

2006-2007 Program Change Request

DEPARTMENT NAME:

- | | |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input checked="" 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 type="checkbox"/> Health At Home | |

DPH SECTION: ENVIRONMENTAL HEALTH

PROGRAM CONTACT NAME/PHONE: RAJIV BHATIA / 415-252-3931

PROGRAM / INITIATIVE TITLE: **Agricultural Commissioner for Weights, Measures & Agriculture Program**

GENERAL FUND: \$91,877

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

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

The Ag Commissioner is a state mandated position under the Food & Agricultural Code (FAC) section 2001 and section 2002. There are parallel requirements in the BPC section 12200.

In FY 2004-05 when the Ag, Weights and Measures was transferred to DPH, the Commissioner position was erroneously deleted. The State has notified the Mayor's Office and DPH that we must reinstate the position.

JUSTIFICATION: (required by the Mayor's Office)

All Counties are required to have an Agricultural Commissioner per State law.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

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

\$91,877 increase in expenditures.

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

Increase of 0.75 FTE

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

**INITIATIVE TITLE: Agricultural Commissioner for Weights, Measures & Agriculture Program
Environmental Health Section**

	FY 2006-07	Ongoing
Sources:		
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 91,877	\$ 122,503
	-	-
	-	-
Subtotal Uses	91,877	122,503
Net General Fund Subsidy Required (Uses less Sources)	\$ 91,877	\$ 122,503
Total FTE's	0.75	1.0

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's		
0922	Manager 1	0.75	\$	69,710
				69,710
	Fringe (31.8%)			22,168
			\$	91,877

Operating Expenses

Index Code Character/Subobject Code

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

DEPARTMENT NAME:

- | | |
|--|---|
| <input checked="" 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 type="checkbox"/> Health At Home | |

DPH SECTION: SFGH
PROGRAM CONTACT NAME/PHONE: Sharon Kotabe/206-2325
PROGRAM / INITIATIVE TITLE: SureMed (Omnice) Pharmacy Lease
GENERAL FUND: \$225,000

TARGETED CLIENTS: All SFGH patients

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

Several changes were made to medication management standards used by the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) to survey hospitals for quality and participation in Centers for Medicare/Medicaid Services (CMS) reimbursement. During a mock survey conducted at the hospital, consultants retained by the hospital highlighted several areas and situations where medication storage and use in the hospital did not conform to the new standards. To successfully complete the JCAHO survey, and to assure accreditation and continued CMS reimbursement for the hospital, these areas and situations must be brought into compliance. Compliance will require adding automated drug storage units to inpatient areas, and installing automated drug storage units to outpatient areas that currently do not have them.

JUSTIFICATION: (required by the Mayor's Office)

Accreditation by JCAHO is necessary for continued CMS funding and reimbursement. New JCAHO accreditation standards for medication management require additional drug storage and dispensing equipment for inpatient and outpatient areas of the hospital. Alternatives would be more costly allocation and remodeling of pharmacy space.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Loss of accreditation by the hospital will jeopardize ability to provide care to an average 320 inpatients daily, and approximately 93,000 outpatients annually.

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

Increase expense of \$225,000 for lease of additional SureMed (Omnice) devices the first year, and \$300,000 thereafter. No change in revenue or labor expense.

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

No change

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: SureMed (Omnice) Pharmacy Lease

	FY 2006-07 (9 Months)	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Operating Expenses	225,000	300,000
Subtotal Uses	225,000	300,000
Net General Fund Subsidy Required (Uses less Sources)	\$ 225,000	\$ 300,000
Total FTE's	0.00	0.00

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's
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Operating Expenses

Index Code	Character/Subobject Code	
HGH1HUN40061	021/03141 Pharmacy SureMed (Omnice) lease @ 9 months	\$ 225,000

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

DEPARTMENT NAME:

- | | |
|--|---|
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| <input type="checkbox"/> Health At Home | |

