

File No. 221203

Committee Item No. 3

Board Item No. 23

COMMITTEE/BOARD OF SUPERVISORS

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Committee: Budget and Finance Committee
Board of Supervisors Meeting

Date January 25, 2023
Date January 31, 2023

Cmte Board

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- Application
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OTHER (Use back side if additional space is needed)

- DPH Statement on Retroactivity 1/27/2023
- _____
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Completed by: Brent Jalipa

Date January 19, 2023

Completed by: Brent Jalipa

Date January 26, 2023

1 [Accept and Expend Grant - Retroactive - National Institutes of Health - Brief Longitudinal
2 Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic Among Persons Who Inject
3 Drugs (PWID) - \$178,137]

4 **Resolution retroactively authorizing the Department of Public Health to accept and**
5 **expend a grant in the amount of \$178,137 from the National Institutes of Health for**
6 **participation in a program, entitled “Brief Longitudinal Incident Sentinel Surveillance**
7 **(BLISS) to End the Human Immunodeficiency Virus (HIV) Epidemic among Persons**
8 **Who Inject Drugs (PWID),” for the period of August 15, 2022, through July 31, 2023.**
9

10 WHEREAS, The National Institutes of Health (NIH) has agreed to fund the Department
11 of Public Health (DPH) in the amount of \$178,137 for participation in a program, entitled
12 ““Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the Human
13 Immunodeficiency Virus Epidemic among Persons Who Inject Drugs (PWID),” for the period
14 of August 15, 2022, through July 31, 2023; and

15 WHEREAS, Although San Francisco appears on track to achieve zero new Human
16 Immunodeficiency Virus (HIV) infections within the next few years, the trajectory among
17 people who inject drugs (PWID) lags behind; and

18 WHEREAS, To end the HIV epidemic and mitigate other health disparities for PWID,
19 data collection systems need to be more rapid, representative, and responsive to this
20 population at high risk; and

21 WHEREAS, We therefore propose to create a new epidemiological data collection
22 system for PWID in Alameda and San Francisco counties called Brief Longitudinal Incident
23 Sentinel Surveillance (BLISS); and
24
25

1 WHEREAS, We will recruit 600 PWID (300 each in county) using a novel venue-
2 based/peer-referral hybrid method called Starfish Sampling to accrue a cohort and follow
3 them longitudinally; and

4 WHEREAS, The grant does not require an Annual Salary Ordinance Amendment; and

5 WHEREAS, A request for retroactive approval is being sought because DPH received
6 the award letter on August 22, 2022, for a project start date of August 15, 2022; and

7 WHEREAS, The grant budget includes a provision for indirect costs in the amount of
8 \$3,363; now, therefore, be it

9 RESOLVED, That DPH is hereby authorized to retroactively accept and expend a grant
10 in the amount of \$178,137 from the NIH; and, be it

11 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
12 expend the grant funds pursuant to Administrative Code, Section 10.170-1; and, be it

13 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
14 Agreement on behalf of the City.

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1 Recommended:
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3 /s/_____

Approved: /s/_____
Mayor

4 Dr. Grant Colfax
5 Director of Health

Approved: /s/_____
Controller

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From: [Altman, Claire \(DPH\)](#)
To: [BOS-Supervisors](#)
Cc: [BOS-Legislative Aides](#); [Somera, Alisa \(BOS\)](#); [Jalipa, Brent \(BOS\)](#); [Rocha, Maximilian \(DPH\)](#); [Trainor, Nikole \(DPH\)](#); [Wilson, Erin \(DPH - Contractor\)](#); [Dieterich, Cristy \(DPH\)](#); [Validzic, Ana \(DPH\)](#); [Wong, Greg \(DPH\)](#); [Ruggels, Michelle \(DPH\)](#); [Hiramoto, Kelly \(DPH\)](#)
Subject: 1/31 BOS: DPH Retroactive Items
Date: Friday, January 27, 2023 3:35:59 PM

Hello Honorable Members of the Board of Supervisors:

The Department of Public Health (DPH) will request approval for four (4) retroactive items at the January 31st Board of Supervisors meeting. We'd like to provide you with brief background information and reason for retroactivity prior to the meeting. Please see below for a description of the item and our DPH representatives who may be contacted should you have any questions.

Agenda item #21 – File no. 221185 – Contract Amendment – Retroactive – Progress Foundation – Behavioral Health Services – Not to Exceed \$221,847,999 – Resolution retroactively approving Amendment No. 2 to the Agreement between Progress Foundation and the Department of Public Health (DPH), for behavioral health services; to increase the Agreement by \$127,324,481 for an amount not to exceed \$221,847,999; to extend the term by five years, from December 31, 2022, for a total Agreement term of July 1, 2018, through December 31, 2027; and to authorize DPH to enter into amendments or modifications to the contract prior to its final execution by all parties that do not materially increase the obligations or liabilities to the City and are necessary to effectuate the purposes of the contract or this Resolution.

