Initiative N	umber	<u>I111</u>
(Leave	blank)	

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: CBHS Mental Health PROGRAM CONTACT NAME/PHONE: Michelle R PROGRAM / INITIATIVE TITLE: Replacement of I San Francisco Homeless Outreach Team, and Com	Federal SAMHSA Funding for Central Access

GENERAL FUND: \$384,525

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)

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

Substance Abuse and Mental Health Services Administration (SAMHSA) funding is Federal revenue passed through the State via the California Department of Mental Health, and has no match requirement and is not allocated through a competitive process. SAMHSA funds can be used for mental health services other than inpatient services, capital expenditures, major medical equipment purchases, or as a non-federal match for other Federal funding. The grant is currently funding dual diagnosis services (San Francisco Homeless Outreach Team, SFHOT), services to support consumers/peers, the Central Access Team, and staff for the Community Programs Placement Unit.

The issue related to this grant is that while the cost of positions increases each year due to increases in labor, retirement and health costs, the grant funding allocation remains flat. As a result, the grant is no longer fully funding the positions, and due to recent more significant civil service cost increases, neither the grant nor the General Fund (through salary savings) is able to absorb the costs. Approval of the proposed initiative would address this shortfall. This situation has been exacerbated by the fact that in prior years, due to City General Fund shortfalls, vacant General Fund positions were deleted and the positions were recreated within the grant as a cost savings measure. As a revenue enhancement mechanism, positions that could draw down MediCal funding were switched off the grant with positions that didn't provide MediCal reimbursable services. The proposed positions represent critical infrastructure positions that CBHS holds as a top priority for funding consideration. The details are described as follows:

Central Access Team \$232,376

The Central Access Team is a State mandated service that was created in April, 1998 when the County implemented the San Francisco Mental Health Plan as a result of the transfer of responsibility from the State to the County for private outpatient and inpatient services provided to mentally ill clients with MediCal. The function of the Team is to authorize and refer clients to services. This interaction occurs over the telephone, but beginning in FY 2007-08 the staff will conduct face-to-face interviews, and will serve as a critical entry point for referrals from the Health Access Program (HAP) of clients needing behavioral health care. When face-to-face,

assessments begin, some of the time will become MediCal reimbursable. Therefore, to address the grant shortfall, a total of 2.2 FTE (four .5 FTE 2930/31 Psychiatric Social Workers and .2 FTE 2932 Senior Psychiatric Social Worker, representing a portion of four FT positions) are proposed to be funded in the General Fund for a total cost of \$232,376. This leaves approximately half of each position still funded by the grant to ensure coverage for services provided to uninsured clients. Of the amount in the General Fund, \$116,188 would be funded with Short Doyle MediCal revenues, leaving a request for \$116,188 in General Fund.

San Francisco Homeless Outreach Team (SFHOT) \$106,550

The SFHOT was created in April, 2004 as a result of a Mayoral initiative to address the homeless crisis in San Francisco. To accomplish this, the Department submitted a successful proposal to reprogram existing SAMHSA funding. SFHOT is an outreach team that works throughout the City to connect with homeless individuals with the goal of linking them to services, such as housing and treatment. SFHOT also receives referrals from the community, the Police Department, and Emergency Medical Services.

The goal is that once these needs are addressed and the individuals are stabilized, there will be a decline in the homeless population. While SFHOT works throughout the year, it is also an integral component for the Mayor's San Francisco Project Homeless Connect (PHC) initiative which occurs every other month by providing ongoing case management to PHC attendees who would benefit from linkages to services, and/or housing. As above, however, the funding for this program exceeds the grant allocation by \$106,550. To address this problem, a total of .8 FTE (three .2FTE 2930 Psychiatric Social Workers and a .2 2232 Senior Physician Specialist) would be moved into the General Fund. Up to now, this program has not generated MediCal. However, an analysis of the approximately 500 clients served in FY05-06 indicates that approximately 20 percent of the clients have MediCal. As such, 20 percent of each of four positions on the grant would be moved to the General Fund, and with the exception of the SFHOT Director who doesn't carry the same caseload, half of the cost of these positions, or \$32,126 would be funded with Short Doyle MediCal, leaving a request of \$74,423 in General Fund.

Community Programs Placement Unit (\$193,913)

The Placement Unit performs the critical function of moving clients from higher to lower levels of care, e.g. from SFGH and PES to less expensive community based alternatives, such as residential treatment or supportive housing. Without the work of this Unit, the flow of clients out of SFGH would be impeded, and the revenue reimbursement would decline sharply, as clients staying longer than the acute stage (i.e. there waiting for placement) have a considerably lower reimbursement. As above, the grant funding which has historically funded some of the positions within the Community Programs Placement Unit is no longer able to support the same level of positions, so the proposed request would also address this structural shortfall by funding 1.75FTE for a total annual cost of \$193,913. Specifically, the proposed request would fund 1.0 2320 Registered Nurse and .75 FTE 2587 Health Worker III. This FTE represents partial FTE of three employees, with the balance of their positions remaining on the grant.

JUSTIFICATION: (required by the Mayor's Office)

The proposed plan to address the SAMHSA grant shortfall is being split between the programs, based on the ability of programs to generate MediCal. The Central Access Team is a State mandated service, required as part of the San Francisco Mental Health Plan. Additionally, the Central Access Team is a critical component in the implementation of the proposed Citywide Health Access Program (HAP), as it will be responsible for authorizations and referrals of all individuals referred to CBHS to receive behavioral health care services.

The SFHOT is the City's primary outreach team and is critical in its function of linking homeless individuals to services and/or housing. SFHOT is also an integral component of Project Homeless Connect which has become an important vehicle to serve homeless individuals in a comprehensive manner.

