



San Francisco Department of Public Health

Barbara A. Garcia, MPA
Director of Health


City and County of San Francisco
Edwin M. Lee
Mayor

MEMORANDUM

February 25, 2015

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

FROM: Greg Wagner, Chief Financial Officer

THROUGH: Barbara Garcia, Director 

RE: **FY 2015-16 and 2016-17 Proposed Budget – Second Hearing**

At the March 3 Commission meeting will have the second hearing on the Department of Public Health's proposed budget for FY 2015-16 and 2016-17. As you recall, we had an initial hearing on February 3 to outline the Department's proposed strategic approach to the budget, and introduce a handful of initiatives, including the reversal of planned reductions to community based service contracts in FY 15-16. At the March 3 hearing, we will introduce a number of additional proposed initiatives for the Commission's consideration. We are requesting approval of these initiatives for submission to the Mayor's Office.

A key area of focus for the department remains information technology. The budget initiatives submitted to date result in available funding of \$19.3 million for IT investments, which we believe will be sufficient to strengthen our existing IT infrastructure and allow us to move forward aggressively in development of an enterprise electronic medical records program and. We continue to work with the City's Committee on Information Technology, Mayor's Office and other partners to refine the IT program over the coming months, and anticipate an additional Commission hearing in late spring to discuss in more detail the proposed uses of this funding.

As discussed at the February 3rd hearing, key areas of focus for the upcoming two-year budget. We believe our proposed 15-17 budget includes initiatives to address these goals.

Goal 1 - Focus resources on continued implementation and refinement of previous years' initiatives to improve access, quality of care and patient satisfaction. Initiatives include:

- Support staffing for new San Francisco General Hospital (\$32,334,914)
- Investments to increase physician staffing at General Medicine Clinic and Family Health Center (\$1,080,815)
- Improving the programming and utilization of acute psychiatry at San Francisco General (\$1,396,574) to address State audit findings

- Goal 2 - Strengthen the department's long-term financial health through investments in information systems and preparation for future economic downturns. Initiatives include:
- Information Technology – funds IT strategic plan for infrastructure, electronic medical records and revenue cycle system replacement (\$19,287,607)
- Workforce Development initiative to increase training opportunities and staff satisfaction for DPH staff (\$417,421)
- Continued reallocation of positions to support new San Francisco Health Network structure (\$1,411,903)
- Proposal to allow DPH to retain a portion of expenditure savings and revenue surpluses in project funds

Goal 3 - Support City efforts to support vulnerable resident, many of whom are struggling with both health and affordability concerns. Initiatives include:

- Restoration of planned reduction to Community Programs contracted services (\$8,843,898)
- Investments in Public Health Division's Infrastructure (\$2,210,985) capacity including Black African-American Health Initiative (\$615,952)
- Improvements to Foster Children's Mental Health Services (\$296,902)
- Increased support for adults with severe mental illness, including the Assisted Outpatient Treatment Program (Laura's Law) (\$2,524,448)

We anticipate additional hearings over the next 3 months as budget initiatives are revised prior to the Mayor's June 1 budget submission.

Division	Item	Description	15-16 FTE Change	15-16 Expend Incr/(Decr)	15-16 Revenues Incr/(Decr)	15-16 Net GF (Cost)/Savings	16-17 FTE Change	16-17 Expend Incr/(Decr)	16-17 Revenues Incr/(Decr)	16-17 Net GF (Cost)/Savings	Comment
REVENUES											
SFGH/PC	A1	SFGH and Primary Care Baseline Revenue	-	-	9,328,323	9,328,323	-	-	9,114,717	9,114,717	Adjustments to the various revenue components based on projections related to Medi-cal, Capitation, Medicare and other patient revenues. It also takes into account federal funding changes to programs such as Meaningful Use and SB208.
LHH	A2	LHH Baseline Revenues	-	-	-	-	-	-	3,007,324	3,007,324	Projected increase in Skilled Nursing Facility inpatient revenue at LHH in FY15-16 will be offset by the decrease in outpatient revenue based on the current year trend. And the revenue increase in FY16-17 is contributed to another 2% rate increase projected
AC - MH	A3	2011 Realignment	-	-	1,738,000	1,738,000	-	-	1,738,000	1,738,000	Projected baseline revenue growth for 2011 Realignment from the State.
TOTAL REVENUE			-	-	11,066,323	11,066,323	-	-	13,860,041	13,860,041	
BUDGET NEUTRAL											
PHD	B1	Environmental Health Fee Adjustments	2.06	593,229	593,229	-	2.40	593,229	593,229	-	Annual and legislated increases in Environmental Services inspection fees to cover related program expenditures.
PC	B2 - Revised	Physician Staff Increase at General Medical Clinic	-	1,080,815	1,080,815	-	-	1,080,815	1,080,815	-	Increases in physician staffing at GMC and FHC to increase the number of patients seen. These additional expenses will also increase services and revenues to offset the costs.
MH	B3 - New	Strengthening Mental Health Services for Foster Care Youth	5.39	143,451	143,451	-	7.00	286,902	286,902	-	Creation of seven 2930/2931 Psychiatric Social Worker/Marriage Family Therapist positions as part of DPH's mental health services for the youth in the foster care system and their guardians for the Human Services Agency (HSA). These permanent positions improve the quality and coordination of the services which will be funded through a workorder with HSA and partially offset by contract savings.
AC - MH	B4 - New	Mental Health Services Act	6.16	2,524,448	2,524,448	-	8.00	2,524,448	2,524,448	-	Allocation of growth in State MHSA funding consistent with the County Approved Integrated Plan. Funds will be invested to support adults with severe mental illness, including expansion of the Assisted Outpatient Treatment program (aka Laura's Law), training for mental health staff and prevention.
SFGH	B5 - New	SFGH Food and Nutrition Services	4.61	-	-	-	6.10	-	-	-	This initiative will strengthen the operations of SFGH Food & Nutrition services with additional positions to fully staff the division and to remain in compliance with federal regulations. In addition, a new therapeutic food program will be piloted to promote healthier habits when patients return home. The increases in costs will be offset entirely by contract savings in food and nutrition services.
TOTAL REVENUE NEUTRAL			18.22	4,341,943	4,341,943	-	23.50	4,485,394	4,485,394	-	

