



London M. Breed
Mayor

Grant Colfax,
Director of Health

MEMORANDUM

DATE: March 13, 2019

TO: President Ed Chow and Honorable Members of the Health Commission

FROM: Greg Wagner, Chief Financial Officer *fw GC*

THROUGH: Grant Colfax, Director of Health

RE: **FY 2019-2020 and FY 2020-2021 Proposed Budget – Second Hearing**

At the March 19th Commission meeting we will have the second hearing on the Department of Public Health's proposed budget for FY 2019-20 and 2020-21 (FY 19-21). As you recall, our first hearing on February 5th included an overview of the Department's base budget, key areas of focus for FY 19-21 and our initial set of initiatives to meet the Mayor's general fund target. In the second hearing we will introduce additional proposed initiatives. We are requesting Commission approval of the initiatives from both meetings for submission to the Controller and Mayor's Office.

As you know, Mayor Breed has already initiated a number of significant new investments in mental health and substance use treatment programs that will take effect during the FY 19-21 budget cycle. These programs will substantially increase DPH's ability to address the complex health needs of individuals experiencing homelessness and help those affected by the national crisis of opiate and methamphetamine use. These investments include:

- Funding for 72 new substance abuse residential step-down recovery beds to allow for continued treatment and stabilization for those with addiction after completing residential treatment programs.
- 14 additional beds at St. Mary's Healing Center, a Mental Health Rehabilitation Center program serving individuals with behavioral health needs.
- \$3.1 million to fund outreach and treatment efforts for homeless individuals with behavioral health and substance use disorders. This funding will expand services in support of the Healthy Streets Operation Center's (HSOC), including case management, clinical services, and social worker engagement. The funding will increase the number of clinicians, social workers, and peer navigators; augment the Street Medicine Team and Harm Reduction Van; and extend hours of operations for programming and services to include more nights and weekends.
- A 14-bed expansion of the Hummingbird program, a psychiatric respite program on the campus of Zuckerberg San Francisco General Hospital.

In addition to these investments, initiatives to be presented to the Commission in March include:

Establishing an Office of Equity – Equity is one of the department’s “true north” Lean strategic goals. In keeping with this priority, DPH will establish a new Office of Equity to address external inequities in the health outcomes for our patients as well as internal inequities in our workforce. This new office will be staffed by reassigning existing staff and adding two new full time equivalent staff members to support workplace equity with department-wide training and education. It will work in an integrated and collaborative manner across the Department, including and especially with Human Resources with regard to internal equity concerns. In addition, the initiative supports DPH’s participation in the Government Alliance on Race and Equity and racially-focused cultural humility training.

Additional Revenue Changes – Based on state projections, there are increases in 2011 Mental Health Realignment offset by additional reductions in revenue in the Population Health Division.

Replacement Environmental Health Database System – This initiative replaces Environmental Health’s current outdated database to create a robust permit tracking system. This new system will be one system of record for common customers and permits across 20+ programs, reducing inefficient paper documents and streamlining tracking. Funding for this project will come from prior year fees collected under the Refuse Lien Program.

Improving Contracts Management – In the last decade, DPH’s contracts budget has increased by 40% without a corresponding increase in permanent staffing. To maintain proper level of support and ensure timely development, implementation, and modifications of contracts, DPH needs to increase its capacity. This initiative proposes to add three additional permanent contracts staff and increase work order funding to the Office of Contracts Administration under the City Administrator.

Creating the “Schegistration” Role – Epic, DPH’s new electronic health record system is designed to reflect best practices in healthcare, which includes a combined role of scheduling, pre-registration and eligibility review, also known as Schegistration. To ensure consistency with civil service job classes, we will convert approximately 130 front line workers and 12 supervisors from existing positions primarily from the health worker or clerical classification series to the hospital eligibility worker series. Not only would this change reorganize our workforce to reflect the workflow in Epic, but will reduce the number of “hand offs” for patients, improving satisfaction and create standard work throughout the department.

Zuckerberg San Francisco General (ZSFG) Equipment Service Maintenance Agreements and Leases – As part of the opening of the new ZSFG in 2016, the department purchased and leased new equipment. These initial transactions included three year service agreements and/or three year lease terms. Starting in FY 20-21, these agreements will need to be renewed and maintained at annual cost of \$3.3 million.

Contingency Reduction Proposal: In addition to initiatives to meet target reductions, the Mayor’s Office instructed departments to propose contingency reductions of one percent and increasing to two percent. For DPH, this target represents \$13 million in FY 19-20 and increasing to \$26.1 million in FY 20-21. While have met our initial reduction targets with projected increases in revenue, the projected growth is insufficient to meet the contingency target. Since it is unclear whether contingency proposals will be needed to balance, DPH proposes to submit unspecified salary savings to meet the contingency target. Should the

Mayor's Office need to execute department's contingency proposals to balance, we will work with closely with the Mayor's Office and our department leadership to determine how to minimize service impacts and update the Commission as needed.

These initiatives results in a net positive balance of \$281,913 as summarized below. With your approval we will submit the full proposal presented in the last two budget hearings to the Mayor and Controller's Office.