The Community Programs Placement Unit is critical to the placement of clients. The proposed cost to address this shortfall is much less than the cost would be of lost revenues should these positions not be funded. These staff are responsible for conducting utilization review on the clients, finding placements, and authorizing these placements. Without the critical role played by these three people, the ability to move clients out of SFGH inpatient units will decline.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The Central Access Team provides authorizations for all clients seen in the San Francisco Health Plan's Private Provider Network. There were 4,009 clients in FY05-06. Additionally, Central Access provides initial authorizations and referrals for new clients to organizational providers (civil service and non-profit clinics). With the implementation of HAP, and the existing volume, Central Access will not be able to absorb the loss of the equivalent of 2.2 FTE (out of five). As such, there will be longer wait times for referrals, as well as appointments, which will result in compliance issues with the State, an increase in grievances, and unsuccessful linkages to services. The SFHOT Team linked 500 clients to services, and/or housing in FY05-06. There would be an impact on the number of clients served if four staff had their hours reduced from full-time to four days per week. The Community Placement Unit is responsible for a significant portion of placements for individuals not having a home to return to when leaving SFGH.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) Increase in expenditures of \$532,840, offset by an increase of \$148,315 in Short Doyle MediCal revenues, for a total General Fund request of \$384,525.

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

If not approved, the workforce would be reduced by 3.0 FTE, including 2.6 FTE 2930/31 Psychiatric Social Workers, .2FTE 2932 Senior Psychiatric Social Worker, .2 FTE 2232 Senior Physician Specialist, .75FTE 2587 Health Worker and 1.0 FTE 2320 Registered Nurse.

INITIATIVE TITLE: Replacement of Federal SAMHSA Funding for Central Access and Homeless Outreach Team

		FY	2007-08		Ongoing
Sources:	MediCal Revenues	\$	148,315	\$	-
Subtotal Sour	rces		148,315		-
Uses:					
	Salaries and Fringes	\$	532,840	\$	-
			-		-
Subtotal Use:	s		532,840		-
Net General (Uses less So	Fund Subsidy Required ources)	\$	384,525	\$	
Total FTE's			0.0	:	0.0
New Position	ns (List positions by Class, Title and FTE)			<u> </u>	
Class	Title	FTE's			
2931	Marriage, Family and Child Counselor		0.20		15,584
2931	Marriage, Family and Child Counselor		0.20		15,584
2232	Sr. Physician Specialist		0.20		32,172
2930	Psychiatric Social Worker		0.20		15,584
2931	Marriage, Family and Child Counselor		0.50		38,961
2932	Sr. Psychiatric Social Worker		0.20		16,286
2931	Marriage, Family and Child Counselor		0.50		38,961
2930	Psychiatric Social Worker		0.50		38,961
2931	Marriage, Family and Child Counselor		0.50		38,961
2587	Health Worker III		0.75		42,140
2320	Registered Nurse		1.00		111,176
			4.75		404,372
	Fringe (35%)				128,468
O 48 T				\$	532,840
Operating I					
Index Code	Character/Subobject Code			Φ.	
			-	\$	

Initiative	Number	I12
	(Leave	blank)

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: Housing and Urban Health PROGRAM CONTACT NAME/PHONE: Marc Trotz, 5 PROGRAM / INITIATIVE TITLE: Funding for the En Access to Housing Sites GENERAL FUND: \$1,556,787	
TARGETED CLIENTS: Chronically Homeless People	
PROGRAM DESCRIPTION: (Description of Program (If proposing reductions to Contractors, provide name of Empress Hotel Housing and Urban Health (HUH) received a three-year Council on Homelessness (ICH) to open a Direct Access the grant expiring, all unspent carry forward funds exhaus funding is needed to continue supportive housing at the IFTE 1822 and a 1.00 FTE 2586 that are being utilized by	grant in FY 2003-04 from the Interagency to Housing (DAH) at the Empress Hotel. With ested and all federal earmarks cancelled this year, Empress Hotel and to continue funding a 1.00
Plaza Apartment In December of 2005, HUH started a new project for chr Apartments that was funded by a SAMHSA Earmark graearmarks cancelled this year, funding is needed to contin provided funding for 106 DAH units and supported a 1.0	ant. With the grant expiring and all federal use operations at the Plaza Apartments. The grant
JUSTIFICATION: (required by the Mayor's Office)	
HUH provides housing with integrated health care service in San Francisco. These funds will be used to maintain the Hotel and maintain the same number of supportive housing the same nu	the current level of tenant services at the Empress
IMPACT ON NUMBER OF CLIENTS SERVED AN	D UNITS OF SERVICE PROVIDED
196 DAH bed slots provided by the two DAH sites.	
EXPENSE AND REVENUE IMPACT (Reductions/R \$1,556,787 in contractual expenses	Reallocations-complete supporting budget doc)
expenses	
IMPACT ON DEPARTMENT'S WORKFORCE (inc	crease or decrease of FTE's)
Funding for 4.00 existing FTEs	

INITIATIVE TITLE: Funding for the Empress Hotel and Plaza Apartment Direct Access to Housing Sites

Sources:		FY	2007-08		Ongoing
Sources.		\$	-	\$	~
Subtotal Sources			60		-
Uses:		- Constant			
Personnel		\$	380,516		380,516
Operating Expen	ases	Ť	1,176,271		1,174,903
					-
Subtotal Uses			1,556,787		1,555,419
Net General Fund Subsidy Required					
(Uses less Sources)		\$	1,556,787	\$	1,555,419
Total FTE's			0.0		0.0
New Positions (List positions by Class,	Title and FTE)		Water the second	<u> </u>	
Class Title	,	FTE's			
2591 Health Program	Coordinator II (existing postion)			\$	80,936
	Planner (existing postion)			*	76,440
1822 Administrative A	Analyst (existing postion)				73,138
2586 Health Worker I	I (existing postion)				51,350
					281,864
Fringe (35%)				_	98,652
				\$	380,516
Operating Expenses Index Code Character/Subob	· C . 1				
Index Code Character/Subob HCHSHHOUSGGF 021 / 02700	ojeci Code			•	
HCHAPURBNCLN 021 / 02700				\$.	1,168,471
HCHAPURBNCLN 021 / 02800				\$	1,500
HCHAPURBNCLN 021 / 02300				\$ \$	3,100 3,200

Initiative	Number	I13
(Leav	ve blank)	

