File No	140068	Committee Item No7	
		Board Item No.	

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee:	Budget and Finance Sub-Committee	<u>e</u> Date: 3/12/2014
Board of Su	pervisors Meeting	Date:
Cmte Boar	rd	
	Motion Resolution Ordinance Legislative Digest Budget and Legislative Analyst R Legislative Analyst Report Youth Commission Report Introduction Form Department/Agency Cover Letter MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Commission Award Letter Application Public Correspondence	
OTHER	(Use back side if additional space	e is needed)
Completed I		ate March 7, 2014

[Accept and Expend Grant - HIV Transmission Cluster Analysis to Inform Prevention - \$108,366]

Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$108,366 from The Regents of the University of California to participate in a program entitled "HIV Transmission Cluster Analysis to Inform Prevention," for the period of July 1, 2013, through June 30, 2014.

WHEREAS, The Regents of the University of California is the recipient of a grant award from National Institutes of Health supporting the HIV Transmission Cluster Analysis to Inform Prevention grant; and

WHEREAS, With a portion of these funds, The Regents of the University of California has subcontracted with Department of Public Health (DPH) in the amount of \$108,366 for the period of July 1, 2013, through June 30, 2014; and

WHEREAS, As a condition of receiving the grant funds, The Regents of the University of California requires the City to enter into an agreement (Agreement), a copy of which is on file with the Clerk of the Board of Supervisors in File No.140068; which is hereby declared to be a part of this Resolution as if set forth fully herein; and

WHEREAS, The purpose of this project will significantly contribute to the field of HIV prevention by identifying drivers of the HIV epidemic and ways to interrupt forward transmission; and

WHEREAS, DPH will subcontract with Public Health Foundation Enterprises, Inc., in the total amount of \$12,478; for the period of July 1, 2013, through June 30, 2014; and

WHEREAS, An Annual Salary Ordinance amendment is not required as the grant partially reimburses DPH for four existing positions, one Supervisor Physician Specialist (Job Class No. 2233) at .01 FTE, one Manager I (Job Class No. 0922) at .15 FTE, one Health

Program Coordinator I (Job Class No. 2589) at .30 FTE, and one Epidemiologist II (Job Class No. 2803) at .25 FTE for the period of July 1, 2013, through June 30, 2014; and

WHEREAS, A request for retroactive approval is being sought because DPH did not receive notification of the award until November 20, 2013, for a project start date of July 1, 2013; and

WHEREAS, The budget includes a provision for indirect costs in the amount of \$10,274; now, therefore, be it

RESOLVED, That DPH is hereby authorized to retroactively accept and expend a grant in the amount of \$108,366 from CDC; and

FURTHER RESOLVED, That DPH is hereby authorized to enter retroactively into a subcontract agreement in the amount of \$12,478 with Public Health Foundation Enterprises, Inc. for services under the grant entitled HIV Transmission Cluster Analysis to Inform Prevention; for the period of July 1, 2013, through June 30, 2014; and, be it

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

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

RECOMMENDED:

Barbara A. Garcia, MPA
Director of Health

Office of the Controller

Office of the Mayor

APPROVED:

