

File No. 200736

Committee Item No. 7

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget & Finance Committee

Date July 22, 2020

Board of Supervisors Meeting

Date _____

Cmte Board

- | | | |
|-------------------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Form 126 – Ethics Commission |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Linda Wong

Date July 17, 2020

Completed by: Linda Wong

Date _____

1 [Accept and Expend Grant - Retroactive - California Department of Public Health - Disease
2 Prevention and Control Local Infrastructure Funds - \$660,557.24]

3 **Resolution retroactively authorizing the Department of Public Health to accept and**
4 **expend a grant in the amount of \$660,557.24 from the California Department of Public**
5 **Health for participation in a program, entitled “Disease Prevention and Control Local**
6 **Infrastructure Funds,” for the period of February 1, 2020, through June 30, 2023.**

7
8 WHEREAS, The California Department of Public Health (CDPH) has agreed to fund
9 the San Francisco Department of Public Health (DPH) in the amount of \$660,557.24 for
10 participation in a program, entitled “Disease Prevention and Control (DPC) Local
11 Infrastructure Funds,” for the period of February 1, 2020, through June 30, 2023; and

12 WHEREAS, The purpose of the funds is for local public health infrastructure to address
13 infectious diseases prevention and control by the local health jurisdiction; and

14 WHEREAS, Public health activities will be implemented to address gaps in core public
15 health functions within the local health jurisdiction, such as investigate and document
16 communicable disease cases and outbreaks, maintain logs of contact and collaboration,
17 provide guidance documents, case/contact investigation and management, and develop and
18 update communicable disease control protocols; and

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

20 WHEREAS, A request for retroactive approval is being sought because DPH received
21 the award on February 6, 2020, for a project start date of February 1, 2020; and

22 WHEREAS, The grant budget includes a provision for indirect costs in the amount of
23 \$132,110; now, therefore, be it

24 **RESOLVED**, That DPH is hereby authorized to retroactively accept and expend a grant
25 in the amount of \$660,557.24 from the CDPH; and, be it

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

3 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
4 Agreement on behalf of the City; and, be it

5 FURTHER RESOLVED, That within thirty (30) days of the Grant Agreement being fully
6 executed by all parties, the Director of Health shall provide a copy to the Clerk of the Board of
7 Supervisors for inclusion in the official file.

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

1 Recommended: Approved: /s/
2 Mayor
3 /s/
4 Dr. Grant Colfax Approved: /s/
5 Director of Health Controller
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

File Number: _____
(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: DPC Local Infrastructure Funds
2. Department: SFDPH – Disease Prevention and Control Branch
3. Contact Person: Susan Philip Telephone: 628.206.7638
4. Grant Approval Status (check one):
 Approved by funding agency Not yet approved
5. Amount of Grant Funding Approved or Applied for: \$660,557.24
- 6a. Matching Funds Required: \$0
b. Source(s) of matching funds (if applicable): N/A
- 7a. Grant Source Agency: CDPH
b. Grant Pass-Through Agency (if applicable): N/A
8. Proposed Grant Project Summary:
This is a one-time funds for local public health infrastructure to address infectious disease prevention and control by the local health jurisdiction.
9. Grant Project Schedule, as allowed in approval documents, or as proposed:
Start-Date: 2/1/2020 End-Date: 6/30/2023
- 10a. Amount budgeted for contractual services: \$0
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? No
d. Is this likely to be a one-time or ongoing request for contracting out? One-time
- 11a. Does the budget include indirect costs? Yes No
b1. If yes, how much? \$132,110
b2. How was the amount calculated? 25% of total personnel & benefits
c1. If no, why are indirect costs not included?
 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?

12. Any other significant grant requirements or comments: We respectfully request for approval to accept and expend these funds retroactive to February 1, 2020. The Department received the award on February 6, 2020. This grant does not require an ASO amendment and partially reimburses the department for one existing position: one Public Health Nurse (Job Class #2830) at 1.00 FTE during the period of July 1, 2020 through December 31, 2022.

FSP chartfields for the grant.

- Fund: 11580
- Department: 251974
- Authority: 10001
- Project: 10036349
- Activity: 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 checked="" type="checkbox"/> Existing Structure(s) | <input checked="" 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: 5/8/2020 | 2:24 PM PDT

DocuSigned by:
Toni Rucker
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Dr. Grant Colfax
(Name)

Director of Health
(Title)

Date Reviewed: 5-19-20

[Signature]
(Signature Required)

**CALIFORNIA DIVISION OF COMMUNICABLE DISEASE CONTROL
INFECTIOUS DISEASE PREVENTION AND CONTROL LOCAL - INFRASTRUCTURE**

Awarded By

THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter “Department”

TO

City and County of San Francisco, hereinafter “Grantee”

**Implementing the project, INFECTIOUS DISEASE PREVENTION AND CONTROL
LOCAL – INFRASTRUCTURE**

**“INFECTIOUS DISEASE PREVENTION AND CONTROL LOCAL – INFRASTRUCTURE”,
hereinafter “Project”**

GRANT AGREEMENT NUMBER 19-10887

The Department awards this Grant and the Grantee accepts and agrees to use the Grant funds as follows:

AUTHORITY: The Department has authority to grant funds for the Project under AB74, Budget Act of 2019, Chapter 23.

PURPOSE: The Department shall provide a grant to and for the benefit of the Grantee; the purpose of the Grant is to implement public health activities to address gaps in core public health functions within the local health jurisdiction.

GRANT AMOUNT: The maximum amount payable under this Grant shall not exceed \$660,557.24.

TERM OF GRANT AGREEMENT: The term of the Grant will be February 1, 2020 and terminates on June 30, 2023. No funds may be requested or invoiced for services performed or costs incurred after June 30, 2023.

PROJECT REPRESENTATIVES: The Project Representatives during the term of this Grant will be:

California Department of Public Health	Grantee: City and County of San Francisco
Name: Taylor St. Mary	Name: Dr. Grant Colfax
Address: 1616 Capitol Avenue, MS 7300	Address: N/A
City, Zip: Sacramento, CA 95814	City, Zip: San Francisco, CA 94102

Phone: (916) 552-8974	Phone: (415) 554-2600
Fax: (916) 552-8973	Fax: N/A
Email: taylor.st.mary@cdph.ca.gov	Email: Grant.Colfax@sfdph.org

Direct all inquiries to:

California Department of Public Health	Grantee: City and County of San Francisco
Attention: Taylor St. Mary	Name: Susan Philip
Address: 1616 Capitol Avenue, MS 7300	Address: 25 Van Ness, Suite 345
City, Zip: Sacramento, CA 95814	City, Zip: San Francisco, CA 94102
Phone: (916) 552-8974	Phone: 628-206-7638
Fax: (916) 552-8973	Fax: 628-554-9636
Email: taylor.st.mary@cdph.ca.gov	Email: susan.philip@sfdph.org

All payments from CDPH to the Grantee shall be sent to the following address:

Grantee: City and County of San Francisco
Address: 1380 Howard Street, 4th Floor
City, Zip: San Francisco, CA 94103-2614
Phone: 415-255-3472
Fax: 415-255-3675
Email: david.anabu@sfdph.org

- Either party may make changes to the Project Representatives, or remittance address, by giving a written notice to the other party. Said changes shall not require an amendment to the agreement. Note: Remittance address changes will require the Grantee to submit a completed CDPH 9083 Governmental Entity Taxpayer ID Form or STD 204 Payee Data Record Form which can be requested through the CDPH Project Representatives for processing.