DEPARTMENT NAME: San Francisco General Hospital Laguna Honda Hospital Primary Care Jail Health Health At Home
DPH SECTION: Housing and Urban Health PROGRAM CONTACT NAME/PHONE: Marc H. Trotz, 554-2565 PROGRAM / INITIATIVE TITLE: Annualize Formerly Grant-Funded HUH Clinical Positions GENERAL FUND: \$159,442
TARGETED CLIENTS: Chronically Homeless People
PROGRAM DESCRIPTION: (Description of Program Change) (If proposing reductions to Contractors, provide name of contractor, program and amount) Funding is requested to annualize HUH Clinical positions who were partially funding by grants in FY2006-07 but the grant portion was not automatically annualized in BPREP during the budget process for FY2007-08.
JUSTIFICATION: (required by the Mayor's Office) Housing and Urban Health requested grant-funded HUH Clinical personnel during the FY 2006-07 budget process to be backfilled by General Fund since the grants were expiring. The request was approved. However, some of the personnel did not shift from grant funding at the beginning of the fiscal year since the grants operate on different funding cycles. These affected personnel were coded as partially general fund in FY2006-07 and should have been automatically annualized in the next budget process but since they came off of grants, they were not automatically annualized. As a result of this proposed correction, these positions will be completely funded in the General Fund.
IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED
The Housing and Urban Health clinicians log approximately 900 client encounters each month.
EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) Total personnel expenses for FY 2007-08 will increase by \$159,442.
IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)
Increase of 0.96 FTEs.

INITIATIVE TITLE: Annualize Formerly Grant-Funded HUH Clinic Positions

Comme			FY 2007-08		Ongoing
Sources:		\$	-	\$	-
Subtotal Sou	rces				~
Uses:					
	Salaries and Fringes	\$	159,442	\$	159,442
Subtotal Use	s		159,442		159,442
	Fund Subsidy Required			Acres Marie and Acres	
(Uses less So	ources)	\$	159,442	\$	159,442
Total FTE's	3		0.96		0.96
New Positio	ns (List positions by Class, Title and FTE)		19040	<u></u>	
Class	Title	FTE	's		
2232	Sr. Physician Specialist		0.12	\$	20,440
2218	Physician Assistant		0.25	\$	39,497
2320	Registered Nurse		0.17	\$	19,061
2328	Nurse Practitioner		0.17	\$	24,941
2587	Health Worker III		0.25	\$	14,166
			0.96		118,105
	Fringe (35%)				41,337
Index Code	HCHAPURBNCLN			\$	159,442
Operating I	Expenses				
Index Code	Character/Subobject Code				
			_	\$	

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: James Stillwel PROGRAM / INITIATIVE TITLE: Drug Court Program GENERAL FUND: \$150,000	1 255-3717
TARGETED CLIENTS: Adult Drug Court Defendants	
PROGRAM DESCRIPTION: (Description of Progra (If proposing reductions to Contractors, provide name of c A Local Law Enforcement Block Grant by the Mayor's Operations of the Drug Court's operation. The assessment, en provided by the Asian American Recovery Services, Drug	ontractor, program and amount) ffice on Criminal Justice previously funded ngagement and referral services service are
JUSTIFICATION: (required by the Mayor's Office)	
This is to backfill funding for 2.78 FTE contracted Assess American Recovery Services' Drug Court Treatment Cent ongoing care coordination (assessment, treatment planning with the Superior Court) of Adult Drug Court defendants.	er. These positions are responsible for the
IMPACT ON NUMBER OF CLIENTS SERVED AND	HNITS OF SEDVICE PROVIDED
The Assessment/Placement Specialists individually assess clients annually, and carry an ongoing caseload of approxication overall clinical depth will be impacted with the loss of the	and refer approximately 100 adult Drug Court imately 50 Drug Court clients. Additionally.
EXPENSE AND REVENUE IMPACT (Reductions/Re	allocations-complete supporting budget doc)
\$150,000 in Medical Services	
IMPACT ON DEPARTMENT'S WORKFORCE (incr None	ease or decrease of FTE's)

INITIATIVE TITLE: Drug Court Program Backfill

Sources:	FY 2007-08			Ongoing	
ovar ees.	\$	-	\$	<u>.</u> .	
Subtotal Sources		_			
Uses:					
Salaries and Fringes	\$	-	\$	es.	
027 Medical Services Contracts		150,000		150,000	
Subtotal Uses		150,000		150,000	
Net General Fund Subsidy Required					
(Uses less Sources)	\$	150,000	\$	150,000	
Total FTE's		0.0		0.0	

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

		=
Fringe (35%)		-
Operating Expenses		\$ -
Index Code Character/Subobject Code HMHSCCRES227 027 Medical Services Contracts	\$ 150,000	\$ 150,000

FTE's

Initiative	Number	I15
(I ea	ve blank)	

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DEPARTMENT NAME: San Francisco General Hospital Laguna Honda Hospital Primary Care Jail Health Health At Home
DPH SECTION: Community Behavioral Health Services – Substance Abuse PROGRAM CONTACT NAME/PHONE: James Stillwell 255-3717 PROGRAM / INITIATIVE TITLE: Federal Substance Abuse Prevention and Treatment Allocation Reduction Backfill (SAPT) GENERAL FUND: \$94,549
TARGETED CLIENTS: Substance Abusing Adults and Youth
PROGRAM DESCRIPTION: (Description of Program Change) (If proposing reductions to Contractors, provide name of contractor, program and amount) Federal SAPT funding, subvened through the State, have been reduced nationwide by one percent effective 10/1/06. This resulted in a reduction of the federal award to CBHS of \$94,549. Various Community Behavioral Health Services Substance Abuse contractors are impacted.
JUSTIFICATION: (required by the Mayor's Office) The categories reduced are as follows: Adolescent Treatment, \$4,724; Prevention, \$5,551, HIV Set-Aside, \$10,545; and, Discretionary (usually allocated to Residential treatment programs), \$74,059. Funding is requested to backfill the cuts.
IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED Based on the average outpatient unit rate of \$80 and based upon the average number of unduplicated clients for outpatient programs per thousand dollars, loss of this funding would result in 33 fewer
unduplicated clients served with the equivalent loss of 1,182 units of service.
EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) \$94,549 in Medical Services Contracts
IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)
N/A

INITIATIVE TITLE: Federal SAPT Funding Loss Backfill

Sources:	FY	Z 2007-08	Ongoing		
	\$	-	\$		
Subtotal Sources		-		-	
Uses: Salaries and Fringes 027 Medical Services Contracts	\$	- 94,549 -	\$	94,549 -	
Subtotal Uses		94,549		94,549	
Net General Fund Subsidy Required (Uses less Sources)	\$	94,549	\$	94,549	
Total FTE's	**************************************	0.0		0.0	

Ini	tiative	Number	<u>I16</u>
	(Lea	ve blank)	

DEPARTMENT NAME:	
San Francisco General Hospital	Public Health
Laguna Honda Hospital	CBHS - Mental Health
Primary Care	CBHS - Substance Abuse
☐ Jail Health	
Health At Home	_
DPH SECTION: Health Promotion and Prevention / Healt	h Education
PROGRAM CONTACT NAME/PHONE: Ginger Smyly/S	581-2425
PROGRAM / INITIATIVE TITLE: YouthPOWER (SAN	
Replacement)	•
GENERAL FUND: \$213,250	

TARGETED CLIENTS: Youth and children of all ages up to 24, their parents and family members, neighbors and other community residents, with a special focus on the Bayview-Hunter's Point District.

