budget; and, be it

1 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
2 expend a grant in the amount of \$1,000,000 from the HRSA; and, be it

3 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
4 expend the grant funds pursuant to Administrative Code, Section 10.170-1; and, be it

5 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
6 Agreement on behalf of the City.

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1 Recommended:

Approved: _____ /s/

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Mayor

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_____ /s/

4 Dr. Grant Colfax

Approved: _____ /s/

5 Director of Health

Controller

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File Number: 241123
(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: **Community Project Funding/Congressionally Directed Spending - Construction**

2. Department: **Department of Public Health
Behavioral Health Services**

3. Contact Person: **Kay Kim** Telephone: **628-271-6574**

4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$1,000,000**

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

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

7a. Grant Source Agency: **Health Resources and Services Administration**

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

8. Proposed Grant Project Summary:

The grant will support the renovation of the old Southeast Health Center and allow the center to house two outpatient behavioral health programs currently located at separate sites - Southeast Child Family Therapy Center (SECFTC) and Families Rising (FaR). The renovation includes the interior renovation, limited exterior façade work and small landscape work.

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

Start-Date: **9/30/24**

End-Date: **9/29/2027**

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? **N.A.**

b2. How was the amount calculated? **N.A.**

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

Not allowed by granting agency

To maximize use of grant funds on direct services

Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? **22.462% of salaries and benefits.**

12. Any other significant grant requirements or comments:

The grant does not require an ASO amendment and does not create net new positions.

We respectfully request for approval to accept and expend these funds retroactive to September 30, 2024. The Department received the award on August 23, 2024. The AL # for this grant is 93.493.

The grantor is a Federal entity.

**Proposal ID: CTR00004365
Version ID: V101
Dept ID: 251984
Project Description: Community Project Funding/Congressionally Directed Spend
Project ID: 10041771
Activity ID: 0001**

****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 checked="" type="checkbox"/> Existing Structure(s) | <input type="checkbox"/> Existing Program(s) or Service(s) |
| <input checked="" 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: 10/11/2024 | 11:03 AM PDT

DocuSigned by:
Toni Rucker
A04292F7331E44D...
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax
(Name)

Director of Health
(Title)

Date Reviewed: 10/22/2024 | 9:37 AM PDT

DocuSigned by:
Jenny Louie for Dr. Colfax
40CFE25DD8E4464...
(Signature Required)
Jenny Louie, COO for

San Francisco Department of Public Health (SFDPH)
Behavioral Health Services
Community Project Funding/Congressionally Directed Spending - Construction

BUDGET JUSTIFICATION
September 30, 2024 to September 29, 2027

A.	PERSONNEL	
B.	MANDATORY FRINGE	
	TOTAL PERSONNEL:	\$0
C.	TRAVEL	\$0
D.	EQUIPMENT	\$1,000,000
E.	SUPPLIES	\$0
F.	CONTRACTUAL	\$0
G.	OTHER	\$0
	TOTAL DIRECT COSTS	\$1,000,000
H.	INDIRECT COSTS	\$0
	TOTAL BUDGET:	\$1,000,000

Budget Narrative

1. Grants and total project cost

The project is funded by two different sources. The first source is Community Project Funding/Congressionally Directed Spending (CPF/CDS) for facilities and/or equipment projects. The second source is Mental Health Service Act (MHSA) funding from the state of California. The MHSA portion, amounting to \$14,080,000, has been secured, ensuring the project is fully funded.

Please see the table below for the award amounts from each funding source.

Fund source	Awarding Agency	Award amount
Community Project Funding/Congressionally Directed Spending (CPF/CDS): Facilities and/or Equipment Projects	Federal CPF/CDS	\$1,000,000
Mental Health Service Act (MHSA), Capital Facilities and Technological Needs Component	The State of California	\$14,080,000
Total Project costs		\$15,080,000

2. Cost submitted in Form SF-424C

The following costs were submitted in Form SF-424C Budget.