Division	Item	Description	15-16 FTE Change	15-16 Expend Incr/(Decr)	15-16 Revenues Incr/(Decr)	15-16 Net GF (Cost)/Savings	16-17 FTE Change	16-17 Expend Incr/(Decr)	16-17 Revenues Incr/(Decr)	16-17 Net GF (Cost)/Savings	Comment
EMERGING NEEDS											
AC	C1	Restoration of Request For Proposal (RFP) Funding Reductions	-	8,843,948	-	(8,843,948)	-	8,843,948	-	(8,843,948)	Restoration of the remaining \$8.8 million funding reduction to contracted services initially proposed as part of the FY 13-15 budget. The department will still continue with a series of request for proposals (RFP) to prioritize services as part of health care reform, but will maintain its overall funding levels for contracted behavioral health services.
SFGH/MH	C2 - New	Improvements to SFGH's Acute Psychiatric Services	3.06	910,186	297,412	(612,774)	4.77	1,293,921	2,369,213	1,075,292	Following recommendations of a consultant, SFGH will improve the patient care experience by monitoring the performance of the psych inpatient program through the use of real time analysis and identification of trends of specific data elements.
AC - JH	C3 - New	Strengthening Jail Health Behavioral Health Services	1.54	74,170	-	(74,170)	2.00	117,128	-	(117,128)	To increase quality and ensure that the Jail Health Services Behavioral Health program is managed and staffed, DPH will increase program staff to oversee these critical services.
PHD	C4 - New	Investments in Population Health Division (PHD) Infrastructure	5.17	1,124,648	(369,236)	(1,493,884)	12.50	1,822,424	(388,427)	(2,210,851)	As healthcare reform mandates improved efficiency and quality outcomes, the Department of Public Health, must also invest in PHD as well as the San Francisco Health Network, its service delivery system to ensure a coordinated and holistic approach to improving health in the City. This in initiative increases the capacity of Communicable Disease Control and Emergency Preparedness programs, PHD operations, creates a new Black African American Health Initiative and provides maintenance and analytical capacity in PHD's new integrated public health information system, PHINX.
DPH - All	C5 - New	Workforce Development	0.77	197,895	-	(197,895)	2.52	74,287	-	(74,287)	The department's future success lies in its ability to recruit and retain a talented and diverse public health workforce at all levels in a department that fosters innovation, quality improvement, and cultural humility. This initiative establishes three positions to support training and staff development at DPH to increase staff retention and satisfaction and to improve the quality of care provided.
TOTAL EMERGING NEEDS			10.54	11,150,848	(71,824)	(11,222,672)	21.79	12,151,708	1,980,786	(10,170,922)	
REGULATORY											
E1											
TOTAL REGULATORY REDUCTIONS/SAVINGS PROPOSALS											

Division	Item	Description	15-16 FTE Change	15-16 Expend Incr/(Decr)	15-16 Revenues Incr/(Decr)	15-16 Net GF (Cost)/Savings	16-17 FTE Change	16-17 Expend Incr/(Decr)	16-17 Revenues Incr/(Decr)	16-17 Net GF (Cost)/Savings	Comment
SFGH	E1 - New	SFGH Pharmacy Savings	-	(7,000,000)	-	7,000,000	-	(7,000,000)	-	7,000,000	Savings related to \$10 M of funding for pharmaceuticals for participants who transferred from Ryan White AIDS Drug Assistance Program to the Low Income Health Program. \$3 M of those costs are assumed for projected growth in patient population and other materials and supplies costs associated with the new hospital, but \$7 M can be released for
SFGH & PC	E2 - New	Salary Savings Adjustments	-	(3,500,000)	-	3,500,000	-	3,216,985	-	(3,216,985)	Salary savings adjustments using the most recent projects and hiring plans will result in an one time increase salary savings in FY 15-16 for Primary Care by \$3.5 million. In addition, for FY 16-17, the new San Francisco General hospital will be fully transitioned and staffed, salary savings will be reduced by \$3.2 million for SFGH on going.
SFHN	E3 - New	San Francisco Health Network Resource Reallocations	0.77	(372,996)	-	372,996	1.00	(290,044)	-	290,044	This initiative reallocates positions within the San Francisco Health Network (SFHN) to improve services in throughout our delivery system and to achieve savings. Service enhancements include the development of a Ambulatory Care Population Health Center outreach program, supporting children's mental health services and increasing capacity at San Francisco General Hospitals
TOTAL REDUCTIONS			0.77	(10,872,996)	-	10,872,996	1.00	(4,073,059)	-	4,073,059	
INFLATIONARY - No Impact on DPH's Target											
DPH - All	D1	DPH Pharmacy and Other Inflationary Cost	-	-	-	-	-	2,880,049	-	(2,880,049)	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
TOTAL INFLATIONARY								2,880,049	-	(2,880,049)	
TOTAL ALL INITIATIVES AFFECTING TARGET			29.53	4,619,795	15,336,442	10,716,647	46.29	15,444,093	20,326,221	4,882,128	

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: Physician Increase at General Medical Clinic and Family Health Center

TARGETED CLIENTS: San Francisco Health Network Patients

PROGRAM CONTACT NAME/PHONE: Valerie Inouye 206-3599

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
-	-	\$0	\$0

PROGRAM DESCRIPTION: (Brief description of Program Change)

Provide additional physicians in the General Medical Clinic (GMC) and Family Health Center (FHC) to meet patient demand and to improve patient flow. These costs will be offset by increased revenue due to increased visits.

JUSTIFICATION:

GMC and FHC are two of DPH's largest and busiest clinics with some of the most complex patients. DPH analyzed GMC and FHC billing data and determined that adding attending physicians would generate revenues equal to or greater than the added costs. To improve patient access and oversight of residents, DPH would add 1.625 FTE faculty attending physicians in the GMC at San Francisco General. This would result in 868 new clinical encounters and add 220 new patients to the clinic panel. The increase in providers will result in an additional 1,456 billable encounters to Medicare and Medi-cal. FHC would add 3.0 FTE faculty attending physicians, which would add approximately 2,600 billable encounters to Medicare and Medi-cal.

IMPACT ON CLIENTS: (unit of service and/or number of clients affected)

Improved access to care for our patients.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Both revenues and expenses would increase by \$1,080,815 in the first year and thereafter.

IMPACT ON DEPARTMENT'S WORKFORCE:

None

**ATTACHMENT B FY 15-17
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: GMC and FHC Physician Increase

Description		FY 2015-16	FY 2016-17
Sources:			
	Medicare and Medi-cal Revenues	\$ 1,080,815	\$ 1,080,815
	Subtotal Sources	1,080,815	1,080,815
Uses:			
	Salary and Fringes	\$ -	\$ -
	Non Personnel Services	1,080,815	1,080,815
		-	-
	Subtotal Uses	1,080,815	1,080,815
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ -	\$ -
Total FTE's		0.0	0.0

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

Class	Title	FTE		
			-	-
			-	-
			-	-
	Fringe (36% for both years)		-	-
			\$ -	\$ -

Operating Expenses

Index Code	Character/Subobject Code		
	UCSF Affiliation Agreement	\$ 1,080,815	\$ 1,080,815

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

2015-16 and 2016-17 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 Services

PROGRAM / INITIATIVE TITLE: **Foster Care Mental Health Services**

TARGETED CLIENTS: Youth in Foster Care

PROGRAM CONTACT NAME/PHONE: **Kenneth Epstein/255-3439**

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
5.39	7.0	\$0	\$0

PROGRAM DESCRIPTION: (brief description of proposed change)

The Department of Public Health, Behavioral Health Services (BHS), Children, Youth and Family (CYF) section has had a long standing partnership with the Human Services Agency (HSA) to provide mental health services to both the youth involved in the foster care system and their guardians. Specifically, the unit provides assessments, therapy, case management, and linkages to other necessary supports and services, as well as to other systems within which the youth are involved. This proposal creates seven 2930/2931 Psychiatric Social Worker/Marriage Family Therapist positions and will be funded by the City’s Human Services Agency through its ongoing work order with DPH. This enhancement in services will result in contractual savings under the workorder to offset costs.