DPH SECTION: SFGH

PROGRAM CONTACT NAME/PHONE: Sharon Kotabe/206-2325

PROGRAM / INITIATIVE TITLE: **SFGH Inpatient Pharmacy staffing**

GENERAL FUND: **\$820,901**

TARGETED CLIENTS: All inpatients of SFGH

PROGRAM DESCRIPTION: (Description of Program Change)

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

Recently implemented JCAHO and other regulatory (e.g. DHS) standards place heavy emphasis on processes to help reduce medication error. A few of the mandated processes to meet these new standards include the requirement for a pharmacist to review all medication orders from all hospital areas prior to administration of a drug to a patient, compounding of all IV solutions and drugs intended for IV use by the pharmacy department, and assuring appropriate and secure drug storage in all areas of the Hospital. Additionally, a recent survey by DHS mandates generation of multiple daily reports on drug use and clinical pharmacist review of all patients on certain types of medication. The pharmacy department must provide these services 24 hours per day, 7 days per week. The SFGH Inpatient Pharmacy is not adequately staffed to assure full compliance to all standards and all DHS required drug monitoring. This request is to add 3.0FTE pharmacists, 3.0FTE pharmacy technicians and 3.0FTE clinical pharmacists (total additional 9.0FTE staff) ongoing to the Inpatient Pharmacy to better enable the Hospital to meet JCAHO and regulatory standards related to medication use.

JUSTIFICATION: (required by the Mayor's Office)

The Hospital is currently not fully compliant with all JCAHO standards related to medication use because there is not sufficient pharmacy department staff. A recent DHS (State) survey additionally mandated daily generation of multiple reports and monitoring by clinical pharmacists of all patients receiving certain drugs. Without additional staffing in the Inpatient Pharmacy, the Pharmacy Department cannot provide these services 24 hours per day, 7 days per week as required, and the Hospital is at jeopardy of losing DHS and CMS certification.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Loss of certification by the Hospital will jeopardize ability to provide care to an average 320 inpatients daily, and approximately 93,000 outpatients annually.

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

There is no change in revenue or materials and supplies expense. Labor (plus fringe) expense increases \$820,901 annually.

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

Net increase of 6.75 FTEs (2.25 FTE pharmacist, class 2450; 2.25 FTE clinical pharmacist, class 2454; and 2.25 FTE pharmacy technician, class 1409.)

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: SFGH Inpatient Pharmacy staffing

	FY 2006-07	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 820,901	\$ 1,094,534
	-	-
	-	-
Subtotal Uses	820,901	1,094,534
Net General Fund Subsidy Required (Uses less Sources)	\$ 820,901	\$ 1,094,534
Total FTE's	6.75	9.0

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's		
2450	Pharmacist	2.25	\$	226,771
2454	Clinical Pharmacist	2.25		250,052
2409	Pharmacy Technician	2.25		146,016
		6.75		622,838
	Fringe (31.8%)			198,063
			\$	820,901

Operating Expenses

Index Code	Character/Subobject Code		
		-	\$ -

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

DEPARTMENT NAME:

- | | |
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| <input type="checkbox"/> Health At Home | |

DPH SECTION: SFGH – Quality Management
PROGRAM CONTACT NAME/PHONE: **Hiro Tokubo, 206-4019**
PROGRAM / INITIATIVE TITLE: **Quality Data Reporting**
GENERAL FUND: \$ 166,384

TARGETED CLIENTS: N/A

PROGRAM DESCRIPTION: (Description of Program Change)

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

SFGH is facing an increase in required data reporting for quality indicators. The Reporting Hospital Quality Data for Annual Payment Update directly impacts our Medicare reimbursement. In addition to required data reporting, SFGH participates in a number of “voluntary initiatives”, which are designed to assist in improving patient safety. Many of these “voluntary initiatives” are only a prelude to mandatory reporting.