PROGRAM DESCRIPTION: (Description of Program Change)

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

The purpose of this initiative is to preserve funding for the YouthPOWER (Drug Free America) project. Federal grant funding for this program expires on 9/30/07. The goal of this project is to prevent youth access and abuse of alcohol and other substances. In a 2006 survey of 100 youth residing in the Bayview Hunter's Point District, 65% of them reported using alcohol within the last month, over twice the rate of their peers from other neighborhoods. This program is one of only two substance abuse prevention programs in San Francisco that uses an environmental approach, a key component of federal/state alcohol and other drugs' prevention framework, with a focus on preventing youth access to alcohol. This done by engaging youth in assessing physical and socio-economic factors that influence youth access to alcohol and other drugs, selecting and working on interventions that might change policies and/or those identified physical conditions, developing skills and abilities that youth can use throughout their lifetimes to be productive citizens. These efforts lead to improvements in the health of the whole community. This program has special focus on the Bayview-Hunter's Point District and is included as one of the Mayor's "Communities of Opportunity" programs, a CCSF initiative to provide services and improve the social environment of families in crisis who reside in seven "nodes" within the southeast sector of San Francisco. YouthPOWER can be expanded to include other neighborhoods with similar circumstances.

The proposed staffing would be used for the continuation of coordination and oversight of the coalitions/partnerships and other affiliations, as well as to provide technical assistance and training. The contractual services, or \$100,000, would be used to fund at least two Community Action Teams (CATs) that engage youth from the Bayview-Hunter's Point district.

JUSTIFICATION: (required by the Mayor's Office)

At a time when youth in the southeast sector report higher use of alcohol at younger ages than their peers citywide, a program that addresses eliminating youth access to alcohol is important. In the 7 total years of federal funding, YouthPOWER created a citywide coalition and several project-related partnerships which brought in millions of dollars to San Francisco to address gang violence (Gang Free), assess the extent of mental health and substance use problems (Newcomer Girls Project), develop youth development standards, practice and train the SFDPH and other city departments, organize and support agencies and youth (CATs) in working toward improving their communities and preventing youth access to alcohol and other drugs (Deemed Approved Uses Ordinance, Beautification of Third Street Stores) and train hundreds of youth of all ages in life-long skills and engage them in civic improvement activities in

their own neighborhoods, making them leaders among their peers. Due to the work they have done toward addressing environmental factors that lead their peers to substance use, these youth as leaders are less likely to use alcohol and other drugs themselves.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

This will eliminate environmental prevention services specifically targeting the Bayview Hunter's Point District. Directly, at least one organization and 10-12 youth and their families will be effected. Indirectly, all of the neighborhood youth will be effected, Bayview being the second largest District with children ages 0-18.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) Increase in expenses of \$213,250

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

Funding for 0.75 FTE 2822 Health Educator and 0.38 FTE 1446 Secretary II in FY2007-08.

INITIATIVE TITLE: Drug Free YouthPOWER Project (SAMHSA Grant Replacement)

C		FY	2007-08		Ongoing
Sources:		\$	-	\$	œ
Subtotal Source	es		509		-
Uses:					
001/013	Salaries and Fringe Benefits	\$	113,250	\$	151,000
021	Professional Services		100,000		100,000
Subtotal Uses			213,250		251,000
Net General F	und Subsidy Required				
(Uses less Sou	rces)	\$	213,250	\$	251,000
Total FTE's			1.13		1.5
New Positions	(List positions by Class, Title and FTE)				A A A A A A A A A A A A A A A A A A A
Class	Title	FTE's			
1446	Secretary II		0.38	\$	21,333
2822	Health Educator		0.75	\$	62,556
	•			-	83,889
	Fringe (35%)				29,361
Omanatina E				\$	113,250
Operating Explandex Code					
HCHPHHLTEDO	Character/Subobject Code GF 021/02700		_	\$	100,000

Initiative Number	<u>I17</u>
(Leave blank)	

DEPARTMENT NAME:	
San Francisco General Hospital Laguna Honda Hospital	Public Health CBHS - Mental Health
☑ Primary Care	CBHS - Substance Abuse
Jail Health	
Health At Home	
DPH SECTION: Primary Care	
PROGRAM CONTACT NAME/PHONE: Marcellina Og	
PROGRAM / INITIATIVE TITLE: PC Dental Position GENERAL FUND: \$174,050	Grant Backfill
CDNDA D1 0ND. \$174,030	
TARGETED CLIENTS: Community Oriented Primary C	are dental clients
PROGRAM DESCRIPTION: (Description of Progra	
(If proposing reductions to Contractors, provide name of c	
Annual General Fund support is requested for 1.85 unbudg 0.75 FTE Dentist.	geted Dental positions – 1.10 Dental Aide and
HISTIFICATION: (required by the Mayor's Office)	
JUSTIFICATION: (required by the Mayor's Office) Recent analysis indicates that while Primary Care dental s	ervices have 14.75 hudgeted dental positions
there are currently 16.60 staff occupying these positions re	esulting in 1.85 unbudgeted positions. This is a
result of dental grant reductions over the years and most refunded by the grants were moved to as-needed salaries in	ecently in the fall of 2006. Staff previously
salaries to fund permanent staff reduces the amount of as	needed salaries available for backfilling
physicians, nurse practitioners and registered nurses on pa	aid leave resulting in an unfavorable salary
variance in as-needed funding throughout Primary Care.	
IMPACT ON NUMBER OF CLIENTS SERVED AND	UNITS OF SERVICE PROVIDED
1,925 clients will not be able to receive dental services.	
EXPENSE AND REVENUE IMPACT (Reductions/Re	allocations-complete supporting budget doc)
\$174,050 for salaries and fringes in FY 2007-08 and \$232	,06/ thereafter.
IMPACT ON DEPARTMENT'S WORKFORCE (incr	rease or decrease of FTE's)
1.39 FTE new positions in FY 2007-08 and 1.85 FTE new	