Budget Instructions	FY 19-20	FY 20-21	Two-Year Total
2% General Fund Reduction Target	\$ (13,062,251)	\$ (26,124,502)	\$ (39,186,753)
Revenue Growth Assumed in Deficit	(12,935,644)	(29,260,883)	(42,196,527)
	(25,997,895)	(55,385,385)	(81,383,280)
Initial Set of Initiatives to Meet Target			
Revenue	\$ 62,462,162	\$ 44,148,436	\$ 106,610,598
Revenue Neutral	\$ -	\$ -	\$ -
Emerging Needs	\$ (10,573,123)	\$ (14,372,281)	\$ (24,945,405)
Total Proposed	\$ 51,889,038	\$ 29,776,155	\$ 81,665,193
Net Balancing - Above/(Below) Target	\$ 25,891,143	\$ (25,609,230)	\$ 281,913
1% Contingency Reduction - Salary Savings	(13,062,251)	(26,124,502)	\$ (39,186,753)
Other Initiatives - No Impact on Balancing			
DPH Inflationary on Pharmacy, Food and Laundry	-	\$ (6,406,332)	\$ (6,406,332)

We will keep you informed and as necessary schedule any additional hearings as our initiatives are considered for the Mayor's Proposed Budget on June 1.

FY 19-21 PROPOSED BUDGET

Div	Item	Description	FY 19-20				FY 20-21				Comment
			FTE Change	Expend Incr/(Decr)	Revenues Incr/(Decr)	Net GF Impact Favorable/ (Unfavorable)	FTE Change	Expend Incr/(Decr)	Revenues Incr/(Decr)	Net GF Impact Favorable/ (Unfavorable)	
MAYOR'S INSTRUCTIONS											
		2% General Fund Reduction				\$ (13,062,251)			\$ (26,124,502)		
		Revenues Assumed In Deficit				\$ (12,935,644)			\$ (29,260,883)		
		Additional 1% Contingency				\$ (6,531,125)			\$ (13,062,251)		
REVENUE AND SAVINGS											
GH	A1	Zuckerberg San Francisco General (ZSFG) and Primary Care Baseline Revenues and Medi-Cal 1115 Waiver Changes	-	\$ 12,881,707	65,100,618	\$ 52,218,911	-	\$ (4,652,881)	25,343,628	\$ 29,996,509	Annual adjustments to ZSFG, Primary Care and SFHN revenue based on actual projections related to Medical, Capitation, Medicare and other patient revenues.
LH	A2	LHH Baseline Revenues	-	\$ -	7,631,049	\$ 7,631,049	-	\$ -	11,553,674	\$ 11,553,674	Annual adjustment to baseline revenues at Laguna Honda Hospital due to legislated state rate increase.
BH	A3 - New	2011 Mental Health Realignment	-	\$ -	3,000,000	\$ 3,000,000	-	\$ -	3,000,000	\$ 3,000,000	Adjustments to mental health revenues for 2011 State Realignment and Short-Doyle Medi-Cal for mental health to match projections.
PHD	A4 - New	Backfill Federal and State Funding Reductions for Population Health	-	\$ -	(387,798)	\$ (387,798)	-	\$ -	(401,747)	\$ (401,747)	Backfills federal and state reductions to the Center for Learning and Innovation, Disease Prevention and Control, snf Public Health Emergency and Preparedness.
			-	\$ -	-	\$ -	-	\$ -	-	\$ -	
TOTAL REVENUE			-	\$ 12,881,707	75,343,869	\$ 62,462,162	-	\$ (4,652,881)	39,495,555	\$ 44,148,436	
REVENUE NEUTRAL											
	B1	Annual Adjustments to Environmental Health	-	\$ 880,936	880,936	\$ -	-	\$ 880,936	880,936	\$ -	Annual and legislated increases in Environmental Services inspection fees to cover related program expenditures.
	B2 - New	Environmental Health Data System Replacement	-	\$ 5,000,000	5,000,000	\$ -	-	\$ -	-	\$ -	New permit tracking system funded by Refuse Lien funding.
			-	\$ -	-	\$ -	-	\$ -	-	\$ -	
TOTAL REVENUE NEUTRAL			-	\$ 5,880,936	5,880,936	\$ -	-	\$ 880,936	880,936	\$ -	
EMERGING NEEDS - DPH											
LHH and ZSFG	C1	Laguna Honda Hospital and Zuckerberg San Francisco General Salary Adjustments	-	\$ 4,527,796	-	\$ (4,527,796)	-	\$ 4,731,547	-	\$ (4,731,547)	Adjust salary savings at by \$2.2 million and Zuckerberg San Francisco General and \$2.5 million Laguna Honda Hospital to reflect current operating expenditures.
PHD and ZSFG	C2	Materials and Supplies Adjustments for Population Health and Zuckerberg San Francisco General	-	\$ 2,678,091	-	\$ (2,678,091)	-	\$ 2,678,091	-	\$ (2,678,091)	Adjusts materials and supplies spending by \$2.3 million at ZSFG and \$335,000 for Population Health.
JH	C3	Continuing Hepatitis C Treatment for Jail Health Patients	-	\$ 332,678	-	\$ (332,678)	-	\$ 332,678	-	\$ (332,678)	Increase Jail Health pharmaceutical budget to continue treatment of Hepatitis C (HCV) for those transferring into the jail who are already on treatment.