Many of these initiatives will eventually be tied to the Hospital’s reimbursement from Medicare (CMS), Medi-Cal (Lumetra), managed care plans (San Francisco Health Plan, Blue Cross Medical Managed Care), and others. Lumetra is “piloting a program” asking Hospitals to submit data on a monthly basis instead of a quarterly basis. It is only a matter of time before these reimbursement parties require Hospitals to reach quality “benchmarks” in order to remain an approved provider. In order to meet these increasing requests for data, as well as the increased frequency of data submission, the Quality Management Department requires the addition of an administrative analyst and healthcare analyst, both with expertise in quality data analysis and reporting, and the ability to work with the Medical Staff and Hospital Departments to reach the established benchmarks.

JUSTIFICATION: (required by the Mayor’s Office)

Beginning in 2003, the Quality Initiative of the Hospital Quality Alliance requested voluntary reporting by hospitals on quality measures related to Acute Myocardial Infarction (AMI), Heart Failure (HF) and Pneumonia (PN). These quality data are now publicly reported through the CMS Hospital Compare website, and are required in order to receive full annual Medicare payment updates. Required reporting to the Centers for Medicare & Medicaid Services (CMS) includes submitting data on 10 quality measures. This data submission requires extensive staff time in Quality Management to abstract medical records, review and revise data for accuracy, complete timely submissions to the data vendor, analyze reports, distribute and review with appropriate staff for appropriate quality improvement initiatives, as indicated. Hospitals that submit validated data to CMS receive a 3.2% increase in their payment rates for inpatient services in FY 2006, while hospitals that do not submit quality data receive a payment update of 2.8%, or a 0.4% lower rate. If SFGH does not have appropriate resources to adequately comply with these data requirements, there would be a significant loss of annual revenue from CMS.

In 2006, CMS will require submission of data on patient experience, which requires participation in the HCAHPS patient survey. This will require additional staff time to implement, coordinate and analyze the

survey data and take appropriate actions when data results are below “established” benchmarks. CMS is almost certain to tie the results of patient survey to Medicare reimbursement. In addition, many states have already passed legislation requiring Hospitals to electronically submit adverse incidents or unusual occurrences to a state agency. When California passes such legislation, the Hospital has to be ready with a “quality data expert” who will know the details of how to submit sensitive information. The current national trend to increasingly require data from hospitals for public reporting confirms the need to have appropriate level staff in Quality Management to assure timely submissions, data completeness and accuracy.

During the recent DHS/CMS Validation Survey, several issues were identified that will require data collection, aggregation and trending, and will require a person to closely monitor all plans of correction that are submitted to regulatory agencies.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

NA

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

Salaries and fringes are expected to increase by \$ 166,384 in the first year and \$ 221,846 ongoing.

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

Additional 0.75FTE, 1824 Principal Administrative Analyst, is requested to meet the increasing burden of requests for quality data from various third-parties. The analyst will be responsible for compliance with increasing demands for mandatory and voluntary reporting of data to external organizations and regulatory agencies. Duties include:

- Coordinating, developing and managing complex, confidential/sensitive QM databases.
- Assuring timely and accurate compliance with multiple external data reporting requirements.
- Preparing complex performance improvement analyses, including interpretation and manipulation of data from internal and external databases.
- Analyzing and interpreting existing and proposed standards/benchmarks, and policies, including requests for data reporting and the financial and non-financial consequences of such reporting.

Additional .75 FTE Health Care analyst, is requested in order to monitor activities that will be required to maintain our Medicare/Medi-cal reimbursement status, the acute hospital license and conduct independent audits as necessary.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Quality Data Reporting

	FY 2006-07 (9 Months)	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 166,384	\$ 221,846
Subtotal Uses	166,384	221,846
Net General Fund Subsidy Required (Uses less Sources)	\$ 166,384	\$ 221,846
Total FTE's	1.50	2.00

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	(9 Months)
1824	Principal Administrative Analyst	0.75	\$ 72,001
2119	Health Care Analyst	0.75	54,239
			126,240
	Fringe (31.8%)		40,144
		1.50	\$ 166,384

Operating Expenses

Index Code Character/Subobject Code

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 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: Valerie Inouye, 206-3599
 PROGRAM / INITIATIVE TITLE: **Nurse Practitioners to replace interns and residents**
 GENERAL FUND: **\$865,844**

TARGETED CLIENTS: All Clients

PROGRAM DESCRIPTION: (Description of Program Change)

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

This request is also to add 5.25 FTE Nurse Practitioners to supplement the services provided in the Surgery department.