- 1) Administrative and legal expenses:
 - Project management service fee to pay project managers' salary who are directly working on the project.
 - Permit fee for regulatory agency approval.
- 2) Architectural and Engineering fees:
 - Architecture and engineering professional services to prepare bid documents.
- 3) Other architectural and engineering fees:
 - Construction management fees.
- 4) Project inspection fees:
 - Fees for inspections needed during the construction.
- 5) Site work:
 - Removing old concrete planter box and provide new paving in two exterior courtyards.
 - landscape & Irrigation work on building's north side.
- 6) Demolition and removal:
 - Limited demolition and removal of material to renovating the building.
 - Hazardous materials remediation/abatement (This is unallowable cost)

7) Construction:

- Construction cost for remodeling the existing building. The project proposes interior remodeling to upgrade interior spaces, including modifications to walls, finishes, and enhancements to mechanical, electrical, plumbing, fire protection, and fire alarm systems. The mechanical work includes the replacement of air handling unit located on the roof. The limited scope of exterior facade work includes replacing the failing wood siding, replacing old clerestory windows, and replacing courtyard storefront system.

8) Contingencies:

- Contingency to cover any additional or unforeseen work.

3. Delineation of project costs covered by CPF/CDS Funds

The CPF/CDS Funds (\$1,000,000) will be used for the following items.

- Site work
- Demolition and removal (except hazardous material remediation which is unallowable cost)
- Construction

4. Budget justification for site work, demolition and removal, and construction

Sitework	Allowable cost	Unallowable cost
Mobilization	\$ 19,429	0
Earthwork	\$ 24,226	0
Courtyard paving, planting, irrigation	\$ 237,508	0
Utilities	\$ 24,286	0
Sub total	\$ 305,450	\$ 0

Demolition and removal	Allowable cost	Unallowable cost
Planter box demolition	\$ 39,906	0
Demolition and removal	\$ 500,951	0
Hazardous materials remediation		\$ 161,148
Subtotal	\$ 540,857	\$ 161,148

Construction	Allowable cost	Unallowable cost
Mobilization	\$ 196,881	0
Concrete	\$ 54,450	0
Metals	\$ 32,230	0
Wood and Plastic	\$ 282,245	0
Thermal and moisture protection	\$ 694,662	0

Doors and windows	\$	1,532,182	0
Finishes	\$	913,337	0
Specialties-Restroom accessories	\$	99,881	0
Furnishings-window shade	\$	30,193	0
Fire suppression	\$	116,338	0
Plumbing	\$	532,234	0
HVAC	\$	1,379,852	0
Integrated Automation	\$	193,377	0
Elect	\$	1,572,039	0
Communications	\$	634,910	0
Electronic safety and security	\$	414,586	0
Sub total	\$	8,679,397	\$ 0



Recipient Information

- 1. Recipient Name**
CITY & COUNTY OF SAN FRANCISCO
1380 Howard St
San Francisco, CA 94103-2638
- 2. Congressional District of Recipient**
11
- 3. Payment System Identifier (ID)**
1946000417A8
- 4. Employer Identification Number (EIN)**
946000417
- 5. Data Universal Numbering System (DUNS)**
103717336
- 6. Recipient's Unique Entity Identifier**
DCTNHRGU1K75
- 7. Project Director or Principal Investigator**
Kay Kim
Project Manager
kay.kim@sfdph.org
(415)860-1444
- 8. Authorized Official**
Hillary Kunins
Director, Behavioral Health Services and MHSF
hillary.kunins@sfdph.org
(415)255-3400

Federal Agency Information

- 9. Awarding Agency Contact Information**
John B Gazdik
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
jgazdik@hrsa.gov
(301) 443-6962
- 10. Program Official Contact Information**
Maritere Mulero Hernandez
Project Officer
Health Systems Bureau (HSB)
mmulerohernandez@hrsa.gov
(301) 443-0236

Federal Award Information

- 11. Award Number**
1 CE1HSS3671-01-00
- 12. Unique Federal Award Identification Number (FAIN)**
CE153671
- 13. Statutory Authority**
Further Consolidated Appropriations Act, 2024 (P.L. 118-47)
- 14. Federal Award Project Title**
Community Project Funding/Congressionally Directed Spending - Construction
- 15. Assistance Listing Number**
93.493
- 16. Assistance Listing Program Title**
Congressional Directives
- 17. Award Action Type**
New
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2024 - End Date 09/29/2027	
20. Total Amount of Federal Funds Obligated by this Action	\$1,000,000.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	\$0.00
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$1,000,000.00
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
25. Total Federal and Non-Federal Approved this Budget Period	\$1,000,000.00
26. Project Period Start Date 09/30/2024 - End Date 09/29/2027	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$1,000,000.00

- 28. Authorized Treatment of Program Income**
Addition
- 29. Grants Management Officer – Signature**
Kanitra Cobbs on 08/23/2024

30. Remarks



Notice of Award
Award Number: 1 CE1HS53671-01-00
Federal Award Date: 08/23/2024

Health Systems Bureau (HSB)