STANDARD PROVISIONS. The following exhibits are attached and made a part of this Grant by this reference:


- Exhibit A SCOPE OF WORK
- Exhibit B BUDGET DETAIL AND PAYMENT PROVISIONS
- Exhibit C STANDARD GRANT CONDITIONS
- Exhibit D ADDITIONAL PROVISIONS

GRANTEE REPRESENTATIONS: The Grantee(s) accept all terms, provisions, and conditions of this grant, including those stated in the Exhibits incorporated by reference above. The Grantee(s) shall fulfill all assurances and commitments made in the application, declarations, other accompanying documents, and written communications (e.g., e-mail, correspondence) filed in support of the request for grant funding. The Grantee(s) shall comply with and require its contractors and subcontractors to comply with all applicable laws, policies, and regulations.

IN WITNESS THEREOF, the parties have executed this Grant on the dates set forth below.

Executed By:

Date: 5-1-20



Dr. Grant Colfax, Director of Health
City and County of San Francisco
25 Van Ness, Suite 345
San Francisco, CA 94101

Date: 5/11/2020



Jeff Mapes, Chief
Contracts Management Unit
California Department of Public Health
1616 Capitol Avenue, Suite 74.262
P.O. Box 997377, MS 1800- 1804
Sacramento, CA 95899-7377

Exhibit A
Scope of Work

1. Service Overview

The Grantee will implement public health activities to address gaps in core public health functions within the local health jurisdiction. California Department of Public Health (CDPH) requests that the focus be on responding to increases in workload associated with high priority, preventable infectious diseases to support efforts to make California the healthiest state in the nation by advancing better health, better care, lower costs, and by promoting health equity, and reducing health disparities.

Key strategic targets for infectious diseases prevention and control local infrastructure are: surveillance; monitor and evaluate disease-specific prevention activities; local capacity to respond and surge for outbreaks; and laboratory and information technology.

2. Service Location

The services shall be performed at applicable facilities in the County of San Francisco.

3. Service Hours

The services shall be primarily provided Monday through Friday, from 8:00 a.m. to 5:00 p.m. and include evenings, weekends, and holidays as needed.

4. Services to be Performed: Core Public Health Functions

OPTION 1: Surveillance:

Activities	Deliverables	Timeline
Not Applicable		

OPTION II: Monitoring and Evaluation of Disease-Specific Prevention Activities

Activities	Deliverables	Timeline
Not Applicable		

OPTION III: Local Capacity to Respond and Surge for Outbreaks

Activities	Deliverables	Timeline
Investigate and follow up on communicable disease reports and outbreaks. Manage cases and outbreaks that are challenging due	<ul style="list-style-type: none"> SFDPH will hire a full time Public Health Nurse to implement the activities listed. Case investigation report forms. 	2/1/20 – 6/30/23

Exhibit A
Scope of Work

Activities	Deliverables	Timeline
<p>to public health significance and/or clinical or psychosocial complexity. Provide consultation to Disease Control Investigators or co-manage cases with them.</p>		
<p>Assist with informing local medical providers, affected populations, community organizations, and general public of relevant disease trends, alerts and outbreaks in a timely manner.</p>	<ul style="list-style-type: none"> • Informational bulletins, routine reports, exposure notices, advisories, public meetings and other appropriate means. 	<p>2/1/20 – 6/30/23</p>
<p>Investigate and document communicable disease cases and outbreaks in a timely manner via phone interviews and field visits. Verify diagnosis, identify exposed susceptible contacts and assess risk, provide or verify appropriate prophylaxis and/or treatment for case and contacts, collection of specimens for testing; ensuring implementation of appropriate infection or outbreak control measures; providing appropriate public health education and information.</p>	<ul style="list-style-type: none"> • Case report forms • Health education materials 	<p>2/1/20 – 6/30/23</p>
<p>Maintain close collaboration with other jurisdictions, agencies and departments through the course of the communicable disease investigation to ensure that pertinent information is communicated, and appropriate interventions are occurring. These include Environmental Health Branch; California Department of Public Health; Centers for Disease Control and Prevention; Maternal, Child and Adolescent Health; SFUSD; hospital infection control providers;</p>	<ul style="list-style-type: none"> • Maintain log of contact/collaboration 	<p>2/1/20 – 6/30/23</p>

Exhibit A
Scope of Work

Activities	Deliverables	Timeline
skilled nursing facilities; childcare centers, etc.		
In the event of a Public Health Emergency related to a communicable disease situation, provide lead direction to other PHNs, clinical staff or paraprofessional staff for broader outbreak investigation and implementation of disease control measures.	<ul style="list-style-type: none"> Guidance documents 	2/1/20 – 6/30/23
Monitor contacts and potential contacts of communicable disease cases by phone, video conference or field visit.	<ul style="list-style-type: none"> Case/contact investigation Case management 	2/1/20 – 6/30/23
Participate in preparation and/or service of Health Officer Orders to prevent transmission of communicable diseases.	<ul style="list-style-type: none"> Health Officer Orders 	2/1/20 – 6/30/23
Provide guidance to medical providers concerning management of communicable disease situations	<ul style="list-style-type: none"> Guidance documents (e.g., infection control and laboratory testing guidance) 	2/1/20 – 6/30/23
Develop and update communicable disease control protocols.	<ul style="list-style-type: none"> Protocols, procedures, policies 	2/1/20 – 6/30/23

OPTION IV: Laboratory and Information Technology

Activities	Deliverables	Timeline
Not Applicable		

Exhibit B
Budget Detail and Payment Provisions

1. Invoicing and Payment

- A. For activities in Exhibit A, the Grantee will have the following payment options: a) submit an invoice for a one time lump-sum payment or b) submit invoices quarterly. The Grantee will work with their CDPH program liaison once they have decided which option to follow.
- B. Invoice(s) shall include the Grant Number and shall be submitted in triplicate either in a one-lump sum request or in quarterly invoices to:

LHJDCDC@cdph.ca.gov

California Department of Public Health
Division of Communicable Disease Control
MS 7300
P.O. Box 997377
Sacramento, CA 95899-7377

- C. Invoices shall:
 - 1) Be prepared on Grantee letterhead. If invoices are not on produced letterhead invoices must be signed by an authorized official, employee or agent certifying that the expenditures claimed represent activities performed and are in accordance with Exhibit A Grant Application under this Grant.
 - 2) Bear the Grantee's name as shown on the Grant.
 - 3) Identify the billing and/or performance period covered by the invoice.
 - 4) Itemize costs for the billing period in the same or greater level of detail as indicated in this Grant. Subject to the terms of this Grant, reimbursement may only be sought for those costs and/or cost categories expressly identified as allowable and approved by CDPH.

2. Budget Contingency Clause

- A. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the State shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to fulfill any provisions of this Agreement.
- B. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, the State shall have the option to either cancel this Agreement with no liability occurring to the State, or offer an agreement amendment to Grantee to reflect the reduced amount.

3. Prompt Payment Clause

Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927.

Exhibit B
Budget Detail and Payment Provisions

4. Amounts Payable

A. The amounts payable under this Grant shall not exceed:

- 1) \$660,557.24 for the budget period of upon execution of final contract through June 30, 2023.

5. Timely Submission of The Final Invoice

A. A final undisputed invoice shall be submitted for payment no more than forty-five (45) calendar days following the expiration or termination date of this Grant, unless a later or alternate deadline is agreed to in writing by the program grant manager. Said invoice should be clearly marked "Final Invoice", indicating that all payment obligations of the State under this Grant have ceased and that no further payments are due or outstanding.

B. The State may, at its discretion, choose not to honor any delinquent final invoice if the Grantee fails to obtain prior written State approval of an alternate final invoice submission deadline.