JUSTIFICATION: (required by the Mayor's Office)

This funding request is to add required staffing in the Surgery department in order to ensure compliance with regulatory guidelines. The ACGME (American College of Graduate Medical Education) mandated 80 hour work weeks for house staff. With the reduction of house staff hours and also a reduction of volunteer physician hours, funds are needed to hire 5.25 FTE Nurse Practitioner for the Department of Surgery to augment the clinical duties of the house staff.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

If funding is not provided to continue the current level of services, there will be an adverse impact on the clients served and units of service provided. There would have to be a reduction of services provided by the Surgery department.

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

Expenses are expected to increase by \$865,844 the first year and \$1,154,459 ongoing.

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

Increase of 5.25 FTE Nurse Practitioners the first year and 7.0 FTE ongoing.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Nurse Practitioners to replace interns and residents

	FY 2006-07	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 865,844	\$ 1,154,459
Operating Expenses	-	-
Subtotal Uses	865,844	1,154,459
Net General Fund Subsidy Required (Uses less Sources)	\$ 865,844	\$ 1,154,459
Total FTE's	5.25	7.00

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	(9 Months)
2328	Nurse Practitioners	5.25 \$	656,938
			-
			656,938
	Fringe (31.8%)		208,906
		5.25 \$	865,844

Operating Expenses

Index Code Character/Subobject Code

2006-2007 Program Change Request

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: **Gayling Gee 759-2363**
PROGRAM / INITIATIVE TITLE: LHH Housekeeping
GENERAL FUND: \$179,567

TARGETED CLIENTS: Laguna Honda Residents, Visitors, Staff , and Volunteers

PROGRAM DESCRIPTION: (Description of Program Change)

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

This initiative funds the minimum number of Porter positions necessary to avoid overtime and cover the minimum number of housekeeping schedules required to avoid the citations experienced in recent licensure surveys.

JUSTIFICATION: (required by the Mayor's Office)

Benchmark studies show an infrastructure shortfall of Porters necessary to maintain the Hospital in a clean and sanitized manner. This addresses the overspending for the 2005-06 fiscal year.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Cleanliness of Hospital serving 1055 patients/residents

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

This initiative would add \$179,567 in salaries and fringe benefits to General Fund obligations during the first fiscal year, and that would annualize to \$239,423 in subsequent fiscal years.

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

This initiative would add 3.0 FTE to the LHH workforce during the first fiscal year which would annualize to 4.0 FTE in subsequent fiscal years.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: LHH HOUSEKEEPING STRUCTURAL

	FY 2006-07	Ongoing
Sources:		
	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 179,567	\$ 239,423
	-	-
	-	-
Subtotal Uses	179,567	239,423
Net General Fund Subsidy Required (Uses less Sources)	\$ 179,567	\$ 239,423
Total FTE's	3.00	4.0

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's		
2736	Porters	3.00	\$	136,242
		3.00		136,242
	Fringe (31.8%)			43,325
			\$	179,567

2006-2007 Program Change Request

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: Paul Isakson, 759-2380
PROGRAM / INITIATIVE TITLE: LHH DENTAL CONTRACT
GENERAL FUND: \$65,000

TARGETED CLIENTS: LHH Residents

PROGRAM DESCRIPTION: (Description of Program Change)

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

University of the Pacific Dental School has been providing services to the LHH residents beyond the reimbursement of Denti-Cal. Denti-Cal pays for one dental exam for life, while DHS under Title 22 requires an annual exam. UOP had been using school costs and grants to cover these losses, but the grants have expired.