City and County of San Fran isco

Γ partment of Public Health



Edwin M. Lee Mayor

Barbara A. Garcia, MPA Director of Health

FROM: Barbara A. Garcia, MPA Director of Health DATE: January 2, 2014 SUBJECT: Grant Accept and Expend GRANT TITLE: HIV Transmission Cluster Analysis to Inform Prevention-\$108,366 Attached please find the original and 4 copies 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. Asked to particip the project. Agreement / Award Letter Other (Explain): Special Timeline Requirements: Departmental representative to receive a copy of the adopted resolution: Name: Richelle-Lynn Mojica Phone: 255-3555 Interoffice Mail Address: Dept. of Public Health, Grants Administration for Community Programs, 1380 Howard St. Certified copy required Yes No	TO:		Angela Calvillo, C	Clerk of the Board of Supervisors					
SUBJECT: Grant Accept and Expend GRANT TITLE: HIV Transmission Cluster Analysis to Inform Prevention- \$108,366 Attached please find the original and 4 copies 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. Asked to particip the project. Agreement / Award Letter Other (Explain): Special Timeline Requirements: Departmental representative to receive a copy of the adopted resolution: Name: Richelle-Lynn Mojica Phone: 255-3555 Interoffice Mail Address: Dept. of Public Health, Grants Administration for Community Programs, 1380 Howard St.	FRC	OM:		· · · · · · · · · · · · · · · · · · ·					
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 ☑ Budget and Budget Justification ☐ Grant application: Not Applicable. No application submitted. Asked to particip the project. ☑ Agreement / Award Letter ☐ Other (Explain): Special Timeline Requirements: Departmental representative to receive a copy of the adopted resolution: Name: Richelle-Lynn Mojica Phone: 255-3555 Interoffice Mail Address: Dept. of Public Health, Grants Administration for Community Programs, 1380 Howard St. 	\boxtimes	Proposed gr	ant resolution, orig	inal signed by Department					
 □ Grant application: Not Applicable. No application submitted. Asked to particip the project. □ Agreement / Award Letter □ Other (Explain): Special Timeline Requirements: Departmental representative to receive a copy of the adopted resolution: Name: Richelle-Lynn Mojica Phone: 255-3555 Interoffice Mail Address: Dept. of Public Health, Grants Administration for Community Programs, 1380 Howard St. 		Grant inform	ation form, includin	ng disability checklist -					
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Interoffice Mail Address: Dept. of Public Health, Grants Administration for Community Programs, 1380 Howard St.	Dep	artmental rep	resentative to rec	ceive a copy of the adopted resolution:					
Community Programs, 1380 Howard St.	Nam	e: Richelle-L	ynn Mojica	Phone: 255-3555					
Certified copy required Yes ☐ No ⊠			<u>-</u>						
	Certi	ified copy requ	uired Yes 🗌	No 🖂					

File Number:			
(Provided by Clerk	k of Board of Supervisors)		
	<u>Grant F</u>	Resolution Information Form (Effective July 2011)	
Purpose: Accompanie: funds.	s proposed Board of Super	visors resolutions authorizing a Department to ac	cept and expend grant
The following describe	es the grant referred to in the	e accompanying resolution:	
1. Grant Title: HIV T	ransmission Cluster analy	ysis to Inform Prevention	
2. Department: Dep a	artment of Public Health, (Center for Public Health Research, HIV Epiden	niology Section
3. Contact Person:	Henry F. Raymond	Telephone: 415-554-9093	
4. Grant Approval Sta	atus (check one):		
[X] Approved	by funding agency	[] Not yet approved	
5. Amount of Grant Fo	unding Approved or Applied	for: \$108,366	
6a. Matching Funds R b. Source(s) of matcl	lequired: \$0 hing funds (if applicable):		
7a. Grant Source Age b. Grant Pass-Throu	ncy: National Institute of gh Agency (if applicable): 1	Health The Regents of the University of California	
prevention by identi Dr. Willi McFarland, provide scientific ov	fying drivers of the HIV e as Principal Investigator versight on the developm	proposed study will significantly contribute epidemic and ways to interrupt forward trans of the subcontract and Co-Investigator of the ent and implementation of the study. Dr. McI miologists working on the study.	mission. In this study, research project, will
9. Grant Project Sche	edule, as allowed in approva	al documents, or as proposed:	
Start-Date:	07/01/2013	End-Date: 06/30/2014	
10a. Amount budgete	d for contractual services:	612,478	
b. Will contractual s	services be put out to bid?	No	
c. If so, will contract requirements?		e goals of the Department's Local Business Ente	rprise (LBE)
d. Is this likely to b	e a one-time or ongoing red	quest for contracting out? One-time	
11a. Does the budget	t include indirect costs?	[X] Yes [] No	
b1. If yes, how mud b2. How was the a	ch? \$10,274 mount calculated? 12% of t	otal salaries	
	ndirect costs not included? d by granting agency ase explain):	[] To maximize use of grant funds on dir	ect services
c2. If no indirect of	costs are included, what wo	uld 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 July 01, 2013. The Department received the subaward agreement on November 20, 2013.