31. APPROVED BUDGET: (Excludes Direct Assistance)

Grant Funds Only
 Total project costs including grant funds and all other financial participation

a. Salaries and Wages:	\$0.00
b. Fringe Benefits:	\$0.00
c. Total Personnel Costs:	\$0.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$1,000,000.00
f. Supplies:	\$0.00
g. Travel:	\$0.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$0.00
j. Consortium/Contractual Costs:	\$0.00
k. Trainee Related Expenses:	\$0.00
l. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$1,000,000.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
i. Indirect Cost Federal Share:	\$0.00
ii. Indirect Cost Non-Federal Share:	\$0.00
q. TOTAL APPROVED BUDGET:	\$1,000,000.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$1,000,000.00

33. RECOMMENDED FUTURE SUPPORT:
(Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS
	Not applicable

34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)

a. Amount of Direct Assistance	\$0.00
b. Less Unawarded Balance of Current Year's Funds	\$0.00
c. Less Cumulative Prior Award(s) This Budget Period	\$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00

35. FORMER GRANT NUMBER

36. OBJECT CLASS
41.11

37. BHCNIS#

32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period	\$1,000,000.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$1,000,000.00

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
24 - 370CONS	93.493	24CE1HS53671	\$1,000,000.00	\$0.00	N/A	24CE1HS53671

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.
2. As required by the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, recipients must report information for each subaward of \$30,000 or more in Federal funds and executive total compensation, as outlined in Appendix A to 2 CFR Part 170. You are required to submit this information to the FFATA Subaward Reporting System (FSRS) at <https://www.fsr.gov/> by the end of the month following the month in which you awarded any subaward. The FFATA reporting requirements apply for the duration of the project period and so include all subsequent award actions to aforementioned HRSA grants and cooperative agreement awards (e.g., Type 2 (competing continuation), Type 5 (non-competing continuation), etc.). Subawards to individuals are exempt from these requirements. For more information, visit: <https://www.hrsa.gov/grants/ffata.html>.
3. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement: <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>.
4. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. **Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.**

You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: <https://pmsapp.psc.gov/pms/app/userrequest>. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at:

<http://pms.psc.gov/find-pms-liaison-accountant.html>

Program Specific Term(s)

1. On September 15, 2010, the United States Department of Justice published revised Americans with Disabilities Act (ADA) regulations in the Federal Register that update and amend some of the provisions in the original 1991 ADA regulations (see <http://www.ada.gov/>). These changes include revised accessibility standards, called the 2010 Standards for Accessible Design (2010 Standards), which establish minimum criteria for accessibility in design and construction (http://www.ada.gov/2010ADAstandards_index.htm).
2. The award recipient must submit an annual Federal Financial Report with expense date for each consecutive twelve (12) month budget period. This report is submitted through the Payment Management System (PMS).
3. This Notice of Award (NoA) is issued to inform your organization of the awarding of Community Project Funding/Congressionally Directed Spending (CPF/CDS): Construction Projects (HRSA-24-110) funding. This funding is authorized by the FY 2024 Consolidated Appropriations Act (P.L. 118-47) for projects that relate to the construction and renovation (including equipment) of health care and other facilities. This award cannot be transferred to another entity.
4. Each budget has a Federal Percentage Share based upon the award amount and the total allowable costs. Grant funds can only be drawn down from the Payment Management System (PMS) as allowable costs are incurred. Unless otherwise authorized, draw down should be

done in the same proportion as the grant is to total project costs in the approved budget. For example, for a project with a total allowable cost of \$100,000, and a federal contribution of \$75,000, the federal share is 75 percent. If \$100 in allowable costs are incurred, then \$75 of grant funds would be drawn down from PMS to pay this incurred cost, while the other \$25 will be paid by other sources of funds. The draw down percentage may be re-evaluated based on any modifications to the project that have been received from the grantee and approved by HRSA.