- **Description:** Under the contract, Progress Foundation provides the following services: (1) Acute Diversion Units; (2) Transitional Residential Treatment Programs; (3) Seniors Programs; (4) Supportive Living Programs; (5) Dore Urgent Care Clinic.
- **Reason for Retroactive Request:** The proposed resolution was submitted on November 17th for introduction on November 29th. Due to the holidays and winter recess, this item was not able to be presented before the end of the year, resulting in this item becoming retroactive. We respectfully request retroactive approval for this contract amendment.
- **DPH Representative:** Maximilian Rocha | Director of Systems of Care, Behavioral Health Services, Department of Public Health | email: Maximilian.Rocha@sfdph.org

Agenda item #22 – File no. 221194 - Contract Agreement - Retroactive - San Francisco AIDS Foundation - Health Access Point Services - Not to Exceed \$11,886,595 - Resolution retroactively approving an original contract agreement between the San Francisco AIDS Foundation and the Department of Public Health (DPH), to provide Health Access Point services in an amount not to exceed \$11,886,595 for a total initial contract term of January 1, 2023, through June 30, 2026, and to authorize DPH to enter into amendments or modifications to the contract prior to its final execution by all parties that do not materially increase the obligations or liabilities to the City and are necessary to effectuate the purposes of the contract or this Resolution.

- **Description:** Under this contract, SF AIDS Foundation would provide Health Access Point (HAP) services for men who have sex with men (MSM). HAP services include HIV, HCV and STD testing, STD treatment medication, case management, support groups, and navigation services. In addition, the AIDS Foundation will provide lab testing and capacity building for

other HAPs.

- **Reason for Retroactive Request:** The proposed resolution was submitted on November 22nd for introduction on December 6th. Due to the holidays and winter recess, this item was not able to be presented before the first of this year, resulting in this item becoming retroactive. We respectfully request retroactive approval for this contract.
- **DPH Representative:** Nikole Trainor | Budget, Contract and Communication Manager, Department of Public Health | email: Nikole.Trainor@sfdph.org

Agenda item #23 – File no. 221203 - Accept and Expend Grant - Retroactive - National Institutes of Health - Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic Among Persons Who Inject Drugs (PWID) - \$178,137 - Resolution retroactively authorizing the

Department of Public Health to accept and expend a grant in the amount of \$178,137 from the National Institutes of Health for participation in a program, entitled “Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the Human Immunodeficiency Virus (HIV) Epidemic among Persons Who Inject Drugs (PWID),” for the period of August 15, 2022, through July 31, 2023.

- **Description:** This grant from the National Institutes of Health (NIH) provides funding for a new epidemiological data system in Alameda and San Francisco counties called Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic among persons who inject drugs (PWID). BLISS data will help identify and avert outbreaks, micro-target interventions, prioritize those at highest risk, fill unmet care and prevention needs, and help end the HIV epidemic.
- **Reason for Retroactive Request:** DPH received the award on August 22nd, 2022, for a program start date of August 15th, 2022. The program start date was pre-determined by the grantor. Upon receiving the award agreement, DPH worked to prepare the budget and legislative packet. The accept and expend packet was sent to the Controller’s Office for review on September 29th. Once the review was completed, the legislation was forwarded to the Mayor’s Office on November 17th for introduction on November 29th. We respectfully request approval to retroactively accept and expend this grant.
- **DPH Representative:** Erin Wilson | Senior Research Scientist, Center for Public Health Research, Department of Public Health | email: Erin.Wilson@sfdph.org

Agenda item #24 – File no. 221248 - Accept and Expend Grant - Retroactive - Office of Refugee Health - Refugee Health Assessment Program (RHAP) - Federal Fiscal Year (FFY) 2022-23 Award Number 22-38-90899-00 - \$324,061 - Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$324,061 from the Office of Refugee Health through the California Department of Public Health for participation in a program, entitled “Refugee Health Assessment Program (RHAP) - Federal Fiscal Year (FFY) 2022-23 Award Number 22-38-90899-00,” for the period of October 1, 2022, through September 30, 2023.

- **Description:** This grant from the Office of Refugee Health (ORH) through the California Department of Public Health (CDPH) provides funding for DPH to participate in the Refugee Health Assessment Program (RHAP). Funding is used to help ensure that arriving refugees, arriving asylees, special immigrant visa holders, Cuban/Haitian entrants, federal-certified victims of human trafficking, Afghan and Ukrainian humanitarian parolees, and other eligible entrants start the health assessment process. The health assessment process also includes

scheduled immunization and referrals to health care providers for identified health conditions.

