

FY 2008-09 MID-YEAR REDUCTIONS - November 18th, 2008										
Item	Div	Description	FTE's Change	Annualized Position Change	Expend Incr/(Decr)	Revenues Incr/(Decr)	2008-09 Net General Fund	2009-10 Net General Fund	Comment	Principle
REVENUE										
A1	Dept. Wide	08-09 Increased Revenue SFGH				3,000,000	(3,000,000)	(3,000,000)	This additional revenue assumes 07/08 final close out revenue surplus will also be reflected in 2008/09 actuals	1. Maximize Revenue
A2	SFGH	Increase Cafeteria Pricing				22,500	(22,500)	(45,000)	Effective January 1, 2009. Price Increases at SFGH.	1. Maximize Revenue
	TOTAL REVENUE					3,022,500	(3,022,500)	(3,045,000)		
BUDGET REDUCTIONS										
F1 - Revised	Environmental Health	Asthma Task Force			(77,000)		(77,000)	(112,000)	Effective: Immediately, BOS Restoration. This was a supplement to our budget and was restored in the last budget round. This will not affect funded services for persons with asthma and the taskforce will continue to exist.	3. Prioritize services to vulnerable populations--this is not a direct service.
F2 - Revised	CBHS	Behavioral Health Outpatient Reduction			(245,834)		(245,834)	(538,363)	Effective January 1, 2009. BOS Restoration. We are prioritizing residential treatment and medical related substance abuse services (consistent with prop. 1).	4. Prioritize services to the most severely ill.
F3 - Revised	CBHS	Behavioral Health Outreach Reduction			(699,593)		(699,593)	(1,526,360)	Effective January 1, 2009. BOS Restoration. We are prioritizing residential treatment and medical related substance abuse services (consistent with prop. 1).	3. Prioritize services to vulnerable populations.
F4	CBHS	Delay Bayview Health Initiative			(75,000)		(75,000)	-	BOS Restoration. Savings from contract delay until mid-year.	3. Contract will be processed for this service that addresses health disparities.
F5	CBHS - MH	Restructuring Trauma Recovery Center/Rape Treatment Center and the Child and Adolescent Support and Advocacy Resource Center.			(338,331)		(338,331)	(671,692)	Effective: February 1, 2009, BOS Restoration. In streamlining the administration and clinical coverage of the two trauma-focused, 24/7, programs administered by UCSF, efficiency can be produced, and productivity increased.	10. Substitution of less expensive service.
F6	CBHS - MH	Supplies for Shelters			(158,000)		(158,000)	(200,000)	Effective: Immediately, BOS Restoration. Due to this difficult budget year, only the highest priority activities can be maintained with this funding. The Department allocated hygiene supplies to shelter contractors on a one-time basis and requested that contractors budget adequate funds in their ongoing budgets to provide for these supplies. Additionally, the Department arranged for the shelter contractors to purchase supplies from the Department's vendors which will result in a 10 percent discount for contractors.	10. Substitution of less expensive service.
F7	CBHS - MH	Provide Mental Health Services to persons with serious mental illness	(5.42)	(13.00)	(654,369)		(554,369)	(1,330,493)	Effective: February 1, 2009, BOS Restoration. This would require a legislative change to the Single Standard of Care ordinance. This proposal would limit mental health services to mentally ill clients with MediCal coverage as per State agreement to operate the San Francisco Mental Health Plan, and to uninsured clients who are seriously mentally ill. While the implementation of this reduction will result in a reduction of clients served by contractors and the Private Provider Network (PPN), the proposed reduction only includes an impact to the civil service programs currently. The PPN was excluded because of the State's previous reduction to the PPN State allocation.	3. Prioritizes services to the most severely ill.
F8	AIDS	Complimentary Therapies			(155,000)		(155,000)	(310,000)	Effective: January 1, 2009, BOS Restoration. These services were originally funded by CARE dollars which are no longer available. City was able to restore this funding in previous years when sufficient dollars were available. Does not affect maintenance of effort.	13. Complimentary therapies are not core services of the Health Dept.
F9 - Revised	AIDS	HIV Prevention	(1.00)	(2.00)	(1,131,720)		(1,131,720)	(2,188,440)	Effective: January 1, 2009, DPH prevention collaboration staff worked with HPC to determine the least harmful way to reduce general fund costs for prevention.	6. The department will focus on programs which have the greatest outcomes.
F10	STD	STD Selective Testing			(72,500)		(72,500)	(145,000)	Effective: January 1, 2009, BOS Restoration. Reduction of selective STD testing for persons over 30.	3. Prioritize services to vulnerable populations--these STD tests are done for lower risk persons
F11	HUH	Closure of housing projects in need of rehabilitation			(61,399)		(61,399)	(323,660)	Effective: February 1, 2009, Buildings which house the Restoration House Program and La Casa Mariposa are in serious disrepair. DPH staff will work to ensure that clients are successfully transitioned into other appropriate housing.	10. Substitution of less expensive service.