6. Travel and Per Diem Reimbursement

Any reimbursement for necessary travel and per diem shall be at the rates currently in effect as established by the California Department of Human Resources.

7. Use of Funds / Supplanting

These funds shall be used to supplement and enhance existing local program activities and services and shall not replace existing services and activities, prevent the addition of new services and activities, and does not duplicate reimbursement of costs and services received from local funds or other sources.

EXHIBIT C

STANDARD GRANT CONDITIONS

1. **APPROVAL:** This Grant is of no force or effect until signed by both parties and approved by the Department of General Services, if required. The Grantee may not commence performance until such approval has been obtained
2. **AMENDMENT:** No amendment or variation of the terms of this Grant shall be valid unless made in writing, signed by the parties, and approved as required. No oral understanding or Agreement not incorporated in the Grant is binding on any of the parties. In no case shall the Department materially alter the scope of the Project set forth in Exhibit A.
3. **ASSIGNMENT:** This Grant is not assignable by the Grantee, either in whole or in part, without the written consent of the Grant Manager in the form of a written amendment to the Grant.
4. **AUDIT:** Grantee agrees that the Department, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to this Grant. Grantee agrees to maintain such records for a possible audit for a minimum of three (3) years after final payment or completion of the project funded with this Grant, unless a longer period of records retention is stipulated. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to the project.
5. **CONFLICT OF INTEREST:** Grantee certifies that it is in compliance with all applicable state and/or federal conflict of interest laws.
6. **INDEMNIFICATION:** Grantee agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the project, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Grantee in the performance of any activities related to the Project.
7. **FISCAL MANAGEMENT SYSTEMS AND ACCOUNTING STANDARDS:** Grantee agrees that, at a minimum, its fiscal control and accounting procedures will be sufficient to permit tracing of all grant funds to a level of expenditure adequate to establish that such funds have not been used in violation of any applicable state or federal law, or the provisions of this Grant. Grantee further agrees that it will maintain separate Project accounts in accordance with generally accepted accounting principles.
8. **GOVERNING LAW:** This Grant is governed by and shall be interpreted in accordance with

the laws of the State of California.

- 9. INCOME RESTRICTIONS:** Grantee agrees that any refunds, rebates, credits, or other amounts (including any interest thereon) accruing to or received by the Grantee under this Grant shall be paid by the Grantee to the Department, to the extent that they are properly allocable to costs for which the Grantee has been reimbursed by the Department under this Grant.
- 10. INDEPENDENT CONTRACTOR:** Grantee, and its agents and employees of Grantee, in the performance of the Project, shall act in an independent capacity and not as officers, employees or agents of the Department.
- 11. MEDIA EVENTS:** Grantee shall notify the Department's Grant Manager in writing at least twenty (20) working days before any public or media event publicizing the accomplishments and/or results of the Project and provide the opportunity for attendance and participation by Department's representatives.
- 12. NO THIRD-PARTY RIGHTS:** The Department and Grantee do not intend to create any rights or remedies for any third-party as a beneficiary of this Grant or the project.
- 13. NOTICE:** Grantee shall promptly notify the Department's Grant Manager in writing of any events, developments or changes that could affect the completion of the project or the budget approved for this Grant.
- 14. PROFESSIONALS:** Grantee agrees that only licensed professionals will be used to perform services under this Grant where such services are called for.
- 15. RECORDS:** Grantee certifies that it will maintain Project accounts in accordance with generally accepted accounting principles. Grantee further certifies that it will comply with the following conditions for a grant award as set forth in the Request for Applications (Exhibit D) and the Grant Application (Exhibit A).

 - A. Establish an official file for the Project which shall adequately document all significant actions relative to the Project;
 - B. Establish separate accounts which will adequately and accurately depict all amounts received and expended on this Project, including all grant funds received under this Grant;
 - C. Establish separate accounts which will adequately depict all income received which is attributable to the Project, especially including any income attributable to grant funds disbursed under this Grant;
 - D. Establish an accounting system which will adequately depict final total costs of the Project, including both direct and indirect costs; and,
 - E. Establish such accounts and maintain such records as may be necessary for the state to fulfill federal reporting requirements, including any and all reporting requirements under federal tax statutes or regulations.
- 16. RELATED LITIGATION:** Under no circumstances may Grantee use funds from any

disbursement under this Grant to pay for costs associated with any litigation between the Grantee and the Department.

17. RIGHTS IN DATA: Grantee and the Department agree that all data, plans, drawings, specifications, reports, computer programs, operating manuals, notes, and other written or graphic work submitted under Exhibit A in the performance of the Project funded by this Grant shall be in the public domain. Grantee may disclose, disseminate and use in whole or in part, any final form data and information received, collected, and developed under this Project, subject to appropriate acknowledgment of credit to the Department for financial support. Grantee shall not utilize the materials submitted to the Department (except data) for any profit making venture or sell or grant rights to a third-party who intends to do so. The Department has the right to use submitted data for all governmental purposes.

18. VENUE: The Department and Grantee agree that any action arising out of this Grant shall be filed and maintained in the Superior Court, California. Grantee waives any existing sovereign immunity for the purposes of this Grant, if applicable.

19. STATE-FUNDED RESEARCH GRANTS:

- A. Grantee shall provide for free public access to any publication of a department-funded invention or department-funded technology. Grantee further agrees to all terms and conditions required by the California Taxpayer Access to Publicly Funded Research Act (Chapter 2.5 (commencing with Section 13989) of Part 4.5 of Division 3 of Title 2 of the Government Code).
- B. As a condition of receiving the research grant, Grantee agrees to the following terms and conditions which are set forth in Government Code section 13989.6 ("Section 13989.6"):
 - 1) Grantee is responsible for ensuring that any publishing or copyright agreements concerning submitted manuscripts fully comply with Section 13989.6.
 - 2) Grantees shall report to the Department the final disposition of the research grant, including, but not limited to, if it was published, when it was published, where it was published, when the 12-month time period expires, and where the manuscript will be available for open access.
 - 3) For a manuscript that is accepted for publication in a peer-reviewed journal, the Grantee shall ensure that an electronic version of the peer-reviewed manuscript is available to the department and on an appropriate publicly accessible database approved by the Department, including, but not limited to, the University of California's eScholarship Repository at the California Digital Library, PubMed Central, or the California Digital Open Source Library, to be made publicly available not later than 12 months after the official date of publication. Manuscripts submitted to the California Digital Open Source Library shall be exempt from the requirements in subdivision (b) of Section 66408 of the Education Code. Grantee shall make reasonable efforts to comply with this requirement by ensuring that their manuscript is accessible on an approved publicly accessible database, and notifying the Department that the manuscript is available on a department-approved database. If Grantee is unable to ensure that their manuscript is accessible on an approved publicly accessible database, Grantee may comply by providing the manuscript to the Department not

later than 12 months after the official date of publication.

- 4) For publications other than those described in paragraph B.3 above,, including meeting abstracts, Grantee shall comply by providing the manuscript to the Department not later than 12 months after the official date of publication.
- 5) Grantee is authorized to use grant money for publication costs, including fees charged by a publisher for color and page charges, or fees for digital distribution.

Exhibit D
Additional Provisions

1. Overview:

The California Department of Public Health (CDPH), Division of Communicable Disease Control (DCDC) sets forth the following standards and procedures. These standards and procedures specify the conditions for receipt of CDPH Infectious Disease Prevention and Control (IDCP) local infrastructure funds.