Div	Item	Description	FTE Change	Expend Incr/(Decr)	Revenues Incr/(Decr)	Net GF Impact Favorable/ (Unfavorable)	FTE Change	Expend Incr/(Decr)	Revenues Incr/(Decr)	Net GF Impact Favorable/ (Unfavorable)	Comment
DPH - AI	C4 - New	Establishing an Office of Equity	1.54	\$ 454,719	-	\$ (454,719)	2.00	\$ 542,120	-	\$ (542,120)	DPH will establish a new Office of Equity to address external inequities in the health outcomes for our patients as well as internal inequities in our workforce. This new office will support workplace equity with department-wide training and education. It will work in an integrated and collaborative manner across the Department, including and especially with Human Resources with regard to internal equity concerns. This initiative requests two new positions and additional funding for training and materials.
SFHN	C5 - New	Adoption of a Combined Scheduling and Registration Workflow	-	\$ 1,988,000	-	\$ (1,988,000)	-	\$ 2,044,658	-	\$ (2,044,658)	Epic, DPH's new electronic health record system is designed to reflect best practices in healthcare, which includes a combined role of scheduling, pre-registration and eligibility review, also known as Schegistration. To ensure consistency with civil service job classes, we will convert approximately 130 front line workers and 12 supervisors from existing positions. Actual costs and positions converted will depend on outcome of civil service process currently underway.
DPH - All	C6 - New	Increasing Contracts Capacity	2.31	\$ 591,840	-	\$ (591,840)	3.00	\$ 734,266	-	\$ (734,266)	To maintain proper level of support and ensure timely development, implementation, and modifications of contracts DPH needs to increase its capacity. This initiative proposes to add three additional permanent contracts staff and increase workorder funding to the Office of Contracts Administration under the City Administrator.
ZSFG	C7 - New	ZSFG Equipment Leases and Service Agreements	-	\$ -	-	\$ -	-	\$ 3,308,923	-	\$ (3,308,923)	As part of the opening of the new ZSFG, the department purchased and leased new equipment. These initial transactions included three year service agreements and/or three year lease terms. Starting in FY 20-21, these agreements will need to be renewed and maintained at annual cost of \$3.3 million.
			3.85	\$ 10,573,123	-	\$ (10,573,123)	5.00	\$ 14,372,282	-	\$ (14,372,282)	
TOTAL EMERGING NEEDS			3.85	\$ 29,335,766	81,224,805	\$ 114,351,200	5.00	\$ 10,600,337	40,376,491	\$ 29,776,154	
TOTAL ALL INITIATIVES											
DPH	D1	Pharmacy and Other Inflationary Costs	-	\$ -	\$ -	\$ -	-	\$ 6,406,332	\$ -	\$ (6,406,332)	Increased expenditure authority related to pharmaceuticals, food, as well as housing and laundry contracts to reflect inflation on the price of these critical supplies and services.
INFLATIONARY (Does not affect target)			-	\$ -	\$ -	\$ -	-	\$ 6,406,332	\$ -	\$ (6,406,332)	

2019-20 and 2020-21 Program Change Request

DIVISION:

- ☐ DPH – department wide ☐ Population Health ☐ SF Health Network Wide /
☐ San Francisco General Hospital ☐ Laguna Honda Hospital Managed Care
☒ Ambulatory Care: Behavioral
 Health

PROGRAM / INITIATIVE TITLE: **2011 Mental Health Realignment**

TARGETED CLIENTS: n/a

PROGRAM CONTACT NAME/PHONE: **Drew Murrell, Finance Manager**

2019-20 FTE Change	2019-20 FTE Cumulative Change	FY 2020-21 Net General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
n/a	n/a	\$3,000,000	\$3,000,000

PROGRAM DESCRIPTION: (brief description of proposed change)

Projected baseline revenue growth for State 2011 Realignment with corresponding increases to behavioral health contracts.

JUSTIFICATION:

Public Safety Realignment, enacted in early 2011, realigned funding for behavioral health services from the State to the County. This change, termed 2011 Realignment, meant that each county became responsible for managing the services within the 2011 Realignment funding level. The Governor's January budget grows funding for 2011 realignment by 9%. The proposed increase of \$3 million reflects San Francisco portion of this funding increase.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

n/a

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Increase of \$3 million in revenue.

IMPACT ON DEPARTMENT'S WORKFORCE :

n/a

INITIATIVE TITLE: 2011 Realignment

Description	FY 2019-20	FY 2020-21
Sources:		
Revenues 2011 Realignment	\$ 3,000,000	\$ 3,000,000
Subtotal Sources	\$ 3,000,000	\$ 3,000,000
Uses:		
Salary and Benefits	\$ -	\$ -
Operating Expense	\$ -	\$ -
Subtotal Uses	\$ -	\$ -
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)	\$ (3,000,000)	\$ (3,000,000)
Total FTE's	0.00	0.00

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
0		0.00			
0		0.00			
	Total Salary	0.00	-	0.00	-
	Fringe				-
	Total Salary and Fringe	0.00	0	0.00	0

Character/Subobject Code
527000 Professional Services

\$ - \$ -

FY 2019-20 & 2020-21 Program Change Request**DIVISION:**

☐ DPH – department wide ☒ Population Health ☐ SF Health Network Wide
☐ San Francisco General Hospital ☐ Laguna Honda Hospital ☐ Ambulatory Care _____

PROGRAM / INITIATIVE TITLE: **Backfill Federal and State Funding Reductions for Population Health Division**