F12	HUH	Elimination of funding for the Crisis Response Team/SFGH Emergency Housing Program		(151,884)	(151,884)	(364,042)	Effective: February 1, 2009. Elimination of funding for the CRT/SFGH Emergency Housing Program - Kean Hotel is in poor condition and New Medical Respite can provide more comprehensive treatment. Effective: February 1, 2009. BOS Restoration. Reduction of General Fund support for programs that provide outreach and advocacy support for residents of single room occupancies.	10. Substitution of less expensive service.
F13	HUH	SRO Collaborative		(148,828)	(148,828)	(357,187)	Effective: January 1, 2009. BOS Restoration. Primary Care funding for Bayview Hunter's Point Adult Day Care. Provides therapeutic, outreach and primary care services targeting frail elders and disabled clients in the Bayview Hunter Point, Potrero Hill, and Visitation Valley neighborhoods.	14. \$750,000 in funding from fees collected by the Department of Building Inspection remain for these advocacy services.
F14	PC	Medical Patch for Adult Day Health Center		(20,000)	(20,000)	(40,000)	Effective: January 1, 2009. BOS Restoration. Primary Care funding for Bayview Hunter's Point Adult Day Care. Provides therapeutic, outreach and primary care services targeting frail elders and disabled clients in the Bayview Hunter Point, Potrero Hill, and Visitation Valley neighborhoods.	10. Substitution of less expensive service—we do not patch Medi-cal rates for other adhc programs.
F15 - Revised	PC	Primary Care Reduction - Medically Indigent Adults		(141,700)	(141,700)	(283,400)	Effective: January 1, 2009. Contractors are Health San Francisco providers (HSF) and receive HSF reimbursements to replace General Fund.	14. These services are also being supported by funds from HSF.
F16 - Revised	PC	Primary Care Reduction		(104,759)	(104,759)	(209,517)	Effective: January 1, 2009. With HSF, and the need to improve health outcomes, provide continuity of care, access and improve efficiencies, most DPH-Primary Care services are now provided within medical homes. Medical homes provide care that is consistent, comprehensive and continuous. These contractors provide services that are episodic and hence no longer meet the scope and direction of primary care services delivery.	13. Our strategic plan is to link all our services to primary care homes.
F17	SFGH	Conversion of One 21 Bed Acute Psych Unit to a Non-Acute Unit	(0.45)	(139,902)	(139,902)	(559,808)	Effective: April 1, 2009. By reducing the level of care for these patients, the mandatory nursing ratios would no longer apply. We would need to obtain non-acute waiver for these beds. Details of obtaining the waiver and requirements are pending and would require approval from the State.	9, 10 and 12. Mandated service can be provided at a lower expense, but we would not move forward if it jeopardized the licensing.
F18 - Revised	SFGH	Convert all CNAs to Nursing Care Assistants for all units except SNF and BHC		(169,893)	(169,893)	(879,571)	New Effective Date: April 1, 2009. Conversion of Certified Nursing Assistants (CNAs) to Nursing Care Assistants at San Francisco General Hospital except for Skilled Nursing Facility and the Behavioral Health Center. Nursing Care Assistants would be oriented to inpatient areas and assist nurses in providing direct patient care (e.g. bathing, toileting, ambulating, feeding, vital signs, close observation). Making this change will also allow flexibility in providing services and allow staff to be temporarily assigned to the Emergency and other outpatient areas as needed.	9 and 12. Mandated service can be provided at a lower expense, but we would not move forward if it jeopardized the licensing.
F19	SFGH	Convert EKG Technician to Medical Evaluation Assistant (MEA)		(6,344)	(6,344)	(15,225)	Effective: February 1, 2009. BOS Restoration. Convert remaining 1.00 FTE EKG Tech to a 1.00 FTE MEA with annual GF savings of \$15,225.	10. Substitution of less expensive service.
F20	Dept. Wide	Security Outsource		(895,497)	(895,497)	(3,581,988)	Effective: April 1, 2009. BOS Restoration. All security services at DPH hospitals and clinics will be outsourced. Additional savings would also be achieved by the Sheriff as deputies are redeployed to the jails. Law enforcement occur in Sheriff's Department.	10. Substitution of less expensive service.
F21	Dept. Wide	Management Reductions and Efficiencies	(2.08)	(250,000)	(250,000)	(800,000)	Effective: February 1, 2009. We are reviewing our operations to increase efficiency so we can further protect direct services. As these strategies are still being identified, no summary is available.	3. Prioritize services for vulnerable populations.
F22	Dept. Wide	Elimination of vacant positions	(24.00)			(1,920,000)	Vacant positions are being held in current year. 08-09 Savings will be applied towards DPH's balancing plan to close its projected \$25 million shortfall. These positions will be deleted for ongoing savings, as part of DPH's 09-10 budget submission. Positions are being identified, no summary is available at this time.	3. Prioritize services for vulnerable populations.
F23	CBHS	Walden House					Effective: February 1, 2009. Given the complex set of issues impacting funding for youth residential treatment placement, the closure recommendation is the only alternative available to the department and the contractor to be fiscally accountable. If this program were to continue, additional funds beyond what has been budgeted in the current year will need to be made available. No savings in current year or budget year.	10. Substitution of less expensive service.
F24 - NEW	LHH	Closure of Adult Day Health Center at LHH	(6.10)	(571,283)	(395,451)	(175,832)	Effective: February 1, 2009. This initiative proposes to temporarily suspend the Adult Day Health Care (ADHC) services at LHH effective Feb 1, 2009 until further notice. The suspension also applies to the two sub-programs under ADHC: Alzheimer's Day Care Resource Center (ADCRC) and Senior Nutrition Program (SNP).	14. ADHC's exist in the community without a general fund supplemental.