5. Applicants that are NOT required to file a Notice of Federal Interest, still acknowledge with the receipt of the Notice of Award that the Federal interest exists in real property and equipment and will be maintained in accordance with 45 CFR Part 75 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR AWARDS AND SUBAWARDS TO INSTITUTIONS OF HIGHER EDUCATION, HOSPITALS, OTHER NONPROFIT ORGANIZATIONS, or 45 CFR Part 75 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE AND LOCAL GOVERNMENTS, as applicable. The recipient shall maintain adequate documentation to track and protect the Federal Interest. For real property, adequate documentation will also include communications between the lessor and the lessee related to protecting such interest, in accordance with the standard award terms and conditions. Such documentation should be available for subsequent review by HRSA.
6. The preferred method for accomplishing construction development is by soliciting for competitive bids and then selecting the lowest responsive and responsible bid (where the contractor has adequately responded to the terms, conditions, and specification of the bid and has the capability to satisfactorily perform the contract). However, some award recipients may wish to accomplish construction using their own work force (force account). The award recipient must justify the use of force account by demonstrating that it would be more cost effective and that qualified personnel are available to accomplish the work. Consultation with the Project Officer is needed to determine if force account labor will be permitted.
7. If a Notice of Federal Interest (NFI) is required, HRSA's Federal interest is subordinate to all pre-existing mortgages or obligations recorded against the property. HRSA's Federal interest is also subordinate to loans and obligations identified in the application as sources of financing for the project. Future modifications and new mortgages and obligations will require prior approval.
8. You will need to submit a pre-award prior approval request to HRSA for review of any costs incurred up to 90 day prior to the Consolidated Appropriations Act, 2024 (P.L. 118-47; enacted March 23, 2024). Please refer to HRSA-24-110 for further guidance.
9. The award recipient does not have expanded authority under this program. Items that require prior approval from the awarding office as indicated in 45 CFR Part 75. HRSA has not waived cost-related or administrative prior approvals for recipients unless specifically stated on this Notice of Award] or 45 CFR Part 75, or the HHS Grants Policy Statement Prior-Approval Requirements, must be submitted in through the Electronic Handbook. Only responses to prior approval requests signed by the GMO and authorized under a Notice of Award are considered valid. award recipients who take action on the basis of responses from other officials do so at their own risk. Such responses will not be considered binding by or upon the HRSA.
HRSA requires award recipients to seek prior approval through the Electronic Handbook for: (a) all pre-award costs, (b) rebudgeting of funds between construction and nonconstruction work; (c) rebudgeting of project costs exceeding 25 percent of the total approved budget (inclusive of direct and indirect costs and Federal funds and required matching or cost sharing) for that budget period; (d) changes in project scope, which occurs when the recipient proposes to change (or changes) the objectives, aims, or purposes identified in the approved application, including changing location, changing the approved design under a construction grant, eliminating a primary care delivery site, or making budget changes that cause a project to change substantially from that which was approved. Approval of a prior approval request may be conditioned by new terms and conditions that must be met and lifted from the Notice of Award prior to implementing work.
10. An award recipient may acquire a variety of commercially available goods or services in connection with a grant-supported project or program. Award recipients may use their own procurement procedures that reflect applicable state and local laws and regulations, as long as those procedures conform to the following applicable U.S. Department of Health and Human Services (HHS) regulations: HHS regulations at 45 Code of Federal Regulations (CFR) 75 UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS. States must follow the requirements at Title 45 CFR 75. Generally, States must follow the same policies and procedures they use for procurements from non-Federal funds. Local and Tribal governments must follow the requirements at 45 CFR 75.
11. All program income generated as a result of awarded funds must be used for approved project-related activities. Any program income earned by the recipient must be used under the addition/additive alternative. Additional requirements found at 45 CFR § 75.307.
12. Note: Your organization is required to submit a Quarterly Expenditure Report due to [*Rationale from FA*]. A detailed expenditure report aligning with your organization's approved budget must be submitted quarterly.

A template for the Quarterly Expenditure Report has been attached to the Notice of Award. The Expenditure Report should include the approved line item amounts from the HRSA approved budget narrative in the first column. Expenditures for each quarter should be provided in the columns indicated for the three months. Please contact your Grants Management Specialist for specific submission instructions.

13. Although this NoA approves funds for the project(s) identified in the submitted application, HRSA may take action to withdraw the approval and funds for the project(s) if subsequent events lead HRSA to conclude that a project as originally proposed is ineligible or cannot be completed. Subsequent events could include, but are not limited to, non-compliance with the implementation of the project (such as excessive drawdown, improper procurement, conflicts of interests, etc.), significant changes to the location or physical scope of the project without prior approval, or the identification of previously undocumented environmental or historic preservation issues that lead the HRSA to conclude that the proposed project cannot be carried out consistent with the eligibility and program requirements. If this occurs, please contact the assigned Project Officer to discuss.
14. Equipment includes all moveable equipment that has a useful life of more than one year and a per-unit acquisition cost of \$5,000 or more, including information technology systems. Moveable equipment can be readily shifted from place to place without requiring a change in the utilities or structural characteristics of the space. Any equipment purchased with your CDS award must be procured, maintained, tracked, and disposed of in accordance with 45 CFR part 75.

