# SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH 9/30/2014-9/29/2015

CA	ATEG	ORY/LINE I	TEM		Annual Salary	42.00% Annual Frin Ben	% OF TIME	% OF FTE	Monthly Rate	Mth	Salary Budget	Frin Ben Budget	Total Budget	Comments
<b>A.</b> P	ERSC	NNEL												In Kind Staff: T.Aragon, I.Nieves, M.Kirin, C.Chan, P,Erwin, D.Smith, H.Hammer
1	.	Igoc Trang I	Vguyen											
					93,935	39,453	20%	0.20	7,828	12	18,787	7,891	26,678	
2	i. J.	<b>McCright</b>					,							
					98,371	41,316	20.0%	0.20	8,198	12	19,674	8,263	27,937	
3	3.										0	0	0	
12	1 S	r. Administ	rative A	nalyst										
$\perp$	1	.823	S.	Shaikh	95,654	40,175	5%	0,05	7,971	12	4,783	2,009	6,791	
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				-										
								0.00	0	12	0	0	0	

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									0,00	0	12	0	0	0	
				1	OTAL SALARY/FRINGE	287,960	<b>120,943</b> FTE 0	City and PHFE	<b>0.4500</b> 4.1500			43,244	18,162	61,406	
					00101 SALARIES 00103 FRNG BN			,						43,244 18,162	
					SUB TOTAL									61,406	!
c		Loca	al Travel												
	2.	Out	t-of-Juriso	liction T	ravel (02101)									1,450	
					Sub Total TRAVEL									1,450	, ,
C	. EQUI	IPMI	ENT		Sub Total EQUIPMEN	lΤ								0	
E	MAT	ERIA	ALS AND :	SUPPLIES	Sub Total SUPPLIES									0	
F	1.	PHF	CTUAL SE FE olic Healt			rs								695,465 695,465	
_															•
G	2.	Ren Tele	ephone/0	Com <b>(03</b> 2										747	250 saft per fte \$2/sa ft per month includes phie staff 15 per month per fte includes phie staff
	5.	Rep	oroductio	n/Photo	copy Sub TOTAL OTHER							<b>V</b>		4,800 <b>30,447</b>	400 per month
					TOTAL DIRECT COST									788,768	
				H. INDIF	RECT COST (24.03% of to	otal salaries)		•	ı				0	10,392	
					TOTAL BUDGET					•				799,159	
					AWARD									799,159	
					SURPL/(DEFICFIT)					•				(0)	
															;

# San Francisco Department of Public Health Community Health Equity and Promotion Branch REACH

то	TAL BUDGET	\$799,159
J.	Indirect Costs (24.03% of Total Salaries)	\$10,392
1.	Total Direct Costs	\$788,768
Н.	Contractual	\$695,465
G.	Other Expenses	\$30,447
F.	Travel	\$1,450
Ε.	Materials and Supplies	\$0
D.	Equipment	\$0
C.	Consultant Costs	\$0
В.	Mandatory Fringe	\$18,162
A.	Salaries and Wages	\$43,244

The program and work plan will be accomplished through collaboration between the San Francisco Department of Public Health (SFDPH) and the San Francisco Health Improvement Partnership (SFHIP). The core team as SFDPH will be supported by the Public Health Foundation Enterprises, Inc. (PHFE). PHFE has provided fiscal, human resource, and contract administration services to SFDPH for over 15+ years. PHFE is a licensed California non-profit that has served the non-profit, education, and research communities for over 39 years. As a Fiscal Intermediary, PHFE currently serves over 250 programs with combined budgets totaling more than \$120 million dollars.

In order to meet the benchmark of allocating a minimum of 10% of our resources towards evaluation, we are allocating resources as shown in the table below. For more information please refer to the details in the justification.

Resource	Resource Cost	% Evaluation	Total \$ Evaluation			
Program Manager	\$27,937	10%	\$2,794			
Epidemiologist	\$26,678	100%	\$26,678			
Project Coordinator	\$98,250	20%	\$19,650			
REACH Coordinators	\$170,300	20%	\$34,060			
Data Manager	\$26,646	100%	\$26,646			
Focus Group Costs	\$16,000	100%	\$16,000			
Assessment Costs	\$4,000	100%	\$4,000			
Community Mini Grants	\$150,000	10%	\$15,000			
Total Funding Allocated To Ev	otal Funding Allocated To Evaluation Activities (approximately 18%)					