TARGETED CLIENTS: Residents and visitors in San Francisco

PROGRAM CONTACT NAME/Title: **Maggie Han, PHD Budget Analyst**

FY 2019-20 FTE Change	FY 2020-21 FTE Cumulative Change	FY 2019-20 Net General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
n/a	n/a	(\$387,798)	(\$401,747)

PROGRAM DESCRIPTION: (brief description of proposed change)

SFDPH's Population Health Division (PHD) addresses public health concerns, including prevention and control for infectious diseases, monitoring of threats to the public's health, health promotion and education, and consumer safety. PHD implements traditional and innovative public health interventions. PHD has an annual budget of \$110 million and approximately \$63 million from federal, state and private grants. Due to changes in federal and state funding priorities, PHD expects a total shortfall of \$387,798 and \$401,747 in revenues in FY 2019-20 and FY 2020-21 respectively. These shortfalls affects Center for Learning and Innovation, Disease Prevention and Control, as well as Public Health Emergency Response and Preparedness Branches. As these grants provide support for core services as described below, a general fund backfill of these grants is necessary to continue our existing services.

JUSTIFICATION:

The Center for Learning and Innovation (CLI) is PHD's dedicated training and workforce development center and is charged with collaborating with each of the Branches and the DPH's Human Resources staff to meet the department's strategic goals of Developing Our People. Funds will maintain a staff person who work with the existing training staff on maintaining a Sharepoint portal of training opportunities and requirements; coordinating intern placements and mentoring through DPH-wide high school training program and Mayor's office summer programs for high school students; maintaining training infrastructure. Estimated general fund support are \$129,751 and \$134,447 in FY 2019-20 and FY 2010-21 respectively.

Disease Prevention and Control Branch protects the health of San Francisco residents and visitors through public health clinics (Tuberculosis clinic, City Clinic, the AITC Immunization and Travel Clinic), our Public Health Laboratory, and our chronic disease prevention and control team. This branch projects the follow revenue reductions:

STD City Clinic – Backfill requested to maintain staff who support a range of mandated public health functions aimed to decrease sexually transmitted diseases and their complications; provide culturally proficient STD diagnosis and treatment; decrease risk factors associated w/ poor sexual health; and provides support to community-based safety net STD screening and treatment programs and providers. Estimated general fund support are \$82,147 and \$85,099 in FY 2019-20 and FY 2020-21 respectively.

Tuberculosis (TB) Prevention and Control Program operates a centralized clinic that specializes in the education, prevention, diagnosis, and treatment of active disease and latent TB infection. Backfill requested to maintain staff who support mandated public health functions, aimed to decrease diagnosis and treatment of TB in San Francisco, including reading the daily microscopic smears, monitoring the solid growth media, inoculating and interpreting the drug susceptibility vials, and performing quality control measures. Estimated general fund support are \$14,929 and \$15,464 in FY 2019-20 and FY 2010-21 respectively.

Public Health Emergency Preparedness and Response (PHEPR) Branch serves the public, Department of Public Health (DPH), and partners by coordinating health emergency preparedness, response, and recovery efforts. PHEPR acts as stewards through strategic planning, efficient allocation of resources, and leveraging of SFDPH and citywide capabilities. PHEPR promotes a culture of preparedness to ensure that in an emergency, disease and injury are prevented. Accessible, timely, and equitable health and clinical services are available. Backfill position is critical and responsible for overseeing and directing the Public Health Emergency Preparedness for the Department, including managing the PHEP unit, PHEPR Logistics program, and the Medical Countermeasures program. Estimated general fund support are \$160,971 and \$166,737 in FY 2019-20 and FY 2010-21 respectively.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

Allows PHD to continue existing services to residents and visitors in San Francisco.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Revenue reductions of \$387,798 in FY 2019-20 and \$401,747 in FY 2020-21, which will be offset by an increase in general fund support for these services. There will be no changes to expenditures.

IMPACT ON DEPARTMENT'S WORKFORCE :

n/a.

INITIATIVE TITLE: Backfill of Federal and State Funding for Population Health

Description		FY 2019-20	FY 2020-21
Sources:			
Revenues			
CLI - CBA backfill		\$ (129,751)	\$ (134,447)
STD backfill		\$ (82,147)	\$ (85,099)
TB backfill		\$ (14,929)	\$ (15,464)
Emergency Preparedness		\$ (160,971)	\$ (166,737)
Subtotal Sources		\$ (387,798)	\$ (401,747)
Uses:			
Salary and Benefits			
Operating Expense		\$ -	
Subtotal Uses		\$ -	\$ -
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ (387,798)	\$ (401,747)
Total FTE's		0.00	0.00

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

<u>Class</u>	<u>Title</u>	FTE		FTE	
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
		<u>0.00</u>			
	Total Salary	0.00	-	0.00	-
	Fringe				-
	Total Salary and Fringe	0.00	0	0.00	0
Character/Subobject Code					
2700 professional services					
		\$	-	\$	-

FY 2019-20 & 2020-21 Program Change Request

DIVISION:☐ DPH – department wide☒ Population Health☐ SF Health Network Wide☐ San Francisco General Hospital☐ Laguna Honda Hospital☐ Ambulatory Care – Jail HealthPROGRAM / INITIATIVE TITLE: **Environmental Health Data System Replacement**

TARGETED CLIENTS: All San Francisco Residents and Regulated Business Establishments

PROGRAM CONTACT NAME/TITLE: June Weintraub and Megan Wier

FY2019-20 FTE Change	FY 2020-21 FTE Cumulative Change	FY 2019-20 General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
n/a	n/a	\$0	\$0

PROGRAM DESCRIPTION: (brief description of proposed change)

This initiative replaces Environmental Health's (EH) outdated database with a modern, robust permitting system. This new system will be a single system of record for permits across EH's 20+ programs, reducing inefficient paper documents (we will be completely paperless), streamlining workflows, and creating synergy between programs by facilitating information sharing.