The California Budget Act of 2019 requires the department to allocate funds to local health jurisdictions (LHJs) and tribal communities for the prevention and control of infectious diseases. The funding allocation methodology was developed in consultation with the County Health Executives Association of California, California Conference of Local Health Officers, community-based organizations, and other stakeholders. As also required by the Budget Act of 2019, the funding formula is based on factors that include disease burden, population impact, and geographical area; and it also allocates the funds in a manner that balances the need to spread funding to as many LHJs as possible and the need to provide meaningful services. These funds are for the prevention and control of infectious disease and funds provided shall not supplant existing services at the local level. The Budget Act of 2019 also requires these funds to be distributed in a lump-sum amount in the 2019-20 fiscal year.

2. Grantee's Responsibilities:

The Grantee agrees to:

- A. Direct activities toward achieving the program objectives set forth by the CDPH DCDC.
- B. Use these funds in accordance with any additional guidance set forth by the CDPH DCDC regarding the granting, use and reimbursement of the DCDC local assistance funds. Additional consideration should be given to other guidance from the CDPH and Centers for Disease Control and Prevention (CDC) intended to highlight successful communicable diseases prevention and response strategies or outline California specific initiatives, policies, and procedures.
- C. Use these funds to augment existing funds and not supplant funds that have been locally appropriated for the same purposes. Local assistance funds are intended to provide local entities with increased capabilities to address infectious disease control needs. Supplanting of funds is defined (for the purposes of this agreement) as using local assistance award monies to "replace" or "take the place of" existing local funding. For example, reductions in local funds cannot be offset by the use of CDPH dollars for the same purpose.
- D. Abide by the most recent standards of care for screening, treatment, control, and prevention as promulgated by:
 - California Department of Public Health
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/STDs-ClinicalGuidelines.aspx>

Exhibit D
Additional Provisions

- Centers for Disease Control and Prevention
<https://www.cdc.gov/std/tg2015/default.htm>
- Advisory Committee for Immunization practices (ACIP)
<https://www.cdc.gov/vaccines/acip/recommendations.html>
- CDPH Quick sheets for LHDs (look up particular disease, then find Quick sheet under “Disease Investigation”). <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/disease.aspx>
- Vaccine preventable diseases: <https://www.cdph.ca.gov/programs/CID/DCDC/CDPH%20Document%20Library/Immunization/ReportingGuidanceforLHJs.pdf>
- Essential Components of a Tuberculosis Prevention and Control Program Recommendations of the Advisory Council for the Elimination of Tuberculosis
<https://www.cdc.gov/MMWR/PDF/rr/rr4411.pdf>
- Official American Thoracic Society/Centers for Disease Control and Prevention/Infectious Diseases Society of America Clinical Practice Guidelines: Treatment of Drug-Susceptible Tuberculosis
https://www.cdc.gov/tb/publications/guidelines/pdf/clin-infect-dis-2016-nahid-cid_ciw376.pdf
- Guidelines for the Investigation of Contacts of Persons with Infectious Tuberculosis: Recommendations from the National Tuberculosis Controllers Association and CDC
<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr541a.htm>

E. Submit information and reports as requested by the CDPH DCDC.

3. Reporting Requirements:

- A. **Case Reports:** All Grantees shall comply with morbidity reporting requirements for reportable diseases and conditions as indicated in the Title 17 California Code of Regulations sections 2500-2505, 2641.5-2643.20, and 2800-2812.
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/ReportableDiseases.pdf>

All Grantees will close out all cases of communicable diseases and enter final case information in the California Reportable Disease Information Exchange (CalREDIE) or in an electronic format approved by CDPH, by the close out deadline requested by CDPH. This will enable timely reporting to the CDC as well as timely completion of CDPH reports on communicable disease incidence.

Unless an alternative data submission mode has been approved by CDPH, all Grantees, must enter case report data directly into CalREDIE. Data must be entered into the appropriate tabs and forms in CalREDIE. Submission of hard copy forms for data entry into CalREDIE by CDPH or scanning of case reports, laboratory results, or interview records into the electronic filing cabinet (EFC), will not be accepted in place of data entry. Grantees not entering data into CalREDIE must provide an electronic dataset in a format approved by CDPH. The CDPH CalREDIE website has

Exhibit D
Additional Provisions

extensive resources to assist LHJs with CalREDIE including frequently asked questions, manuals/guidelines, and forms/instructions.

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/CalREDIE-HELP.aspx> For additional CalREDIE help, please email CalREDIEHelp@cdph.ca.gov.

Work Plan and Evaluation:

LHJs will submit a draft work plan for the period of January 1, 2020 through June 30, 2023. The work plan will outline performance indicators specific to the areas identified in the scope of work. Project specific data reporting requirements and performance indicators will be determined in collaboration with CDPH within the first six months of the project period.

C. Data Security and Confidentiality:

Grantees shall have staff complete CDPH required confidentiality and data security training, and maintain on file associated confidentiality agreements for each staff person with access to confidential public health records and data.

D. Outbreak Reporting:

The California Code of Regulations (Title 17, Section 2502[c]) directs local health officers to immediately report unusual disease occurrences or outbreaks to CDPH.

E. Performance Progress Reporting:

The Annual Performance Progress Report is due no later than 30 days prior to the end of the budget period (e.g. May 31, 2020), and serves as the continuation application for the follow-on budget period. All publications and manuscripts published as a result of the work supported in part or whole by this cooperative grant must be submitted with the performance progress reports. Additionally, health advisories, health education materials, and other products should be submitted. Annual Performance Progress Report should be submitted to LHJDCDC@cdph.ca.gov.

Progress reports should include measures proposed by the Grantee, depending on the activities selected for the work plan. In addition, all grantees shall report the following on an annual basis:

- Number and classification of staff hired under this contract
- Data on incident/outbreak response:
 - Number of infectious disease control activities that were identified, by type (e.g., respiratory, food-borne, etc)
 - Number of infectious disease control activities by type
 - Number of infectious disease control activities supported by resources funded by this funding stream

Exhibit D
Additional Provisions

An infectious disease control activity is defined as one of the following:

- An outbreak that meets a standard local health department, CDPH or CDC definition.
- A response to an outbreak that exists in another jurisdiction, but has not yet impacted the responding jurisdiction. For example: implementing expanded hepatitis A vaccination to prevent an outbreak from spreading to the responding jurisdiction.
- An investigation of a significant disease exposure with the potential to become an outbreak. For example: contact investigation of a large scale exposure to a single case of tuberculosis or measles (e.g., in a school).
- A response to an infectious disease threat with the potential to become an outbreak, including a cluster of cases. For example, monitoring persons exposed to Ebola virus or investigating a cluster of cases of food-borne illness identified by Pulsed-Field Gel Electrophoresis or Whole Genome Sequencing.

4. Cancellation / Termination

- A. This Grant may be cancelled by CDPH without cause upon thirty (30) calendar days advance written notice to the Grantee.
- B. CDPH reserves the right to cancel or terminate this Grant immediately for cause. The Grantee may submit a written request to terminate this Grant only if CDPH substantially fails to perform its responsibilities as provided herein.
- C. The term "for cause" shall mean that the Grantee fails to meet the terms, conditions, and/or responsibilities of this agreement. Causes for termination include, but are not limited to the following occurrences:
 - 1) If the Grantee knowingly furnishes any statement, representation, warranty, or certification in connection with the agreement, which representation is materially false, deceptive, incorrect, or incomplete.
 - 2) If the Grantee fails to perform any material requirement of this Grant or defaults in performance of this agreement.
 - 3) If the Grantee files for bankruptcy, or if CDPH determines that the Grantee becomes financially incapable of completing this agreement.
- D. Grant termination or cancellation shall be effective as of the date indicated in CDPH's notification to the Grantee. The notice shall stipulate any final performance, invoicing or payment requirements.
- E. In the event of early termination or cancellation, the Grantee shall be entitled to compensation for services performed satisfactorily under this agreement and expenses

Exhibit D
Additional Provisions

incurred up to the date of cancellation and any non-cancelable obligations incurred in support of this Grant.