JUSTIFICATION:

Establishing these positions as civil service will enable the employees to navigate more efficiently within the governmental structures impacting the children and their guardians, and therefore be more effective in achieving treatment goals. Additionally, the staffing capacity is required to enable the BHS Foster Care Unit meet its ongoing current caseload demands, as well as to comply with the State’s mandated mental health evaluations and treatment requirements under State’s Katie A. lawsuit settlement for children in the foster care program.

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

These positions will maintain the Foster Care Unit’s current caseload levels.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

The proposed initiative reflects an increase in civil service positions and a decrease in contractual funding provided to DPH through a work order from H SA.

IMPACT ON DEPARTMENT’S WORKFORCE :

This proposal will increase by seven the number of civil service positions assigned to the Department’s Foster Care Unit, supervised by the Children, Youth and Family section of Behavioral Health Services, including 4.0 2930 Psychiatric Social Worker, and 3.0 2931 Marriage Family Therapist positions.

**ATTACHMENT B FY 15-17
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Foster Care Mental Health Services - H.S.A Work Order

Description		FY 2015-16	FY 2016-17
Sources:			
	H.S.A. Work Order - HMHMCHSPMPWO	\$ 121,149	\$ 242,297
	H.S.A. Work Order HMHMCHFOSTWO	22,302	44,605
Subtotal Sources		143,451	286,902
Uses:			
	Salaries and Fringes	\$ 451,644	\$ 903,286
	Contractual Services	(308,193)	(616,384)
		-	-
Subtotal Uses		143,451	286,902
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 0	\$ 0
Total FTE's		0.0	0.0

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

Class	Title	FTE			
2930	Psychiatric Social Worker	2.31	\$	219,180	\$ 284,649
2931	Marriage, Family And Child Counselor	2.31	\$	219,180	\$ 284,649
2930	Psychiatric Social Worker	0.77		73,060	94,883
	Salary Savings			(153,710)	
	Salary Savings			(25,618)	
				-	-
		5.39		332,091	664,181
	Fringe (36% for both years)			119,553	239,105
		5.39	\$	451,644	\$ 903,286

Operating Expenses

Index Code	Character/Subobject Code				
HMHMCHSPMPWO		\$	(265,975)	\$	(531,948)
HMHMCHFOSTWO			(42,218)		(84,436)
		\$	(308,193)	\$	(616,384)

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

2015-16 and 2016-17 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 Services

PROGRAM / INITIATIVE TITLE: **Mental Health Service Act Growth**

TARGETED CLIENTS: CBHS Clients

PROGRAM CONTACT NAME/PHONE: **Marlo Simmons 255-3915**

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
6.16	8.0	\$ 0	\$ 0

PROGRAM DESCRIPTION: (brief description of proposed change)

The Mental Health Services Act (MHSA) was enacted through a ballot initiative (Proposition 63) in 2004 and provides funding to expand mental health services to meet unmet need, both to individuals not currently receiving any services, as well as those who are not receiving enough. MHSA funding comes from a one percent tax on personal income in excess of \$1.0 million dollars. The proposed initiative will reflect an increase of \$1,438,433 in total over our projected 15-16 MHSA base budget as well as the associated Medi-cal revenue of existing MHSA funded contractors.

In compliance with MHSA regulations, the Behavioral Health Services section has developed an MHSA Integrated Plan that provides an overview of existing components and Identifies new investments planned for fiscal year 15/16. The following describes the proposed expansion of MHSA’s five major program components for which funds may be used and in accordance with funding guidelines which stipulate the percentage of funding that should be expended in each category:

Community Services and Supports (CSS)

The purpose of the CSS component is to address the unmet needs of adults with Severe Mental Illness (SMI) and children and youth with Serious Emotional Disturbance (SED).

- BHS Peer to Peer Program Manager (1.0 FTE 2593 Health Program Coordinator): Both MHSA and the Affordable Care ACA mandate that Peers be recruited, trained and supported to be active members of the service delivery system. The MHSA Peer-to-Peer Program Manager will be responsible for planning, designing, implementing and evaluating various projects outlined in the Integrated Plan designed to promote and increase the use of peer programs and practices (there are currently 60 peer staff up from six in 2007). This position will also be responsible for the management of a new Peer Respite program located at the SFGH Behavioral Health Center.
- Assisted Outpatient Treatment (AOT), aka Laura’s Law: Create 2.0 FTE 2586 Health Worker positions to reflect the State legislative requirement to have one family member specialist and one consumer specialist be part of the treatment team for AOT participants. The Board of Supervisors approved the implementation of AOT in San Francisco, following a Mayoral Task Force.
- Consumer Employment Specialist (1.0 FTE of 2587 (Health Worker III)): Over the last 4 years, MHSA has supported a rapid expansion of vocational training opportunities for behavioral health clients. This position is needed to support BHS Vocational Services, including co-op programs

funded by the State Department of Rehab. The position will be responsible to conduct outreach to clinics, deliver presentations, route referrals from clinical staff, provide job coaching, collect and compile evaluation data, organize job fairs and other events, and conduct training for staff.

Workforce Development, Education and Training (WDET)

The purpose of the WDET component is to develop and maintain a competent and diverse workforce capable of effectively meeting the mental health needs of the public; addressing identified shortages in occupations and skill sets; and education and training for all individuals who provide or support services in the Public Mental Health System

- Trauma informed System Coordinator (1.0 FTE 2593 Health Program Coordinator III): This position will continue the implementation of the local Trauma Informed system strategy and coordinate regional efforts with other county partners. This had been a grant funded, contractual position. However, the initiative is expanding to both continue the current DPH staff trainings, and to respond to and coordinate Citywide, regional and nation-wide interest and efforts.
- Coordinator for a CBHS Staff Wellness (1.0 FTE 2930 Psychiatric Social Worker)– BHS clinical staff are subjected to immensely difficult life situations of the individuals who seek behavioral health services. Stories compounded by grief, loss, sadness, anger, anxiety, depression, hopelessness, and turmoil are not foreign to BHS clinicians. If BHS does not properly care for its frontline staff they are at increased risk for burnout, compassion fatigue, depression, and other stress-related problems, and will have a diminished capacity to offer excellent care. In accordance with the Ambulatory Care goal to improve staff satisfaction, the DPH goal to develop a trauma informed system and the MHSA Goal to promote wellness and recovery principles and practices, the position will help create peer support groups for clinical staff, develop training and education materials on self-care, will promote prevention and protective practices among staff, and link staff with needed resources, etc.

Innovation (INN)

The purpose if the INN component is to identify new practices for the primary goal of learning and increasing the array of creative and effective approaches that can be applied to mental health services for specified populations.

- Innovation (INN) Program Manager (1.0 2593 Heath Program Coordinator III) - the MHSA INN Program Manager will be responsible for planning, designing, implementing and evaluating MHSA funded Innovation projects to determine which ones should be continued as successful, and which ones should be discontinued or adjusted. This position was approved in the FY 13/14 budget but was reassigned to a different MHSA purpose to address an immediate internal and ongoing requirement. The need for this position is ongoing to meet MHSA evaluation requirements.

Prevention and Early Interventions (PEI)

The purpose of the PEI component is to promote prevention and early intervention services, education, support, and outreach to help inform and identify individuals and their families who may be affected by some level of mental health issue. Providing mental health education, outreach and early identification (prior to diagnosis) can mitigate costly negative long-term outcomes for mental health consumers and their families.