Grant Code: HCAO66/1400

Disability Access Checklis Mayor's Office of Disability)	*(Department must forward a	a copy of all completed Grant Information Forms to the
13. This Grant is intended for a	activities at (check all that apply):	
[X] Existing Site(s) [] Rehabilitated Site(s) [] New Site(s)	[] Existing Structure(s) [] Rehabilitated Structure(s) [] New Structure(s)	[] Existing Program(s) or Service(s) [] New Program(s) or Service(s)
the project as proposed will be	in compliance with the American	n Disability have reviewed the proposal and concluded that is with Disabilities Act and all other Federal, State and inclusion of persons with disabilities. These requirements
1. Having staff trained in hove	w to provide reasonable modifica	tions in policies, practices and procedures;
2. Having auxiliary aids and	services available in a timely ma	nner in order to ensure communication access;
		to the public are architecturally accessible and have been cer or the Mayor's Office on Disability Compliance
If such access would be techni	cally infeasible, this is described	in the comments section below:
Comments:		
Departmental ADA Coordinato	r or Mayor's Office of Disability R	eviewer:
Ron Weigelt		
(Name)		· · · · · · · · · · · · · · · · · · ·
Director of Human Resources a	and Interim Director, EEO, and C	ultural Competency Programs
(Title)	/	
Date Reviewed: //7	//4	
		(Signature Required)
Department Head or Designe	e Approval of Grant Informatio	n Form:
Barbara A. Garcia, MPA (Name)		
Director of Health		
(Title)		(dl),(V,
Date Reviewed: 1/7/19	<u> </u>	(Signature Required)

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
AIDS Office - HIV Epidemiology Section
HIV Transmission Cluster analysis to Informa Prevention
July 1, 2013 - June 30, 2014
Year 2

HPH-03 2S/CHS/GNC HCHIVEPIDMGR HCAO66

/ Div: HPH-03 | Group: 2S/CHS | Code: HCHIVE | t Code: HCAO6 | t Detall: 1400

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	NIH CAP \$179,700	9,700		!								
;ATEGORY/LINE ITEM	Annual Salary	Annual Frin Ben	otal Annu al/Frin Be	% OF TIME	% OF FTE	Monthly Rate	Mth	Salary Budget	Frin Ben Budget	Total Budget	Comments	
ERSONNEL SEROEPIDEMIOLOGY										<u> </u>		
Supv Physician Specialist 2233 9 W. McFarland	179,700	53,910	233,610	%	0.01	14,975	12	1,797	485	2,282		
Manager I 0922 5 S. Scheer	117,762	29,441	147,203	15%	0.15	9,814	12	17,665	7,772	25,437		
Health Program Coordinator I 2589 5 T. Buckman	76,966	19,242	96,208	30%	0:30	6,414	80	15,393	7,697	23,090		
Epidemiologist II 2803 5 S. Pipkin	99,442	24,861	124,303	25%	0.25	8,287	12	24,861	9,944	34,805		
TOTAL SALARY/FRINGE	473,870	127,453	601,323		0.71			59,716	25,898	85,614		
00101 SALARIES 00103 FRNG BN SUB TOTAL										59,716 25,898 85,614		
EL 1. Local Travel (02301) Out-of-Jurisdiction Travel(02101) Sub Total TRAVEL	_ d	,					·		· · ·	000		
QUIPMENT 1. Computers (06061) Sub Total EQUIPMENT	PMENT								: -	0		
IATERIALS AND SUPPLIES 1. Office supplies (04951) 2. Non-Inventoried Equipment Sub Total SUPPLIES	PLIES									0 0 0		
ONTRACTUAL SERVICES (02789) 1. PHFE 2. SFDPH-Public Health Laboratory Sub Total CONTRACTS	RACTS									12,478 0 12,478		

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

AIDS Office - HIV Epidemiology Section HIV Transmission Cluster analysis to Informa Prevention July 1, 2013 - June 30, 2014

NIH CAP \$179,700

2S/CHS/GNC HCHIVEPIDMGR

HPH-03

HCA066

1400

Detail: Code: Group: Code:

Comments

98,092 59,716 10,274 12,478 108,366 108,366 25,898 98,092 Budget Total Frin Ben Budget Budget Salary Σ Monthly Rate % OF FTE 0.71 **BUDGET SUMMARY** % OF TIME otal Annu al/Frin Be Frin Ben Annual H. INDIRECT COST (12% of total salaries) Annual Salary E. MATERIALS AND SUPPLIES TOTAL DIRECT COST Sub TOTAL OTHER SURPL/(DEFICFIT) B. MANDATORY FRINGE **TOTAL BUDGET** DIRECT COSTS c. Repro srvc (In House) (03551) 6. Print/Slide srvc (Outside) (03552) 7. Promotion/Advertis (03599) F. CONTRACT / MOU a. Photocopier leasing (03131) b. Photocopier maint (02931) Rent support/mtg fac (03011) 4. Delivery/Courier srvc (03521) AWARD 9. Staff training (02201)0. Other Prof. Svcs (02799) Telephone/Com (03241) Reproduction/Photocopy D. EQUIPMENT A. SALARIES ATEGORY/LINE ITEM C. TRAVEL G, OTHER Postage (03561) 1. IRB fees (02799) Stipend (02783)

San Francisco Department of Public Health (SFDPH)

AIDS Office HIV Epidemiology Section

HIV Transmission Cluster Analysis to Inform Prevention

BUDGET JUSTIFICATION

July 1, 2013 - June 30, 2014

Budget Summary

A.	Personnel	\$59,716
В.	Mandatory Fringe	\$25,898
C.	Travel	\$0
D.	Equipment	\$0
E.	Materials and Supplies	\$0
F.	Contractual	\$12,478
G.	Other Expenses	\$0
	TOTAL DIRECT COSTS	\$98,092
H.	Indirect Costs (12% of Total Salaries)	\$10,274
	TOTAL BUDGET FOR YEAR 2013-2014	\$108,366

Detail Line-Item Budget and Justification: July 1, 2013 - June 30, 2014

A. PERSONNEL

B. MANDATORY FRINGE

1. 0.01 2233 – Supervisor Physician Specialist: Willie McFarland

Annual Salary \$179,700 x 0.01 FTE for 12 months = \$1,797 Mandatory Fringe Benefits @ 27% = \$485

\$2,282

\$25,437

\$23,090

Dr. Willi Mcfarland, as Principal Investigator of the subcontract and co-investigator of the research project, will provide scientific oversight on the development and implementation of the study. Dr. McFarland, along with Dr. Susan Scheer, will jointly supervise the epidemiologists working on the study.

2. 0.15 0922 – Manager I: Susan Scheer

Annual Salary \$117,762 x 0.15 FTE for 12 months = \$17,665 Mandatory Fringe Benefits @ 44% = \$7,772

Dr. Susan Scheer, along with Dr. Willi Mcfarland, will jointly supervise the epidemiologists working on the study. She is responsible for overseeing data collection and analysis, interpreting, writing and disseminating findings.

3. 0.30 2589 - Health Program Coordinator I: Tony Buckman

Annual Salary \$76,966 x 0.30 FTE for 8 months = \$15,393 Mandatory Fringe Benefits @ 50% = \$7,697

Mr. Tony Buckman, as the Health Program Coordinator, his primary responsibilities are to serve as the liaison with laboratories and medical facilities so that project staff are aware of newly diagnosed HIV cases and resistance test results as soon as they are available; He assists with medical chart abstraction; He helps coordinate participant interview by collecting contact information for HIV cases and/or working with the interviewers to contact the individuals and schedule the interviews; and he also assists with data management, including the merged database created for this study.

4. 0.25 2803 - Epidemiologist II: Sharon Pipkin

Annual Salary \$99,442 x 0.25 FTE for 12 months = \$24,861 Mandatory Fringe Benefits @ 40% = \$9,944 \$34,805

Ms. Sharon Pipkin, as the epidemiologist II, her primary responsibilities are oversight of the database merging protocol; data management; managing, creating and analyzing resistance test and geographic study data; data quality; and data analysis. The epidemiologist will also assist in

preparing, interpreting, and summarizing study findings for reports, scientific publications, and conference presentations. In addition, she will work with the Health Program Coordinator to guide the preparation for the interviews and answer any staff questions regarding the questionnaire and data gathered.