F25 - NEW	HAH	Health at Home	(3.22)	(7.73)	(450,246)	(45,724)	(404,521)	(970,852)	Effective: February 1, 2009. BOS addback. Reduction of 30% of the HAH licensed home health agency budget, decreasing nursing management, RN field and non-field staff, Public Health nurse, nurse practitioner, home health aide and other administrative support necessary to provide services to clients needing acute, skilled clinical services in the home. Effective: Immediately Jail Health Services will eliminate 30 vacant Registered Nurse positions that were funded to staff additional Pods at C.I.5 and will include a reduction to Jail Psychiatric Services (JPS) contract with Jail Health Services in the amount of \$6,034.	8. Moderate priority reduction. 70% of the service still remains.
F26 - NEW	JH	Jail Health	(3.00)	(3.00)	(245,000)		(245,000)	(513,025)		9. Fulfill legally mandated functions at lower cost
F27 - NEW	SFGH	5% cut to UC Affiliation Agreement	(2.08)	(5.00)	(1,301,367)		(1,301,367)	(2,663,087)	Effective: January 1, 2009. This initiative will reduce the UCSF Affiliation Agreement by \$1,301,367 in FY 08-09, which represents 1.5% of the Affiliation Agreement budget. This reduction will be achieved primarily by eliminating positions in several departments, not filling vacant positions in the clinical laboratories and several sub-specialty areas, and delaying recruitment of various facility positions. Further reductions are likely to involve clinical service cuts, which will impact patient care and might have an effect on the teaching programs.	9. Fulfill legally mandated functions at lower cost
F28 - NEW	SFGH	Medical High User Program	(2.08)	(5.00)	(263,335)	(111,334)	(152,001)	(364,802)	Effective: February 1, 2009. This initiative will eliminate the Medical High User Program effective February 1, 2009. This program was targeted for "frequent users" (3 or more hospitalizations in one year) of very expensive acute inpatient services at SFGH. Social Worker Case Managers provide a full spectrum of community based support services with the goal of keeping these frequent users healthy and out of the hospital.	14. Program reliant on general fund, will substitute case management.
F29 - NEW	SFGH	Close the 4C Clinic on Holidays	(0.08)	(0.40)	(17,010)	(3,606)	(13,402)	(39,952)	Effective: January 20, 2009. The 4C clinic can eliminate services on all holidays and still provide safe, quality care to all patients. Patients will be seen prior to or after the holidays. The number of patients seen on holidays is approximately 25% of the number seen on other days.	10. Substitution of less expensive service.
F30 - NEW	HUH	Termination of Contracted Case Management Services at Two Housing Sites and Replaced With Medical Billable Staff			(272,721)		(272,721)	(654,530)	Effective: February 1, 2009. Contracted support services at two Direct Access to Housing sites (Pacific Bay Inn and LeMain Hotel) provided by existing CPH clinical staff who can bill Medical for their services.	10. Substitution of less expensive service.
F31 - NEW	CBHS	Reductions Community Behavioral Health Contracts			(4,795,526)	(19,540)	(4,775,986)	(11,462,370)	Effective: February 1, 2009. Due to the need for severe budget cuts, an across-the-board 5% reduction is being applied to behavioral health contracts except for drug maintenance outpatient which will receive a 25% reduction and substance outpatient will be reduced by 50%. This reduction methodology will shrink but not eliminate service modalities, thus preserving a system of care which could more easily be restored to current levels should future funding increases become available.	9. Fulfill legally mandated functions at lower cost
F32 - NEW	CBHS	5% reduction in CBHS civil service clinics	(7.06)	(16.94)	(747,522)	(391,667)	(355,855)	(766,136)	Due to the need for severe budget cuts, an across-the-board reduction is being applied. This reduction methodology will shrink, but not eliminate service modalities, thus preserving a system of care, which could more easily be build back should future funding become available.	9. Fulfill legally mandated functions at lower cost
F33 - NEW	SFGH	Convert Unit Clerks to Clerks in Certain Outpatient Areas			(189,632)		(189,632)	(455,116)	Effective: February 1, 2009. Making this change would reduce costs and not compromise patient care. This change is consistent with the community based outpatient clinics.	10. Substitution of less expensive service.
F34 - NEW	SFGH	Convert RNs in Certain Outpatient Clinics to LVNs and MEAs	(0.63)	(1.50)	(699,439)		(699,439)	(1,438,653)	Effective: February 1, 2009. In the outpatient areas where there are no treatments, procedures and urgent care services, it is more cost effective to use lower level LVNs and MEAs to support the clinical operations. Patient care will not be compromised.	10. Substitution of less expensive service.
F35 - NEW	SFGH	Inpatient LVN Reduction	(6.08)	(14.60)	(523,966)		(523,966)	(1,257,517)	Effective: February 1, 2009. This initiative would eliminate Licensed Vocational Nurses working in the inpatient areas.	12. State nursing requirements do not recognize LVNs.
F36 - NEW	CBHS	Clinic Co-location and Care Coordination			(35,000)		(35,000)	(293,005)	Effective: June 1, 2009. Three clinics will be relocated to other existing clinics and services for both will be coordinated. Center for Special Problems will be integrated with Tom Wadell Health Center. Southeast Children's Services Mission Campus will be integrated with Silver Avenue Family Health Center. Team II will be integrated with Castro Mission Health Center.	10. Substitution of less expensive service. The co-location will achieve coordinate care, resulting in efficiencies without significant reduction in service.
		TOTAL REDUCTIONS	(37.20)	(109.57)	(15,607,380)	(987,324)	(14,640,056)	(37,255,582)		
		GRAND TOTAL REVENUE AND REDUCTIONS	(74.41)	(219.15)	(15,607,380)	2,055,176	(17,662,556)	(40,300,582)		

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☒ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: Community Behavioral Health Services – Substance Abuse

PROGRAM CONTACT NAME/PHONE: **Bob Cabaj, 255-3447**PROGRAM / INITIATIVE TITLE: **Behavioral Health Outpatient Reduction**GENERAL FUND: **\$245,834 General Fund Reduction in FY08_09****\$536,365 General Fund Reduction in FY09_10**

TARGETED CLIENTS: Adults with behavioral health disorders

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Funding for nine CBHS-funded outpatient programs will be eliminated under this mid-year initiative. The affected Agencies/Programs and the General Fund savings in FY08_09 and FY09_10 are as follows:
Family Services Agency, Geriatrics Post St. Intensive Case Management: FY08_09 - \$70,934; FY09_010 - \$154,765

Family Services Agency, Geriatrics Gough St.: FY08_09 - \$80,071; FY09_010 - \$174,700

Westside Comm. Mental Health, Alliance Outpatient: FY08_09 - \$94,829; FY09_10 - \$206,900

JUSTIFICATION: (required by the Mayor's Office)

The need for multiple, large, free-standing outpatient treatment programs has been reduced in the past year, as planned, by the implementation and growth of Health San Francisco (HSF). HSF now provides a primary health care home for most indigent San Franciscans, and provides a starting place to assess and address any of the individual's health needs. Although many individuals who need ongoing specialty mental health or substance abuse treatment will be referred to community providers, much of the work of screening, assessment, routine medication, and even supportive counseling will be done within the community oriented primary care centers as part of integrated care.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

This initiative will result in the reduction of services to 155 unduplicated clients with an equivalent loss of 5,138 units of service.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This initiative will result in General Fund savings in the Medical Services Contract line as follows:
HMHMCC730515: FY08_09: \$245,834; FY09_10: \$536,365

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

There is no impact on the Department's workforce.