## A. SALARIES AND WAGES

Salaries and Wages: City and County of San Francisco Personnel

Position Title and Name	Annual	Time	Months	Amount Requested
PI and Director, Population Health Division	NA	10%	12 months	In-Kind
T. Aragon			*	
Community Health Equity and Promotion Branch Deputy Director and Program Manager	\$98,371	20%	12 months	\$19,674
J. McCright Epidemiologist N.T. Nguyen	\$93,935	20%	12 months	\$18,787
Sr. Administrative Analyst S. Shaikh	\$95,654	5%	12 months	\$4,783
Director, Community Health and Equity Promotion Branch T. Packer	NA	5%	12 months	In-Kind

\$43,244

Community Health Equity and	NA	10%	12 months	In-Kind
Promotion Branch Deputy Director				
P. Erwin				
Epidemiologist	NA	5%	12 months	In-Kind
M. Kirian				
Tobacco Free Project Health	NA	5%	12 months	In-Kind
Educator			]	
D. Smith				
Director of Food Systems	NA	5%	12 months	In-Kind
Environmental Health Branch				
P. Jones				
Tobacco Free Project Health	NA	5%	12 months	In-Kind
Planner S. Hennessey-Lavery				
Director, Office of Equity and	NA	5%	12 months	In-Kind
Quality Improvement			į.	
I. Nieves				
Coordinator Feeling Good Project	NA	5%	12 months	In-Kind
L. Brainin-Rodriguez			*	
Program Manager, Children's	NA	5%	12 months	In-Kind
Environmental Health Promotion			]	
K. Cohen				
Maternal, Child and Adolescent	NA	5%	12 months	In-Kind
Health Medical Director				
C. Chan				
Director of Primary Care	NA	5%	12 months	In-Kind
H. Hammer				

<u>Job Description</u>: Pl and Director, Population Health Division (T. Aragon) – Dr. Tomas Aragón will provide leadership for the project. Dr. Aragón is the San Francisco Health Officer, and the Director of the Population Health and Prevention Division of SFDPH. Dr. Aragón will be responsible for overall planning, implementation, monitoring, and reporting of the program.

Job Description: Program Manager (J. McCright) – Jacqueline McCright is a Deputy Director of Community Health Equity & Promotion Branch at SFDPH. Ms. McCright will serve as the Program Manager for this program. She has over 10 years' experience in Community-based participatory research; developing, planning, implementing, and evaluating community-based services with the African American and Latino populations of all ages. Ms. McCright is also the team lead for the pilot Quality Improvement African American Hypertension Project with Southeast Health Center, linking patients to physical activity at the YMCA via green prescriptions. Ms. McCright will be responsible for monitoring all short-term outcomes with the support of other project staff, managing the Communication Plan and maintaining smooth implementation of all project strategies on a day-to-day basis. Ms. McCright will supervise the

REACH coordinators and program assistant for this project. She is also responsible for tracking and reporting all activities to CDC annually, under the close supervision of Dr. Aragón,

<u>Job Description</u>: Epidemiologist II (N.T. Nguyen) –Dr. Nguyen will assist in analyzing the clinical and community prevention resource data for the project and synthesizing the information that will be used for the REACH reports and dissemination of information materials.

<u>Job Description</u>: Senior Administrative Analyst (S. Shaikh) — Mr. Shaikh will provide fiscal and administrative support to the program. He prepares funding notification letters, manages section budgets and prepares statistical reports on contracts. He will work with program staff and contractors to resolve issues related to invoicing.

<u>Job Description</u>: Director, Community Health Equity and Promotion Branch (T. Packer) — This position is in-kind. Ms. Packer provides oversight to all work in the Branch and direct supervision to the Program Manager. She also provides linkages to other Branches and Divisions of the Department on REACH and other initiatives.

<u>Job Description</u>: Deputy Director of Community Health Equity & Promotion (P. Erwin) – This position is in-kind and will provide leadership and technical assistance on the physical activity and community linkages strategies of the REACH Project, as well as linkages to the SFHIP Coalition.

<u>Job Description</u>: CHI Epidemiologist (M. Kirian) – This position is in-kind. Ms. Kirian will head the evaluation for REACH. She is an epidemiologist with 9 years of experience in the design and implementation of qualitative and quantitative data collection and analyses.

<u>Job Description</u>: Tobacco Free Project Health Educator (D. Smith) – This position is inkind and will provide leadership and technical assistance on all tobacco control initiatives and linkages to the Tobacco Free Coalition and other tobacco control work in San Francisco.

<u>Job Description:</u> Director of Food Systems Environmental Health Branch (P. Jones) – This position is in-kind and will provide linkages to the Food Security Task Force and other linkages to food security work in SF.

<u>Job Description</u>: Tobacco Free Project Health Planner (S. Hennessey-Lavery) – This position is in-kind and will provide leadership and technical assistance on all tobacco control initiatives and linkages to the Tobacco Free Coalition and other tobacco control work in San Francisco.