- F. In the event of termination, and at the request of CDPH, the Grantee shall furnish copies of all proposals, specifications, designs, procedures, layouts, copy, and other materials related to the services or deliverables provided under this Grant, whether finished or in progress on the termination date.
- G. The Grantee will not be entitled to reimbursement for any expenses incurred for services and deliverables pursuant to this agreement after the effective date of termination.
- H. Upon receipt of notification of termination of this Grant, and except as otherwise specified by CDPH, the Grantee shall:
 - 1) Place no further order or subgrants for materials, services, or facilities.
 - 2) Settle all outstanding liabilities and all claims arising out of such termination of orders and subgrants.
 - 3) Upon the effective date of termination of the Grant and the payment by CDPH of all items properly changeable to CDPH hereunder, Grantee shall transfer, assign and make available to CDPH all property and materials belonging to CDPH, all rights and claims to any and all reservations, grants, and arrangements with owners of media/PR materials, or others, and shall make available to CDPH all written information regarding CDPH's media/PR materials, and no extra compensation is to be paid to Grantee for its services.
 - 4) Take such action as may be necessary, or as CDPH may specify, to protect and preserve any property related to this agreement which is in the possession of the Grantee and in which CDPH has or may acquire an interest.
- I. CDPH may, at its discretion, require the Grantee to cease performance of certain components of the Scope of Work as designated by CDPH and complete performance of other components prior to the termination date of the Grant.

5. Avoidance of Conflicts of Interest by Grantee

- A. CDPH intends to avoid any real or apparent conflict of interest on the part of the Grantee, subgrants, or employees, officers and directors of the Grantee or subgrants. Thus, CDPH reserves the right to determine, at its sole discretion, whether any information, assertion or claim received from any source indicates the existence of a real or apparent conflict of interest; and, if a conflict is found to exist, to require the Grantee to submit additional information or a plan for resolving the conflict, subject to CDPH review and prior approval.
- B. Conflicts of interest include, but are not limited to:

Exhibit D
Additional Provisions

- 1) An instance where the Grantee or any of its subgrants, or any employee, officer, or director of the Grantee or any subgrant or has an interest, financial or otherwise, whereby the use or disclosure of information obtained while performing services under the grant would allow for private or personal benefit or for any purpose that is contrary to the goals and objectives of the grant.
 - 2) An instance where the Grantee's or any subgrant's employees, officers, or directors use their positions for purposes that are, or give the appearance of being, motivated by a desire for private gain for themselves or others, such as those with whom they have family, business or other ties.
- C. If CDPH is or becomes aware of a known or suspected conflict of interest, the Grantee will be given an opportunity to submit additional information or to resolve the conflict. A Grantee with a suspected conflict of interest will have five (5) working days from the date of notification of the conflict by CDPH to provide complete information regarding the suspected conflict. If a conflict of interest is determined to exist by CDPH and cannot be resolved to the satisfaction of CDPH, the conflict will be grounds for terminating the grant. CDPH may, at its discretion upon receipt of a written request from the Grantee, authorize an extension of the timeline indicated herein.

6. Dispute Resolution Process

- A. A Grantee grievance exists whenever there is a dispute arising from CDPH's action in the administration of an agreement. If there is a dispute or grievance between the Grantee and CDPH, the Grantee must seek resolution using the procedure outlined below.
- 1) The Grantee should first informally discuss the problem with the CDPH Program Grant Manager. If the problem cannot be resolved informally, the Grantee shall direct its grievance together with any evidence, in writing, to the program Branch Chief. The grievance shall state the issues in dispute, the legal authority or other basis for the Grantee's position and the remedy sought. The Branch Chief shall render a decision within ten (10) working days after receipt of the written grievance from the Grantee. The Branch Chief shall respond in writing to the Grantee indicating the decision and reasons therefore. If the Grantee disagrees with the Branch Chief's decision, the Grantee may appeal to the second level.
 - 2) When appealing to the second level, the Grantee must prepare an appeal indicating the reasons for disagreement with Branch Chief's decision. The Grantee shall include with the appeal a copy of the Grantee's original statement of dispute along with any supporting evidence and a copy of the Branch Chief's decision. The appeal shall be addressed to the Deputy Director of the division in which the branch is organized within ten (10) working days from receipt of the Branch Chief's decision. The Deputy Director of the division in which the branch is organized or his/her designee shall meet with the Grantee to review the issues raised. A written decision signed by the Deputy Director of the division in which the branch is organized or

Exhibit D
Additional Provisions

his/her designee shall be directed to the Grantee within twenty (20) working days of receipt of the Grantee's second level appeal.

- B. If the Grantee wishes to appeal the decision of the Deputy Director of the division in which the branch is organized or his/her designee, the Grantee shall follow the procedures set forth in Division 25.1 (commencing with Section 38050) of the Health and Safety Code and the regulations adopted thereunder. (Title 1, Division 2, Chapter 2, Article 3 (commencing with Section 1140) of the California Code of Regulations).
- C. Disputes arising out of an audit, examination of an agreement or other action not covered by subdivision (a) of Section 20204, of Chapter 2.1, Title 22, of the California Code of Regulations, and for which no procedures for appeal are provided in statute, regulation or the Agreement, shall be handled in accordance with the procedures identified in Sections 51016 through 51047, Title 22, California Code of Regulations.
- D. Unless otherwise stipulated in writing by CDPH, all dispute, grievance and/or appeal correspondence shall be directed to the CDPH Grant Manager.
- E. There are organizational differences within CDPH's funding programs and the management levels identified in this dispute resolution provision may not apply in every contractual situation. When a grievance is received and organizational differences exist, the Grantee shall be notified in writing by the CDPH Grant Manager of the level, name, and/or title of the appropriate management official that is responsible for issuing a decision at a given level.

				County of San Francisco
				19-10887
FOR INTERNAL RECORDS ONLY				
Exhibit B				
Budget Summary				
February 1, 2020 - June 30, 2023				
PERSONNEL				
Classification	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
will implement public health activities to address gaps in core public health functions within the local health jurisdiction, such as investigate and document communicable disease cases and outbreaks, maintain log of contact/collaboration, provide guidance documents, case/contact investigation and management, develop and update communicable disease control protocols, etc.	\$38,188	0%	12	\$377,462
Classification	\$0	0%	12	\$0
Classification	\$0	0%	12	\$0
Total Personnel				\$377,462
Fringe Benefits @	40%			\$150,985
Total Personnel & Benefits				\$528,447
OPERATING EXPENSES				
General Office Expense (paper, pens, pencils)				\$0
Lab Services (\$XX/test x approximately XXX tests = \$X,XXX)				\$0
Duplication/Printing (educational materials)				\$0
Minor Equipment (printers, software licenses)				\$0
Total Operating Expenses				\$0
MAJOR EQUIPMENT (If >\$50K, please itemize)				\$0
TRAVEL (meetings, site visits)				\$0
SUBCONTRACTORS				
Name of subcontractor or service to be performed				\$0
<i>(Must provide a detail budget for all subcontractors - See Subcontractors Budget Template)</i>				
Total Subcontractors				\$0
OTHER COSTS				\$0

