

Zuckerberg San Francisco General Hospital & Trauma Center

Memorandum of Understanding

This Memorandum of Understanding (MOU) between San Francisco General Hospital Foundation herein after called "Foundation" and Zuckerberg San Francisco General Hospital is made and entered into as of June 8, 2021:

PURPOSE AND SCOPE

The Purpose of this MOU is to identify the roles and responsibilities of each party as they relate to the disbursement of funds for expenses incurred in carrying out the purpose of the:

The Department of Psychiatry Inpatient Unit Improvements

The funds for which were received by the Foundation from The Gerson Bakar Foundation.

MOU TERMS

The term of this MOU Agreement is the period within which the project responsibilities of this agreement shall be performed. The expected timeframe of the **Department of Psychiatry at Zuckerberg San Francisco General Hospital & Trauma Center** begins June 8, 2021 and ends June 7, 2022.

PROGRAM RESPONSIBILITIES UNDER THIS MOU

This grant is to support Zuckerberg San Francisco General Hospital in providing replacement of furnishings, fixtures, and equipment upgrades for psychiatric services.

The project leads for this grant are Dr. Lisa Fortuna and Dr. Mark Leary.

Furnishings

Replace bedside tables

Permitting Contingencies

Replace patient beds



| Replace patient day room furniture | |
|---|-----------|
| Replace family welcome room furniture | |
| Replace occupational therapy room furniture | |
| Replace bedside tables | |
| Replace patient beds | |
| Patient property room organizational storage system | |
| Replace 7th floor patio modular furniture | \$300,000 |
| Behavioral Health Center Furnishings | |
| Replace patient day room furniture | |
| Replace family welcome room furniture | |
| Replace occupational therapy room furniture | |
| | |

| <i>Fixtures</i> | |
|--|-----------|
| Windows to selected solid doors | \$76,300 |
| Shower faucet replacement in all patient bathrooms | \$160,000 |
| Adjustable soft lighting for common areas in dayrooms, hallway, and family meeting | \$205,000 |
| rooms | |
| Art, Signage, Wayfinding | \$325,300 |
| Security Door Entry Upgrade | \$115,000 |
| Equipment | |
| Ceiling mounted cameras (+ outside monitors) in seclusion rooms | \$117,900 |
| Patient medication refrigerator | \$10,000 |
| Flat screen/link to patient info system | \$75,000 |
| Upgrade linoleum in patient care areas with wood laminate | \$230,000 |
| Deticate assocition including varietted blankets beadshages and solaving CDs | \$3,500 |
| Patient amenities, including weighted blankets, headphones, and relaxing CDs | 73,300 |

| Total | \$1,900,000 |
|-------|-------------|
| Total | 31,300,000 |

\$107,000

\$175,000



Expenses allowed are up to the maximum spend not to exceed the amounts in \$1,900,000.

ZSFG shall comply with the Foundation Disbursement Request Policies and Procedures (Exhibit A), namely, provide adequate payroll records documenting the personnel expenses and final purchased invoices/receipts. Any exceptions to the disbursement request procedures, including requests for advance payments, must be requested in advance and agreed upon in writing by the Foundation.

MODIFICATION AND TERMINATION

IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

This agreement may be terminated with or without cause by either party upon 30 days prior written notice to the other party. Such notification shall state the effective date of termination or cancellation and include any final performance and/or payment invoicing instructions/requirements.

Any and all amendments must be made in writing and must be agreed to and executed by the parties before becoming effective.

Either party may terminate this agreement immediately on written notice if the other party has committed a material breach of this MOU and has not cured the breach within thirty (30) days after receiving written notice of the breach by the non-breaching party, or the parties cannot reach an agreement to amend this MOU.

If the budget covered under this agreement does not have sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the Foundation shall have no liability to pay any funds whatsoever to ZSFG and ZSFG shall not be obligated to perform any provisions for which they are not reimbursed.

CONTACT INFORMATION

All notices hereunder shall be in writing, personally delivered, sent by certified mail, return receipt requested, addressed to the other party as follows:

Gerry Chow Chief Financial Officer San Francisco General Hospital Foundation 2789 25th Street, Suite 2028 San Francisco, CA 94110



SIGNATURE

| Kim Meredith | | | |
|--------------|-------|------------|--|
| | Date: | 12.03.2021 | |
| | | | |

Kim Meredith Chief Executive Officer San Francisco General Hospital Foundation 2789 25th Street, Suite 2028 San Francisco, CA 94110

| DocuSigned by: | | | |
|----------------|-------|------------|---------------|
| Susan Elirlich | | 12/06/2021 | 11:50 AM PST |
| | Date: | 12/00/2021 | 11130 741 131 |
| | | | |

ZSFG Authorized Signer

Susan Ehrlich Chief Executive Officer Zuckerberg San Francisco General Hospital



EXHIBIT A

Disbursement Request Policy and Procedure

For each disbursement requested, a disbursement request form must be completed and authorized by the individual named on the Establishment of Restricted Funds document. Valid documents, such as vendor invoices, receipts, * payroll reports etc., verifying the expense, must be submitted along with the disbursement request form.

The cost categories allowed for use in identifying expenses are as follows:

| Salaries & benefits**Acc# | 7500 | Equipment/Remodeling | 7530 |
|---------------------------|------|---------------------------|------|
| Consultants | 7510 | Permits/Fees/Inspection | 7532 |
| Graphic Design | 7511 | Meals/Refreshment | 7540 |
| Translation Services | 7512 | Transportation & Lodging | 7560 |
| Supplies | 7520 | Conference & Training Fee | 7570 |
| Incentives | 7521 | Patient Assistance | 7580 |
| Stipend | 7522 | Other (please specify): | 7590 |
| Printing | 7523 | | |
| Software | 7524 | | |

^{*}Reimbursements: the receipt must show the following information: name of the person who paid it, item purchased, amount and date of purchase. Estimates are not accepted.

The Foundation recommends submitting authorized disbursement requests within 30 days of date of expenditure. All expenses must be submitted on or before July 15th in order to close the June 30 fiscal year. Expenses that do not fall within the open fiscal year will not be reimbursed.

The disbursement form can be submitted several ways:

- 1. Email to accounting@sfghf.org
- 2. Interoffice mail
- 3. Dropped off at Foundation office location
- 4. Mailed to PO Box 410836, SF CA 94141.

Once the completed form is received, the disbursement check will be issued within 5 to 10 business days.

^{**}Salaries and benefits: the report provided as part of the disbursement request must clearly list the name of the individual, the period or periods covered. The compensation and benefit amounts must be also listed separately.