Standard Term(s)

1. Your organization must have policies, procedures, and financial controls to follow all the [General Terms and Conditions](#). HRSA awards are based on the application submitted and approved by HRSA. All awards are subject to the General Terms and Conditions, in addition to those included in the Notice of Award or referenced in documents and attachments.

Reporting Requirement(s)

1. **Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.**

The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. **All FFRs must be submitted through the Payment Management System (PMS)**. Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal ([PMS Self-Service Web Portal](#)), or calling 877-614-5533.

2. **Due Date: Within 90 Days of Project End Date**

Within 90 days of project completion, the award recipient must submit into HRSA's Electronic Handbook a final SF-424C budget page, budget justification, and equipment list (if applicable), for the completed project.

3. **Due Date: Within 90 Days of Project End Date**

Within 90 days of project completion, the award recipient must scan and upload photographs, with brief descriptions, of the project prior to initiating work, during renovation/construction, and of the completed project, including exterior shots (front, rear of building), major rooms and examples of grant provided major equipment items, into the EHB for the approved project.

4. **Due Date: Within 90 Days of Project End Date**

Within 90 days of project completion, the award recipient will submit documentation for the approved project certifying that the project have been completed in accordance with the previously provided certified documents and in accordance with all mandatory requirements imposed on+D3 federally-assisted projects by specific laws enacted by Congress, Presidential Executive Orders, or Departmental Policy, as well as all applicable program standards, State codes, and local codes and ordinances.

5. **Due Date: Semi-Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 30 days after end of reporting period.**

The award recipient will submit a semi-annual Progress Report for the approved project(s) into the HRSA Electronic Handbook (EHB) approximately every six months until the project is completed.

6. **Due Date: Within 90 Days of Project End Date**

The award recipient must submit within 90 days after the project end date the SF-428 (Tangible Personal Property Report) with the SF-428B (Final Report Attachment) and if applicable the SF-428S (Supplemental Sheet). These documents must be completed using the Electronic Handbooks (EHBs). The award recipient is required to report federally-owned property, acquired equipment with an acquisition cost of \$5,000 or more for which HRSA has reserved the right to transfer title, and residual unused supplies with total aggregate fair market value exceeding \$5,000. Records for equipment acquired with Federal funds shall be retained for three years after final disposal.

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts

NoA Email Address(es):

Name	Role	Email
Kay Kim	Point of Contact	kay.kim@sfdph.org

Kay Kim	Program Director	kay.kim@sfdph.org
Hillary Kunins	Authorizing Official	hillary.kunins@sfdph.org

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).

This Workspace form is one of the forms you need to complete prior to submitting your Application Package. This form can be completed in its entirety offline using Adobe Reader. You can save your form by clicking the "Save" button and see any errors by clicking the "Check For Errors" button. In-progress and completed forms can be uploaded at any time to Grants.gov using the Workspace feature.

When you open a form, required fields are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message. Additional instructions and FAQs about the Application Package can be found in the Grants.gov Applicants tab.

OPPORTUNITY & PACKAGE DETAILS:

Opportunity Number:	HRSA-24-110
Opportunity Title:	Community Project Funding/Congressionally Directed Spending (CPF/CDS): Facilities and/or Equipment Projects
Opportunity Package ID:	PKG00285677
CFDA Number:	93.493
CFDA Description:	Congressional Directives
Competition ID:	9523
Competition Title:	Community Project Funding/Congressionally Directed Spending (CPF/CDS): Facilities and/or Equipment Projects
Opening Date:	04/01/2024
Closing Date:	06/13/2024
Agency:	Health Resources and Services Administration
Contact Information:	Kimberly Smallwood-Madison CDS Program, Office of Federal Assistance and Acquisition Management (OFAAM) Email: CDSProgram2024@hrsa.gov

APPLICANT & WORKSPACE DETAILS:

Workspace ID:	WS01353535
Application Filing Name:	HRSA-24-110 Application
UEI:	DCTNHRGU1K75
Organization:	CITY & COUNTY OF SAN FRANCISCO
Form Name:	Budget Information for Construction Programs (SF-424C)
Form Version:	2.0
Requirement:	Mandatory
Download Date/Time:	Jun 13, 2024 08:16:17 PM EDT
Form State:	No Errors

FORM ACTIONS:

BUDGET INFORMATION - Construction Programs

NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case, you will be notified.