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☒ CBHS - Mental Health
☒ CBHS - Substance Abuse
☐

DPH SECTION: Community Behavioral Health Services – Substance Abuse

PROGRAM CONTACT NAME/PHONE: **Bob Cabaj, 255-3447**

PROGRAM / INITIATIVE TITLE: **Behavioral Health Outreach Reduction**

GENERAL FUND: **\$699,582 General Fund Reduction in FY08_09**

\$1,526,360 General Fund Reduction in FY09_10

TARGETED CLIENTS: Adults with Substance Abuse Addictions and Adults with Mental Health Disorders

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Funding for ten CBHS-funded Mental Health and Substance Abuse Outreach programs will be eliminated under this mid-year initiative. Additionally, the General Fund supplement for nine Substance Abuse Primary Prevention programs currently funded by the Federal Substance Abuse Prevention and Treatment Block Grant will be eliminated. The affected Agencies/Programs and the General Fund savings in FY08_09 and FY09_10 are as follows:

Richmond Area Multi-Services, Outreach - FY08_09: \$11,408; FY09_10: \$24,890

SF Study Center, Office of Self Help - FY08_09: \$68,869; FY09_10: \$150,260

SF Study Center, Socialization Through Empowering Peer - FY08_09: \$23,364; FY09_10: \$50,975

SF Study Center, Center for Special Problems - FY08_09: \$10,201; FY09_10: \$22,256

SF Study Center, Southeast Jobs Initiative Roundtable - FY08_09: \$8,122; FY09_10: \$17,720

Bayview Hunters Point Foundation, Family Center Outreach - FY08_09: \$158,897; FY09_10: \$346,685

Caduceus, Outreach Services - FY08_09: \$160,417; FY09_10: \$350,000

Larkin Street, Homeless Youth Outreach - FY08_09: \$93,789; FY09_10: \$204,631

National Council on Alcoholism, Information Center - FY08_09: \$52,735; FY09_10: \$115,059

Japanese Community Youth Council, Asian Youth Prevention Services - FY08_09: \$47,048; FY09_10: \$102,651

San Francisco Pre-Trial Prevention – Substance Abuse Referral Unit - FY08_09: \$32,300; FY09_10: \$70,472

Asian American Recovery Services, COPASSA Prevention - FY08_09: \$4,431; FY09_10: \$9,667

Bayview Hunters Point Foundation, Youth Prevention - FY08_09: \$1,664; FY09_10: \$3,631

Center on Human Development, Youth Striving for Excellence - FY08_09: \$2,274; FY09_10: \$4,961

National Council on Alcoholism, Youth Services - FY08_09: \$1,780; FY09_10: \$3,884

Westside Community Mental Health, Youth Aware Prevention - FY08_09: \$1,782; FY09_10: \$3,887

Youth Leadership Institute, Friday Nite Live - FY08_09: \$4,051; FY09_10: \$8,838

YMCA, Urban Services Prevention - FY08_09: \$16,451; FY09_10: \$35,893

JUSTIFICATION: (required by the Mayor's Office)

S:\Budget Folder\budget\FY 2008-09\08-09 Mid Year Reductions\November Mid-year Reductions\Write Up Summaries\Draft Summaries for HC 112108\Final Drafts - Jen working\CBHS\Behavioral Health Outreach Reduction.doc
11/24/08 4:28 PM

The need for multiple, small outreach projects has been reduced over the past year. The creation of Healthy San Francisco has generated wide publicity and outreach, bringing new individuals into treatment and coordinating the care of many who already received some services piecemeal. Healthy San Francisco now provides a primary health care home for most indigent San Franciscans, which creates a steady stream of individuals needing specialty mental health and substance abuse treatment to community treatment providers.

The consolidation of the Homeless Outreach Team and the MOST Team into 'SF First' provides a single, large, coordinated outreach unit focused on engaging populations identified as the top priority by the Department.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

This initiative will result in the reduction of outreach services to 1,234 unduplicated clients with an equivalent loss of 21,167 units of service.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This initiative will result in General Fund savings in the Medical Services Contract line as follows:

HMHSCCRES227: FY08_09: \$258,305; FY09_10: \$563,574

HMHMCC730515: FY08_09: \$650,317; FY09_10: \$1,418,873

HMHMCP751594: FY08_09: \$11,408; FY09_10: \$24,890

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

There is no impact on the Department's workforce.

258,305	563,574
429,869	937,896
11,408	24,890
699,582	1,526,360

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☒ AIDS Office HIV Prevention Section

DPH SECTION: AIDS Office - HIV Prevention

PROGRAM CONTACT NAME/PHONE: Dr. Grant Colfax 554-9173

PROGRAM / INITIATIVE TITLE: HIV Prevention Programs

GENERAL FUND: \$1,131,720 (midyear reduction)

TARGETED CLIENTS: Residents of San Francisco who are at high risk for HIV.

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

HIV Prevention programs are guided by the priorities of the HIV Prevention Planning Council (HPPC). The HIV Prevention Section works closely with the HPPC to establish and implement programs reaching the highest risk populations. To manage the General Fund reduction, the HPS maintained the HPPC priorities to focus funding on gay men and other men who have sex with men, transgendered populations at risk, and injection drug users. Less funding is targeted to lower risk populations, such as females who sex with men and males who have sex with females. HPS proposes a cut across all programs, grant-funded and General Fund with the exception of syringe exchange programs which will be held harmless. Programs will then largely be funded on grants to address the General Fund reduction. Syringe exchange programs will be maintained at current funding level because of the evidence that demonstrates the effectiveness of these programs in preventing HIV transmission among injection drug users and their partners. The low rate of HIV among heterosexual populations in San Francisco is often attributed to the early and continuous support of syringe access programs.

Additionally, the HPS will receive a reduction of \$144,000 in State Office of AIDS funding, also midyear 2008-09, therefore, the total amount of reduction to HIV prevention programs will be increased by the State funding cut.

The HIV Prevention Section met with the HPPC Steering Committee to review budget reduction proposals, HPPC members expressed concerns about eliminating funding for heterosexual men and women entirely. In order to be responsive to this feedback, and also maintain HPPC commitment to preserving as much funding as possible for higher risk populations, we plan to achieve the \$1.1 million mid-year cut with the following compromise:

1. \$75,000 (addback) to St. James Infirmary is eliminated.
2. The remaining \$1,056,720 will be reduced with the following methodology:
 - Hold syringe exchange programs harmless
 - Reduce funding allocation for behavioral risk populations 7 (females who have sex with males [FSM]) and 8 (males who have sex with females [MSF]):
 - Reduce funding for FSM from the current 6% to 3%, in accordance with the HPPC funding recommendations.
 - Reduce funding for heterosexual men (males who have sex with females - MSF) from the current 4% to 0.9%, in accordance with the HPPC funding recommendations.
 - Achieve the remainder of the cut by reducing all other program funding by the necessary percentage.

