

**San Francisco Department of Public Health (SFDPH)
NACCHO Request for Applications: Implementing Overdose Prevention Strategies
at the Local Level (IOPSLL)**

Budget Justification Narrative

Personnel:

Manager of Community Substance Use Services - \$12,994/Mo. @ .30 FTE x 18 Mos. = \$70,169

The Manager of Community Substance Use Services will work on a 30%-time basis for an 18-month period providing day-to-day supervision and oversight for the proposed program. The Manager will oversee and coordinate the proposed project subcontracts and all direct agency activities related to the program, while ensuring integration of proposed IOPSLL activities into SFDPH's overall opioid overdose prevention response.

Fringe Benefits @ 44% = \$30,875

Fringe Benefits are calculated based on current rates for health, dental, retirement, life insurance, Social Security, FICA, and other established County employee benefits.

Equipment:

Year 1: Two (2) Portable Drug Spectrometers @ \$12,500 Each x 2 = \$25,000

Two portable drug spectrometers will be purchased in year 1 to provide mobile checking of drug purity and safety directly within San Francisco neighborhoods that are highly impacted by opioid and other drug use. Spectrometers will be available on mobile vans, and drug tests will be administered by existing staff of local community-based organizations, including the San Francisco AIDS Foundation, in conjunction with other mobile harm reduction and substance use programs.

Supplies:

Drug Spectrometry Solvents and Other Testing Supplies:

Year 1 - \$500 Per Month x 2 Months = \$1,000

Year 2 - \$500 Per Month x 12 Months = \$6,000

The line item above supports the cost of essential supplies and materials needed to successfully administer mobile drug checking using the portable drug spectrometers during the pilot phase of the program. Support for these supplies begins at the anticipated time of launch of the mobile testing program, on approximately June 1, 2022, and continues through the end of the no-cost extension period on July 31, 2023. In the event the mobile drug checking program

proves successful, funding for mobile spectrometer supplies will be located from other funding sources within SFDPH.

Contractual Costs:

Opioid Overdose Dashboard Development Subcontract (TBA):

Year 1: \$40,000

Year 2: \$150,000

The San Francisco Department of Public Health (SFDPH) will contract with a qualified firm, agency consultant, or group of consultants to research, develop, and implement the proposed opioid overdose prevention dashboard. Contracted firms or individuals will have extensive knowledge and experience in formulating and implementing high-quality online dashboard systems using a collaborative, iterative process that works closely with public and private experts and providers to develop and launch the project, including staff from a variety of SFDPH divisions and departments. The dashboard development process will include development of dashboard parameters, indicators, and data sources; procedures and protocols for updating and assessing the quality of dashboard data; extensive measures to ensure the safety and confidentiality of data; and incorporation of de-duplicated data from a range of local agencies. The dashboard is expected to be launched on or around July 1, 2022, and will be continually evaluated and refined to produce increasingly impactful and reliable data and to accommodate a growing number of local data sources. Estimated costs for the dashboard development subcontract are based on estimates received from web specialists within SFDPH.

Expanded Opioid Overdose Prevention Capacity in SF Emergency Departments Subcontract (California Bridge)

Year 1: \$26,956

Year 2: \$150,000

SFDPH will contract with the California Bridge program, which already supports a full-time Opioid Overdose Prevention Navigator in each of San Francisco's 7 hospital-based emergency departments (EDs). Through the subcontract, California Bridge will recruit, train, and support a cadre of ED-based clinical champions who will advocate for enhanced and expanded substance use assessment and navigation within each hospital, while providing ongoing training and orientation to ED staff. The champions will support expanded substance use assessment and referral services within local hospitals, which see a high percentage of low-income persons with opioid use disorder who do not seek treatment or services elsewhere. This will in turn greatly expand the number of individuals with substance use disorders who are linked to medication-assisted treatment and significantly reduce opioid overdoses in the city.