- 1.0 FTE 2935 Senior Marriage, Family & Child Counselor- The BHS Child Youth and Family System of Care has been actively engaging SFUSD to streamline and coordinate mental health services, both in community and school based settings. The proposed position will oversee DPH's coordination activities, and will help to triage cases presented by the school district, provide clinical consultation, link clients to DPH system of care, and follow through and monitor on case plans discussed during systems coordination meeting. This position is funded by a redirection of contractual services funding and MHSA funding. This improved partnership is now allowing high level SFUSD

administrators and CYF's Deputy Director to directly address high risk cases that require systemic solutions, so it is critical that the Department has the staffing to sustain the effort.

JUSTIFICATION:

This proposed initiative allows for the expansion of critical – potentially revenue generating services. Funding allocated to counties through MHSA is subject to a community planning process, as well as Board of Supervisors approval to ensure the proposed plan meets MHSA requirements. Counties are only allowed to use MHSA revenue to fund programs consistent with their approved local MHSA Revenue and Expenditure Plans. The proposed funding items are within the scope and consistent with the existing MHSA Integrated Plan.

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

Peer staff are placed at 42 sites across our system and serve thousands of clients a year. This initiative will provide additional support to these clients. The Trauma training will reach 8,000 DPH employees – resulting in better care for all clients served by DPH. Assertive Outpatient Treatment (AOT a.k.a Laura's Law) will serve up to 100 severely mentally ill clients and their families each year. The CBHS Staff Wellness Initiative will benefit BHS staff and support the provision of higher quality care for all clients served by BHS. BHS CYF provides mental health services to over 4,000 children in the SFUSD. This position will result in better coordination and outcomes for many of those students.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Increase MHSA revenues and expenditures of \$1,438,433 in FY15-16 and FY16-17, and \$1,086,015 in Federal MediCal.

IMPACT ON DEPARTMENT'S WORKFORCE :

The following positions are requested to administer and implement various MHSA projects:

- 2.0 2586 Health Worker
- 1.0 2587 Health Worker III
- 2.0 2593 Health Program Coordinator III
- 1.0 2930 Psychiatric Social Worker
- 1.0 2935 Senior Marriage, Family & Child Counselor

**ATTACHMENT B FY 15-17
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Mental Health Services Act Growth

Sources:		Description	FY 2015-16	FY 2016-17
HMHMPROP63	45412	Mental Health Services Act Revenue	\$ 1,438,433	\$ 1,438,433
HMHM048041	45416	- Medi-Cal	\$ 1,086,015	\$ 1,086,015
Subtotal Sources			2,524,448	2,524,448
Uses:				
		Salaries & Fringes	\$ 730,028	\$ 978,346
		Non Personnel Costs	1,794,420	1,546,102
Subtotal Uses			2,524,448	2,524,448
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)			\$ 0	\$ (0)
Total FTE's			6.16	8.00

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

Class	Title	FTE		FTE	
2593	Health Program Coordinator III	2.31	\$ 238,542	3.00	\$ 319,680
2935	Senior Marriage, Family & Child Counselor	0.77	\$ 76,297	1.00	\$ 102,250
2930	Psychiatric Social Worker	0.77	\$ 73,060	1.00	\$ 97,912
2586	Health Worker II	1.54	\$ 96,212	2.00	\$ 128,938
2587	Health Worker III	0.77	\$ 52,675	1.00	\$ 70,592
		6.16	536,785	8.00	719,372
	Fringe (36% for both years)		193,243		258,974
			\$ 730,028		\$ 978,346

Operating Expenses

Index Code	Character/Subobject Code		
HMHMPRO63	021/02700 Contractual Services	\$ 708,405	\$ 460,087
Project Code PMHS63 1600			
HMHMCC730515	021/02700 Contractual Services	1,086,015	1,086,015

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

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: SFGH Food & Nutrition Services (FNS) and Therapeutic Food Pantry (TFP)

TARGETED CLIENTS: SFGH patients, visitors, staff, interns/residents

PROGRAM CONTACT NAME/PHONE: Shermineh Jafarieh, 206-5804

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
4.61	6.10	\$0	\$0

PROGRAM DESCRIPTION:

San Francisco General Hospital will make two improvements related to food and nutrition services to better serve our patients. The first is to augment staffing of the Food and Nutrition Services (FNS) and bring the entire operation in house. The second is to create a new Therapeutic Food Pantry program to provide access to food and classes to promote better health for our patients once they are discharged.

JUSTIFICATION:

In preparation for the new SFGH, the department will enhance management and operations of FNS with new positions and upgrades to an existing system. For the past five years SFGH Food & Nutrition Services was managed by Sodexo Food Management Company. During that time, SFGH has reviewed its workflows and is now prepared managed the entire operations for the entire campus. This cost neutral change will create an optimal staffing skill mix for food service delivery, allow the hospital to transition away from contracted services with Sodexo and ensure that FNS continues to meet Centers for Medicare & Medicaid Services (CMS) regulations. All of SFGH's customers will benefit from improved services, which include proper sanitary conditions, nutritionally adequate and healthy meals, financial control of food and supply costs through use of industry standard, and optimization of IT systems that will provide better safety measures and quality of service.

Thinking beyond the inpatient services, the Therapeutic Food Pantry (TFP) is a new clinically-based prescription food program in which doctors will prescribe healthy diets to their patients who can then access these recommendations by filling the prescriptions at the Pantry. TFP will be linked to patients' clinical care plans and will be staffed by a Nutritionist who provides on-site nutrition education. Patients can be referred to the adjacent demonstration kitchen where they can learn to cook their new food items. TFP aims to promote sustained behavior change that will improve health outcomes by providing increased access to food, referrals to other local food programs, knowledge via on-site Nutritionist, skills to cook healthy meals, and tools, including starter cooking kits.

This new program will be staffed with a Health Program Coordinator I and a Nutritionist. In Year 1, TFP will be available to pregnant women with diabetes from 5M and FHC as well as overweight and obese children in the Healthy Lifestyles Clinic. Maintaining a healthy diet is often at odds with other, more pressing economic demands for low income families, so they often resort to nutrition-poor, high caloric food items. Food insecurity is associated with higher rates of hypertension, high cholesterol, and diabetes. Whereas 15% of US households are food insecure, 47% of SFGH inpatients and 59% of Latino diabetics in the SFGH General Medicine Clinic cannot afford adequate nutrition. TFP's goal is to bring together resources to promote sustained behavior change that will improve health outcomes and reduce preventable healthcare utilization.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

FNS annually serves 337 patients, 2000 staff, and 345 interns/residents. The interns/residents meals are a part of their MOU with the City & County. TFP has an estimated 4,800 visits in the first year, and is expected to grow in subsequent years.

EXPENSE AND REVENUE IMPAC

New positions will be offset entirely by contract savings.