JUSTIFICATION: (required by the Mayor's Office)

To maintain the HIV prevention priorities of the HPPC, a reduction was made across all HIV prevention programs, with the exception of syringe access programs. Syringe access programs are demonstrated effective in preventing the transmission of HIV among injection drug users, a vulnerable and high risk population. Early support in San Francisco for syringe access programs has lessened the impact of HIV on injection drug users and their partners and may contribute to the low rates of HIV among heterosexual populations. Therefore these programs will be held harmless. Both grant-funded and city funded programs are cut, therefore, programs currently on General Fund will be moved to grant-funded to account for the budget reduction.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Approximately 20,814 client contacts will be eliminated if funding is not restored.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

(\$1,131,720) General Fund Reduction
(\$144,000) State Office of AIDS reduction to San Francisco

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Positions are still be identified, but 1.0 FTE reduction expected in 08-09.

**2008-2009 Program Change Request
Mid-Year Reduction**

DEPARTMENT NAME:

- | | |
|---|--|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> Mental Health |
| X Primary Care | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Jail Health | <input type="checkbox"/> |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Primary Care

PROGRAM CONTACT NAME/PHONE: Marcellina Ogbu/255-3524

PROGRAM / INITIATIVE TITLE: **Reduction in Primary Care Community Program – Medically Indigent Adult Providers**

GENERAL FUND: **(\$141,700)**

TARGETED CLIENTS: Women, children and adults requiring culturally/gender/language sensitive services or substance abuse services.

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The proposed initiative will reduce Primary Care services provided through contracts by Mission Neighborhood Health Center (\$75,000), Lyon Martin (\$38,853), and Haight-Ashbury (\$27,846) .

JUSTIFICATION: (required by the Mayor's Office)

Contractors are Health San Francisco providers (HSF) and receive HSF funding to serve also HSF participants who are medically indigent adults.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

For FY0809 elimination of this funding will impact 776 visits and 261 unduplicated clients (Mission Neighborhood), 1,350 visits and 500 unduplicated clients (Haight-Ashbury) and 345 visits and 132 unduplicated clients (Lyon Martin). For FY0910, elimination of this funding will impact 1,553 visits and 522 unduplicated clients (Mission Neighborhood); 2700 visits and 1,047 unduplicated clients (Haight-Ashbury) and 790 visits and 264 unduplicated clients (Lyon Martin). Contractors above participate in Healthy San Francisco (HSF) as primary care medical homes serving medically indigent adults. Clients will be able to receive services under HSF.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Reducing professional services expense by \$141,700 effective January 1, 2009 and by \$283,400 ongoing.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

None

**2008-2009 Program Change Request
Mid-Year Reduction**

DEPARTMENT NAME:

- | | |
|---|--|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> Mental Health |
| X Primary Care | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Jail Health | <input type="checkbox"/> |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Primary Care

PROGRAM CONTACT NAME/PHONE: Marcellina Ogbu/255-3524

PROGRAM / INITIATIVE TITLE: **Reduction in Primary Care Community Program**

GENERAL FUND: **(\$104,759)**

TARGETED CLIENTS: Women requiring specialized and sensitive services.

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The proposed initiative will terminate the contract to provide specific family planning and women services by Women's Community Health Clinic (Tides) (\$104,759).

JUSTIFICATION: (required by the Mayor's Office)

With HSF, and the need to improve health outcomes, provide continuity of care, access and improve efficiencies, most DPH-Primary Care services are now provided within medical homes. Medical homes provide care that is consistent, comprehensive and continuous. The above contractor is not a full scope primary care medical home and provide services that are episodic and hence no longer meet the scope and direction of primary care services delivery (HSF).

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

For FY0809, elimination of this funding will impact 1,002 unduplicated clients and 2,350 visits (Women's Community Health Clinic). For FY0910, elimination of this funding will impact 2,004 unduplicated clients and 4,700 visits (Women's Community Health Clinic).

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Reducing professional services expense by \$104,759 effective January 1, 2009 and by \$209,517 ongoing.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

None

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Sue Currin/206-6761

PROGRAM / INITIATIVE TITLE: **Convert Certified Nursing Assistants (CNAs) to Nursing Care Assistants.**

GENERAL FUND: (\$169,893)

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Convert Certified Nursing Assistants to Nursing Care Assistants at San Francisco General Hospital except for Skilled Nursing Facility and the Behavioral Health Center.

JUSTIFICATION: (required by the Mayor's Office)

To save City money without compromising the standard of care. There are no regulatory requirements mandating the use of Certified Nursing Assistants except at the Behavioral Health Center and 4A-Skilled Nursing Facility. Nursing Care Assistants would be oriented to inpatient areas and assist nurses in providing direct patient care (e.g. bathing, toileting, ambulating, feeding, vital signs, close observation). Making this change will also allow flexibility in providing phlebotomy services and allow staff to be temporarily assigned to the Emergency and other outpatient areas as needed.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This would reduce salary and fringe expense by \$169,893 for FY0809 if fully implemented by April 1, 2009. The savings would increase to \$679,571 for FY 2009 - 2010.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

It is estimated that 88 Certified Nursing Assistants or 79.8 FTEs would be laid off if implemented.

**2008-2009 Program Change Request
(Mid-Year Reduction)**

DEPARTMENT NAME:

- | | |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input checked="" type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Mental Health |
| <input type="checkbox"/> Primary Care | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health | <input type="checkbox"/> |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: LAGUNA HONDA HOSPITAL (LHH)

PROGRAM CONTACT NAME/PHONE: John Kanaley, 759-2363

PROGRAM / INITIATIVE TITLE: **LHH Adult Day Health Care (ADHC) Suspension
(effective Feb 1, 2009)**

GENERAL FUND: (\$175,832)

TARGETED CLIENTS: Laguna Honda ADHC Patients and Clients

PROGRAM DESCRIPTION: (Description of Program Change)

This initiative proposes to temporarily suspend the Adult Day Health Care (ADHC) services at LHH effective Feb 1, 2009 until further decision. The suspension also applies to the two sub-programs under ADHC: Alzheimer's Day Care Resource Center (ADCRC) and Senior Nutrition Program (SNP).

JUSTIFICATION:

The cost to run the ADHC is higher than the revenues generated from both Medi-Cal claims and Human Services' Grants combined. By closing the center, we will realize a saving in the City's general funds support.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The numbers of patients currently enrolled in the programs are: 91 for ADHC, 12 for ADCRC, and 65 for SNP. The average daily attendances have been around 40-50 at ADHC, 7 for ADCRC, and 35 for SNP. All three programs operate on weekdays only. These patients would have to find other private day care facilities in the community if we close the programs.