	Total Salaries	\$59,716
	Total Fringe	\$25,898
	TOTAL PERSONNEL:	\$85,614
C.	TRAVEL	\$0 .
D.	EQUIPMENT	\$0
E.	MATERIALS AND SUPPLIES	\$0

F. CONTRACTUAL

1. Name of contractor: Public Health Foundation Enterprises, Inc. (PHFE)

Method of Selection: Sole Source. We have worked with PHFE in the past and have a good working relationship. Our working relationship has been beneficial to the section.

Period of performance: 07/01/2013 - 06/30/2014

Method of accountability: The contractor will follow the CDC and HIV Epidemiology Section procedures; will follow strict performance timelines; contractor's performance will be monitored and evaluated by the senior epidemiologist; payment to contractor will be based on fee for service.

Description of activities: PHFE will provide the staffing for the maintenance and technical services for computer equipment. They have demonstrated expertise in this area and have an established relationship with the AIDS Office.

Itemized budget with narrative justification:

a. & b. PHFE PERSONNEL AND MANDATORY FRINGE BENEFITS

i) 0.25 Epidemiologist: TBD

6 months salary = \$11,448 Mandatory Fringe Benefit @31% = \$2,698

\$11,448

This position will have primary respnsibility for oversight of the database merging protocol, data management, data quality, and data analysis. The epidemiologist will also assist in preparing, interpreting, and summarizing study findings for reports, scientific publications, and conference presentations.

	TO	TAL PHFE PERSONNEL AND MFB	\$11,448
	c.	PHFE TRAVEL	\$0
	d.	PHFE EQUIPMENT	\$0
	e.	PHFE MATERIALS AND SUPPLIES	\$0
	f.	PHFE CONTRACTUAL SERVICES	\$0
	g.	PHFE OTHER COSTS Medical Chart Retrieval Fee for \$0	\$0
	TOT	TAL PHFE DIRECT COST	\$11,448
	TO	ΓAL PHFE INDIRECT COST (9% of Direct Costs)	\$1,030
	TO	ΓAL PHFE SUBCONTRACT	\$12,478
		TOTAL CONTRACTUAL (PHFE):	\$12,478
G.	OTI	HER	\$0
		TOTAL DIRECT EXPENSES:	\$98,092
н.	IND	OIRECT COSTS (12% of total salaries)	\$10,274
		TOTAL BUDGET FOR YEAR 2013-2014:	\$108,366

Research Su Am	baward Ag endment	reeme	nt
Prime Recipient			ubrecipient
Institution/Organization ("University")	Institution/Org	janization ("	'Subrecipient")
Name: The Regents of the University of California Office of Sponsored Research Division of Contracts and Grants	Name:	Depart	County of San Francisco tment of Public Health
University of California, San Francisco 3333 California Street, Suite 315	Address:	1380 Ho San Fra	oward Street, 4 th Floor ancisco, CA 94105
San Francisco, CA 94143-0962	EIN: 94-600	0417	
Prime Award No. 5R01MH096642-02	Subaward No	. 7238sc	Principal Investigator Dr. William McFarland
UCSF DPA-FUND Number: 557738-21738	Amendment I	No. 1	·

Amendment(s) to Original Terms and Conditions

Period of Performance: will be extended from July 1, 2013 through June 30, 2014.

 The amount funded by this amendment is \$108,366.00 as itemized in attachment A. This amount will not be exceeded nor shall any portion be carried forward without prior written approval of the University's Principal Investigator and a subsequent formal amendment to this Agreement.

Special Terms and Conditions: 3) Objectivity in Research is to be deleted in its entirety.

General terms and conditions as of the effective date of this Research Subaward Agreement:

NIH-Specific Requirements Promoting Objectivity in Research Applicable to Subrecipients (42 CFR Part 50 Subpart F)

a) 42 CFR Part 50. 604 requires that institutions conducting PHS-funded research "Maintain an up-to-date, written, enforced policy on financial conflicts of interest." Further, "If the Institution carries out the PHS-funded research through a subrecipient (e.g., subcontractors or consortium members), the Institution (awardee Institution) must take reasonable steps to ensure that any subrecipient Investigator complies with this subpart by incorporating as part of a written agreement with the subrecipient terms that establish whether the financial conflicts of interest policy of the awardee Institution or that of the subrecipient will apply to the subrecipient's Investigators."