- **Reason for Retroactive Request:** DPH received the award on October 1st, 2022, for a program start date of the same date. The program start date was pre-determined by the grantor. Upon receiving the award agreement, DPH worked to prepare the budget and legislative packet. DPH sent the packet for review by the Controller's Office on October 26th. Once the Controller's review was final, the legislation was sent to the Mayor's Office on November 22nd for introduction on December 6th, 2022. We respectfully request approval to retroactively accept and expend this grant.
- **DPH Representative:** Cristy Dieterich | Program Manager for Community Health Equity & Promotion (CHEP), Department of Public Health | email: Cristy.Dieterich@sfdph.org

Thank you for your time and consideration,

Claire Altman (Lindsay), MPH

Senior Health Planner | Office of Policy and Planning
San Francisco Department of Public Health
claire.altman@sfdph.org – updated email address

File Number: 221203
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic among Persons Who Inject Drugs (PWID)**
2. Department: **Department of Public Health
Center of Public Health Research**
3. Contact Person: **William McFarland** Telephone: **415-437-6251**
4. Grant Approval Status (check one):
 Approved by funding agency Not yet approved
5. Amount of Grant Funding Approved or Applied for: **\$178,137**
- 6a. Matching Funds Required: **\$0**
b. Source(s) of matching funds (if applicable): **N.A.**
- 7a. Grant Source Agency: **National Institutes of Health (NIH)**
b. Grant Pass-Through Agency (if applicable): **N.A.**
8. Proposed Grant Project Summary:

The endgame for eliminating HIV will become increasingly difficult as transmission persists in populations who are the most marginalized from society, the hardest to reach with prevention programs, and the most challenging to include in epidemiological studies. Although San Francisco appears on track to achieve zero new HIV infections within the next few years, the trajectory among people who inject drugs (PWID) lags behind. The slower rate of decrease in HIV among PWID may be due to lower levels of awareness and uptake of pre-exposure prophylaxis (PrEP). Meanwhile, neighboring Alameda County (home to Oakland) has seen little decrease in the HIV epidemic, and outbreaks occur among PWID who are Black/African American or experiencing homelessness. In addition to HIV, PWID in the US are experiencing a surge in deaths due opioid overdose. To end the HIV epidemic and mitigate other health disparities for PWID, data collection systems need to be more rapid, representative, and responsive to this population at high risk. We therefore propose to create a new epidemiological data collection system for PWID in Alameda and San Francisco counties called Brief Longitudinal Incident Sentinel Surveillance (BLISS). We will recruit 600 PWID (300 each in county) using a novel venue-based / peer-referral hybrid method called Starfish Sampling to accrue a cohort and follow them longitudinally. Following HIV testing and a baseline questionnaire, participants will be enlisted to provide monthly brief responses to 11 sentinel events of high significance to the HIV and substance use epidemics (e.g., PrEP uptake or discontinuation, harm reduction program utilization, overdose experiences). Monthly data will be collected through smart phone and online technologies with in-person options as back up. Selected sentinel events will trigger “deeper dive” data collection through ecological momentary assessments (EMAs). The sample size is geared to detect events

occurring at low rates in the community as early warning signals and to obtain sufficient longitudinal data to assess causal factors for HIV risk and preventive behaviors, particularly barriers and facilitators to PrEP use and adherence. BLISS data will help identify and avert outbreaks, micro-target interventions, prioritize those at highest risk, fill unmet care and prevention needs, and end the HIV epidemic.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **08/15/2022**

End-Date: **07/31/2023**

10a. Amount budgeted for contractual services: **\$161,321**

b. Will contractual services be put out to bid? **No**

c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **N.A.**

d. Is this likely to be a one-time or ongoing request for contracting out? **On-going**

11a. Does the budget include indirect costs? Yes No

b1. If yes, how much? **\$3,363**

b2. How was the amount calculated? **25% of total personnel costs**

c1. If no, why are indirect costs not included? **N.A.**

Not allowed by granting agency

To maximize use of grant funds on direct services

Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? **N.A.**

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive to August 15, 2022. The Department received the award on August 22, 2022.

This grant does not require an ASO amendment and partially reimburses the Department for one position: one Supervising Physician Specialist (Job Class #2233) at 0.05 FTE during the period of August 15, 2022, through July 31, 2023. The AL # for this grant is 93.855.