EXPENSE AND REVENUE IMPACT

This initiative decreases General Fund support requirements by \$175,832 in FY08-09. Budget support for base salary and fringe benefits will be reduced by \$546,901. Budget support for supplies and services will be reduced by \$24,382. These reduced costs for labor, supplies, and services will be partially offset by a loss of \$395,451 in revenue and grants for the ADHC programs. These amounts reflect 42% (five months) of the effect for a full fiscal year.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

This initiative reduces the budgeted workforce at LHH by 6.1 FTE for Fiscal Year 2008-2009, and this annualizes to 14.6 FTEs for subsequent fiscal years.

**2008-2009 Program Change Request
Mid-Year Reduction**

DEPARTMENT NAME:

- | | |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Mental Health |
| <input type="checkbox"/> Primary Care | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Health At Home | |

DPH SECTION: Health At Home

PROGRAM CONTACT NAME/PHONE: Kathy Eng/206-6941

PROGRAM / INITIATIVE TITLE: **Reduction of Health At Home Program (effective Feb. 1, 2009)**

GENERAL FUND: **(\$404,522)**

TARGETED CLIENTS: Homebound clients requiring acute, skilled services by the DPH licensed home health agency

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Reduction of 30% of the HAH licensed home health agency budget, decreasing nursing management, RN field and non-field staff, Public Health nurse, nurse practitioner, home health aide and other administrative support necessary to provide services to clients needing acute, skilled clinical services in the home. Use of RN's in office, after-hours, and on-call will be restructured to handle part of the reduction in RN staffing.

JUSTIFICATION: (required by the Mayor's Office)

Cuts are due to the City budget deficit

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

935 home visits will be eliminated to 49 unduplicated clients in FY 08/09. 2,244 home visits will be eliminated to 118 unduplicated clients in FY 09/10.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Labor expenses total \$444,936, Operating expenses total \$5,310 and Revenue Loss totals \$45,724. Total General Fund Savings = \$404,522 in FY 08/09.

Labor expenses total \$1,067,846, Operating expenses total \$12,744 and Revenue Loss totals \$109,738. Total General Fund Savings = \$970,852 in FY 09/10.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Decreasing by 3.22 FTEs in FY 08/09 and by 7.73 FTEs annually.

**2008-2009 Program Change Request
Mid-Year Reduction**

DEPARTMENT NAME:

- | | |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Mental Health |
| <input type="checkbox"/> Primary Care | <input type="checkbox"/> CBHS - Substance Abuse |
| <input checked="" type="checkbox"/> Jail Health | <input type="checkbox"/> |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Jail Health Services

PROGRAM CONTACT NAME/PHONE: Frank Patt/415-995-1717

PROGRAM / INITIATIVE TITLE: **Jail Health Services Reduction (January 1, 2009)**

GENERAL FUND: (\$245,000)

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Jail Health Services FY 08-09 Mid Year reduction will eliminate 3.0 vacant Registered Nurse positions that were funded to staff additional Pods at CJ 5 and will include a reduction to Jail Psychiatric Services (JPS) contract with Jail Health Services in the amount of \$6,034.

JUSTIFICATION: (required by the Mayor's Office)

Reductions taken in order to meet FY 08-09 Mid Year Departmental target.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

No impact.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

A total reduction in general fund in the amount of \$245,000 in FY 08-09 and \$513,025 ongoing.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Decrease by 3.0 FTEs (vacant positions) in FY 08/09 and 3.00 FTEs ongoing.

**2008-2009 Program Change Request
Mid-Year Reduction****DEPARTMENT NAME:**

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Valerie Inouye 206-3599

PROGRAM / INITIATIVE TITLE: **Reduction to UCSF Affiliation Agreement**GENERAL FUND: **(\$1,301,367) reduction in FY 08-09**

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

This initiative will reduce the UCSF Affiliation Agreement by \$1,301,367 in FY 08-09, which represents 1.5% of the Affiliation Agreement budget. This reduction will be achieved primarily by eliminating positions in several departments, not filling vacant positions in the clinical laboratories and several sub-specialty areas, and delaying recruitment of various faculty positions.

The items that are identified for reduction in FY 08-09 translate to savings of \$2,663,087 in FY 09-10. The target is to achieve a 5% reduction in the UCSF Affiliation Agreement in FY 09-10 (\$4.3 million). Hospital Administration is working on identifying additional reductions to achieve this target. Further reductions are likely to involve clinical service cuts, which will impact patient care and might then have an affect on the teaching programs.

JUSTIFICATION: (required by the Mayor's Office)

These reductions support our budget principles and do not impact vulnerable populations.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Current wait times in sub specialty clinics will not improve. Two of the positions being eliminated are nurse midwives, and therefore, requests for delivery using a nurse midwife may not be accommodated.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

No impact on revenue. Non personal services will be reduced by \$1,301,367 in FY 08-09 and \$2,663,087 in FY 09-10.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

None

2008-2009 Program Change Request
Mid-Year Reduction

DEPARTMENT NAME:

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☒ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Roland Pickens

PROGRAM / INITIATIVE TITLE: **Elimination of Medical High User Program**

GENERAL FUND: **(\$152,001)**

TARGETED CLIENTS: Frequent Users of Inpatient Services

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

This initiative will eliminate the Medical High User Program effective February 1, 2009. This program was targeted for "frequent users" (3 or more hospitalizations in one year) of very expensive acute inpatient services at SFGH. Social Worker Case Managers provide a full spectrum of community based support services with the goal of keeping these frequent users healthy and out of the hospital.

JUSTIFICATION: (required by the Mayor's Office)

Case Management functions will be coordinated by DPH clinic based Case Managers.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The program maintains a patient case load of 30 patients at any point in time.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Revenues will decrease by \$111,334 and expenses will decrease by \$263,335 the first year.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

2.08 FTE's would be eliminated the first year with this program change.

2008-2009 Program Change Request
Mid Year Reductions

DEPARTMENT NAME:

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital
PROGRAM CONTACT NAME/PHONE: Sue Currin
PROGRAM / INITIATIVE TITLE: **Close the 4C Clinic on Holidays**
GENERAL FUND: **(\$13,401) reduction**

TARGETED CLIENTS: Patients needing infusion and wound care

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The 4C clinic provides infusion and wound care 7 days a week including holidays. This initiative proposes to close the 4C clinic on all holidays.