INITIATIVE TITLE: Primary Care Dental Position Grant Backfill

Sources:		\$	FY 2007-08 (9 Months)	\$	Ongoing -
Subtotal S	Sources		-		· -
Uses:		THE SECOND VALUE OF THE SE			
	Salaries and Fringes Operating Expenses	\$	174,050	\$	232,067
Subtotal U	Jses		174,050		232,067
1	eral Fund Subsidy Required s Sources)	\$	174,050	\$	232,067
Total FT	E's		1.39		1.85
New Posi	tions (List positions by Class, Title and FTE)			<u> </u>	
Class	Title		FTE's		(9 Months)
2202	Dental Aide		0.83	\$	48,927
2210	Dentist		0.56	\$	79,999
	7.1				128,926
	Fringes (35%)	-			45,124
			1.39		174,050

Operating Expenses

Index Code Character/Subobject Code

DEPARTMENT NAME: San Francisco General Hospital Laguna Honda Hospital Primary Care Jail Health Health At Home	X Public Health, TB Control Section CBHS - Mental Health CBHS - Substance Abuse
DPH SECTION: Tuberculosis Control PROGRAM CONTACT NAME/PHONE: L. Masae K PROGRAM / INITIATIVE TITLE: Backfill 2007 CD GENERAL FUND: \$97,919	

PROGRAM DESCRIPTION: (Description of Program Change)

TARGETED CLIENTS: All San Francisco residents at risk for TB

The San Francisco DPH TB Control Section provides and oversees comprehensive TB services, including diagnosis, treatment, contact investigation, targeted community screening, patient outreach, surveillance, policy development, TB training and education to citizens and providers of San Francisco. San Francisco continues to have the highest TB case rates of any urban area in the U.S. (16.6/100,000 compared to a U.S. rate of 4.8/100,000) and multi-year TB outbreaks among our homeless living in shelters and hotels. 2006 represents a watershed year with the uncovering of multiple Tenderloin SRO hotel outbreaks, including a deadly multi-drug resistant strain and multiple cases linked to a busy AIDS daycare facility. The TB Clinic, located on the SFGH campus, currently serves 3,000 unduplicated patients annually, with a total of over 50,000 patient encounters.

JUSTIFICATION: (required by the Mayor's Office)

Over the past ten years, the program has undergone significant federal and state funding decreases along with annual cuts due to rising costs, salaries, congressional rescissions and CDC funding shortfalls. Use of formula funding calculations (primarily based on the number of cases) has exacerbated the cuts because of our success in decreasing our TB caseload by more than half in the past 10 years. As a result, 25 positions have been lost and programs targeting the highest risk populations in the jail, Chinatown and Tenderloin have been shut down. The Tenderloin outreach program was relocated to SFGH campus in December 2006 to help consolidate resources and preserve staff positions.

The CDC has indicated that there will be a 7% cut in 2007. The total 2007 CDC Grant award would be \$1,352,410 less 7% which would be a \$97,919 cut. General Funds are requested to backfill the cut.

For 2007-08, to offset the federal cuts, \$97,919 is requested from the General Fund to support the following existing positions: 0.5 FTE, 2591, Health Program Coordinator II; and a 0.5 FTE, 2908, Hospital Eligibility Worker.

- The Health Program Coordinator II position supports the surveillance, reporting, case management, and contact investigation and health worker supervision.
- The Hospital Eligibility Worker position provides administrative support, including data entry, patient registration and generation of revenues for the City and County through billing to third party payers for patient services provided.

Over the past nine years, TB has created an efficient billing system and successfully worked to maximize reimbursement from Medi-Cal Administrative Activities (MAA) surveys completed annually by staff

funded by the General Funds. The use of General Funds to support these positions would allow new reimbursement opportunities from the MAA Program.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

3,000 unduplicated patients annually, with a total of over 50,000 patient encounters

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) \$97,919 for salaries and fringes for existing positions

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

No new positions are added, 1 FTE (0.5 FTE, 2591, Health Program Coordinator II; and a 0.5 FTE, 2908, Hospital Eligibility Worker) would be moved from our CDC grant funds to the General Fund.

INITIATIVE TITLE: Backfill 2007 CDC Grant Cuts TB Control and Prevention

		FY 2	007-08		Ongoing
Sources:		\$	- ,	\$	
Subtotal Sources			-		-
Uses:	Salaries and Fringes	\$	97,919	\$	97,919
			-	·	,
Subtotal Uses					97,919
Net General Fund Sub	osidy Required				
(Uses less Sources)	•	\$	97,919	\$	97,919
Total FTE's			0.0		0.0
New Positions (List pos	sitions by Class, Title and FTE)				
Class	Title	FTE's			
2591	Health Program Coordinator II Existing			\$	40,313
2908	Hospital Eligibility Worker Existing			Ψ	32,214
					72,527
	Fringe (35%)				25,384
Operating Expenses				\$	97,919
Index Code	Character/Subobject Code				
			_	\$	***

Initiative	Number	<u> 119</u>
(Leav	ve blank)	

DEPARTMENT NAME:	
San Francisco General Hospital Laguna Honda Hospital	☐ Public Health☐ CBHS - Mental Health
Primary Care	CBHS - Substance Abuse
☐ Jail Health☐ Health At Home	
DPH SECTION: Communicable Disease Control and P	
PROGRAM CONTACT NAME/PHONE: Susan Ferny	rak, MD 554-2845/Lorna Garrido 554-2859
PROGRAM / INITIATIVE TITLE: Communicable D	isease Control Staff
GENERAL FUND: \$163,385	
TARGETED CLIENTS:	
PROGRAM DESCRIPTION: (Description of Prog	gram Change)
(If proposing reductions to Contractors, provide name o	f contractor, program and amount)
General Fund support is request for 1.0 FTE 2588 Healt	th Work IV and 1.0 FTE 2587 Health Work III
position to offset the reduction of grant funding for com-	municable disease control staff.

