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Committee Item	No. 3	3_
Board Item No.		

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee:	Budget and Finance Committee	Date: November 30, 201
Board of Su	pervisors Meeting	Date
Cmte Boa	rd	
	Motion Resolution Ordinance Legislative Digest Budget & Legislative Analyst Repor Ethics Form 126 Introduction Form (for hearings) Department/Agency Cover Letter at MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Award Letter Application	
OTHER	(Use back side if additional space i	s needed)
-	by: Victor Young Dat by: Victor Young Dat	e: November 21, 2011 e:

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.

[Accept and Expend Grant - Community of Veterans Engaged in Restoration Program - \$249,662]

Resolution authorizing the Sheriff's Department to retroactively apply for, accept and expend \$249,662 in funds from the Office of Justice Programs, through the Justice and Mental Health Collaboration Program. The Community of Veterans Engaged in Restoration Program (COVER) will strive to increase public safety and reduce recidivism among incarcerated and recently released veterans with Post-Traumatic Stress Disorder (PTSD) in the City and County of San Francisco.

WHEREAS, The Office of Justice Programs, Justice and Mental Health Collaboration Program seeks applicants and encourages partnerships between criminal justice and mental health providers to respond to the increasing number of people who are in need of these services and related resources to achieve a successful return to their communities; and

WHEREAS, The Sheriff's Department established the COVER Program (Community of Veterans Engaged in Restoration) to support incarcerated veterans of military services; and

WHEREAS, That the funds received will target military veterans involved with the criminal justice system who are in need of mental health services and who are returning to the City and County of San Francisco; and

WHEREAS, That services addressing Post-Traumatic Stress Disorder (PTSD) and related services totaling \$222,917 will be provided through a collaboration with Walden House, Inc., Jail Psychiatric Services, and other community based agencies which includes the hiring of a Mental Health Coordinator; and

WHEREAS, That the grant includes indirect costs of \$26,745; and

WHEREAS, That the Sheriff's Program Administrator and additional SFSD staff will provide in-kind services in excess of \$50,000; and

WHEREAS, That these services are designed to increase public safety and reduce recidivism; and

WHEREAS, That the City and County of San Francisco will participate in data collection on key variables related to client-level performance and outcome data as required; now, therefore, be it

RESOLVED, That the Sheriff's Department is hereby authorized to retroactively accept and expend \$249,662 in funds from the Department of Justice; and be it

FURTHER RESOLVED, That the Sheriff's Department is authorized to furnish whatever additional information or assurances the funding agency may request in connection with this grant, and execute any and all agreements necessary to complete the transfer of funds. The grant period is from October 01, 2011 to September 30, 2013; and be it

FURTHER RESOLVED, That the City and County of San Francisco assures that it will abide by the statues governing the Office of Justice Programs as well as the terms and conditions of the Grant Agreement as set forth by the U.S. Department of Justice, Office of Justice Programs.

Recommended: , Unvarshouff for Michael Hennessey Sheriff Approved: Controller

City and County of San Francisco

OFFICE OF THE SHERIFF



SHERIFF

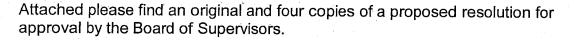
Michael Hennessey

(415) 554-7225

October 13, 2011 Reference: 2011-084

Angela Calvillo, Clerk of the Board Board of Supervisors 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco, CA 94102-4689

Dear Ms. Calvillo:



The resolution authorizes the Sheriff's Department to apply for, accept and expend the COVER Program (Community of Veterans Engaged in Restoration) grant in an amount of \$ 249,662 from the Office of Justice Programs, through the Justice and Mental Health Collaboration Program. The purpose of the grant is to increase public safety and reduce recidivism by providing mental health services to incarcerated veterans of military service within the City and County of San Francisco.

The following is a list of accompanying documents:

Cover Memo
Proposed Resolution
Grant Information Form
Grant Application & Budget
Grant Award Notice

Please contact Maureen Gannon at (415) 554-4316 if you require more information. Thank you.

Sincerely,

Handrupley, Undarghan of for MICHAEL HENNESSEY

Sheriff

FAX: (415) 554-7050

City and County of San Francisco

OFFICE OF THE SHERIFF



File No. 1112/8

Michael Hennessey SHERIFF

(415) 554-7225

TO:	Angela Calvillo, Cle	erk of the Board of Supervisors
FROM:	Michael Hennessey	y, Sheriff De for shareff Heanerly
DATE:	October 13, 2011	
SUBJECT:	Accept and Expend	d Resolution for Subject Grant
GRANT TITLE:	The COVER Program (Community of Vete	am terans Engaged in Restoration)
Attached please fir	nd the original and 4 co	opies of each of the following:
X Proposed gran	nt resolution; original si	signed by Department, Mayor, Controller
X Grant information	tion form, including disa	sability checklist
X Grant budget		
X Grant applicat	ion	
X Grant award le	etter from funding agen	ncy
Other (Explain):	
	equirements: None esentative to receive a	copy of the adopted resolution:
Name: Maur	een Gannon	Phone: (415) 554-4316
Certified copy required copy required by funding	ired Yes 🗌 ies have the seal of the	ment, City Hall – Room 456 No ⊠ ne City/County affixed and are occasionally ases ordinary copies without the seal are
sufficient).		** Complete copy of document is located in