JUSTIFICATION: (required by the Mayor's Office)

The 4C clinic can eliminate services on all holidays and still provide safe, quality care to all patients. Patients will be seen prior to or after the holidays. The number of patients seen on holidays is approximately 25% of the number seen on other days.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

There is no impact on the number of clients and units of service provided.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Revenues will decrease by \$3,608 and expenses will decrease by \$17,010 in the first year.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

0.08 FTE's will be reduced in the first year.

2008-2009 Program Change Request (Mid-Year)**DEPARTMENT NAME:**

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☒ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: HUH

PROGRAM CONTACT NAME/PHONE: Marc Trotz / 554-2565

PROGRAM / INITIATIVE TITLE: **Termination of Contracted Case Management Services at Two Housing Sites and Replaced With MediCal Billable Staff.**

GENERAL FUND: (\$272,721) FY8/09 and (\$654,530) FY09/10

TARGETED CLIENTS: Formerly Homeless Individuals

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Episcopal Community Services currently has a contract to provide support services a two Direct Access to Housing sites (Pacific Bay Inn and LeNain Hotel). The proposal includes terminating this contract as of February 1, 2009 and utilizing existing DPH clinical staff who can bill MediCal for their services.

JUSTIFICATION: (required by the Mayor's Office)

The acuity of clients being placed in community base housing has increased and therefore requires an enhanced level of clinical care and oversight. Additionally, by utilizing DPH staff, the department will be able to bill MediCal for services provided.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

There would be no impact on the number of clients served.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

General fund will be reduced by (\$272,721) in FY08/09 and (\$654,530) in FY09/10.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

N/A

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☒ CBHS - Mental Health
☒ CBHS - Substance Abuse
☐

DPH SECTION: Community Behavioral Health Services – Substance Abuse

PROGRAM CONTACT NAME/PHONE: **Bob Cabaj, 255-3447**

PROGRAM / INITIATIVE TITLE: **Overall Reduction of General Fund Dollars to Community Behavioral Health Contractors.**

GENERAL FUND: **\$4,795,528 General Fund Reduction in FY08_09 Less Revenue Loss of \$19,540**
\$11,509,266 General Fund Reduction in FY09_10 Less Revenue Loss of \$46,896

TARGETED CLIENTS: San Francisco Residents with Substance Abuse Addictions and/or Mental Health Disorders

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Department proposes to apply across the board reduction of General Funds for Community Behavioral Health (CBHS) contractors. **This reduction will become effective February 1, 2009, thus the percentage applied against 5/12th (41.6%) of General Funds for FY08_09**

Modality Percentages:

Alcohol/Drug non-methamphetamine outpatient 50%

Alcohol/Drug methamphetamine outpatient 25%

All other CBHS modalities 5%

This will be annualized in FY09_10. Excluded from these reductions were CBHS contractors' programs that were subject to larger cuts in the CBHS Outpatient and Outreach Reductions per Initiative Items F2 and F3 of the November 12, 2009 Mid-Year Reductions spreadsheet, and those that would lose Medi-Cal or other pass-through revenue on a dollar-for-dollar basis.

To implement these savings in the most economical and efficient manner, the Department will work with its contractors to determine the most suitable plan to minimize the reduction in unduplicated clients served, but at the same time keep their administrative infrastructures intact.

JUSTIFICATION: (required by the Mayor's Office)

Due to the need for severe budget cuts, an across-the-board reduction is being applied. This reduction methodology will shrink but not eliminate service modalities, thus preserving a system of care which could more easily be restored to current levels should future funding increases become available. A larger percentage cut was applied to Alcohol and Drug Outpatient, for which there are more readily available, free, effective, community based alternatives, such as peer recovery projects, self-help and 12 step programs.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The number of clients impacted by this initiative is not known at this time because many clients receive an array of services delivered by multiple Community Programs sections and in multiple agencies and because Contractors may not allocate 100 percent of the reduction to direct services.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This initiative will result in General Fund savings in the Medical Services Contract line as follows:

HMHMCC730515: FY08_09 - \$1,858,830; FY09_10 - \$4,461,191

HMHMCP751594: FY08_09 - \$520,308; FY09_10 - \$1,248,740

HMHSCCRES227: FY08_09 - \$2,416,390, FY09_10 - \$5,799,335

The initiative will result in the loss of revenue as follows:

HMHMO48041: FY08_09 - \$19,540; FY09_10 - \$46,896

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

There is no impact on the Department's workforce.

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☒ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: Community Behavioral Health Services

PROGRAM CONTACT NAME/PHONE: Bob Cabaj

PROGRAM / INITIATIVE TITLE: **5% reduction in CBHS civil service clinics**

GENERAL FUND:

Adult/Older Adult :	\$527,736 mid-year;	\$1,266,566 annualized
CYF:	\$219,786 mid-year;	\$439,572 annualized
Total Reduction:	\$747,522 mid-year;	\$1,706,138 annualized
Estimated Revenue	(\$391,667) mid-year;	(\$940,000) annualized
Net General Fund Saving	\$355,855 mid-year	\$766,138 annualized

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Service delivery through CBHS civil service clinics will change in several significant ways. The focus will be primarily providing clinical case management and medication management for clients to prevent use of higher levels of care. Psychotherapy sessions will be limited to situations that are medically necessary and will be provided using evidence-based interventions; except when medical necessity indicates a greater need, no more than twenty (20) sessions will be allowed, to be consistent with services allowed under Healthy San Francisco (HSF). Clients who can be managed by primary care providers will be referred to primary care. CBHS will continue to provide consultation to primary care providers and can provide services directly if the primary care provider determines that need. These reductions and changes in services will allow a 5% reduction in the workforce across all the CBHS civil service clinics and programs. There will be revenue losses due to the different service provision categories, and there should be revenue offsets with services that can be billed through the primary care provider system.

The revenue loss will be most acute with general fund leveraged for Federal Financial Participation (Medi-Cal & Medi-Care). For adult/older adult services, the local general fund match is 50% of the cost of services. For children/youth and family services, the local general fund match is only 10% of the cost of services.