JUSTIFICATION: (required by the Mayor's Office)

Since 2002, the Department has had two positions in the Communicable Disease Control Unit (CDCU) funded by a grant from the Centers for Disease Control and Prevention (CDC) passed through the California Department of Health Services (CDHS). The principal goal of this CDC/CDHS program (formally known as the Public Health Emergency Preparedness Cooperative Agreement) has been to assist local health departments to develop and strengthen their infrastructure and capacity to respond effectively to bioterrorism or other infectious disease emergencies. To meet this goal, the Department had invested in hiring and training two health workers to conduct essential disease surveillance, investigations, and control activities, including:

- Receiving and investigating routine and urgent reports of over 80 disease and conditions as mandated by the California Code of Regulations (CCR), Title 17, Sections 2500-2505, 24 hours a day, 7 days a week
- Identifying, informing, and counseling SF residents who have been exposed to a communicable disease and assisting them in obtaining post-exposure prophylaxis if indicated
- Investigating disease outbreaks to identify the source and mode of transmission and to make recommendations for containing and stopping disease spread

The duties of both the HW IV and HW III primarily include state-mandated functions of communicable disease surveillance and investigation; formulating disease control recommendations and interventions; and reporting to CDHS. The HW IV also ensures appropriate prioritization and timely follow-up of surveillance and investigation tasks and coordination of complex outbreak investigation activities. These positions are essential to disease control activities that are mandated by state law. The Department's ability to investigate and contain outbreak depends directly on the depth of experience and size of its workforce. Without these well-trained and experienced staff, the Department's capacity to effectively discharge its duties would be severely hampered. General Fund support for these positions would ensure timely and effective response to communicable disease to protect the health of SF residents and to maintain the Department's compliance with state regulations.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

In 2005, the Department investigated over 1,100 cases of reportable diseases. In the first 6 months of 2006, over 40 outbreaks have been investigated. Communicable disease outbreaks can range in size from several isolated cases to several hundred cases. The amount of investigational and follow-up work is considerable, and continued funding of these two health workers is essential to keeping the caseloads manageable.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) \$163,385 for salaries and fringes

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

No net impact on department's workforce (positions will be moved from grant to General Fund)

INITIATIVE TITLE: Communicable Disease Control Staff

Sources:			FY 2007-08		Ongoing	
Sources.			\$	-	\$	~
Subtotal S	Sources			_		-
Uses:				•		
	Salaries and Fringes		\$	163,385	\$	163,385
	•			-		
				•		-
Subtotal I	Uses			163,385		163,385
Net Gene	eral Fund Subsidy Required					
(Uses less	s Sources)		\$.	163,385	\$	163,385
Total FT	E's			0.0		0.0
New Posi	itions (List positions by Class, Title a	and FTE)		A		4110
Class	Title	,	FTE's			
2588	Health Worker IV				\$	65,955
2587	Health Worker III	7 . 1 5				55,071
		Total FTE Total Salaries				101.006
		Fringe (35%)				121,026 42,359
		1 mge (5570)			\$	163,385
	g Expenses				7	202,200
Index Co	de Character/Subobject Code					
				_	\$	long.

Initiative Number	<u> 120</u>
(Leave blank)	

2007-2008 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: Communicable Disease Control and Preprogram Contact Name/Phone: Susan Fernya Program / Initiative Title: Communicable Disease Control and Preprogram / Initiative Disease Control and Preprogram / Initiative Disease Control and Preprogram / In	k, MD 554-2845/Lorna Garrido 554-2859			
TARGETED CLIENTS:				
PROGRAM DESCRIPTION: (Description of Progr (If proposing reductions to Contractors, provide name of General Fund support is requested for 1.0 FTE 2593 Hea the reduction of grant funding for the Communicable Dis	contractor, program and amount) 1th Program Coordinator III position to offset			

JUSTIFICATION: (required by the Mayor's Office)

The Director of the Communicable Disease Prevention Unit (CDPU) oversees the operations of several programs within the Communicable Disease Control and Prevention Section. The responsibilities of the position include:

- Development, implementation and evaluation of all immunization programs, for pediatrics, adolescents and adults in San Francisco;
 - Manage State mandated activities such as distribution of State-supplied vaccines as well as those provided under the Vaccine for Children program. Ensure that public primary care clinics are supplied with vaccines, oversee annual kindergarten and childcare immunization assessments, monitor monthly/quarterly vaccine utilization and inventory, and conduct annual coverage assessments of primary care clinics.
 - Oversee all aspects of adult influenza and hepatitis programs, including distribution of vaccine, holding public flu clinics, special flu clinics for underserved populations, and hepatitis prevention projects targeting specific populations. Provide technical assistance to local medical providers around all immunization issues.
 - Oversee intensive case management of the approximately 200 babies born each year in San Francisco to women who are chronically infected with hepatitis B.
 - Oversee existing contracts between SFDPH and community health centers and San Francisco Immunization Coalition.
 - Prepare and manage the Immunization Grant budget to ensure proper staffing and project capabilities. Prepare the immunization program's annual budget. Manage procurement of vaccines.
 - Supervise the work of the Pediatric and Adolescent Immunization Coordinator, the Adult Immunization Coordinator, the Perinatal Hepatitis B Coordinator and the Immunization Programs Health Educator.
- Administrative oversight of the Adult Immunization and Travel Clinic;
 - o Prepare the Clinic's annual budget.
 - Ensure appropriate staffing and service delivery.

- o Ensure adequate vaccine and other medical supplies in accordance with all City and County purchasing regulations.
- Development, implementation and evaluation of the California Automated Immunization Registry (CAIR) software in San Francisco;
 - Ensure appropriate infrastructure for customer service and quality assurance for all participating providers.
 - o Increase the number of providers utilizing immunization registry from both the public and private health care sectors.

This position is also responsible for emergency preparedness activities including the development of SFDPH's mass prophylaxis plan.