**Proposal ID: CTR00003125
Version ID: V101
Department ID: 162646
Project Description: HD HIV PD178 2223 BLISS
Project ID: 10039291
Activity ID: 0001**

****Disability Access Checklist***(Department must forward a copy of all completed Grant Information Forms to the Mayor’s Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s) | <input type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s) | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s) | <input type="checkbox"/> New Structure(s) | |

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor’s Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor’s Office of Disability Reviewer:

Toni Rucker, PhD
(Name)

DPH ADA Coordinator
(Title)

Date Reviewed: 10/31/2022 | 10:36 AM PDT

DocuSigned by:
Toni Rucker
784282F5331F44D...
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax
(Name)

Director of Health
(Title)

Date Reviewed: 11/9/2022 | 4:15 PM PST

DocuSigned by:
Greg Wagner
20527524752646F...
(Signature Required)

Greg wagner, COO for

Center for Public Health Research
 Brief Longitudinal Incident Sentinel Surveillance (BLISS) DUNS #1037173360000
 Year 1: Aug 15, 2022 to July 31, 2023
 Budget Summary

A. PERSONNEL

B. MANDATORY FRINGE

1. 0.05 Sr. Supervising Physician Specialist: Willi McFarland, MD, PHD, MPH&TM

Annual Salary \$199,300 @ 0.05 FTE for 12 months = \$9,965

Mandatory Fringe Benefits @ 35% = \$3,488 \$13,453

As Principal Investigator for the NHBS this position has primary responsibility for planning, developing, directing, and evaluating all scientific aspects of the study. This position is the primary liaison with the CDC. This position develops survey protocols, policies, procedures and instruments. This position directly supervises one project director and indirectly supervises Research Assistants. This position works closely with CDC study epidemiologists.

Total Salaries	\$9,965
Total Fringe	\$3,488
TOTAL PERSONNEL:	\$13,453

C. TRAVEL **\$0**

D. EQUIPMENT **\$0**

E. MATERIALS AND SUPPLIES **\$0**

F. CONTRACTUAL **\$161,321**

Contractor	Amount
Heluna Health	\$ 117,623
Alameda County Public Health Dept	\$ 26,535
UCSF	\$ 17,163

G. OTHER **\$0**

TOTAL DIRECT EXPENSES: \$174,774

H. INDIRECT COSTS (25% of total personnel)	\$3,363
 TOTAL BUDGET FOR YEAR 2022:	\$178,137

**BUDGET JUSTIFICATION PAGE
MODULAR RESEARCH GRANT APPLICATION**

Consortium

Consortium with **Heluna Health (Yr 1 - 117,623)**

PHFE will provide the staffing for formative assessment and survey data collection. They have demonstrated expertise in this area and have an established relationship with the AIDS Office

Erin Wilson (Meek), DrPH Co-Investigator, (effort = 0.6 Cal Mos) is a Senior Research Scientist at the SFPDPH in the Center for Public Health Research and Assistant Professor at the University of California San Francisco in the Department of Epidemiology and Biostatistics. Dr. Wilson has over 10 years of experience working with and conducting research with adult trans women, trans men, and youth. Her research focuses on identifying stigma-related risk factors for HIV infection. She also focuses on describing, and ultimately intervening to reduce HIV-associated health disparities with HIV prevention interventions including pre-exposure prophylaxis, behavioral interventions, peer health navigation, and combination prevention strategies. Dr. Wilson is currently PI of two interventions to increase engagement in HIV care – one among young people in San Francisco and another study focused on trans women of color. She is PI of a study to increase uptake of PrEP among trans women and PI of two prospective social epidemiological studies associated HIV risk among adult and young trans women in the U.S. and globally. Dr. Wilson is currently launching a study of trans women and their sexual partners, an anti-stigma study of trans women in Nepal, an anti-stigma reduction intervention among providers who provide care to trans women in Brazil, and a HIV testing intervention with young trans women in Brazil. She was PI of the first longitudinal social and epidemiological NIMH-funded study of young trans women ages 16-24 and the first HIV surveillance study of trans men in San Francisco. Dr. Wilson will serve as Co-Investigator for the proposed study

Sean Arayasirikul, PhD Co-Investigator, (effort = 0.6 Cal Mos) is a medical sociologist, Assistant Professor in Pediatrics at the University of California, San Francisco (UCSF) and Senior Research Scientist at SFPDPH's Center for Public Health Research. Dr. Arayasirikul's mixed methods, intersectional research seeks to understand the social etiology of HIV acquisition, specifically how minority statuses and identities, discrimination and violence exacerbate health disparities. He brings expertise in examining the role of social action theory dimensions, including contextual influences and self-changes processes on health outcomes. His work is at the intersection of developing new behavioral HIV prevention interventions using mobile health (mHealth) technologies and the implementation science of mHealth interventions in clinical and public health settings. His research also explores means to disrupt intersectional stigma and discrimination to address negative health outcomes among marginalized populations including people who use drugs and youth. Dr. Arayasirikul will serve as Co-Investigator for the proposed study.

