## File Number:

(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: Overdose Prevention Program in Single Room Occupancy Hotel (SRO)
- 2. Department: San Francisco Department of Public Health Center for Public Health Research
- 3. Contact Person: Phillip Coffin

Telephone: 415-437-6282

4. Grant Approval Status (check one):

[X] Approved by funding agency

[] Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$700,000 YR1: 350,000 Term: 02/01/20-01/31/21 YR2: 350,000 Term: 02/01/21-01/30/22

- 6a. Matching Funds Required: \$0
- b. Source(s) of matching funds (if applicable):
- 7a. Grant Source Agency: California Department of Public Health (CDPH)
- b. Grant Pass-Through Agency (if applicable):
- 8. Proposed Grant Project Summary:

One-third of opioid overdose deaths in San Francisco occur in SROs, and the overdose death rate among SRO residents is 19 times that of the general San Francisco population. SRO residents are more likely than others to die from overdose at home (86% vs 64%), and residents are physically isolated from others. In response to this issue SFDPH will partner with the DOPE Project of the Harm Reduction Coalition to implement an overdose prevention program in Single Room Occupancy (SRO) hotel rooms. Through this process we will: (1) Develop agreements with building management of SROs with the highest frequency of overdose develop a project charter that will outline the content, implementation plan, timeline, communication agreements, and evaluation of the program. (2) Recruit and train tenants at each SRO on overdose prevention interventions and community leadership so that they can address this issue among their co-residents. (3) Install "NaloxBoxes" on each floor of the selected SROs to ensure ongoing naloxone access in each building.

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

Start-Date: 02/01/2020 End-Date: 01/30/2022

10a. Amount budgeted for contractual services: Yr1 - \$344,000 & Yr2 - \$344,000

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?

d. Is this likely to be a one-time or ongoing request for contracting out? On-Going

11a. Does the budget include indirect costs? [] Yes [X] No

b1. If yes, how much? \$0

b2. How was the amount calculated?

c1. If no, why are indirect costs not included? [] Not allowed by granting agency [] To maximize use of grant funds on direct services [x] Other (please explain): No Personnel Cost

c2. If no indirect costs are included, what would have been the indirect costs? Zero, since no personnel cost budgeted on grant.

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds for the period of February 01, 2020 to January 30, 2022. The Department received the subaward agreement on November 19, 2019.

Department ID: 251929 Proposal ID: CTR00001660 Project ID: 10035737 Activity ID: 0001 Version ID: V101 \*\*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):

[X] Existing Site(s) [] Rehabilitated Site(s) [] New Site(s)

[ ] Existing Structure(s) [ ] Rehabilitated Structure(s) [ ] New Structure(s) [] Existing Program(s) or Service(s) [] New Program(s) or Service(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: <u>Now 21, 2019</u>	(Signature Required)

## Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax (Name)	
Director of Health	
(Title) ////////////////////////////////////	
Date Reviewed:	SU
	(Signature Required)