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

Increase of 4.61 FTEs in Year 1 that annualizes to 6.10 FTE in Year 2.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: SFGH Food & Nutrition Services (FNS & TFP)

Description		FY 2015-16	FY 2016-17
Sources:			
	Revenues	\$ -	\$ -
Subtotal Sources		\$ -	\$ -
Uses:			
	Salary and Benefits	\$ 632,520	\$ 788,753
	Operating Expense	\$ (632,520)	\$ (788,753)
Subtotal Uses		\$ 0	\$ (0)
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 0	\$ (0)
Total FTE's		4.61	6.10

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
0923	Manager II	0.77	99,551	1.00	133,414
2624	Dietitian	0.77	66,545	1.00	89,181
1406	Senior Clerk	0.39	21,973	0.50	29,448
2608	Supply Room Attendant	0.77	41,447	1.00	55,545
2622	Dietetic Technician	0.77	46,590	1.00	62,438
2654	Cook	(0.40)	(26,682)	(0.40)	(27,534)
2846	Nutritionist	0.77	95,495	1.00	98,544
2591	Health Program Coordinator II	0.77	92,329	1.00	95,276
PREMM_E	Premium Pay - Miscellaneous	0.00	26,529	0.00	27,325
	Total Salary	4.61	463,777	6.10	563,635
	Fringe	36.4%	168,744	39.9%	225,117
	Total Salary and Fringe	4.61	632,520	6.10	788,753

Operating Expenses

Index Code	Character/Subobject Code		
HGH1HUN40061	021/02700 Professional Services (Sodexo Contract)	(871,733)	(897,966)
HGH1HUN40061	021/02700 Professional Services (Cbord System)	34,582	34,582
HGH1HUN40061	040/04000 Materials & Supplies (Disaster Food Plan)	130,000	-
HGH1HUN40061	040/04000 Materials & Supplies (Disaster Food Plan)	13,000	13,000
HGH1HUN40061	021/02700 Professional Services (UCSF)	24,918	24,918
HGH1HUN40061	040/04000 Materials & Supplies	36,713	36,713
		\$ (632,520)	\$ (788,753)

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

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: **Improvements to SFGH's Acute Psychiatric Services**

TARGETED CLIENTS: **Acute Psychiatric Inpatients, Inpatient Psychiatric Patients**

PROGRAM CONTACT NAME/PHONE: **Kathy Ballou, 206-5726 Ana Sampera, 206-3358**

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
5.39	7.77	\$612,774	(\$1,084,639)

PROGRAM DESCRIPTION: (Brief description of Program Change)

Following the recommendations and findings of a State Audit, San Francisco General Hospital will implement programming changes to improve the quality and level of services for Acute Psychiatric services by increasing staffing and improving utilization management.

JUSTIFICATION:

Two additional occupational therapists will increase the clinical services provided including group mental health treatments and individual clinical interventions that are focused on patients' readiness for discharge from the hospital. Increases in these services can decrease the severity of acute symptoms, thereby reducing the length of stay, and decrease violence risk to staff and other patients. These positions will also ensure adequate staffing to meet regulatory requirements and to justify acute care billing. To strengthen oversight, a supervising social worker will be added to oversee patient treatment groups and discharge planning activities, and will result in contract savings as part of the Affiliation Agreement with UC.

To further improve the patient care experience and ensure that patients are at the right level of care, SFGH will increase its utilization management review of this acute unit. Three 2320 Registered Nurses and a 2322 Nurse Manager will be added to monitoring the performance of the psych inpatient program with specific indicators. Beginning in FY 16-17 a healthcare analyst will also be added to analyze data related to usage of these units. Real time analysis and identification of trends of specific data elements will allow for rapid implementation of corrective action plans thus improving the patient experience and improve financial reimbursement for Acute Psych Utilization Management.

Once these improvements are implemented fully, mental health revenues will increase in FY 16-17, by \$2.3 million.

IMPACT ON CLIENTS: (unit of service and/or number of clients affected)

On average there are 52 patients on the SFGH locked acute units (7B, 7C, 7L). These patients will benefit from improved quality of care and patient experience provided to patients.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Expenses will increase by \$612,774 in FY1516 and increase to \$1,293,918 and be offset by revenues of \$2,369,213 in FY1617.

IMPACT ON DEPARTMENT'S WORKFORCE:

FTE's will increase by 5.39 FTEs in FY1516 and 7.77 FTE's in FY1617.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Improvements to SFGH's Acute Psychiatric Services

Description		FY 2015-16	FY 2016-17
Sources:			
	Revenues -MH Short Doyle	\$ 297,412	\$ 2,369,213
	Subtotal Sources	\$ 297,412	\$ 2,369,213
Uses:			
	Salary and Benefits	\$ 1,023,747	\$ 1,445,245
	Operating Expense	\$ (113,561)	\$ (151,264)
	Subtotal Uses	\$ 910,186	\$ 1,293,981
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 612,774	\$ (1,075,232)
Total FTE's		5.39	7.77

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
2320	Registered Nurse	2.31	350,283	3.00	458,969
2322	Nurse Manager	0.77	150,300	1.00	196,935
2119	Health Care Analyst	0.00	0	0.77	71,946
2548	Occupational Therapist	1.54	175,295	2.00	234,923
2924	Medical Social Work Supervisor	<u>0.77</u>	<u>81,726</u>	<u>1.00</u>	<u>109,527</u>
	Total Salary	5.39	757,604	7.77	1,072,300
	Fringe	35.1%	<u>266,143</u>	34.8%	<u>372,946</u>
	Total Salary and Fringe	5.39	1,023,747	7.77	1,445,245

Operating Expenses

Index Code	Character/Subobject Code		
Index Code	Character/Subobject Code		
HGH1HUN40061	021/02700 Professional Services (UCSF)	(113,561)	(151,264)
		\$ (113,561)	\$ (151,264)

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

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: Strengthening Jail Health Behavioral Health Services

TARGETED CLIENTS: Patients in the Jails

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

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
1.54	3.0	\$74,170	\$117,128

PROGRAM DESCRIPTION: (Brief description of Program Change)

To increase quality and ensure that the Jail Health Services Behavioral Health program is managed and staffed, DPH will increase program staff to oversee these critical services.

JUSTIFICATION:

Jail Health Services Behavioral Health services are currently provided by HealthRight 360. On any given day, approximately 33% of the jail population receives mental health treatment from Jail Behavioral Health Services. In FY 13-14, BHS performed 4,943 mental health evaluations and conducted 32,094 psychiatric visits for patients who required stabilization. This program is experiencing a high turnover rate in staff. Because both mental health and jail medical services are fully integrated in terms of service provision, staff communication, and documentation in the electronic medical record, it would ensure an integrated approach to program management and staffing. These positions will offset services provided in the contract, resulting in savings.

IMPACT ON CLIENTS: (unit of service and/or number of clients affected)

This will result in a more effectively managed and consistently staffed program for all jail health services patients.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

FY 15-16 General Fund Impact of \$74,170 increasing to 117,128 in FY 16-17.