HELUNA HEALTH - Other Personnel

Caitlin Turner, MPH, PhD Student , Data Manager, (effort = 0.6 Cal Mos) is a Social Epidemiologist and PhD student in Epidemiology and Translational Sciences at UCSF. She has worked as a data manager on a number of HIV prevention studies at SFPDPH's Center for Public Health Research for over 5 years. As Data Manager, she will be responsible for developing the study databases, programming and testing data collection instruments, establishing data cleaning queries, conducting analyses, and contribute to manuscript writing and dissemination activities in collaboration with the MPIs.

To Be Hired, Research Assistant. (effort 2.4Cal Mos) A Research Assistant will be hired through Heluna Health and will report directly to the Investigative Team. The Research Assistant will support study recruitment, retention and data collection activities.

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RESEARCH DEVELOPMENT SUPPORT

General Supplies, Years 1, (\$3,000): Costs associated with implementing BLISS during the project period. Required supplies will include but are not limited to HIV testing supplies, tablets, binders, tabs, dividers, binder storage cabinets with locking mechanism, folders, printer cartridges, computer paper, labels, etc. There is also a need for general supplies such as envelopes, file folders/dividers, labels, memo pads, post-its, pencils, pens, staples, paper clips, writing pads, business cards, research file folders, etc. The costs for each year are as follows:

Participant Stipends, Years 1, (\$23,500): Participants enrolled into our longitudinal cohort sample (N=600) will complete baseline, 6-month, 12-month and 18-month study visits. For each visit, they will complete a survey interview (\$50), HIV/HCV testing and HCV RNA testing (\$25), hair testing (\$25) for a total of \$100USD for each study visit. Participants will be paid for peer referrals (\$10/referral for up to 5 referrals for a total of \$50).

Indirect - Costs for administrative support, calculated at 12.8% of modified total direct costs (MTDC).

**BUDGET JUSTIFICATION PAGE
MODULAR RESEARCH GRANT APPLICATION**

Consortium

Consortium with **Alameda County Public Health Department (Yr 1- 26,535)**

Neena Murgai, PhD, MPH, Co-Investigator (0.60 calendar months in Years 1-2, and 1.20 calendar months in Years 3-5) is the Director of the HIV Epidemiology and Surveillance Unit at ACPHD. As Co-Principal Investigator for this grant, she has primary responsibility for leading and overseeing all activities related to the implementation of the NHBS cycle among people who inject drugs (PWID) and assessing the feasibility of the regional virtual PWID cohort for ACPHD. This includes developing collaborations with local, state, and federal stakeholders; and overseeing all formative and operational activities to conduct the NHBS in Alameda County. She will participate in regular planning meetings; oversee the ACPHD epidemiologists involved in case surveillance analysis and data management; and oversee the NHBS lead for ACPHD. She will collaborate closely with her SFDPH counterparts on all aspects of NHBS implementation and joint analyses across the two counties.

Other Personnel

TBD, Project Coordinator, NHBS (1.2 calendar months in Years 1-5) will lead NHBS planning and implementation activities in the HIV Epidemiology and Surveillance Unit at ACPHD. He/she will lead field operations to conduct the NHBS PWID cycle in Alameda County. He/she will participate in regular planning and team meetings; assist in developing collaborations with local, state, and federal stakeholders; lead formative assessment activities; and supervise research assistants conducting data collection. He/she will collaborate closely with SFDPH counterparts on all aspects of NHBS implementation.

TBD, Data Manager, NHBS (0.60 calendar months in Years 1-5) will lead NHBS data management activities in the HIV Epidemiology and Surveillance Unit at ACPHD. He/she will participate in regular planning and team meetings; develop and maintain data systems to support NHBS operations and data collection; implement NHBS data quality assurance protocols; and process and submit NHBS data to CDC. He/she will collaborate closely with SFDPH counterparts on all aspects of NHBS data management.

**BUDGET JUSTIFICATION PAGE
MODULAR RESEARCH GRANT APPLICATION**

Consortium

Consortium with **University of San Francisco (Yr 1 - 17,163)**

UCSF will provide support for the work of Dr. Glenn-Milo Santos on the proposed project.