The funding for the CDPU Director has been provided through two existing grants: 1) the Immunization grant from the California Department of Health Services, and 2) the Cities Readiness Initiative (CRI) grant. However, the Immunization grant award has remained unchanged over the past several years even as personnel expenses increase with inflation. As the immunization program grows more complex with the introduction of new vaccines and the expansion of the target population, the gap between program needs and financial support continue to widen. In recent years, the department has turned increasingly to the Cities Readiness Initiative grant to supplement funding for this position by giving the CDPU Director additional emergency preparedness responsibilities. However, the CRI grant was significantly cut in FY 2006-07, and the department expects additional cuts in FY 2007-08. As a result, grant funding in FY 2007-08 will be insufficient to support this position. The department requests General Fund support for this position to replace the loss of grant funding.

The CDPU Director's position is critical to SFDPH's ability to sustain comprehensive immunization programs and perform State-mandated activities. Lack of oversight and direction of these activities will compromise the program's goal protecting the public's health through the provision of immunization services.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The programs overseen by the CDPU Director serve a number of client populations. The Adult Immunization and Travel Clinic is a fee-for-service operation that serves over 10,000 per year. The clinic's volume has grown dramatically in the past several years and is expected to exceed 12,000 clients in FY 2007-08. The Vaccines for Children program serves over 15,000 children. The hepatitis immunization program serves approximately 6,000 adult clients annually via 30 health centers and local medical providers. The Department also conducts periodic off-site immunization clinics throughout the city. The influenza immunization program serves 40,000 clients annually. Clients affected by all programs include indigent residents of San Francisco, school-age children, babies born to women with chronic Hepatitis B infection, and special targeted such as men who have sex with men. In addition, the programs also serve San Francisco's clinical community through the provision of high-quality technical assistance to medical providers (both private and public sectors).

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

\$131,567 in salaries and mandatory fringe benefits

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

No net impact on department's workforce. (position will move from grants to General Fund)

INITIATIVE TITLE: Communicable Disease Prevention Unit Director

Sources:		FY	FY 2007-08		Ongoing		
Sources.		\$	•	\$	-		
Subtotal S	Sources		••		-		
Uses:							
	Salaries and Fringes	\$	131,567	\$	131,567		
			-		5		
Subtotal U	Jses		131,567		131,567		
	ral Fund Subsidy Required						
(Uses less	Sources)	\$	131,567	\$.	131,567		
Total FT	E's		0.0		0.0		
New Posi	tions (List positions by Class, Title and FTE)						
Class	Title	FTE's					
2593	Health Program Coordinator III			\$	97,457		
	Total Salaries				97,457		
	Fringe (35%)				34,110		
Operatin	g Expenses			\$	131,567		
	le Character/Subobject Code						
	· .		«n	\$	_		

Initiative Number	<u>I21</u>
(Leave blank)	

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: STD Prevention and Control Services PROGRAM CONTACT NAME/PHONE: Wendy Wolf/PROGRAM / INITIATIVE TITLE: Chlamydia Eradica (YUTHE) GENERAL FUND: \$49,625	487-5501 tion Among African American Youth
TARGETED CLIENTS: 12 – 24 Year Old African Amer View/Sunnyvale Neighborhoods of San Francisco	ican Youth Who Reside or Hang Out in the Bay
PROGRAM DESCRIPTION: (Description of Progra (If proposing reductions to Contractors, provide name of contractors)	am Change) ctor, program and amount)

The Youth United Through Health Education (YUTHE) Project's mission is to reduce chlamydia among African American youth in San Francisco through the use of youth peer educators performing street outreach and STD/HIV education and screening. YUTHE targets youth and young adults ages 12-24 who reside in the five San Francisco neighborhoods with the highest STD rates among heterosexuals: Potrero Hill, Western Addition, Visitacion Valley, Sunnydale and Bayview Hunters Point.

YUTHE was developed as a collaborative research intervention project between the STD Program and the UCSF. The intervention successfully increased knowledge about STD/HIV and increased STD testing among youth living in the high STD morbidity neighborhoods. Due to its success, the YUTHE Project was expanded to include field-based STD screening at community-based locations, in collaboration with Providence Foundation. It has been formally evaluated and shown to be very successful in reducing rates of gonorrhea and chlamydia among African American youth in San Francisco.

JUSTIFICATION: (required by the Mayor's Office)

Over the past 11 years, the STD Program has received research funding from the State of California (7 years) and from the Centers for Disease Control (last 3 years) to fund the Chlamydia Eradication Project/YUTHE Project. In FY 2005-06, due to decreases in grant funding, two of four YUTHE Project staff were laid off and community-based screenings were discontinued. Funding was also lost for the .50 FTE YUTHE Program Supervisor and was temporarily absorbed by the annual STD Program Grant. The remaining staff was only able to perform 15 workshops reaching 805 males and females compared to the 30 workshops that reached 285 adolescents and young adults in the previous year. The number of condoms and lubricant packets distributed decreased from 15,000 given to 4,570 young adults males to 11,000 condoms given to 1,400 young adults.

Coinciding with decreased YUTHE activities, gonorrhea case rates in San Francisco significantly increased throughout 2005. An analysis of gonorrhea rates compared to YUTHE Program encounters from January 03 – January 06, showed a marked correlation between the number of YUTHE encounters and numbers of gonorrhea cases – the more YUTHE Program encounters that were conducted, the less

gonorrhea cases were reported.

Research dollars have demonstrated the value of this intervention. However due to the intervention's repeated success, it is no longer eligible for research or other types of outside funding because it is no longer considered to be an innovative or new program.

The current research funding, which funds the peer health educators, is limited and due to expire in 9/29/08 and no other funding has been identified. In FY 2006-07 the budget for the program is \$96,390 (\$49,625 in research grant funds and \$46,765 in STD Grant funds) and covers a 0.50 supervisor who is a civil service employee and two half time contractual peer outreach worker positions. However, two contractual positions are not sufficient to perform all of the outreach and community based screenings necessary to achieve the research results described above. Four contractual positions (the number hired during the original research project) are needed to achieve the results of the research previously conducted and evaluated.

In anticipation of research grant funds expiring, and in an attempt to increase the YUTHE Program's funding back to its original level, an application was made, in April 2006, for funding for the YUTHE Project under the AIDS Office Alternative Solicitation #3-2006. The Solicitation was for HIV related Health Education and Risk Reduction for Youth in San Francisco. The proposal was ranked 4th, and only the top three proposals received funding.