<u>Job Description:</u> Office of Equity & Quality Improvement Director (I. Nieves) – This position is in-kind, and will provide leadership and technical assistance on quality improvement efforts with the SFDPH primary care medical homes and performance measures.

<u>Job Description:</u> Program Coordinator Feeling Good Project (L. Brainin-Rodriguez) – This position is in-kind and will provide linkages and technical assistance to healthy retail efforts in the Tenderloin as well as for community engagement efforts.

Job Description: Program Manager, Children's Environmental Health Promotion (K. Cohen) – This position is in-kind and will provide technical assistance to the Media Broker/PR Firm and REACH team to support the planning, implementing, and evaluating communication activities, with the support of Ms. Kirian for evaluation.

<u>Job Description</u>: Maternal, Child and Adolescent Health Medical Director (C. Chan) – This position is in-kind, and will provide leadership and technical assistance on Healthy Eating Active Living initiatives and linkages to other Healthy Eating Active Living work in San Francisco, primarily those focused on youth, children, and parents as well as linkages to the Childhood Obesity TaskForce.

<u>Job Description</u>: Director of Primary Care (H. Hammer) —This position is in-kind and will provide leadership and technical assistance for access to the patients and clinical teams at the SFDPH primary care medical homes and facilitate implementation of the REACH Project at the priority clinics.

B.	FRINGE BENFITS 42% of total salaries	\$18,162
c.	CONSULTANT COSTS	\$0
D.	EQUIPMENT	\$0
E.	MATERIALS AND SUPPLIES	\$0
F.	TRAVEL	\$1,450

Meeting		Rate	Cost
CDC Meetings	Airfare	\$800 x 1 traveler x 1 trip = \$800	\$1,450
	Lodging	\$250 per night x 2 nights x 1 traveler x 1 trip = \$500	
	Transportation	\$150/traveler x 1 traveler x 1 trips = \$150	

<u>CDC Meetings</u>: Staff will travel to Atlanta annually as needed for the annual CDC REACH meeting.

G. OTHER		\$30,447
ltem	Rate	Cost

Office Rent	\$2/sq.ft./month x 250 sq.ft/FTE x 4.15 FTE x 12 months	\$24,900
Telephone/Communication	Average monthly cost \$15/FTE/month x 4.15 FTE x 12 months	\$747
Photocopier lease/maintenance	Approximately \$400/month x 12 months	\$4,800

Office Rent: Office rent covers expenses of office space rental and maintenance for all FTE included in the budget. Calculations are based on the number of FTE from the City and County of San Francisco (SFDPH) as well as the FTE from fiscal sponsor contract with Public Health Foundations Enterprises (PHFE).

<u>Telephone/Communication</u>: Funds cover expenses for all means necessary to communicate with contractors, partners, health departments, and grantors, including local and long distance telephone calls, fax usage, Internet, voicemail and replacement/maintenance of phones for program staff and administrative staff. Calculations are based on the number of FTE from the City and County of San Francisco (SFDPH) as well as the FTE from fiscal sponsor contract with PHFE.

<u>Photocopier Lease/Maintenance</u>: Funds cover expenses for office photocopier lease and maintenance for program staff.

### H. CONTRACTUAL

\$695,465

Contractor Name (see below for details)	Total Funding
 Public Health Foundation Enterprises, Inc.	\$695,465

# 1. Name of Contractor: Public Health Foundation Enterprises, Inc.

<u>Method of Selection</u>: PHFE was selected through a Request for Qualifications process held in 2013 by the SFDPH Contracts Unit. PHFE acts as a fiscal intermediary for SFDPH.

Period of Performance: 09/30/2014 - 09/29/2015

<u>Scope of Work</u>: Fiscal intermediary services to the SFDPH Population Health Division. PHFE pays for staff members and travel that support the goals and objectives of the project. The staff supports all programmatic actives, including but not limited to coordination and administrative support.

Method of Accountability: Annual program and fiscal and compliance monitoring.

#### Itemized budget and justification:

a. Salaries and Wages

\$255,101

Position Title and Name	Annual	Time	Months	Amount Requested
Project Coordinator (TBD)	\$75,000	100%	12 months	\$75,000
REACH Coordinator (TBD)	\$65,000	100%	12 months	\$65,000
REACH Coordinator (TBD)	\$65,000	100%	12 months	\$65,000
Project Assistant L. Bristow	\$50,000	25%	12 months	\$12,500
Finance & Operations Manager Arfana Sogal	\$95,481	10%	12 months	\$9,548
Project Manager J. Balido	\$77,123	10%	12 months	\$7,712
Data Manager J. White	\$81,363	25%	12 months	\$20,341

<u>Job Description</u>: Project Coordinator (TBD) – The Project Coordinator will be responsible for the day to day activities for the grant. This person will serve as the main point of contact for all communication and evaluation activities. In addition, the Project Coordinator will be responsible for all programmatic administration and monitoring of the mini-grants including managing the request for proposal process and providing technical assistance to those who receive the mini-grants.