IMPACT ON DEPARTMENT'S WORKFORCE:

1.54 FTE in FY 15-16 and 3.0 FTE in FY 16-17.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Strengthening JHS Behavioral Health Services

Description		FY 2015-16	FY 2016-17
Sources:			\$ -
Subtotal Sources		\$ -	\$ -
Uses:	Salary and Benefits	\$ 143,848	\$ 437,301
		\$ (69,678)	\$ (320,173)
Subtotal Uses		\$ 74,170	\$ 117,128
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 74,170	\$ 117,128
Total FTE's		1.00	3.00

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
2593	Health Program Coordinator III	0.50	51,633	1.00	106,561
2593	Health Program Coordinator III	0.50	51,633	1.00	106,561
2932	Sr Psychiatric Social Worker	0.00	0	0.50	51,125
2932	Sr Psychiatric Social Worker	0.00	0	0.50	51,125
		<u>0.00</u>	<u>0</u>	<u>0.00</u>	<u>0</u>
	Total Salary	1.00	103,265	3.00	315,372
	Fringe	39.3%	40,583	38.7%	121,929
	Total Salary and Fringe	1.00	143,848	3.00	437,301

Operating Expenses

Index Code	Character/Subject Code		
	Reduction in 021 Prof & Specialized Svcs	(69,678)	(320,173)
		\$ (69,678)	\$ (320,173)

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

2015-16 and 2016-17 Program Change Request

DIVISION:

- DPH – department wide X Population Health SF Health Network Wide /
 San Francisco General Hospital Laguna Honda Hospital Managed Care
 Ambulatory Care _____

PROGRAM / INITIATIVE TITLE: **Investments in Population Health Division’s Infrastructure**

TARGETED CLIENTS: All San Francisco residents, workers and visitors

PROGRAM CONTACT NAME/PHONE: **Christine Siador 554-2832**

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
4.59	9.00	\$1,493,884	\$2,210,851

PROGRAM DESCRIPTION: (brief description of proposed change)

The Population Health Division (PHD) provides core public health services for the City and County of San Francisco: health protection, health promotion, disease and injury prevention, and disaster preparedness and response. As healthcare reform mandates improved efficiency and quality outcomes, the Department of Public Health, must also invest in population health as well as the San Francisco Health Network, its service delivery system to ensure a coordinated and holistic approach to health in the City.

JUSTIFICATION:

PHD consists of six branches (Applied Research, Community Health Epidemiology, and Surveillance; Environmental Health Branch; Community Health Equity and Promotion; Disease Prevention and Control; Emergency Medical Services; and Public Health Preparedness and Response), two offices (Office of Equity and Quality Improvement; Office of Operations, Finance, and Grants Management), and three centers (Center for Innovation and Learning; Center for Public Health Research; and Bridge HIV (HIV research)).

This initiative strengthens PHD’s core infrastructure for the division and includes:

- Strengthening Communicable Disease and Emergency Preparedness- The recent Ebola response has exposed the need to strengthen both our Public Health Emergency Response and the Disease Prevention & Control Branches. Understaffing of these units jeopardizes SFDPH’s ability to respond to emergencies. The initiative would add the following positions to the Disease Prevention & Control Branch: Operations Administrator for the STD and Tuberculosis Clinics, Senior Clerk to staff the communicable disease outbreak line, Disease Control Investigator, Public Health Nurse and a Senior Physician Specialist to focus on chronic diseases. For Emergency Preparedness to ensure adequate safety DPH will be adding a Health Educator to increase training and outreach and a Health Program Coordinator I to manage the equipment and assets. In FY 16-17, the department will also begin to incur costs for maintaining our assets and equipment.
- Black African American Health Initiative (BAAHI) - Despite incremental forward steps to improve the health of San Franciscans, many disparities still exist among Black/African American residents. In March 2014, the Director of Health launched the African American Health Initiative to adequately address and make a significant impact on the health disparities among the Black/African American population in San Francisco. The initiative includes a Health Program Coordinator III to coordinate and a Healthworker IV support the BAAHI.

- Improving Program and Operations Management – The department will strengthen the infrastructure of PHD with key leadership positions including a Manager III deputy director to oversee the entire division and a half time health program planner to oversee quality improvement.
- Backfilling reduced funding – Additional general fund will be used to maintain service levels in the Public Health Emergency Preparedness Branch, STD and TB Branches, and the Office of Operations, Finance & Grant Management, due to cuts in federal and other funding.
- Emergency Medical Services (EMS) Fellowship - This initiative also includes funding for a 2-year The Fellow will provide medical oversight for dispatch and fire.

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

This initiative supports all San Francisco resident, workers and visitors, through improved operations of the PHD.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

\$1.2 million expenditure increase in FY 15-16 and annualizing to \$2 million in year 2.

IMPACT ON DEPARTMENT'S WORKFORCE :

4.59 FTE increase in FY 15-16, annualizing to 9.0 FTE in FY 16-17

**ATTACHMENT B FY 15-17
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Investments in Population Health Division's Infrastructure

Description		FY 2015-16	FY 2016-17
Sources:			
	Federal Revenue Reductions	\$ (369,236)	\$ (388,427)
	Subtotal Sources	(369,236)	(388,427)
Uses:			
	Personnel Costs	\$ 824,648	\$ 1,472,424
	Non Personnel	300,000	350,000
	Subtotal Uses	1,124,648	1,822,424
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 1,493,884	\$ 2,210,851
Total FTE's		4.6	9.0

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

Class	Title	FTE		FTE	
0931	Manager III	0.77	\$ 107,377	1.00	\$ 143,903
2593	Health Program Coordinator III	1.54	\$ 159,028	2.00	\$ 213,122
2818	Health Program Planner	0.39	\$ 35,782	0.50	\$ 47,954
2822	Health Educator	0.77	\$ 72,761	1.00	\$ 98,543
2589	Health Program Coordinator I	0.77	\$ 62,431	1.00	\$ 83,662
1406	Senior Clerk	0.77	\$ 43,947	1.00	\$ 58,896
2806	Disease Control Investigator	0.77	\$ 57,489	1.00	\$ 77,044
2232	Supervising Physician	0.77	\$ 184,556	1.00	\$ 241,820
2830	Public Health Nurse	0.77	\$ 116,761	1.00	\$ 152,990
2588	Health Worker	0.77	\$ 61,566	1.00	\$ 82,508
9993M	Attrition Savings	(3.50)	\$ (304,500)	(1.50)	\$ (134,670)
		4.59	597,199	9.00	1,065,772
	Fringe (40% for both years)		227,449		406,652
			\$ 824,648		\$ 1,472,424

Operating E: Character/Subject Code

Index Code	02700 EMS Fellow	\$ 100,000	\$ 100,000
	02700 Professional Services for BAAHI	\$ 200,000	\$ 200,000
	03000 Rental Costs		\$ 50,000

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

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: **Workforce Development and Training Initiative**

TARGETED CLIENTS: DPH’s Workforce

PROGRAM CONTACT NAME/PHONE: Jonathan Fuchs 437-7309/Toni Rucker 255-3522

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
.77	197,895	2.52	74,287

PROGRAM DESCRIPTION: (brief description of proposed change)

The department’s future success lies in its ability to recruit and retain a talented and diverse public health workforce at all levels in a department that fosters innovation, quality improvement, and cultural humility. DPH has identified several areas of potential future concern, including a large portion of its workforce eligible for retirement, the need to have a workforce that reflects the demographics of its clients, barriers to career advancement within the department, and creation of employment opportunities for City residents, including those in economically disadvantaged communities. Over the last year, DPH developed an committee to focus on these workforce development challenges. The committee identified three key opportunities to effectively train its workforce and increase staff satisfaction while focusing on the challenges posed by scaling up services to meet the demands of the Affordable Healthcare Act (ACA) and are recommending the following:

A Cultural Humility Trainer (1232 Training Officer) will launch a sustainable, department-wide initiative focused on cultural humility and competency. This full time position will coordinate, train, and work with key DPH staff and external to improve workforce and patient experience to achieve health equity.