File Number:			
(Provided by	Clerk of Board of Sur	envienre)	Τ

Grant Information Form

(Effective March 2005)

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: The COVER Program (Community of Veterans Engaged in Restoration)
- 2. Departments: Sheriff's Department
- 3. Contact Person: Maureen Gannon Telephone: (415) 554-4316
- 4. Grant Approval Status (check one):

[X] Approved by funding agency

[] Not yet approved

- 5. Amount of Grant Funding Approved or Applied for: Approved \$249,662
- 6a. Matching Funds Required: \$50,000 (in-kind)
 - b. Source(s) of matching funds (if applicable): General Fund
- 7a. Grant Source Agency: Office of Justice Programs

Justice and Mental Health Collaboration Program

- b. Grant Pass-Through Agency (if applicable): N/A
- 8. Proposed Grant Project Summary:

The grant will be used to enhance the existing COVER Program (Community of Veterans Engaged in Restoration) by planning and implementing mental health services and programming for military veterans in the San Francisco county jail. Specifically, additional mental health services and related services will address PTSD. The Sheriff's Department will collaborate with Jail Psychiatric Service, Walden House, Inc. and other community based agencies. The Sheriff's Program Administrator and additional SFSD staff will provide in-kind services in excess of \$50,000. The overarching goal is to promote public safety by reducing recidivism and violence among veterans who are involved in the criminal justice system and to increase their chances of being self-supporting and living independently in the community following incarceration.

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

Start-Date: 10/01/2011

End-Date: 9/30/2013

10. Number of new positions created and funded: 0

Departmental or Mayor's (Office of Disability Reviewer:_	Jan Dempsey	_
Date Reviewed: 10/20	<u> </u>	(Name) Juny with Have F (Signature)	_
Department Approval:	Michael Hennessey	Sheriff	
	(Name)	(Title)	_
· · · · · · · · · · · · · · · · · · ·	Augh Amplay U (Signature)	INDURSITER FF FOR Shurff Hannaray	_

NOTIFICATION OF CONTRACT APPROVAL (S.F. Campaign and Governmental Conduct Code § 1.126)

City Elective Officer Information (Please print clearly.)	
Name of City elective officer(s):	City elective office(s) held:
Members, Board of Supervisors	Members, Board of Supervisors
Contractor Information (Please print clearly.)	
Name of contractor: Haight Ashbury Free Clinics, Inc. (d.b.a. Haight	Ashbury Free Clinics - Walden House)
Please list the names of (1) members of the contractor's board of direction financial officer and chief operating officer; (3) any person who has any subcontractor listed in the bid or contract; and (5) any political cadditional pages as necessary. (1) Harlan Grossman; Eric Flowers; Stephen Bach; Deborah Broyles; Christian; Tamara Mason-Williams; Marguerite Meade; Liam Maycle (2) CEO: Vitka Eisen; CFO: David Crawford; COO: N/A (3) N/A (4)	an ownership of 20 percent or more in the contractor; (4) committee sponsored or controlled by the contractor. Use Todd Choy; Susan Christian; Graham Gunst; Tomem; Victor Ortiz; Peter Sullivan; Jeanne Woodford.
Contractor address: 1735 Mission Street, 2 nd Floor, San Francisco, C.	A 94103
Date that contract was approved:	Amount of contract: \$249,662.00
Describe the nature of the contract that was approved: Contract funds	a mental health coordinator for incarcerated veterans.
2 control and manufacture of the control of the con	
Comments:	
This contract was approved by (check applicable):	
the City elective officer(s) identified on this form	
a board on which the City elective officer(s) serves San Fra	ncisco Board of Supervisors Trint Name of Board
the board of a state agency (Health Authority, Housing Author Board, Parking Authority, Redevelopment Agency Commission Development Authority) on which an appointee of the City elec	ity Commission, Industrial Development Authority, Relocation Appeals Board, Treasure Island
Print Name of Board	
Filer Information (Please print clearly.)	
Name of filer:	Contact telephone number:
Angela Calvillo, Clerk of the Board	(415) 554-5184
Address:	E-mail:
City Hall, Room 244, 1 Dr. Carlton B. Goodlett Pl., San Francisco, C.	
Signature of City Elective Officer (if submitted by City elective office	r) Date Signed
Signature of Board Secretary or Clerk (if submitted by Board Secretar	y or Clerk) Date Signed