JUSTIFICATION:

The current data and applications system ("Data system") is in an outdated system with limited functionality that creates inefficiencies in EH's workflow. The data system is also in vulnerable state. Failure could possibly compromise the ability of EH staff to meet dozens of local, state, and federal laws and regulatory mandates, and protect and promote the health of San Franciscans in the diverse industries under EH's purview.

Costs in the initiative include the design, development, and implementation of an integrated, functional and secure system that is useful for both administrative, field, quality improvement, and evaluation purposes. The current data system is the only system of record for the Branch without a paper back-up. If this system fails before it is replaced, it would impact thousands of businesses and the health of San Franciscans.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

Clients will benefit from the increased efficiency and service delivery of EH staff and systems. Public records requests will be easily facilitated by the new data system. By upgrading to new technology, there will be increased interoperability with other City agency's data systems (ie. EH's data system could "talk to" the planning department's data system).

Additionally:

- Clients will have increased visibility into the status of their applications or permits through a client facing portal. They will be able to track when their application/permit was submitted, where it currently is in the process, and what other steps are remaining. Through the portal, clients will also be able to update their information.
- Customer relationship management (CRM) capabilities will be included. This includes integrated management of correspondence, and the ability to proactively generate

- correspondence to constituents based on business rules.
- Client's confidential information will be kept private and adhere to SFDPH IT security requirements and data security policies.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Increase of \$5 million of project expenses funded by prior year fees assessed and collected on commercial and residential property liens. These liens are assessed on properties with unpaid refuse collection charges pursuant to Health Code 291.14. The portion of fee revenue being used for funding the Environmental Health System project is authorized specifically for administrative expenses borne by Environmental Health Programs.

IMPACT ON DEPARTMENT'S WORKFORCE:

Adds temporary salaries for a project based technical lead to support the development of this critical program.

INITIATIVE TITLE: EHS Data System Replacement

Description		FY 2019-20	FY 2020-21
Sources:			
	Special Revenue Fund - Refuse Lien Program	\$ 5,000,000	\$ -
	Subtotal Sources	\$ 5,000,000	\$ -
Uses:			
	Environmental Health Data System Replacement: Software + Implementation + On-going Maintenance	\$ 4,833,250	
	Temporary Salary and Benefits	\$ 166,750	
	Subtotal Uses	\$ 5,000,000	
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ -	\$ -
Total FTE's			

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>	
TEMP	TEMP Salaries	0.00	115,000
0		0.00	
0		0.00	
0		0.00	
0		0.00	
0		0.00	
0		0.00	
0		0.00	
0		0.00	
0		0.00	
0		0.00	
		0.00	
	Total Salary	0.00	115,000
	Fringe	45.0%	51,750
	Total Salary and Fringe	0.00	166,750

Character/Subobject Code
2700 professional services

\$ - \$ -

FY 2019-20 & 2020-21 Program Change Request**DIVISION:**☒ DPH – department wide☐ Population Health☐ SF Health Network Wide☐ San Francisco General Hospital☐ Laguna Honda Hospital☐ Ambulatory Care _____PROGRAM / INITIATIVE TITLE: **Establishing an Office of Equity**

TARGETED CLIENTS: All DPH staff and clients

PROGRAM CONTACT NAME/TITLE: **Ayanna Bennett**

FY2019-20 FTE Change	FY 2020-21 FTE Cumulative Change	FY 2019-20 General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
1.54	2.00	\$454,719	\$542,120

PROGRAM DESCRIPTION: (brief description of proposed change)

Equity is one of the department's true north Lean strategic goals. However, health inequities continue to be severe in multiple communities in San Francisco, including and especially in the Black/African American population. An institutional focus and accountability structure is needed. In keeping with this priority, DPH will establish a new Office of Equity to address external inequities in the health outcomes for our patients as well as internal inequities in our workforce. This new office will be staffed by reassigning existing staff and adding two new full time equivalent staff members to support workplace equity with department-wide training and education. It will work in an integrated and collaborative manner across the Department, including and especially with Human Resources with regard to internal equity concerns. In addition, the initiative also funds contracted training and materials from Government Alliance on Race and Equity and racially focused cultural humility training.

JUSTIFICATION:

DPH, in collaboration with community partners and other stakeholders, has been working to improve equity, both in term of external health outcomes for our patients and internally for our workforce. Examples of our efforts to improve patient outcomes include disease specific efforts like those in HIV or heart disease, or population specific efforts like the Pacific Islander Task Force and the Black African American Health Initiative. While there have been some modest gains through these efforts, the department has been less effective, in part due to lack of staff training and equity-focused leadership. Our efforts to improve workforce equity have included changes in human resources policies around hiring and some target training for managers and executives. These efforts, however, still need to reach a majority of staff.