Job Description: 2 REACH Coordinators (TBD) — The REACH Coordinators will be the point of contact for our target clinics. They will be responsible for developing and coordinating the priority patient assessment and focus groups. They will provide assistance to the primary care medical home (PCMH) clinics on aspects of implementing this project. They will convene meetings monthly with key integrated clinical team members to share information, facilitate communication, and maintain and update an inventory of high quality, effective resources available to support patients in the community by serving as a primary contact with 2-1-1.org. The REACH Coordinators will also work with the PCMH clinics to implement a clinic-wide system to provide non-pharmaceutical prescriptions to further support their patients in reducing their risk for heart attack and stroke. The REACH Coordinators will also provide support for all data tracking, evaluation and communication activities as needed.

<u>Job Description:</u> Project Assistant (L. Bristow) – The Project Assistant will provide overall administrative support to the project including scheduling meetings, answering calls from community partners, media, providers, and the distribution of program materials.

<u>Job Description</u>: Finance and Operations Manager (A. Sogal) – Arfana Sogal is responsible for the fiscal management, policy development, and financial reporting of projects at SFDPH's Population Health Division. She will monitor the budget, establish contracts and

sub-contracts in addition to managing FTEs, benefits, budget estimates, and monthly reports to assist with the execution of activities. These reports will be used to make staffing, space, and other logistically based decisions to ensure capacity, and to meet program requirements. Ms. Sogal will collaborate with PHFE and SFDPH (Accounts Payable, Payroll, Human Resources, and Fiscal) on a regular basis to facilitate project activities.

<u>Job Description:</u> Project Manager (J. Balido) – Ms. Balido will be responsible for working with the Program Manager to develop the project charter, which will include the roles and responsibilities chart, identification of project stakeholders, identify key assumptions and risks, development of the project timeline and scope.

<u>Job Description</u>: Data Manager (J. White) – Mr. White will be responsible for extracting data from the San Francisco Health Network (SFHN) clinical health information technology system of African American & Latino patients with cardiovascular disease from the priority clinics of their primary care medical homes. This data will be used to track ongoing progress and heart health outcomes for the REACH Project.

	Fringe Benefits % of total salaries	\$79,081
c.	Consultant Costs	\$0
d.	Equipment	\$0
e.	Materials and Supplies	\$13,130

Item	Rate	Cost
Office Supplies	\$75/month/FTE x 3.7 FTE x 12 months = \$3,330	\$5,130
	\$150/month x 12 months for meetings = \$1,800	
IT Supplies	4 computers/software x \$2000 = \$8,000	\$8,000

Office Supplies: This line item includes general office supplies required for daily work for project staff including, but not limited to pens, paper, binders and files. In addition, this includes supplies for meetings/conferences conducted by the program. Meeting supplies include, but are not limited to, folders, pens, handouts and recording devices for focus groups.

<u>IT Supplies</u>: Including but not limited to 4 desktop computers including all appropriate software.

ŧ	Travel	\$5,82	72
1.	Havet	20,00	40

Meeting			Rate	Cost
	Local Travel	Muni Card	\$66 x 12 months x 2 REACH Coordinators	\$1,584

CDC Meetings	Airfare	\$550 x 3 travelers x 1 trip = \$1,650	\$4,239
	Lodging	\$250 per night x 2 nights x 3 travelers x 1	
		trip = \$1,500	1
	Per diem	\$71 per day x 3 days x 3 travelers x 1 trip =	
		\$639	
	Transportation	\$150/traveler x 3 travelers x 1 trips = \$450	

<u>Local Travel</u>: Public transit muni cards will be purchased to cover local travel for the field REACH coordinators.