JUSTIFICATION: (required by the Mayor's Office)

Due to the need for severe budget cuts, an across-the-board reduction is being applied. This reduction methodology will shrink, but not eliminate service modalities, thus preserving a system of care, which could more easily be build back should future funding become available.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The amount of clients impacted by this initiative is not known at this time. The formula for estimating the number of clients not being served per FTE reduction is 60 clients annually per FTE clinician position.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

For five months, the decrease in workforce will be as follows:

For Adult/Older Adult services: Total of 5.35 FTE

(0.42 FTE 1426, 0.42 FTE 1426, 0.42 FTE 1426, 0.13 FTE 2232, 0.42 FTE 2305, 0.42 FTE 2305, 0.42 FTE 2566, 0.29 FTE 2574, 0.42 FTE 2588, 0.42 FTE 2593, 0.35 FTE 2930, 0.42 FTE 2931, 0.42 FTE 2932, 0.42 FTE 2935)

For CYF services, Total of 1.71 FTE

(0.25 FTE 2232, 0.42 FTE 2587, 0.42 FTE 2587, 0.42 FTE 2588, 0.21 FTE 2930)

**2008-2009 Program Change Request
Mid Year Reductions****DEPARTMENT NAME:**

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Sue Currin/206-6761

PROGRAM / INITIATIVE TITLE: **Convert Unit Clerks to Sr. Clerks in Certain Outpatient Areas**

GENERAL FUND: (\$189,632)

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Convert Unit Clerks to Sr. Clerks in hospital based outpatient areas where transcription of orders is not currently performed by the Unit Clerks. This change is consistent with the community based outpatient clinics.

JUSTIFICATION: (required by the Mayor's Office)

This change is supported by our budget principle that reductions will be guided by the DPH Strategic Plan goal that "services, program, and facilities are cost-effective and resources are maximized." In the outpatient areas where transcription of orders is not part of the job function, the responsibilities of the unit clerk are answering phones, pulling patient charts, filing, making appointments and check-in of patients. These responsibilities could also be performed by Sr. Clerks. Making this change would reduce costs and not compromise patient care. There are no regulatory requirements mandating the use of Unit Clerks in these areas of the hospital.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This would reduce salary and fringe expense by \$226,072 for FY08-09 if fully implemented by February 1, 2009. The savings would increase to \$542,573 for FY 2009-10.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

This conversion will impact 22.92 FTEs. It is unknown how many layoffs would result from this classification change.

Initiative Number F34
(Leave blank)

**2008-2009 Program Change Request
Mid Year Reductions**

DEPARTMENT NAME:

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Sue Currin/206-6761

PROGRAM / INITIATIVE TITLE: **Replace RN's in Certain Outpatient Clinics with LVNs and MEAs**

GENERAL FUND: (\$599,439)

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

This initiative would replace Registered Nurses with Licensed Vocational Nurses or Medical Evaluation Assistants in outpatient areas that do not do treatments, procedures or see urgent care patients.

JUSTIFICATION: (required by the Mayor's Office)

This change is supported by our budget principle that reductions will be guided by the DPH Strategic Plan goal that "services, program, and facilities are cost-effective and resources are maximized." In the outpatient areas where there are no treatments, procedures and urgent care services, it is more cost effective to use lower level LVNs and MEAs to support the clinical operations. Patient care will not be compromised.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This would reduce salary and fringe expense by \$599,439 for FY08-09 if fully implemented by February 1, 2009. The savings would increase to \$1,438,653 for FY 09-10.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

There would be a reduction of 6.46 RN FTE's, an increase of .83 LVN FTEs and an increase of 5.00 MEA FTEs in FY 08-09.

**2008-2009 Program Change Request
Mid Year Reductions****DEPARTMENT NAME:**

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Sue Currin, 206-6761

PROGRAM / INITIATIVE TITLE: **Eliminate LVNs in Inpatient Hospital Areas**GENERAL FUND: **(\$523,966)****TARGETED CLIENTS:****PROGRAM DESCRIPTION: (Description of Program Change)**

(If proposing reductions to Contractors, provide name of contractor, program and amount)

This initiative would eliminate Licensed Vocational Nurses working in the inpatient areas and providing phlebotomy services at San Francisco General Hospital.

JUSTIFICATION: (required by the Mayor's Office)

This change is supported by our budget principle that reductions will be guided by the DPH Strategic Plan goal that "services, program, and facilities are cost-effective and resources are maximized." The LVN's who are currently doing phlebotomy services will be replaced by phlebotomists on the UCSF Affiliation Agreement. Patient care will not be compromised.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

This would reduce salary and fringe expense by \$523,966 for FY08-09 if fully implemented by February 1, 2009. The savings would increase to \$1,257,517 for FY 09-10.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

There would be a reduction of 6.06 LVN FTE's in FY 08-09.

2008-2009 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
xx ☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: Community Behavioral Health Services

PROGRAM CONTACT NAME/PHONE: Bob Cabaj

PROGRAM / INITIATIVE TITLE: **Co-Location and Care Coordination of Behavioral Health with Primary Care at Three Sites**

GENERAL FUND: \$35,000 in 08-09.

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Department of Public Health will integrate three of its Community Behavioral Health programs with three of its Community Oriented Primary Care clinics. The goal is to enhance client and family health outcomes. By the end of June 2009,

- a. Center for Special Problems will be integrated with Tom Waddell Health Center
- b. Southeast Children's Services Mission Campus will be integrated with Silver Avenue Family Health Center
- c. Team II will be integrated with Castro Mission Health Center

The behavioral health programs will maintain their current clients when they move, and over time, the number of shared clients with primary care at the co-located sites will increase as referrals between the two services increase. A planning process, which will involve community, clients, and staff, will be implemented to ensure a smooth transition for clients of both services, optimum integrated program and facility design, and completion of licensing and recertification processes.

JUSTIFICATION: (required by the Mayor's Office)

This integration will increase access to both services for our clients and improve coordination between behavioral health and primary care staff. Also, by reducing facility costs, the impact of budget cuts to our essential services will be lessened.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The number of clients served and units of services provided are not expected to be impacted by this co-location and care coordination initiative per se, however, other planned DPH budget reductions this mid-year 08-09 will reduce the number of staff and services in behavioral health services, including possibly at any of the three CBHS programs co-locating under this initiative.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Annualized rental savings of \$293,052 at three relinquished CBHS clinic sites.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

None.