INDIRECT COSTS (25% OF PERSONNEL AND BENEFITS)			25.00%	\$132,110
BUDGET GRAND TOTAL				\$660,557.24

**Exhibit B, Attachment I
Budget
Year 1
February 1, 2020 - June 30, 2020 (6 months)**

PERSONNEL

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
Classification	\$0	0%	12	\$0
Classification	\$0	0%	12	\$0
Classification	\$0	0%	12	\$0
Total Personnel				\$0
Fringe Benefits @	0%			\$0
Total Personnel & Benefits				\$0

OPERATING EXPENSES

General Office Expense (paper, pens, pencils)	\$0
Lab Services (\$XX/test x approximately XXX tests = \$X,XXX)	\$0
Duplication/Printing (educational materials)	\$0
Minor Equipment (printers, software licenses)	\$0
Total Operating Expenses	\$0

MAJOR EQUIPMENT (If >\$50K, please itemize) **\$0**

TRAVEL (meetings, site visits) **\$0**

SUBCONTRACTORS

Name of subcontractor or service to be performed **\$0**
(Must provide a detail budget for all subcontractors - See Subcontractors Budget Template)

Total Subcontractors **\$0**

OTHER COSTS **\$0**

INDIRECT COSTS (XX% OF PERSONNEL AND BENEFITS) 0.00% **\$0**

BUDGET GRAND TOTAL **\$0**

**Exhibit B, Attachment I
Budget
Year 2
July 1, 2020 – June 30, 2021**

PERSONNEL

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
2000 - Public Health Nurse. This position will implement public health activities to address gaps in core public health functions within the local health jurisdiction, such as investigate and document communicable disease cases and outbreaks, maintain log of contact/collaboration, provide guidance documents, case/contact investigation and management, develop and update communicable disease control protocols, etc.	\$12,355	100%	12	\$148,260
Classification	\$0	0%	12	\$0
Classification	\$0	0%	12	\$0
Total Personnel				\$148,260
Fringe Benefits @	40%			\$59,304
Total Personnel & Benefits				\$207,564

OPERATING EXPENSES

General Office Expense (paper, pens, pencils)	\$0
Lab Services (\$XX/test x approximately XXX tests = \$X,XXX)	\$0
Duplication/Printing (educational materials)	\$0
Minor Equipment (printers, software licenses)	\$0
Total Operating Expenses	\$0

MAJOR EQUIPMENT (If >\$50K, please itemize) **\$0**

TRAVEL (meetings, site visits) **\$0**

SUBCONTRACTORS

Name of subcontractor or service to be performed **\$0**

(Must provide a detail budget for all subcontractors - See Subcontractors Budget Template)

Total Subcontractors **\$0**

OTHER COSTS		\$0
INDIRECT COSTS (25% OF PERSONNEL AND BENEFITS)	25.00%	\$51,891
BUDGET GRAND TOTAL		\$259,455

**Exhibit B, Attachment I
Budget
Year 3
July 1, 2021 – June 30, 2022**

PERSONNEL

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
2000 Public Health Nurse. This position will implement public health activities to address gaps in core public health functions within the local health jurisdiction, such as investigate and document communicable disease cases and outbreaks, maintain log of contact/collaboration, provide guidance documents, case/contact investigation and management, develop and update communicable disease control protocols, etc.	\$12,726	100%	12	\$152,708
Classification	\$0	0%	12	\$0
Classification	\$0	0%	12	\$0
Total Personnel				\$152,708
Fringe Benefits @	40%			\$61,083
Total Personnel & Benefits				\$213,791

OPERATING EXPENSES

General Office Expense (paper, pens, pencils)	\$0
Lab Services (\$XX/test x approximately XXX tests = \$X,XXX)	\$0
Duplication/Printing (educational materials)	\$0
Minor Equipment (printers, software licenses)	\$0
Total Operating Expenses	\$0

MAJOR EQUIPMENT (If >\$50K, please itemize) **\$0**

TRAVEL (meetings, site visits) **\$0**

SUBCONTRACTORS

Name of subcontractor or service to be performed **\$0**
(Must provide a detail budget for all subcontractors - See Subcontractors Budget Template)

Total Subcontractors **\$0**

OTHER COSTS		\$0
INDIRECT COSTS (25% OF PERSONNEL AND BENEFITS)	25.00%	\$53,448
BUDGET GRAND TOTAL		\$267,239

**Exhibit B, Attachment I
Budget
Year 4
July 1, 2022 – June 30, 2023**

PERSONNEL

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
2000 - Public Health Nurse. This position will implement public health activities to address gaps in core public health functions within the local health jurisdiction, such as investigate and document communicable disease cases and outbreaks, maintain log of contact/collaboration, provide guidance documents, case/contact investigation and management, develop and update communicable disease control protocols, etc.	\$13,107	100%	6	\$76,494
Classification	\$0	0%	12	\$0
Classification	\$0	0%	12	\$0
Total Personnel				\$76,494
Fringe Benefits @	40%			\$30,598
Total Personnel & Benefits				\$107,092

OPERATING EXPENSES

General Office Expense (paper, pens, pencils)	\$0
Lab Services (\$XX/test x approximately XXX tests = \$X,XXX)	\$0
Duplication/Printing (educational materials)	\$0
Minor Equipment (printers, software licenses)	\$0
Total Operating Expenses	\$0

MAJOR EQUIPMENT (If >\$50K, please itemize) **\$0**

TRAVEL (meetings, site visits) **\$0**

SUBCONTRACTORS

Name of subcontractor or service to be performed **\$0**

(Must provide a detail budget for all subcontractors - See Subcontractors Budget Template)

Total Subcontractors **\$0**

OTHER COSTS		\$0
INDIRECT COSTS (25% OF PERSONNEL AND BENEFITS)	25.00%	\$26,771
BUDGET GRAND TOTAL		\$133,863

**Exhibit B Attachment I - Schedule 1
Subcontractor Budget
Year 1 - 5 Months
February 1, 2020 - June 30, 2020**

Name of Subcontractor:

Expense Category

Personnel
General Expense
Travel
Subcontracts
Indirect Costs (XX% of Personnel)

Totals

\$	_____
\$	_____
\$	_____
\$	_____
\$	_____
Total Costs	_____ \$0

Name of Subcontractor:

Expense Category

Personnel
General Expense
Travel
Subcontracts
Indirect Costs (XX% of Personnel)

Totals

\$	_____
\$	_____
\$	_____
\$	_____
\$	_____
Total Costs	_____ \$0

**Exhibit B Attachment I - Schedule 1
Subcontractor Budget
Year 2
July 1, 2020 - June 30, 2021**

Name of Subcontractor:

Expense Category

Personnel

General Expense

Travel

Subcontracts

Indirect Costs (XX% of Personnel)

Totals

\$

\$

\$

\$

\$

Total Costs

\$0

Name of Subcontractor:

Expense Category

Personnel

General Expense

Travel

Subcontracts

Indirect Costs (XX% of Personnel)

Totals

\$

\$

\$

\$

\$

Total Costs

\$0

**Exhibit B Attachment I - Schedule 1
Subcontractor Budget
Year 3
July 1, 2021 - June 30, 2022**

Name of Subcontractor:	
Expense Category	Totals
Personnel	\$ _____
General Expense	\$ _____
Travel	\$ _____
Subcontracts	\$ _____
Indirect Costs (XX% of Personnel)	\$ _____
Total Costs	\$0

Name of Subcontractor:	
Expense Category	Totals
Personnel	\$ _____
General Expense	\$ _____
Travel	\$ _____
Subcontracts	\$ _____
Indirect Costs (XX% of Personnel)	\$ _____
Total Costs	\$0