COST CLASSIFICATION	a. Total Cost	b. Costs Not Allowable for Participation	c. Total Allowable Costs (Columns a-b)
1. Administrative and legal expenses	\$ 926,063.00	\$ 0.00	\$ 926,063.00
2. Land, structures, rights-of-way, appraisals, etc.	\$ 0.00	\$ 0.00	\$ 0.00
3. Relocation expenses and payments	\$ 0.00	\$ 0.00	\$ 0.00
4. Architectural and engineering fees	\$ 2,997,761.00	\$ 0.00	\$ 2,997,761.00
5. Other architectural and engineering fees	\$ 1,133,074.00	\$ 0.00	\$ 1,133,074.00
6. Project inspection fees	\$ 145,303.00	\$ 0.00	\$ 145,303.00
7. Site work	\$ 305,450.00	\$ 0.00	\$ 305,450.00
8. Demolition and removal	\$ 702,005.00	\$ 161,148.00	\$ 540,857.00
9. Construction	\$ 8,679,397.00	\$ 0.00	\$ 8,679,397.00
10. Equipment	\$ 0.00	\$ 0.00	\$ 0.00
11. Miscellaneous	\$ 0.00	\$ 0.00	\$ 0.00
12. SUBTOTAL (sum of lines 1-11)	\$ 14,889,053.00	\$ 161,148.00	\$ 14,727,905.00
13. Contingencies	\$ 190,947.00	\$ 0.00	\$ 190,947.00
14. SUBTOTAL	\$ 15,080,000.00	\$ 161,148.00	\$ 14,918,852.00
15. Project (program) income	\$ 0.00	\$ 0.00	\$ 0.00
16. TOTAL PROJECT COSTS (subtract #15 from #14)	\$ 15,080,000.00	\$ 161,148.00	\$ 14,918,852.00
FEDERAL FUNDING			
17. Federal assistance requested, calculate as follows: (Consult Federal agency for Federal percentage share.) Enter the resulting Federal share.	Enter eligible costs from line 16c Multiply X <input type="text"/> %		\$ <input type="text"/> 0.00

City and County of San Francisco

Department of Public Health



London N. Breed
Mayor

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Dr. Grant Colfax
Director of Health

DATE: 10/22/2024

SUBJECT: Grant Accept and Expend

GRANT TITLE: Community Project Funding/Congressionally Directed Spending - Construction - \$1,000,000

Attached please find the original and 1 copy of each of the following:

- Proposed grant resolution, original signed by Department
- Grant information form, including disability checklist
- Budget and Budget Justification
- Grant application: Not Applicable. No application submitted.
- Agreement / Award Letter
- Other (Explain):

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521

Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108

Certified copy required Yes

No

From: [Trejo, Sara \(MYR\)](#)
To: [BOS Legislation, \(BOS\)](#)
Cc: [Paulino, Tom \(MYR\)](#); [Validzic, Ana \(DPH\)](#); [Wong, Greg \(DPH\)](#); [Chiong, Christina \(DPH\)](#)
Subject: Mayor -- Resolution -- Community Project Funding/Congressionally Directed Spending - Construction A&E
Date: Tuesday, November 19, 2024 2:36:14 PM
Attachments: [1317 Board Cover Memo.docx](#)
[DPH A&E - Community Project Funding Congressionally Directed Spending - Construction - \\$1,000,000.pdf](#)
[DPH A&E Resolution - Community Project Funding Congressionally Directed Spending - Construction - \\$1,000,000.doc](#)
[1317 2024-0823 HRSA NoA for SEHC-BH project.pdf](#)
[1317 Budget Justification.doc](#)
[1317 Budget Narratives-SFDPH.pdf](#)
[1317 GRIF.docx](#)
[1317 WS01353535-SF424C_2_0-V2.0.pdf](#)
[RE New Proposed Legislation from DPH \(Community Project FundingCongressionally Directed Spending Construction - \\$1000000\).msg](#)

Hello Clerks,

Attached is a Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$1,000,000 from the Health Resources and Services Administration for participation in a program entitled, "Community Project Funding/Congressionally Directed Spending - Construction," for the period of September 30, 2024, through September 29, 2027.

Best regards,

Sara Trejo

Legislative Aide

Office of the Mayor

City and County of San Francisco