Subrecipient hereby certifies by execution of this agreement that its own financial conflicts of interest policy complies with 42 CFR Part 50.

Subrecipient shall report any financial conflict of interest to University, to the designated address below. Any financial conflicts of interest identified shall subsequently be reported to NIH. Such report shall be made before expenditure of funds authorized in this Subrecipient Agreement and within 45 days of any subsequently identified financial conflict of interest. The report must include the following information: (a) Grant/contract number; (b) Name of the PI; (c) Name of the investigator (if different from PI) with the conflict of interest; (d) the nature of the conflict; and (e) how the conflict was managed. All required disclosures and reports should be made to the following University official:

COI Coordinator, Campus Box 0294 UCSF, Office of Ethics and Compliance 3333 California Street, Suite 295 San Francisco, CA 94143-0294 If sent by Fed Ex or UPS, the zip code is 94118

All other terms and conditions of this Subaward Agreement remain in full force and effect.

By an Authorized Official of Subrecipient: By an Authorized Official of University Date Name: Marcellina Ogbu, DrPH
Title Director of Community Programs

Title: Manager, Contracts & Grants Division

MITACHMENT A

	Principal investigator/F					FROM		THROUGH
DETAILED BUDG	ET FOR INITIAL RECT COSTS O	NLY				7/1/2013		6/30/2014
ERSONNEL (Applicant or	ganization only)	Month	s Devoted to	Project		DOLLAR AMOU		ED (omit cents)
NAME	ROLE ON PROJECT	Cel. Mnths	Acad. Mnths	Summ. Mnths	INST. BASE SALARY	SALARY REQUESTED	FRINGE BENEFITS	TOTAL
N. McFarland	Sub Pl	0.12			179,700	1,797	48	2,282
S. Scheer	Co-I	1.80			117,762	17,665	7,77	2 25,437
F. Buckman	Health Project Coordinator	3.60			76,966	15,393	7,69	23,090
S. Pipkin	Epidemiologist	3.00			99,442	24,861	9,94	34,805
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	SUBTOTALS					59,716	25,89	8 85,614
CONSULTANT COSTS	···					·		12,478
EQUIPMENT (Ilemize)			<u>.</u>				-	12,310
			•				٠	
					. 			0
SUPPLIES (Itemize by								
	,						<u> </u>	0
TRAVEL								
Domestic Travel start I								0
PATIENT CARE COSTS	INPATIENT							0
ALTERATIONS AND RENO	OUTPATIENT VATIONS/lemize by ca	legory)						<u> </u>
OTHER EXPENSES (Itemiz	ze by calegory)						•	0
OTHER EXPENSES THE	· ·				•			
CONSORTIUM/CONTRACT	TUAL COSTS					DIRECT COSTS	 	0
SUBTOTAL DIRECT	COST FOR INITIA	L BUDG	ET PERIC					\$98,092
CONSORTIUMCONTRACT				FACILITIE	S AND ADMIN	ISTRATIVE COS	TS	10,274
TOTAL DIRECT COS			PERIOD					\$108,366
SBIR/STTR Only: FIX PHS 398 (Rev. 06/09)	XED FEE REQUE	STED	Page					Form Page
I ITO ODO (IZOV. VOIVO)			8	-				, v.m reye

Notice of Award

Issue Date:



RESEARCH
Department of Health and Human Services
National Institutes of Health
NATIONAL INSTITUTE OF MENTAL HEALTH



Grant Number: 5R01MH096642-02

Principal investigator(s): HONG-HA M TRUONG, PHD

Project Title: HIV Transmission Cluster Analysis to Inform Prevention

RYAN CURTIS WELLS Research Services Analyst 3333 California Street Suite 315 San Francisco, CA 941186215

Award e-mailed to: cgrasteam@ucsf.edu

Budget Period: 07/01/2013 - 06/30/2014 **Project Period:** 09/01/2012 - 06/30/2017