**Exhibit B Attachment I - Schedule 1
Subcontractor Budget
Year 4
July 1, 2022 - June 30, 2023**

Name of Subcontractor:	
Expense Category	Totals
Personnel	\$ _____
General Expense	\$ _____
Travel	\$ _____
Subcontracts	\$ _____
Indirect Costs (XX% of Personnel)	\$ _____
Total Costs	<u> \$0</u>

Name of Subcontractor:	
Expense Category	Totals
Personnel	\$ _____
General Expense	\$ _____
Travel	\$ _____
Subcontracts	\$ _____
Indirect Costs (XX% of Personnel)	\$ _____
Total Costs	<u> \$0</u>

SAMPLE ONLY

**California Department of Public Health
Division of Communicable Disease Control
February 1, 2020 - June 30, 2020 (5 months)
Fiscal Year 2019/2020**

PERSONNEL					DESCRIPTION OF EXPENSE
Classification	Monthly Salary	Percent of Time	Months	Budget	
					<i>Monthly salary x percent of time x number of months = Budgeted amount of position.</i>
Sample Position	\$4,856	100%	12	\$58,272	Duties and Responsibilities: Provide monitoring of local program needs by assessing STD morbidity data with local community partners; provide workshops/trainings on STDs to staff of community agencies and institutions; provide health education materials to be distributed to community agencies.
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
			Total Personnel	\$58,272	
BENEFITS					
Benefits		42.50%		\$24,766	Local health jurisdiction benefit rate. <i>For benefit rates that exceed 50% please provide a justification for the rate.</i>
OPERATING EXPENSES					
General Office Expense				\$0	Program's share of office expenses (paper, envelopes, pencils, copy services, etc.) (\$100/person x 5 staff x 12 months = \$6,000) Include minor equipment items that have a unit cost that is under \$5,000 each.
Media/Advertising				\$0	Cost for ads (\$25 x 4 ads = \$100)
Lab Services				\$0	Lab cost to test specimens (\$25 x 560 specimens = \$14,000)
Printing				\$0	Cost to print brochures (\$0.50 x 200) = \$100
Training				\$0	Registration fees for staff to attend 2 to 4 training opportunities
			Total Operating	\$0	
EQUIPMENT					
Equipment				\$0	Please itemize equipment purchases with a unit cost that exceeds \$5,000 and provide a justification for need of the equipment. Include the unit cost, the number of units, and the extended cost.
TRAVEL					
Mileage				\$0	Cost of mileage at 57.5 cents per mile
Lodging				\$0	Lodging for 2 people to attend 2 conferences (\$125 x 2 x 2 = \$500)
Conference Fees				\$0	\$25 registration fee for 2 people for 2 conferences
			Total Travel	\$0	
Revised 7/8/2020				14 of 21	

					County of San Francisco 19-10887
SUBCONTRACTORS					
Subcontractor Name				\$0	Description of activities of subcontractor (i.e., activities to be performed from Scope of Work) Please provide which activities in the SOW the subcontractor will be responsible for. Subcontracts that exceed \$50,000 will need a detailed, itemized budget.
			Total Subcontractor	\$0	
OTHER COSTS					
				\$0	Please itemize and provide justification.
INDIRECT COSTS					
		12.00%		\$9,965	Program share of supplies, postage, photocopying, etc based on quarterly FTE for program. Rate should not exceed the approved negotiated rate for the LHJ for the fiscal year
Budget Total				\$93,003	
NOTES:					
1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on an annual basis. A copy of the current rates is included in the email with your templates for use in the budget and budget justifications.					

TRAVEL				
Mileage				\$0 Cost of mileage at 57.5 cents per mile
Lodging				\$0 Lodging for 2 people to attend 2 conferences (\$125 x 2 x 2 = \$500)
Conference Fees				\$0 \$25 registration fee for 2 people for 2 conferences
			Total Travel	\$0
SUBCONTRACTORS				
Subcontractor Name				\$0 Description of activities of subcontractor (i.e., activities to be performed from Scope of Work) Please provide which activities in the SOW the subcontractor will be responsible for. Subcontracts that exceed \$50,000 will need a detailed, itemized budget.
			Total Subcontractor	\$0
OTHER COSTS				
				\$0 Please itemize and provide justification.
INDIRECT COSTS				
		12.00%		\$9,965 Program share of supplies, postage, photocopying, etc based on quarterly FTE for program. Rate should not exceed the approved negotiated rate for the LHJ for the fiscal year
Budget Total				\$93,003

NOTES:

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on an annual basis. A copy of the current rates is included in the email with your templates for use in the budget and budget justifications.

**California Department of Public Health
Division of Communicable Disease Control
July 1, 2021 - June 30, 2022
Fiscal Year: 2021/2022**

PERSONNEL					DESCRIPTION OF EXPENSE
Classification	Monthly Salary	Percent of Time	Months	Budget	
Sample Position	\$4,856	100%	12	\$58,272	Monthly salary x percent of time x number of months = Budgeted amount of position. Duties and Responsibilities: Provide monitoring of local program needs by assessing STD morbidity data with local community partners; provide workshops/trainings on STDs to staff of community agencies and institutions; provide health education materials to be distributed to community agencies.
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
			Total Personnel	\$58,272	
BENEFITS					
Benefits		42.50%		\$24,766	Local health jurisdiction benefit rate. For benefit rates that exceed 50% please provide a justification for the rate.
OPERATING EXPENSES					
General Office Expense				\$0	Program's share of office expenses (paper, envelopes, pencils, copy services, etc.) (\$100/person x 5 staff x 12 months = \$6,000) Include minor equipment items that have a unit cost that is under \$5,000 each.
Media/Advertising				\$0	Cost for ads (\$25 x 4 ads = \$100)
Lab Services				\$0	Lab cost to test specimens (\$25 x 560 specimens = \$14,000)
Printing				\$0	Cost to print brochures (\$0.50 x 200) = \$100
Training				\$0	Registration fees for staff to attend 2 to 4 training opportunities
Space				\$0	290 sq. ft. x \$2.21/sq. ft. = \$640.90/month x 12 months = \$7,690/1.0 FTE x .03 FTE = \$231
			Total Operating	\$0	
EQUIPMENT					
Equipment				\$0	Please itemize equipment purchases with a unit cost that exceeds \$5,000 and provide a justification for need of the equipment. Include the unit cost, the number of units, and the extended cost.

TRAVEL				
Mileage				\$0 Cost of mileage at 57.5 cents per mile
Lodging				\$0 Lodging for 2 people to attend 2 conferences (\$125 x 2 x 2 = \$500)
Conference Fees				\$0 \$25 registration fee for 2 people for 2 conferences
			Total Travel	\$0
SUBCONTRACTORS				
Subcontractor Name				\$0 Description of activities of subcontractor (i.e., activities to be performed from Scope of Work) Please provide which activities in the SOW the subcontractor will be responsible for. Subcontracts that exceed \$50,000 will need a detailed, itemized budget.
			Total Subcontractor	\$0
OTHER COSTS				
				\$0 Please itemize and provide justification.
INDIRECT COSTS				
		12.00%		\$9,965 Program share of supplies, postage, photocopying, etc based on quarterly FTE for program. Rate should not exceed the approved negotiated rate for the LHJ for the fiscal year
Budget Total				\$93,003

NOTES:

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on an annual basis. A copy of the current rates is included in the email with your templates for use in the budget and budget justifications.