Dr. Glenn Milo-Santos, PhD, MPH– UCSF Co-Investigator (0.6 Calendar Months for Year 1 through Year 5; salary support requested): Dr. Santos will work closely with PI Dr. McFarland to advance the proposed specific aims. Dr. Santos has participated in the execution and conduct of 9 NIH-funded intervention trials among people who use drugs, as well as a CDC-funded behavioral study for substance-users. Dr. Santos is the PI of four NIH-funded studies evaluating the efficacy of combination interventions (pharmacologic agents with counseling modalities) among substance-using and alcohol-drinking individuals at high-risk for HIV, and PI of a 5-year NIDA funded supplement evaluating changes substance-use patterns using biomarkers. Dr. Santos was the lead author of a narrative review of interventions for alcohol and substance use, published in AIDS and Behavior, and he was the primary analyst in the first systematic review and meta-analysis conducted on the efficacy of behavioral interventions for amphetamine-group substances, published in The Lancet. Dr. Santos has led numerous analyses and manuscripts; he has co-authored over 100 peer-reviewed articles on the results of pharmacologic trials, predictors of medication adherence, social networks, substance use patterns, and risk-taking behaviors of people who use drugs. He was also part of the editorial board for the United Nations Office of Drug and Crime’s Treatment Guidelines on Stimulant Use and HIV. In addition, he has experience in the safety and monitoring of clinical trials as a member of the UCLA Data Safety Monitoring Board (DSMB) for Addiction Medicine.

For the proposed study, Dr. Santos will bring his considerable expertise in substance use research and research with PWID to this project. Dr. Santos will also oversee in the development of the data collection instruments to monitor and evaluate study outcomes and measures, including development of the ACASI instrument. Dr. Santos will work closely with the Study Coordinator to update the study protocol for proposed activities and ensure adherence to the protocol and integrity of all data collected. He will also contribute to the planning and execution of statistical analyses for the study’s specific aims and exploratory aims. Dr. Santos will also play an active role in disseminating data and study findings by preparing scientific abstracts, manuscripts, and annual reports.

C. Equipment

None

D. Travel

None

E. Participant/Trainee Support Costs

None.

F. Other Direct Costs

UCSF Data Network Recharge (Y1-Y5: \$2,130):

The data network services recharge or data network recharge is a vital component of the University’s Enterprise Network Services (ENS), which provides funding for critical equipment in support of UCSF’s

electronic information flow. Per agreement signed January 24, 2008 with The Department of Health & Human Services (DHHS), Division of Cost Allocation, (cognizant agency to the University), the University does not disclose ENS costs as F&A pool costs and can charge for ENS costs as direct costs. This cost totals \$426 per year for each year of the grant.

H. INDIRECT COSTS

University-wide flat indirect rate charged to sponsored projects with DPH at 12% of total direct costs.



<p>Recipient Information</p> <p>1. Recipient Name CITY & COUNTY OF SAN FRANCISCO 101 GROVE ST SAN FRANCISCO, 94102</p> <p>2. Congressional District of Recipient 12</p> <p>3. Payment System Identifier (ID) 1946000417A8</p> <p>4. Employer Identification Number (EIN) 946000417</p> <p>5. Data Universal Numbering System (DUNS) 103717336</p> <p>6. Recipient's Unique Entity Identifier DCTNHRGU1K75</p> <p>7. Project Director or Principal Investigator William McFarland, MD Professor willi.mcfarland@sfdph.org 415-554-9000</p> <p>8. Authorized Official Willi McFarland willi.mcfarland@sfdph.org 415-554-9016</p>	<p>Federal Award Information</p> <p>11. Award Number 1R01AI169635-01</p> <p>12. Unique Federal Award Identification Number (FAIN) R01AI169635</p> <p>13. Statutory Authority 42 USC 241 42 CFR 52</p> <p>14. Federal Award Project Title Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic among Persons Who Inject Drugs (PWID)</p> <p>15. Assistance Listing Number 93.855</p> <p>16. Assistance Listing Program Title Allergy and Infectious Diseases Research</p> <p>17. Award Action Type New Competing</p> <p>18. Is the Award R&D? Yes</p>														
<p>Federal Agency Information</p> <p>9. Awarding Agency Contact Information Nicole A Guidetti Grants Management Program NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES nicole.guidetti@nih.gov 301-761-6934</p> <p>10. Program Official Contact Information Gerald B. Sharp Program Officer NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES gsharp@niaid.nih.gov 240-627-3217</p>	<p>19. Budget Period Start Date 08-15-2022 – End Date 07-31-2023</p> <table border="1"> <tr> <td>20. Total Amount of Federal Funds Obligated by this Action</td> <td style="text-align: right;">\$178,137</td> </tr> <tr> <td> 20 a. Direct Cost Amount</td> <td style="text-align: right;">\$174,774</td> </tr> <tr> <td> 20 b. Indirect Cost Amount</td> <td style="text-align: right;">\$3,363</td> </tr> </table> <p>21. Authorized Carryover</p> <p>22. Offset</p> <table border="1"> <tr> <td>23. Total Amount of Federal Funds Obligated this budget period</td> <td style="text-align: right;">\$178,137</td> </tr> <tr> <td>24. Total Approved Cost Sharing or Matching, where applicable</td> <td style="text-align: right;">\$0</td> </tr> <tr> <td>25. Total Federal and Non-Federal Approved this Budget Period</td> <td style="text-align: right;">\$178,137</td> </tr> </table> <hr/> <p>26. Project Period Start Date 08-15-2022 – End Date 07-31-2027</p> <table border="1"> <tr> <td>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period</td> <td style="text-align: right;">\$178,137</td> </tr> </table> <p>28. Authorized Treatment of Program Income Additional Costs</p> <p>29. Grants Management Officer - Signature ANNIE NOEL Grimes</p>	20. Total Amount of Federal Funds Obligated by this Action	\$178,137	20 a. Direct Cost Amount	\$174,774	20 b. Indirect Cost Amount	\$3,363	23. Total Amount of Federal Funds Obligated this budget period	\$178,137	24. Total Approved Cost Sharing or Matching, where applicable	\$0	25. Total Federal and Non-Federal Approved this Budget Period	\$178,137	27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$178,137
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27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$178,137														
<p>30. Remarks Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise</p>															