<u>CDC Meetings</u>: Staff will travel to Atlanta annually as needed for the annual CDC REACH meeting, as well other CDC meetings as needed.

g. Other Expenses

\$39,540

ltem	Rate	Cost
Printing	Approximately \$100/month x 12 months	\$1,200
Shipping	Approximately \$20/month x 12 months	\$240
Communication	\$50/ month x 12 months	\$600
Kick-off Meeting	Approximately \$125/person x 100 attendees	\$12,500
Patient Focus Group Incentives	8 groups x 10 participants x \$50/participant x 2/year = \$8,000	\$8,000
Patient Focus Group Transcription	\$50/hr. x 10 hrs. transcription x 8 groups x 2/year = \$8,000	\$8,000
Priority Patient Assessment Survey	2 clinics x 200 participants x \$10/participant = \$4,000	\$4,000
2-1-1 Services	Up to 50 hours x \$100 per hour	\$5,000

<u>Printing</u>: Funds for costs of printing project materials to provide to clinic and other partners as well as project staff. This includes but is not limited to flyers, manuals, and binders.

<u>Shipping</u>: Funds for shipping project materials for meetings and general project management and grant administration.

<u>Communication</u>: Funds for programmatic conference calls with collaborators, community members, and funders.

<u>Kick-off Meeting</u>: Funds will be used to cover costs associated with the kick-off meeting planned for February of 2015. Costs will include but are not limited to location rental, materials production and event coordination. Costs are estimated on a per participant basis.

<u>Focus Group Incentives</u>: Funds will cover the costs of providing a \$50 stipend to focus group participants. Costs are based on 8 groups with 10 participants each, conducted twice in year one.

<u>Focus Group Transcription</u>: Funds will cover the cost of transcribing the information gathered at the above mentioned focus groups. Costs are estimated based on each group requiring 10 hours of transcription services at \$50/hour.

<u>Priority Patient Assessment Survey Incentives</u>: Funds will cover the costs of a \$10 gift card for all who participate in the needs assessment survey. Costs are calculated based on conducting the survey with 200 people at two clinics.

2-1-1 Services: To support the identification and active referral of valuable community resources that promote good cardiovascular health for AA and Latinos in San Francisco, the REACH Coordinators will work closely with SF's existing agency 2-1-1. 2-1-1 currently runs the website http://211bayarea.org/find-help/, which is a community resource database to assist SF residents with food security, healthcare, housing, legal aid, senior services, and other supportive services at no cost. It is confidential and available in 150 languages, 24 hours a day, with the information also available via a phone call to 2-1-1. This information can be accessed by patients directly but also by healthcare providers while they are being seen at the clinic. It can be searched by zip code, helping to find resources in close proximity to a patient's home, work, or the clinic itself if desired. This 2-1-1 data is also part of the HealthyCity lookup database, which provides data and mapping tools to help public health professionals and community members build a better community. Therefore REACH Coordinators will partner with 2-1-1 staff to request the addition of community resources identified from our patient assessments and throughout the course of the project.

### h. Contractual

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Contractor Name (see below for details)	Total Funding
Media Broker Consultant	\$85,000
Community Mini-Grants	\$150,000

# i. Media broker Consultant

Method of Selection: We will conduct a request for proposal (RFP) process through PHFE. A RFP review committee (consisting of: REACH Program Manager, SFHIP Coalition member, CHEP staff and the SFDPH Communication Officer) will develop criteria and a scoring sheet for the selection of the Media broker agency.

Period of Performance: 11/01/2014 - 09/29/2015

Scope of Work: The contractor will be responsible for the development and implementation of the communication plan. The contractor will work closely with

SFHIP, the SFDPH core REACH team and the SFDPH Public Information Officer. Please refer to the narrative for key strategies and components of the Healthy Hearts SF communication plan.

Method of Accountability: Annual program and fiscal and compliance monitoring.

Itemized budget and justification: Estimated budget is \$85,000. Once contractor is selected, budget and justification will be sent to CDC for approval.

#### Community Mini-Grants

Method of Selection: We will release a request for applications for communitybased organization.

Period of Performance: 02/01/2015 - 09/29/2015

Scope of Work: To address the ABCDs in the community, we will be providing minigrants to conduct activities in support of the Million Hearts<sup>®</sup> Initiative. Proposals will be required to include a communication plan, to engage African Americans and Latinos who have or are at high risk for cardiovascular disease, encourage widespread, equitable utilization of community activities, and to support evaluation activities. For more information on this please refer to narrative.

Method of Accountability: Annual program and fiscal and compliance monitoring.

Itemized budget and justification: We estimate 4-5 grants will be awarded ranging from \$10,000 to \$50,000. Once proposals are selected, a budget and justification will be sent to CDC for approval.

	Total PHFE Direct Costs	\$627,676	
i.	Total PHFE Indirect Costs (10.8% of Modified Total Direct Costs)	\$67,789	
	Total PHFE Costs	\$695,465	
1.	TOTAL DIRECT COSTS: INDIRECT COSTS (24.03% of total salaries)		\$788,768 \$10,392 \$799,159