JUSTIFICATION: (required by the Mayor's Office)

Fund the UOP Dental Memorandum of Understanding for \$65,000.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Basic Dental Services for all 1,055 LHH residents could be lost in the absence of this funding.

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

Cost increase of \$65,000.

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

None

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: LHH DENTAL CONTRACT

	FY 2006-07	Ongoing
Sources:		
Subtotal Sources	-	-
Uses:		
University of the Pacific Dental Contract	\$ 65,000	\$ 65,000
	-	-
	-	-
Subtotal Uses	65,000	65,000
Net General Fund Subsidy Required (Uses less Sources)	\$ 65,000	\$ 65,000
Total FTE's	0.0	0.0

Operating Expenses

Index Code Character/Subobject Code

HLH448944 02789 Other Medical Services

\$ 65,000

2006-2007 Program Change Request

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 | X Department Wide |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Department Wide

PROGRAM CONTACT NAME/PHONE: Pamela Levin/554-2605

PROGRAM / INITIATIVE TITLE: **Increase in Natural Gas and Steam Costs**

GENERAL FUND: **\$1,268,458**

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

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

Increase in workorder with PUC based on FY 2005-06 variance, pending notification of actual amount.
This includes a savings of \$150k at SFGH due to the replacement of the chiller.

JUSTIFICATION: (required by the Mayor's Office)

As of this date we have not received the request from PUC for FY 2006-07, but the FY 2005-06 deficit is a placeholder until better information is obtained.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

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

Increased expenses of \$1,268,458

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

None

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Increase in Natural Gas and Steam Costs

	FY 2006-07	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ -	\$ -
Work order with PUC	1,268,458	1,268,458
Subtotal Uses	1,268,458	1,268,458
Net General Fund Subsidy Required (Uses less Sources)	\$ 1,268,458	\$ 1,268,458
Total FTE's	0.0	0.0

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	
			-
			-
	Fringe (31.8%)		-
			\$ -
Operating Expenses			
Index Code	Character/Subobject Code		
	081UL	1,268,458	\$ -

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

DEPARTMENT NAME:

- | | |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
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| <input type="checkbox"/> Jail Health | X Department wide |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: SFGH/CHN

PROGRAM CONTACT NAME/PHONE: Sharon Kotabe/206-2325

PROGRAM / INITIATIVE TITLE: Pharmacy Inflation

GENERAL FUND: \$ 2,115,000

TARGETED CLIENTS: All patients who receive drug therapy through SFGH and CHN

PROGRAM DESCRIPTION: (Description of Program Change)

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

Industry projections indicate inflationary increases of 8 to 10% for pharmaceuticals in the next year. Increases at SFGH are projected to be 4% above FY 05-06 budget due to ongoing aggressive use of manufacturer patient assistance, maximizing participation in the Federal 340B program and other programs that help reduce pharmaceutical expense.

JUSTIFICATION: (required by the Mayor's Office)

The total inflation for the department is \$2,115,000. This includes \$818,000 for SFGH, \$90,000 for Jail Health, \$408,000 for LHH and \$1,125,000 for Mental Health. Revenues consist of \$326,000 at LHH.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

All DPH clients who receive drug therapy will be impacted. Increasing the drug budget will provide these patients with the ability to continue to receive the same level of pharmacotherapy care they currently enjoy.

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

Net increase in base pharmaceuticals budget (materials and supplies expense) of \$ 2,114,778.