requested from the grant payment system.



RESEARCH
Department of Health and Human Services
National Institutes of Health



NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

SECTION I – AWARD DATA – 1R01AI169635-01

Principal Investigator(s):

William McFarland, MD

Award e-mailed to: barbara.garcia@sfdph.org

Dear Authorized Official:

The National Institutes of Health hereby awards a grant in the amount of \$178,137 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Each publication, press release, or other document about research supported by an NIH award must include an acknowledgment of NIH award support and a disclaimer such as "Research reported in this publication was supported by the National Institute Of Allergy And Infectious Diseases of the National Institutes of Health under Award Number R01AI169635. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health." Prior to issuing a press release concerning the outcome of this research, please notify the NIH awarding IC in advance to allow for coordination.

Award recipients must promote objectivity in research by establishing standards that provide a reasonable expectation that the design, conduct and reporting of research funded under NIH awards will be free from bias resulting from an Investigator's Financial Conflict of Interest (FCOI), in accordance with the 2011 revised regulation at 42 CFR Part 50 Subpart F. The Institution shall submit all FCOI reports to the NIH through the eRA Commons FCOI Module. The regulation does not apply to Phase I Small Business Innovative Research (SBIR) and Small Business Technology Transfer (STTR) awards. Consult the NIH website <http://grants.nih.gov/grants/policy/coi/> for a link to the regulation and additional important information.

If you have any questions about this award, please direct questions to the Federal Agency contacts.

Sincerely yours,

ANNIE NOEL Grimes
Grants Management Officer
NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

Additional information follows

Cumulative Award Calculations for this Budget Period (U.S. Dollars)

Federal Direct Costs	\$174,774
Federal F&A Costs	\$3,363
Approved Budget	\$178,137
Total Amount of Federal Funds Authorized (Federal Share)	\$178,137
TOTAL FEDERAL AWARD AMOUNT	\$178,137
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$178,137

SUMMARY TOTALS FOR ALL YEARS (for this Document Number)		
YR	THIS AWARD	CUMULATIVE TOTALS
1	\$178,137	\$178,137
2	\$205,679	\$205,679
3	\$235,470	\$235,470
4	\$235,470	\$235,470
5	\$208,096	\$208,096

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

Fiscal Information:

Payment System Identifier: 1946000417A8
 Document Number: RAI169635A
 PMS Account Type: P (Subaccount)
 Fiscal Year: 2022

IC	CAN	2022	2023	2024	2025	2026
AI	8472297	\$178,137	\$205,679	\$235,470	\$235,470	\$208,096

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

NIH Administrative Data:

PCC: A27G / OC: 41021 / Released: Grimes, ANNIE 08-01-2022
 Award Processed: 08/15/2022 12:03:52 AM

SECTION II – PAYMENT/HOTLINE INFORMATION – 1R01AI169635-01

For payment and HHS Office of Inspector General Hotline information, see the NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm>

SECTION III – STANDARD TERMS AND CONDITIONS – 1R01AI169635-01

This award is based on the application submitted to, and as approved by, NIH on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. Conditions on activities and expenditure of funds in other statutory requirements, such as those included in appropriations acts.
- c. 45 CFR Part 75.
- d. National Policy Requirements and all other requirements described in the NIH Grants Policy

- Statement, including addenda in effect as of the beginning date of the budget period.
- e. Federal Award Performance Goals: As required by the periodic report in the RPPR or in the final progress report when applicable.
 - f. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

(See NIH Home Page at <http://grants.nih.gov/grants/policy/awardconditions.htm> for certain references cited above.)

Research and Development (R&D): All awards issued by the National Institutes of Health (NIH) meet the definition of “Research and Development” at 45 CFR Part§ 75.2. As such, auditees should identify NIH awards as part of the R&D cluster on the Schedule of Expenditures of Federal Awards (SEFA). The auditor should test NIH awards for compliance as instructed in Part V, Clusters of Programs. NIH recognizes that some awards may have another classification for purposes of indirect costs. The auditor is not required to report the disconnect (i.e., the award is classified as R&D for Federal Audit Requirement purposes but non-research for indirect cost rate purposes), unless the auditee is charging indirect costs at a rate other than the rate(s) specified in the award document(s).