Contractual funding is requested to fund the two part-time youth peer educator positions that were defunded in FY 2005-06. These combined with the two currently funded peer educator positions (one year of funding left) will ensure that the Program is fully staffed in FY 07-08. In FY 08-09, funding will be required for the other two peer educators that will be defunded as of 9/29/08.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Nearly 3,500 at risk African American youth will be at greater risk for being infected with gonorrhea and/or chlamydia, which could result in another STD outbreak as well as an increase in new HIV cases being diagnosed in the City.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) \$49,625 in contractual funds

r decrease	of FTE's
ſ	decrease

None

INITIATIVE TITLE: Chlamydia Eradication Among African American Youth (YUTHE)

Sources:	FY 2007-08		Ongoing	
·	\$	-	\$	-
Subtotal Sources		- .		-
Uses:				
Salaries and Fringes Contractual Services	\$	- 49,625 -	\$	49,625
Subtotal Uses		49,625		49,625
Net General Fund Subsidy Required				
(Uses less Sources)	\$	49,625	\$	49,625
Total FTE's		0.0		0.0

Class Title FTE's Fringe (35%) \$ **Operating Expenses** Index Code Character/Subobject Code HCHPDSTDSVGF 02799, Professional Services

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

\$49,625

\$49,625

Initiative 1	Number	I22
(Leav	e blank)	

DEPARTMENT NAME: San Francisco General Hospital Laguna Honda Hospital Primary Care Jail Health Health At Home
DPH SECTION: Community Behavioral Health Services – Substance Abuse PROGRAM CONTACT NAME/PHONE: Alice Gleghorn, 255-3722 PROGRAM / INITIATIVE TITLE: SAMHSA Haven Grant Backfill GENERAL FUND: \$79,379
TARGETED CLIENTS: N/A
PROGRAM DESCRIPTION: (If proposing reductions to Contractors, provide name of contractor, program and amount) The HAVEN grant, which is expiring in FY 2006-07, provides program evaluation funding for a 0.50 FTE Epidemiologist I (2802) and 0.50 FTE Health Worker I (2585).
JUSTIFICATION: (required by the Mayor's Office)
This expiring grant will create a significant void in data collection and analysis of: clients' knowledge, needs and satisfaction with the City's behavioral health services; the integrity of CBHS' billing information; CBHS service/slot capacity by modality; and, outcomes for all populations including homeless. The staff funded by this grant also provides data to outside researchers (e.g., SFGH, National Institute of Health, and UCSF) regarding substance use, and prepare Accept and Expend requests to the Health Commission and the Board of Supervisors.
IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED
N/A
EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) \$79,379 in FY 2007-08
9/2,3/2 III F I 200/-08
IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)
Add 0.50 FTE Epidemiologist I (2802) and 0.50 FTE Health Worker I (2585).

INITIATIVE TITLE: HAVEN Grant Loss Replacement

				 W.
Sources:		FY	2007-08	Ongoing
Sources.	General Fund	\$	79,379	\$ 79,379
Subtotal S	Sources		79,379	79,379
Uses:				
	Salaries and Fringes 027 Medical Services Contracts	\$	79,379	\$ 79,379
			des .	ens.
Subtotal	Uses		79,379	79,379
	eral Fund Subsidy Required			
(Uses les	s Sources)	\$	(0)	\$ ***
Total FT	E's		1.00	1.00
New Pos	itions (List positions by Class, Title and FTE)			C. Comp. 19 Charles
Class	Title	FTE's		
2802	Epidemiologist I			\$ 35,854
2585	Health Worker I		0.50	22,945
	Subtotal			 58,799
	Fringe (35%)		1.00	 20,580
Onomatic	g Evnonger			\$ 79,379
Index Co	g Expenses de Character/Subobject Code			
	CRES227 027 Medical Services Contracts		_	\$

Initiative	Number	<u>123</u>
	(Leave	blank)

DEPARTMENT NAME: X San Francisco General Hospital						
DPH SECTION: San Francisco General Hospital PROGRAM CONTACT NAME/PHONE: Roland Pickens, 206-3528 PROGRAM / INITIATIVE TITLE: MammoVan & Avon Breast Center Cancer Education – Expired Grant GENERAL FUND AMOUNT: \$113,034 TARGETED CLIENTS: Patients needing mammograms and cancer education						
PROGRAM DESCRIPTION: (Description of Program Change) (If proposing reductions to Contractors, provide name of contractor, program and amount) In 2003 UCSF donated the Mammo Van to DPH/SFGHMC to help improve the breast cancer screening rates and timely appointment dates for underserved women. The van visits the Community Health Centers and also sees patients at various health fairs. The Avon Foundation provided gift funding to operate the Mammo Van for two years that will expire in FY 2006-07.						
JUSTIFICATION: (required by the Mayor's Office) Experience over the past two years has shown the Mammo Van to be very effective, having cut the wait for a mammogram from 6 months to 20 days at 15 Miles and 15 Mil						
for a mammogram from 6 months to 30 days or less. The AVON Foundation funding also provided for a health educator, who provides education to patients in all phases of the breast care program. The staffing to operate the education program needs to be continued with the general fund subsidy.						
IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED Continued operation of the Mammo Van will allow for maintaining appointment wait times at 30 days or						
less and for increased opportunities to increase the breast cancer screening rates for underserved women. Currently, the Mammo Van serves 1,200 to 1,500 patients annually.						
EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc) Increasing expenses by \$113,034 in FY 2007-08 and ongoing.						
IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)						
1.00 FTE in FY 2007-08 and ongoing.						

INITIATIVE TITLE: MammoVan & Avon Breast Center Cancer Education - Expired Grant

Sources:			FY 2007-08 (12 Months)		Ongoing (12 Months)	
Sources:						
Subtotal Source	es	\$	_	\$		
Uses:				Ψ	_	
	Salaries and Fringes	\$	113,034	\$	113,034	
Subtotal Uses		\$	113,034	\$	113,034	
Net General F	und Subsidy Required				414	
(Uses less Sou	rces)	\$	113,034	\$	113,034	
Total FTE's			1.00		1.00	
New Positions	(List positions by Class, Title and FTE)	L.				
Class	Title		FTE's		(12 Months)	
2822	Health Educator		1.00		83,729	
	D: (050/)		1.00		83,729	
	Fringes (35%)	•			29,305	
					113,034	

Operating Expenses

Index Code

Character/Subobject Code