

File Number: 220266
(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: **DP21-2111 Closing the Gap with Social Determinants of Health Accelerator Plans**

2. Department: San Francisco Department of Public Health
Office of Health Equity

3. Contact Person: **Ayanna Bennett** Telephone: **(415) 359-5739**

4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$125,000**

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 (CDC)**

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

8. Proposed Grant Project Summary:

Chronic disease is disproportionately impacting the Black/African American San Franciscans to an extreme degree, the gaps dwarf those between all other groups. The San Francisco Black African American focused social determinants of health (SDOH) Accelerator plan improve the Black African American health disparities by focusing on two social determinants Food Security and Community-Clinical Linkages. The Accelerator plan will focus on disparity in cardiovascular disease incidence and severity, and the food and nutrition needed to prevent and manage cardiovascular disease. The Leadership Team developing the Accelerator plan will include representatives of clinical providers, community-based organizations, a nationally recognized academic institution, the San Francisco Department of Public Health, The San Francisco Human Services Agency, and residents with lived experience. This group will cross-train to gain a shared understanding, then meet regularly within a collective impact framework to generate a shared objective, metrics, proposed activities and evaluation plan. These recommendations will be evaluated using a Health Equity Impact Tool, then be presented to the community and potential partners as an action plan for improving the health of the Black/African American community.

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

Start-Date: **09/30/2021**

End-Date: **09/29/2022**

10a. Amount budgeted for contractual services: **\$125,000**

b. Will contractual services be put out to bid? **No**

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? **One-time**

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): No Personnel Cost

c2. If no indirect costs are included, what would have been the indirect costs? **5% of direct costs**

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive to September 30, 2021. The Department received the subaward agreement on September 13, 2021. This grant does not require an ASO amendment.

Proposal ID: CTR00002865
Version ID: 0001
Department ID: 251912
Project Desc: HAD DPH Admin Exec
Project ID: 10038572
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 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: 2/23/2022 | 3:04 PM PST

DocuSigned by:
Toni Rucker
4842927331F44D
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax
(Name)

Director of Health
(Title)

Date Reviewed: 2/28/2022 | 4:44 PM PST

DocuSigned by:
Greg Wagner
20327324335485
(Signature Required)

Greg wagner, COO for