The Office of Equity will be responsible for creating infrastructure and supporting a culture that expands and enhances our work within community health and workforce equity. Working with DPH leadership, Human Resources, and community stakeholders, staff will support and align health equity programming for patients and communities to share best practices, ensure collaboration among divisions, provide advanced equity training, and provide accountability for health equity goals at a department level. The additional staff will focus on these issues fully and allow the Department to focus on interventions we need to make more rapid progress in meeting equity goals.

This new office will also create a new equity training infrastructure with 2.0 FTE and contracted training support including the Government Alliance on Race and Equity, (GARE). This workplace focused team will also help to establish supports for managers in creating and enforcing an equitable workplace culture. Current training resources in the department do not have the depth of experience on this topic to move forward efficiently and address complex issues of legal or regulatory importance. The goals of all training will be:

1. To promote and enhance racial sensitivity and awareness between and among all staff
2. To provide a framework for conducting progressive and productive conversations about race, racism, and other dimensions of diversity and discrimination to improve equity outcomes
3. To enhance the delivery of quality, racially sensitive, culturally humble, and trauma informed care to DPH's patients and clients.

In addition to the core staff training that these new staff will help design and implement, we will have additional in-depth training for managers and champions among our staff. We will establish a policy-making group that will evaluate and create policy that can advance racial equity across the Department. GARE has agreed to work with DPH to design an intensive health-focused equity policy curriculum for designated staff. This curriculum will address equity-related issues unique to health and health care and provide the scientific and medical evidence clinical and public health staff need to support changes in healthcare and public practices. In addition to GARE training, DPH will also add additional trainings on racially focused cultural humility and cross-racial communication. The goal of these added resources will be to deepen staff and leaderships skills at creating sustainable new practices and policies needed to create the change in our culture and system needed to advance equity.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

Racial health inequities are the result of both interpersonal and systemic behaviors. Bias and disrespect results in poor patient engagement, poor care quality, and poor health outcomes. Policies can often disproportionately affect communities of color. To address these causes of inequity we need to provide training that equips staff with the skills to identify and mitigate both systematic and individual biases. This work will impact the healthcare and the quality of service for clients and patients. We hold fairness and respect as core local values. We now need to make the investments that will help ensure those values are translated into improved outcomes for all residents.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Increase in FY 19-20 of \$454,719 and \$542,120 in FY 20-21.

IMPACT ON DEPARTMENT'S WORKFORCE :

Requested increase of 1.0 FTE Manager III, 0.5 FTE Healthworker IV, 0.5 FTE 9924 Public Service Aide annually.

INITIATIVE TITLE: Establishing an Office of Equity

Description		FY 2019-20	FY 2020-21
Sources:			
	Revenues	\$ -	\$ -
	Subtotal Sources	\$ -	\$ -
Uses:			
	Salary and Benefits	\$ 250,719	\$ 338,120
	Operating Expense	\$ 204,000	\$ 204,000
	Subtotal Uses	\$ 454,719	\$ 542,120
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 454,719	\$ 542,120
Total FTE's		1.54	2.00

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
0931	Manager III	0.77	121,896	1.00	163,183
9924	Public Service Aide - Health Services	0.39	17,028	0.50	22,796
2588	Health Worker IV	0.39	34,942	0.50	46,777
0		0.00			
0		0.00			
Total Salary		1.54	173,867	2.00	232,756
Fringe		44.2%	76,852	45.3%	105,364
Total Salary and Fringe		1.54	250,719	2.00	338,120
Character/Subobject Code					
527000 GARE Cohort Implementation			89,000		89,000
527000 Cultural Humility Training			100,000		100,000
540000 Training and Community Outreach Materials			15,000		15,000
				\$	-
			\$ 204,000	\$	204,000

FY 2019-20 & 2020-21 Program Change Request

DIVISION:☐ DPH – department wide☐ Population Health☐ SF Health Network Wide☒ San Francisco General Hospital☐ Laguna Honda Hospital☐ Ambulatory Care _____PROGRAM / INITIATIVE TITLE: **Adoption of a Combined Scheduling and Registration workflow**

TARGETED CLIENTS: All SFHN patients

PROGRAM CONTACT NAME/TITLE: **Ron Weigelt, Human Resources Director**

FY2019-20 FTE Change	FY 2020-21 FTE Cumulative Change	FY 2019-20 General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
n/a	n/a	\$1,988,000	\$2,044,658

PROGRAM DESCRIPTION: (brief description of proposed change)

Epic is DPH's new integrated electronic health record that will replace our current set of legacy systems that support the department's clinical operations, as well as, billing and revenue collections. The department plans to go-live with Phase 1 in August of 2019. As part of this transition, existing workflows at DPH will need to adapt new processes around its scheduling and registration functions to leverage the new system.

Currently, DPH has a decentralized staff that handles scheduling, registration and eligibility with functions that can vary depending on their location and their role. Within the Epic system, these functions are combined into a single "schegistration" role where the scheduling and the pre-registration, including the collection of demographic and financial information, is performed by the same person at the time an appointment is scheduled. In order to ensure that the future job duties of our current scheduling, registration and eligibility staff are within the scope of civil service job classes, DPH will convert approximately 130 positions and 12 supervising positions from existing classifications, primarily the health worker and clerical job class series, into 2903 Hospital Eligibility Workers and 2909 Hospital Eligibility Worker Supervisors respectively.