Working with content and subject matter experts in the City and the department, an Instructional Designer (1230) will develop high quality online training to make training more accessible to staff and minimize backfill costs for staff to participate in trainings, improve compliance with required trainings that can avert workplace injury associated costs. Training topics may include include trauma informed services, workforce and patient safety training to comply with CAL OSHA requirements, disaster service worker training for emergency preparedness and sensitivity training. This position will also coordinate deployment of large scale training throughout the department.

Finally, a personnel analyst (1244) will be added in FY 16-17 to analyze the existing workforce and to prepare for a new city wide performance appraisal system by July 2, 2016. The analyst will work with each manager to develop core competencies for each position which will be used for evaluation purposes in the electronic performance appraisal system. In addition, the analyst will review job classes and establish a consistent baseline set of skills required for each which can then be used to establish, modify and/or adjust minimum qualifications, establish desired qualifications and set expectations for existing employees and new hires. As part of this work, the analyst will also examine the department’s existing and projected workforce to determine our current and future needs and make recommendations with regards to appropriate staffing models which in turn will inform the department’s strategy for staff development and hiring needs.

In addition, \$50,000 will be budgeted for training costs, including the City's 24+ Training for supervisors and managers. The total expenditures for this initiative will be offset by expected savings as DPH migrates from its existing eLearning and Talent Management software programs to the city's centralized programs.

JUSTIFICATION:

To effectively provide quality services, DPH must attract, retain and train its existing workforce.

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

DPH's clients will be served with better with improved and culturally competent services.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Increase of general fund support of \$197,985 in FY 15-16 decreasing to FY 16-17 to \$74,287 due to savings in software costs related to training and tracking software.

IMPACT ON DEPARTMENT'S WORKFORCE :

These three additional positions will work to recruit, train and retain DPH's entire workforce.

**ATTACHMENT B FY 15-17
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Workforce and Training Initiative

Description		FY 2015-16	FY 2016-17
Sources:			
Subtotal Sources			
Uses:			
Personnel Costs		\$ 147,895	\$ 367,421
Professional Services		50,000	(293,134)
		-	-
Subtotal Uses		197,895	74,287
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ 197,895	\$ 74,287
Total FTE's		0.8	2.5

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

Class	Title	FTE		FTE	
1232	Training Officer	0.77	\$ 72,117	1.00	\$ 96,648
1230	Instructional Designer	0.77	\$ 79,834	1.00	\$ 106,532
1244	Personnel Analyst	-	\$ -	0.77	\$ 86,154
9993M	Attrition Savings	(0.77)	\$ (66,990)	(0.25)	\$ (22,445)
		0.77	84,962	2.52	266,889
	Fringe (40% for both years)		62,934		100,532
			\$ 147,895		\$ 367,421

Operating E: Character/Subobject Code

02200	Training Costs	\$ 50,000	\$ 50,000
-------	----------------	-----------	-----------

Operating Expenses

Index Code Character/Subobject Code

HLH449199	021/02761 Software upgrade & licensing fees (LHH)	\$ (93,000)
HGH1HUN40	021/02761 Software upgrade, licensing & implementation fees (SFGH)	\$ (179,987)
HCHAPADM	021/02761 Software upgrade & licensing fees (COPC)	\$ (18,497)
HJAILHLTH	021/02761 Software upgrade & licensing fees (JHS)	\$ (5,200)
HCHAPHOM	021/02761 Software upgrade & licensing fees (HAH)	\$ (1,710)
HCHACEXE	021/02761 Software upgrade & licensing fees (CHS & Central Admin)	\$ (23,766)
HMHMCC73	021/02761 Software upgrade & licensing fees (CBHS-MH & SA)	\$ (20,974)

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: **SFGH Pharmacy Savings**

TARGETED CLIENTS: SFGH patients

PROGRAM CONTACT NAME/PHONE: David Woods PharmD, 206-2332

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
-	-	(\$7,000,000)	(\$7,000,000)

PROGRAM DESCRIPTION: (Brief description of Program Change)

Projected savings in pharmacy costs due to the transfer of Low Income Health Program (LIHP) patients to Medi-Cal.

JUSTIFICATION:

In FY 12-13 the department increased its pharmacy costs by \$10 million by \$5 million of revenue to account for the new patients enrolled into the LIHP due to the transfer of patients from the Ryan White AIDS Drug Assistance Program (ADAP). As patients in the LIHP have now completely transferred over to Medi-Cal as part of Healthcare Reform and revenues changes have been adjusted as part of the SFGH baseline revenue initiative, DPH can now reduce its pharmacy budget to reflect this change. \$3 M of those costs will remain in the budget to account for additional costs associated with projected growth in patient population and other materials and supplies costs assumed as part of the new hospital, but \$7 M can be reduced to achieve savings.

IMPACT ON CLIENTS: (unit of service and/or number of clients affected)

None.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Expense appropriation will decrease by \$7 million in both fiscal years.

IMPACT ON DEPARTMENT'S WORKFORCE:

None.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: SFGH Pharmacy Savings

Description		FY 2015-16	FY 2016-17
Sources:			
Subtotal Sources		\$ -	\$ -
Uses:	Salary and Benefits		
	Operating Expense	\$ (7,000,000)	\$ (7,000,000)
Subtotal Uses			
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)			
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>
		0.00	0.00
	Total Salary	0.00	0.00
	Fringe		
	Total Salary and Fringe	0.00	0.00
Operating Expenses			
Index Code	Character/Subobject Code		
HGH1HUN40061	040/04461 Materials & Supplies (Pharmaceuticals)	(7,000,000)	(7,000,000)
		\$ (7,000,000)	\$ (7,000,000)

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

2015-16 and 2016-17 Program Change Request

DIVISION:

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

PROGRAM / INITIATIVE TITLE: **Salary Savings Adjustments**

TARGETED CLIENTS: n/a

PROGRAM CONTACT NAME/PHONE: **Jenny Louie 554-2610**

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
n/a	n/a	-\$3,500,000	\$3,216,985

PROGRAM DESCRIPTION: (brief description of proposed change)

For the FY 15-17 budget, DPH will realign its salary and fringe benefits budget to be consistent with current projections.

JUSTIFICATION:

Throughout the year DPH finance and program staff review payroll projections and as part of the budget development process, determines appropriate spending levels for the upcoming two year budget cycle. The adjustments proposed use our most recent projects and hiring plans will result in a one-time salary savings in FY 15-16 for Primary Care of \$3.5 million. The primary care savings is a result of delays in filling positions added in the prior year’s budget for primary care expansion initiatives. In addition, for FY 16-17, the new San Francisco General hospital will be fully transitioned and staffed, salary savings will be reduced by \$3.2 million for SFGH ongoing.

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

None.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

One time savings in FY 15-16 of \$3.5 million and ongoing salary expenditure increases of \$3.2 million starting in FY 16-17.