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

No change

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Inflation on Pharmaceuticals

	FY 2006-07	Ongoing
Sources:		
Medi-Cal	326,000	326,000
Subtotal Sources	326,000	326,000
Uses:		
Pharmaceuticals - Materials and Supplies	\$ 2,441,000	\$ 2,441,000
	-	-
	-	-
Subtotal Uses	2,441,000	2,441,000
Net General Fund Subsidy Required (Uses less Sources)	\$ 2,115,000	\$ 2,115,000
Total FTE's	0.0	0.0

Operating Expenses

Index Code Character/Subobject Code
Materials and supplies

\$ 2,441,000

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

DEPARTMENT NAME:

- | | |
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| <input type="checkbox"/> Health At Home | |

DPH SECTION: Housing and Urban Health

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

PROGRAM / INITIATIVE TITLE: Direct Access to Housing Master Lease Rent Increases and Annualization of Contracts

GENERAL FUND: \$445,088

TARGETED CLIENTS: Chronically Homeless People

PROGRAM DESCRIPTION: (Description of Program Change)

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

Housing and Urban Health will be facing various inflationary pressures in FY 06/07. The annualization of new projects that were started in FY 05/06, the annualization of contracts that were partially funded by grants that will be expiring in FY06/07 and the annual master lease rent increases for the Direct Access to Housing sites.

In FY 05/06, Housing and Urban Health started new projects to provide additional DAH bed slots for chronically homeless people at the Plaza Hotel, the Mission Creek Senior Housing and the Folsom Dore Apartments which was partially funded by the ICH grant. The Plaza Hotel opened in December of 2005 and provides 106 DAH bed slots for chronically homeless individuals. Mission Creek Senior Housing is a new affordable housing site being developed by Mercy Housing of California which will open in February of 2006 and will include 140 units of senior housing with 51 units designated as supportive housing units for frail elderly people exiting Laguna Honda Hospital and other locations. HUH is currently contracting with Episcopal Community Services for 20 supportive housing units at the Folsom Dore affordable housing development. Given that these projects started mid-year or were partially funded by grants in FY 05/06, the annualized cost to cover a full year of operations will be \$334,362 in FY 06/07.

Housing and Urban Health received a three-year grant in FY 03/04 from the Interagency Council on Homelessness (ICH) to open a Direct Access to Housing (DAH) site, the Empress Hotel, and the Housing and Urban Health Clinic which provides medical services to all DAH residents and other supportive housing residents. In FY 05-06, the ICH grant, described above, funded a portion of the Baker Places contract to provide support services to the Empress Hotel. With the ICH grant due to expire in FY 06-07, HUH is proposing to replace those grant funds (\$128,388) with FQHC Medi-Cal revenue in order to maintain the current level of tenant services. The HUH clinic is now a fully operational Medi-Cal clinic and generates sufficient revenue to offset these support services costs.

Housing and Urban Health currently has eleven Direct Access to Housing (DAH) sites: the Empress Hotel, the Star Hotel, the Camelot Hotel, the Le Nain Hotel, the Windsor Hotel, the Pacific Bay Inn, the Civic Center Residence, the West Hotel, the Folsom Dore Apartments, the Broderick Street Residential Care Facility and the Plaza Hotel. Together these eleven DAH sites provide 729 bed slots of service-enriched subsidized housing to homeless persons who have been living on the streets and revolving through emergency care settings with the goal of enabling these individuals to achieve greater levels of

residential stability and improved health status. Seven of the eleven DAH sites are secured through a master lease agreement that includes annual rent increases for the building owners based on the Consumer Price Index. The Empress Hotel's annual rent increase will be partially funded by federal monies in FY 06-07. The projected annual rent increase for the seven locally funded DAH sites is \$305,343.

JUSTIFICATION: (required by the Mayor's Office)

Housing and Urban Health provides housing with integrated health care services with the goal of ending chronic homelessness in San Francisco. These funds will be used to annualize the cost of the new and partially funded projects in FY 06/07, maintain the current level of tenant services at the Empress Hotel and cover the annual rent increases at the seven DAH sites as required in the lease agreement. Some of the costs will be offset by revenues that will be generated by providing medical services to Medi-Cal eligible clients at the HUH clinic.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

If the proposal is not approved, HUH will not be able to provide 287 DAH bed slots that is currently being provided by the new projects and existing DAH sites lease agreement. HUH will also not be able to provide the same level of support services to the target population. A reduction in support services could destabilize residents. Unstable residents are much more likely to utilize emergency services, which are considerably more expensive than the cost of support services.