The conversion of these positions will not only ensure the consistency of workflow with Epic, but also transitions the department to a best practice in the health care industry.

JUSTIFICATION:

In addition to avoiding costly reconfigurations to the standard Epic system, this conversion will also achieve the following benefits:

1. Streamlined Workflow / Lean Staffing – staff accomplish the work more efficiently due to decreased hand-offs and follow-ups. Will allow for "lean" staffing in the clinics with staff who can perform schegistration.
2. Increased Patient Satisfaction – patients appreciate the reduced hand-offs and quicker check-in process at the "one stop shop" (either due to the registration already filled out or

the front desk staff completing the check-in without routing them elsewhere)

3. Revenue Cycle Standard Work – gathering insurance information upfront will allow proactive follow-ups with patients who need to see a financial counselor, obtain authorizations needed with insurance in advance, and help with completeness of registration information needed on the claim.
4. Revenue Security – allow proactive detection of patients who may not belong in DPH's network at the time of scheduling and defer/deter patients accordingly.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

As described above, this transition should result in more streamlined services for our clients.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Increase in salary and associated fringe benefits of \$2 million in FY 19-20 and inflated by 2.85% for FY 20-21. This projection is calculated by an estimated average increase in salary and fringe cost of \$14,000 per employee. The actual costs will depend on the number of internal staff that apply and their underlying classifications that will be converted.

IMPACT ON DEPARTMENT'S WORKFORCE:

The conversion of approximately 130 positions into the 2903 Eligibility worker classification and 12 Supervising Eligibility Workers positions. No staff member will lose employment as a result of this initiative. The adoption will only convert existing positions into the eligibility worker classification and will not change the number of positions within the department. The actual changes in classifications will be determined by the civil service application process currently underway.

INITIATIVE TITLE: "Schegistration"

Description		FY 2019-20	FY 2020-21
Sources:			
	Revenues	\$ -	\$ -
	Subtotal Sources	\$ -	\$ -
Uses:			
	Salary and Benefits	\$ 1,988,000	\$ 2,044,658
	Operating Expense	\$ -	\$ -
	Subtotal Uses	\$ 1,988,000	\$ 2,044,658
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 1,988,000	\$ 2,044,658
Total FTE's		-	0.00

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>	<u>FTE</u>
	Salary and Fringes	1,988,000	2,044,658
Total Salary and Fringe		0.00	2,044,658

FY 2019-20 & 2020-21 Program Change Request

DIVISION:

☒ DPH – department wide
☐ Zuckerberg San Francisco
 General

☐ Population Health
☐ Laguna Honda Hospital

☐ SF Health Network Wide
☐ Ambulatory Care _____

PROGRAM / INITIATIVE TITLE: Strengthening Contracts Development and Implementation

TARGETED CLIENTS: All DPH Programs

PROGRAM CONTACT NAME/TITLE: Mario Moreno, Dir. Of Contract Management and Compliance

FY2019-20 FTE Change	FY 2020-21 FTE Cumulative Change	FY 2019-20 General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
2.31	3.00	-(591,840)	-(734,266)

PROGRAM DESCRIPTION: (brief description of proposed change)

The proposed initiative would add three permanent Full-Time Equivalent (FTE) 1823 Senior Administrative Analyst positions to the Department of Public Health's (DPH), DPH Business Office, Office of Contracts Management and Compliance (OCMC) to support the development, approval and implementation of current and new contracts. This request would also add funding to the Department's existing work-order with the City's Office of Contracts Administration (OCA) to support the addition of a Supervising Purchaser, dedicated exclusively to DPH contracts.

JUSTIFICATION:

The Office of Contracts Management and Compliance (OCMC) is responsible for the development of all professional services contracts for the Department of Public Health (DPH). Currently, DPH has over 350 active contracts and 27 employees, of whom 21 are primarily dedicated directly to processing contracts, with the remaining staff performing key mandated supporting functions to achieve contract certification. Within the 21 contract analysts, four are temporary employees, so approval of the three new positions will maintain the current staffing level and enable the unit to respond to the continual increase in new contracts.

Each new contract is the result of a lengthy approval process beginning with the Civil Service Commission who approves contracting out for services (128 Professional Service Contract (PSC) approvals are maintained annually, with 60 new PSC's requested in FY18-19), followed by an even lengthier solicitation process to select a vendor (123 solicitations occurred in the past two years, and 70 sole source waivers were prepared in FY18-19), a multi-step internal review process for all contracts, followed by a multi-step approval process by up to more than five City entities (City Attorney, Office of Contract Administration, Contract Management Division, Office of Labor Standards Enforcement, the Board of Supervisors etc.), each of which has unique documentation and reporting requirements. Most contracts are modified annually, requiring the review and approval process to be repeated. In FY18-19, an anticipated 100 contract modifications will be processed for Behavioral Health Services contracts, with similar activity expected in FY19-20.

In the last decade, there has been significant growth in the volume of new contracts and related transactions due to new DPH departmental initiatives, such as the replacement of San Francisco General Hospital with the construction of the new Zuckerberg San Francisco General Hospital, the current development and implementation of the Department's \$350 million new Electronic Health Record, with little change in permanent staffing. From 2007-08 to FY 2018-19, DPH's total professional services budget increased by over 40% from \$356 million to \$521.6 million without a comparable increase to DPH contracts staff. In FY18-19, ninety new contracts were added, and in FY19-20 an expected fifty new contracts are expected as part of the new Electronic Health Record implementation.