**SAMPLE ONLY
FOR INTERNAL RECORDS ONLY**

**California Department of Public Health
Division of Communicable Disease Control
July 1, 2022 - June 30, 2023
Fiscal Year: 2022/2023**

PERSONNEL					DESCRIPTION OF EXPENSE
Classification	Monthly Salary	Percent of Time	Months	Budget	
Sample Position	\$4,856	100%	12	\$58,272	Monthly salary x percent of time x number of months = Budgeted amount of position. Duties and Responsibilities: Provide monitoring of local program needs by assessing STD morbidity data with local community partners; provide workshops/trainings on STDs to staff of community agencies and institutions; provide health education materials to be distributed to community agencies.
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
Sample Position				\$0	Duties and Responsibilities:
			Total Personnel	\$58,272	
BENEFITS					
Benefits		42.50%		\$24,766	Local health jurisdiction benefit rate. For benefit rates that exceed 50% please provide a justification for the rate.
OPERATING EXPENSES					
General Office Expense				\$0	Program's share of office expenses (paper, envelopes, pencils, copy services, etc.) (\$100/person x 5 staff x 12 months = \$6,000) Include minor equipment items that have a unit cost that is under \$5,000 each.
Media/Advertising				\$0	Cost for ads (\$25 x 4 ads = \$100)
Lab Services				\$0	Lab cost to test specimens (\$25 x 560 specimens = \$14,000)
Printing				\$0	Cost to print brochures (\$0.50 x 200) = \$100
Training				\$0	Registration fees for staff to attend 2 to 4 training opportunities
			Total Operating	\$0	
EQUIPMENT					
Equipment				\$0	Please itemize equipment purchases with a unit cost that exceeds \$5,000 and provide a justification for need of the equipment. Include the unit cost, the number of units, and the extended cost.

TRAVEL					
Mileage				\$0	Cost of mileage at 57.5 cents per mile
Lodging				\$0	Lodging for 2 people to attend 2 conferences (\$125 x 2 x 2 = \$500)
Conference Fees				\$0	\$25 registration fee for 2 people for 2 conferences
			Total Travel	\$0	
SUBCONTRACTORS					
Subcontractor Name				\$0	Description of activities of subcontractor (i.e., activities to be performed from Scope of Work) Please provide which activities in the SOW the subcontractor will be responsible for. Subcontracts that exceed \$50,000 will need a detailed, itemized budget.
			Total Subcontractor	\$0	
OTHER COSTS					
				\$0	Please itemize and provide justification.
INDIRECT COSTS					
		12.00%		\$9,965	Program share of supplies, postage, photocopying, etc based on quarterly FTE for program. Rate should not exceed the approved negotiated rate for the LHJ for the fiscal year
Budget Total				\$93,003	

NOTES:

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on an annual basis. A copy of the current rates is included in the email with your templates for use in the budget and budget justifications.



SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

February 6, 2020

Tomás Aragón, MD, DrPH
Health Officer
County of San Francisco
101 Grove Street, Room 308
San Francisco, CA 94102

**SUBJECT: REVISED NOTICE OF AWARD – INFECTIOUS DISEASE
PREVENTION AND CONTROL LOCAL INFRASTRUCTURE FUNDS**

Dear Dr. Aragón,

On July 1, 2019, the California Department of Public Health (CDPH), Division of Communicable Disease Control (DCDC) received \$35,000,000 in one-time funds for local public health infrastructure to address infectious disease prevention and control. These funds are to be granted in one lump sum and available for expenditure through June 30, 2023.

CDPH/DCDC is pleased to announce the intent to award \$660,557.24 in one-time funding beginning February 1, 2020. To secure these funds, an official grant agreement will be developed and executed between your agency and CDPH covering the budget period upon execution of final contract through June 30, 2023.

Instructions

Attached are the revised documents that will assist DCDC staff in preparing your grant agreement. Please submit the completed documents via email to LHJDCDC@cdph.ca.gov no later than March 2, 2020 and include your agency's name in the subject line to help us easily identify which local health jurisdiction you represent.

Enclosures

1. Exhibit A – Scope of Work with chosen options, identified activities, and deliverables
2. **Exhibit B – Budget and Payment Details**



3. Exhibit B – Budget for Fiscal Year 2019 – 2023
4. Exhibit C – Standard Grant Conditions
- 5. Exhibit D – Additional Provisions**
- ~~6. Exhibit E – Standards, General Terms, and Conditions~~
- ~~7. Exhibit E1 – Appendix~~
8. Government Agency Taxpayer Identification Form (CDPH 9083)
9. Local Health Jurisdiction Contact Information Form
10. Fiscal Year 2019/2020 Indirect Cost Rate (ICR) Form
11. Payer's Payee Data Record Form (Std. 204)

Scope of Work

The Scope of Work (SOW) is enclosed. You will be responsible for all selected activities in the SOW in the core public health function areas. Your jurisdiction will select an area by marking the box adjacent to the option with an X. More than one option can be selected.

Indirect Costs

Beginning with Fiscal Year (FY) 2014/15, CDPH negotiated the Indirect Cost Rate (ICR) with each local health jurisdiction in an effort to standardize the rate. This rate is applied to all contracts that CDPH has with your agency. Please see the attached FY 2019/2020 ICR for your use in completing your budgets. Please note that most of the local health jurisdictions apply the ICR to the total personnel costs only. However, there are a few that apply the rate to the total direct costs (personnel, benefits, operating expenses, travel, and subcontract line items). Your ICR cannot exceed the negotiated amount, nor can the application of the ICR be changed. However, you may elect to reduce the published ICR percentage or not include Indirect Costs in the budget.

Board of Resolution or Minute Order Requirements

All agreements with the local health jurisdictions must have a current Board of Resolution or Minute Order. If the grant is amended during the term of the agreement, a new Board of Resolution or Minute Order must be obtained unless the original resolution clearly states the allowance for amendments, extensions, and renewals to be approved without going through the Board of Supervisors.

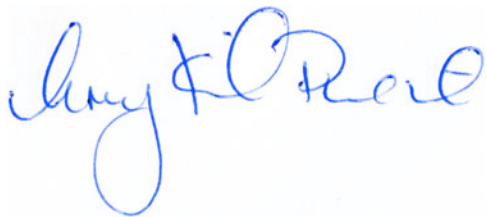
County of San Francisco
February 6, 2020
Page 3

Data Use Agreement

All counties must have a current CalREDIE data use agreement (DUA) with CDPH. If you are a CalREDIE user there should already be a data use agreement in place with your agency. If your jurisdiction does not have a current CalREDIE DUA in place, DCDC staff will work with your agency to execute an agreement.

If you have any questions, please feel free to contact Taylor St. Mary by email at Taylor.St.Mary@cdph.ca.gov or by phone at (916) 552-9797 or Bill Rhinehart by email at Bill.Rhinehart@cdph.ca.gov or by phone at (916) 440-7282.

Sincerely,



Amy Kile-Puente
Assistant Division Chief
Division of Communicable Disease Control

Enclosures

cc:

Dr. James Watt, Chief, DCDC
Drew Johnson, Assistant Deputy Director, Center for Infectious Disease
Bill Rhinehart, Staff Services Manager II, DCDC
Michelle Gibbons, Executive Director, The County Health Executives Association of California
Grant Colfax, Director, Health Department



London N. Breed
Mayor

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Dr. Grant Colfax
Director of Health
DATE: Wednesday, July 8, 2020
SUBJECT: Grant Accept and Expend
GRANT TITLE: Accept and Expend Grant - DPC Local Infrastructure Funds
- \$660,557.24

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, Grants Administration for
Community Programs, 101 Grove St # 108

Certified copy required Yes

No