An unobligated balance may be carried over into the next budget period without Grants Management Officer prior approval.

This grant is subject to Streamlined Noncompeting Award Procedures (SNAP).

This award is subject to the requirements of 2 CFR Part 25 for institutions to obtain a unique entity identifier (UEI) and maintain an active registration in the System for Award Management (SAM). Should a consortium/subaward be issued under this award, a UEI requirement must be included. See <http://grants.nih.gov/grants/policy/awardconditions.htm> for the full NIH award term implementing this requirement and other additional information.

This award has been assigned the Federal Award Identification Number (FAIN) R01AI169635. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

Based on the project period start date of this project, this award is likely subject to the Transparency Act subaward and executive compensation reporting requirement of 2 CFR Part 170. There are conditions that may exclude this award; see <http://grants.nih.gov/grants/policy/awardconditions.htm> for additional award applicability information.

In accordance with P.L. 110-161, compliance with the NIH Public Access Policy is now mandatory. For more information, see NOT-OD-08-033 and the Public Access website: <http://publicaccess.nih.gov/>.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75. This term does not apply to NIH fellowships.

Treatment of Program Income:

Additional Costs

SECTION IV – AI SPECIFIC AWARD CONDITIONS – 1R01AI169635-01

Clinical Trial Indicator: No

This award does not support any NIH-defined Clinical Trials. See the NIH Grants Policy Statement Section 1.2 for NIH definition of Clinical Trial.

The budget period anniversary start date for future year(s) will be **August 1**.

In accordance with the NIAID Financial Management Plan, NIAID does not provide funds for inflationary increases. See: <https://www.niaid.nih.gov/grants-contracts/financial-management-plan>.

REMINDER: This grant is funded for HIV/AIDS research. Per the NIH Revitalization Act of 1993, funds are restricted for HIV/AIDS research and cannot be re-budgeted for other purposes.

This is a Modular Award without direct cost categorical breakdowns in accordance with the guidelines published in the NIH Grants Policy Statement, see https://grants.nih.gov/grants/policy/nihgps/HTML5/section_13/13.5_post-award_administration.htm. Recipients are required to allocate and account for costs related to this award by category within their institutional accounting system in accordance with applicable cost principles.

This Notice of Award (NoA) includes funds for **Heluna Health**.

This Notice of Award (NoA) includes funds for **University of California San Francisco**.

This Notice of Award (NoA) includes funds for **Alameda County Public Health Department**.

This award includes human subject research studies and must conform to the DHHS policies for the [Protection of Human Subjects](#) research, which are a term and condition of award. Human subjects research is covered by the 2018 Common Rule, and may not be initiated until the associated protocols have received IRB approval as specified in [45 CFR 46](#). Failure to comply with the terms and conditions of award may result in the disallowance of costs and/or additional enforcement actions as outlined in Section 8.5 of the NIH Grants Policy Statement.

SPREADSHEET SUMMARY

AWARD NUMBER: 1R01AI169635-01

INSTITUTION: SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Budget	Year 1	Year 2	Year 3	Year 4	Year 5
TOTAL FEDERAL DC	\$174,774	\$202,316	\$232,107	\$232,107	\$204,733
TOTAL FEDERAL F&A	\$3,363	\$3,363	\$3,363	\$3,363	\$3,363
TOTAL COST	\$178,137	\$205,679	\$235,470	\$235,470	\$208,096

Facilities and Administrative	Year 1	Year 2	Year 3	Year 4	Year 5
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Costs					
F&A Cost Rate 1	25%	25%	25%	25%	25%
F&A Cost Base 1	\$13,453	\$13,453	\$13,453	\$13,453	\$13,453
F&A Costs 1	\$3,363	\$3,363	\$3,363	\$3,363	\$3,363



London N. Breed
Mayor

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Dr. Grant Colfax
Director of Health

DATE: 11/30/2022

SUBJECT: Grant Accept and Expend

GRANT TITLE: Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic among Persons Who Inject Drugs (PWID) - \$178,137

Attached please find the original and 1 copy of each of the following:

- Proposed grant resolution, original signed by Department
- Grant information form, including disability checklist
- Budget and Budget Justification
- Grant application: Not Applicable. No application submitted.
- Agreement / Award Letter
- Other (Explain):

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Gregory Wong (greg.wong@sfdph.org) Phone: 554-2521

Interoffice Mail Address: Dept. of Public Health, 101 Grove St # 108

Certified copy required Yes

No