At the same time, City approving departments are continually adding new requirements that result in extra steps in the certification process. Contract processing delays slow the implementation of new or expanded services, and existing contractors experience cash flow interruptions that can directly impact service capacity for existing clients.

The continually increasing volume of contracts noted above, is also creating a staffing issue for the Office of Contracts Administration (OCA) under the City Administrator, which approves all new DPH contracts and amendments. Other large City Departments have a dedicated Supervising Purchaser. The volume and complexity of DPH contracts requires dedicated attention to ensure a constant approval flow. Without which, there are delays in OCA's approval, which is required before DPH is able to reimburse contractors. For this reason, the Department is establishing a workorder to fund a dedicated supervising purchaser at OCA to facilitate timely contract review and approval.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

Approval will diminish the potential for contract certification delays, resulting in the interruption of cash flow and thus service delivery capacity for contractors serving the most vulnerable individuals in San Francisco

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

\$591,846 Total Salaries and Fringe Benefits for FY19-20; annualized to \$734,266 in FY20-21

IMPACT ON DEPARTMENT'S WORKFORCE:

Request 2.31 FTE 1823 Senior Administrative Analyst in FY19-20, annualized to 3.0 FTE in FY20-21.

INITIATIVE TITLE: Increasing Contracts Capacity

Description		FY 2019-20	FY 2020-21
Sources:			
	Revenues	\$ -	\$ -
	Subtotal Sources	\$ -	\$ -
Uses:			
	Salary and Benefits	\$ 387,768	\$ 522,452
	Operating Expense	\$ 204,072	\$ 211,819
	Subtotal Uses	\$ 591,840	\$ 734,271
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 591,840	\$ 734,271
Total FTE's		2.31	3.00

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
1823	Senior Administrative Analyst	2.31	272,290	3.00	364,515
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
	Total Salary	2.31	272,290	3.00	364,515
	Fringe	42.4%	115,478	43.3%	157,937
	Total Salary and Fringe	2.31	387,768	3.00	522,452

Character/Subobject Code			
581000	Office of Contracts Administration Workorder	204,072	211,819
		\$ 204,072	\$ 211,819

FY 2019-20 & 2020-21 Program Change Request

DIVISION:

- ☐ DPH – department wide ☐ Population Health ☐ SF Health Network Wide
☒ San Francisco General Hospital ☐ Laguna Honda Hospital ☐ Ambulatory Care _____

PROGRAM / INITIATIVE TITLE: **ZSFG Medical Equipment Leases**TARGETED CLIENTS: **ZSFG Patients**PROGRAM CONTACT NAME/PHONE: **Jennifer Boffi, ZSFG CFO**

2019-20 FTE Change	2020-21 FTE Cumulative Change	FY 2019-20 Net General Fund Impact Favorable/(Unfavorable)	FY 2020-21 Cumulative Net General Fund Impact Favorable/(Unfavorable)
n/a	n/a	-	(\$3,308,923)

PROGRAM DESCRIPTION: (brief description of proposed change)

This initiative funds ongoing operating and maintenance costs associated with the medical equipment needed to support patient care that was procured as part of the initial the Furniture Fixtures & Equipment (FF&E) program at the opening of the new Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG).

JUSTIFICATION:

ZSFG is a community hospital and the only Level 1 Trauma Center serving San Francisco and northern San Mateo. In 2016, it opened its new seismically safe, technologically advanced acute care hospital – mandated by SB1953, emphasizing that essential facilities, such as hospitals, should remain operational after an earthquake. As part of the new facility, ZSFG purchased, leased or upgraded existing leases for over 3,100 additional pieces of equipment. This equipment either had three-year lease terms or in the case of purchases, service maintenance agreements, that are scheduled to expire in FY 2020-21.

This request begins in FY 2020-21, four years after the opening of Building 25, to continue the on-going medical equipment leases as the original agreements expire. Equipment supports effective patient care in areas including imaging, critical care neuromonitoring, infusion pumps and its interface with pharmacy workflow and other medical and surgical units.

IMPACT ON CLIENTS: (units of service and/or number of clients affected, if applicable)

This will allow ZSFG to maintain its existing patient access to quality services.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

ZSFG Professional Services expenses will increase by \$3,308,923 in FY2021.

IMPACT ON DEPARTMENT'S WORKFORCE :

N/A.

INITIATIVE TITLE: ZSFG Medical Equipment Leases

Description		FY 2019-20	FY 2020-21
Sources:			
	Revenues	\$ -	\$ -
	Subtotal Sources	\$ -	\$ -
Uses:			
	Salary and Benefits	\$ -	\$ -
	Operating Expense		\$ 3,308,923
	Subtotal Uses	\$ -	\$ 3,308,923
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ -	\$ 3,308,923
Total FTE's		0.00	0.00

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

<u>Class</u>	<u>Title</u>	FTE		FTE	
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
0		0.00			
	Total Salary	0.00	-	0.00	-
	Fringe				-
	Total Salary and Fringe	0.00	0	0.00	0
Character/Subobject Code					
Leases and Service Agreements					3,308,923

\$ -