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

The total contractual and rent expenses for HUH in FY 06/07 will increase by \$768,093 but will be offset by revenues of \$323,005 from FQHC Medi-Cal, therefore, the net impact on general fund will be only be \$445,088.

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

None

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Annualization of Contracts and Direct Access to Housing Master Lease Rent Increases

		FY 2006-07	Ongoing
Sources:			
	FQHC Medi-Cal	\$ 323,005	\$ 323,005
Subtotal Sources		323,005	323,005
Uses:			
	Operating Expenses	\$ 462,750	\$ 462,750
	Rents and Leases	305,343	305,343
		-	-
Subtotal Uses		768,093	768,093
Net General Fund Subsidy Required (Uses less Sources)		\$ 445,088	\$ 445,088
Total FTE's		0.00	0.00

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	
	Fringe (31.8%)	0.00	-
			-
			\$ -
Operating Expenses			
Index Code	Character/Subobject Code		
HCHSHHOUSGGF	021 / 02700		\$ 462,750
HCHSHHOUSGGF	021 / 03000		\$ 305,343
			\$ 768,093

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

DEPARTMENT NAME:

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

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

DPH SECTION: Laguna Honda Hospital (LHH)
 PROGRAM CONTACT NAME/PHONE: Gayling Gee 759-2363
 PROGRAM / INITIATIVE TITLE: **LHH Laundry Contract Increase**
 GENERAL FUND: **\$415,000.**

TARGETED CLIENTS: LHH residents

PROGRAM DESCRIPTION: (Description of Program Change)

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

[Empty box for program description]

JUSTIFICATION: (required by the Mayor's Office)

The cost of the Laundry Contract for the current fiscal year increased by \$415K because of a 4.6% price increase (from .325 to .34 per pound) and a 12% surge in the poundage laundered

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

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

\$415,000 increase in expenditures

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

N/A

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: LHH LAUNDRY CONTRACT

	FY 2006-07	Ongoing
Sources:		
Subtotal Sources	-	-
Uses:		
Contract Increase	\$ 415,000	\$ -
	-	-
	-	-
Subtotal Uses	415,000	-
Net General Fund Subsidy Required (Uses less Sources)	\$ 415,000	\$ -
Total FTE's	0.0	0.0

Operating Expenses

Index Code Character/Subobject Code

HLH449439 02799 Other Professional Services \$ 415,000

Facilities Maintenance, and Equipment (List by each items by count and amount)

2006-2007 Program Change Request

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 | X Department Wide |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Department Wide
PROGRAM CONTACT NAME/PHONE: Pamela Levin/554-2605
PROGRAM / INITIATIVE TITLE: **Contractor's COLA**
GENERAL FUND: \$ 4,806,257

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

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

The Mayor's Budget Instructions ask departments to take into consideration the cost pressures affecting our Community-Based Partners. Specifically, we have been asked to consider reallocating base budgets to provide for cost increases impacting contractors. We are building a 2% increase in the budget as a placeholder as we work with our contractors to evaluate needs. This estimate includes all contracts in Behavioral Health and the UC Affiliation Agreement.

JUSTIFICATION: (required by the Mayor's Office)

An estimate on the impact of a COLA increase on contractors is \$4.8M.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

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

Increased expenses of \$4,806,257.

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

None

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Contractor's COLA

	FY 2006-07	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ -	\$ -
Professional Services	4,806,257	4,806,257
Subtotal Uses	4,806,257	4,806,257
Net General Fund Subsidy Required (Uses less Sources)	\$ 4,806,257	\$ 4,806,257
Total FTE's	0.0	0.0

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	
			-
			-
	Fringe (31.8%)		-
			\$ -

Operating Expenses

Index Code	Character/Subobject Code		
	Professional Services	4,806,257	\$ -

Facilities Maintenance, and Equipment (List by each items by count and amount)