IMPACT ON DEPARTMENT’S WORKFORCE :

None, these adjustments are made to a general salary savings line item and do not alter any budgeted position classes.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Salary Savings Adjustments

Description		FY 2015-16	FY 2016-17
Sources:			
	Revenues	\$ -	\$ -
Subtotal Sources		\$ -	\$ -
Uses:			
	Salary and Benefits	\$ (3,500,000)	\$ 3,216,984
	Operating Expense	\$ -	\$ -
Subtotal Uses		\$ (3,500,000)	\$ 3,216,984
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)		\$ (3,500,000)	\$ 3,216,984
Total FTE's		25.16	15.75

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

<u>Class</u>	<u>Title</u>	<u>FTE</u>	<u>FTE</u>		
PREMN_E	Premium Pay - Nurses		0		450,000
9993N_Z	Attrition Savings - Nurses		0		2,088,286
9993M_Z	Attrition Savings - Miscellaneous		(2,506,225)		0
	Total Salary	25.16	(2,506,225)	15.75	2,538,286
	Fringe	39.7%	(993,775)	26.7%	678,698
	Total Salary and Fringe	25.16	(3,500,000)	15.75	3,216,984

Operating Expenses

Index Code Character/Subobject Code

\$ - \$ -

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

2015-16 and 2016-17 Program Change Request

DIVISION:

- | | | |
|---|--|--|
| <input type="checkbox"/> DPH – department wide | <input type="checkbox"/> Population Health | X SF Health Network Wide /
Managed Care |
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Laguna Honda Hospital | |
| <input type="checkbox"/> Ambulatory Care _____ | | |

PROGRAM / INITIATIVE TITLE: **SF Health Network Resource Reallocation and Savings**

TARGETED CLIENTS: SFHN Patients

PROGRAM CONTACT NAME/PHONE: Marcellina Ogbu 255-3524

2015-16 FTE Change	2016-17 FTE Cumulative Change	FY 2015-16 Net General Fund Impact	FY 2016-17 Cumulative Net General Fund Impact
0	0	-\$372,996	-\$290,044

PROGRAM DESCRIPTION: (brief description of proposed change)

This initiative reallocates positions and costs within the San Francisco Health Network (SFHN) to improve services throughout the network. In the spring of 2014, DPH was exploring the possibility of opening up a new primary care satellite clinic and budgeted expenditures and corresponding revenues which offset costs entirely as part of the FY 14-16 budget. After significant analysis, DPH determined in the fall that an additional clinic was not a viable option. At the same time the SFHN has identified areas where investment can be made to improve outcomes and compliance. Rather than create new expenditures, DPH will reallocate the costs originally budgeted for the clinic to areas to provide more effective service and/or eliminated to achieve savings. The following positions will be used to augment or improve services as follows:

- Ambulatory Care Population Health Center - 4.0 2586 Health Worker II will be used to in this new program to support our population-based quality improvement initiatives. Outreach population health improvement functions will include contacting patients who are due for recommended screening and other preventive health care, Chronic illness management support in the form of reminders and patient education and Population-wide surveillance functions to ensure timely notification and follow-up for patients with abnormal screening tests.
- Children’s Mental Health services - 1.0 FTE 2593 Health Program Coordinator will oversee and strengthen program operations for behavioral health services for children, youth and families. In addition, 1.0 FTE 2586 Healthworker II will be transferred to Southeast Child and Family Clinics to improve customer service and clinic efficiency.
- Workforce Development – 1.0 FTE 2586 Healthworker to support Ambulatory Care’s workforce development program to coordinate increased training and workforce development throughout the network.
- SFGH outpatient specialty clinics 1.5 2320 RN, 1.0, 2328 Nurse Practitioner and 1.0 Medical Evaluations Assistant) to support patient flow and access. In addition, 1.0 FTE of a Health Program Coordinator III will be added to coordinate and manage the Care Experience roll out to improve patient experience scores.
- SFGH Materials Management 1.0 1942 Assistant Materials Coordinator to support managers and to expedite procurement throughout the network. Timely and accurate purchasing will ensure proper hospital and clinic operations.

-
- Office of Managed Care – 1.0 FTE 2818 Health Program Planner and 1.0 FTE 1824 Principal Analyst will help manage contracts and conduct payment audits to ensure revenues are achieved.
- LHH administration - 1.0 1406 Senior Clerk to ensure compliance and adherence to reporting requirements

As revenues have already been reflected as part of our baseline revenue initiatives, the balance of these changes, including rental and materials and supplies costs will be eliminated and used to achieve savings.

JUSTIFICATION:

To avoid new costs and to create savings, DPH will reallocate and eliminate costs originally budgeted for a program the department will no longer be pursuing.

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

These enhancements will improve access to and the quality of services to all clients in the SFHN.

EXPENSE AND REVENUE IMPACT: (for both fiscal years)

Savings of 372,996 increasing to \$290,044.

IMPACT ON DEPARTMENT'S WORKFORCE :

Net increase of 2.31 FTE in 15-16, increasing to 3.0 in year 2.

**ATTACHMENT B FY 15-17
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: SFHN Reallocation

Sources:		Description	FY 2015-16	FY 2016-17
Subtotal Sources			-	-
Uses:				
	Personnel Costs		\$ 34,813	\$ 117,765
	Non Personnel		(407,809)	(407,809)
Subtotal Uses			(372,996)	(290,044)
Net General Fund Subsidy Required (savings)/cost (Uses less Sources)			\$ (372,996)	\$ (290,044)
Total FTE's			2.31	3.00

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

Class	Title	FTE		FTE	
2586	Healthworker II	(1.60)	\$ (99,960)	(1.60)	\$ (103,150)
2903	Eligibility Worker	(1.60)	\$ (109,454)	(1.60)	\$ (112,947)
2320	Registered Nurse	(1.80)	\$ (272,948)	(1.80)	\$ (275,382)
2409	Pharmacy Technician	(0.50)	\$ (40,567)	(0.50)	\$ (43,410)
2230	Physician Specialist	(2.00)	\$ (445,360)	(2.00)	\$ (449,332)
2430	Medical Evaluations Assistant	(4.00)	\$ (255,540)	(4.00)	\$ (263,696)
2450	Pharmacist	(1.00)	\$ (153,261)	(1.00)	\$ (158,153)
1406	Senior Clerk	1.00	\$ 57,074	1.00	\$ 58,896
2586	Healthworker II	6.00	\$ 374,850	6.00	\$ 386,814
2593	Health Program Coordinator III	1.77	\$ 182,779	2.00	\$ 213,122
1824	Principal Administrative Analyst	0.77	\$ 92,482	1.00	\$ 123,941
2818	Health Program Planner	0.77	\$ 71,565	1.00	\$ 95,908
2320	Registered Nurse	1.50	\$ 227,457	1.50	\$ 229,485
2328	Nurse Practitioner	1.00	\$ 202,432	1.00	\$ 204,237
2430	Medical Evaluations Assistant	1.00	\$ 63,885	1.00	\$ 65,924
1942	Assistant Materials Coordinator	1.00	\$ 101,296	1.00	\$ 104,529
	Fringe (40% for both years)		38,083		40,979
		2.31	\$ 34,813	3.00	\$ 117,765

Operating E: Character/Subobject Code

Index Code	04000 Materials and Supplies	\$ (100,000)	\$ (100,000)
	03000 Rents and Leases	\$ (307,809)	\$ (307,809)

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

10.2