Dear Business Official:

The National Institutes of Health hereby awards a grant in the amount of \$370,362 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to UNIVERSITY OF CALIFORNIA-SAN FRANCISCO 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 grantee when funds are drawn down or otherwise obtained 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 Mental Health of the National Institutes of Health under Award Number R01MH096642. 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 42 CFR Part 50 Subpart F. Subsequent to the compliance date of the 2011 revised FCOI regulation (i.e., on or before August 24, 2012), Awardees must be in compliance with all aspects of the 2011 revised regulation; until then, Awardees must comply with the 1995 regulation. 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 contact the individual(s) referenced in Section IV.

Sincerely yours,

Jane Z. Lin Grants Management Officer

NATIONAL INSTITUTE OF MENTAL HEALTH

Additional information follows

SECTION I - AWARD DATA - 5R01MH096642-02

Award Calculation (U.S. Dollars)

Federal Direct Costs		\$315,011
Federal F&A Costs		\$55,351
Approved Budget		\$370,362
Federal Share		\$370,362
TOTAL FEDERAL AWARD AMOUNT	•	\$370,362

AMOUNT OF THIS ACTION (FEDERAL SHARE)

\$370,362

	SUMMARY TOTALS FOR ALL YEARS				
YR	THIS AWARD	CUMULATIVE TOTALS			
2	\$370,362	\$370,362			
3	\$372,916	\$372,916			
4	\$368,928	\$368,928			
5	\$347,648	\$347,648			

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

Fiscal Information:

CFDA Number:

93.242

FIN-

1946036493A6

Document Number:

RMH096642A

Fiscal Year:

.2013

IC	CAN	2013	2014	2015	2016
МН	8472592	\$370,362	\$372,916	\$368,928	\$347,648

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

NIH Administrative Data:

PCC: 9A-ASGP / OC: 414E / Released: LINJZ 06/28/2013

Award Processed: 07/01/2013 01:18:22 AM

SECTION II - PAYMENT/HOTLINE INFORMATION - 5R01MH096642-02

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 - TERMS AND CONDITIONS - 5R01MH096642-02

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 74 or 45 CFR Part 92 as applicable.
- d. The NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. 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.)

This institution is a signatory to the Federal Demonstration Partnership (FDP) Phase V Agreement which requires active institutional participation in new or ongoing FDP demonstrations and pilots.

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 receive a Dun & Bradstreet Universal Numbering System (DUNS) number and maintain an active registration in the Central Contractor Registration. Should a consortium/subaward be issued under this award, a DUNS 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.

Based on the project period start date of this project, this award i 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/.

Treatment of Program Income: Additional Costs

SECTION IV - MH Special Terms and Conditions - 5R01MH096642-02

AWARD NOTICE:

This award has been made in response to the application submitted under the Funding Opportunity Announcement PA-10-067 which can be referenced at:http://grants.nih.gov/grants/guide/pa-files/PA-10-067.html.

FISCAL POLICY

In accordance with NOT-OD-13-064 (http://grants.nih.gov/grants/guide/notice-files/NOT-OD-13-064.html) the FY2013 award is made at 96% of the previously FY2013 committed level noted in the FY2012 Notice of Award. Any future year funding remains at the level noted in the FY2012 Notice of Award. The fiscal policies described therein apply.

CONSORTIUM/CONTRACTUAL COSTS:

This award includes funds for consortium activity with following organizations. Each consortium is to be established and administered in accordance with the NIH Grants Policy Statement dated October 2011. No foreign performance site may be added to this project without the written prior approval of the National Institute of Mental Health.

- 1. The J. David Gladstone Institutes
- 2. San Francisco Departpart of Public Health

STAFF CONTACTS

The Grants Management Specialist is responsible for the negotiation, award and administration of this project and for interpretation of Grants Administration policies and provisions. The Program Official is responsible for the scientific, programmatic and technical aspects of this project. These individuals work together in overall project administration. Prior approval requests (signed by an Authorized Organizational Representative) should be submitted in writing to the Grants Management Specialist. Requests may be made via e-mail.

Grants Management Specialist: Jane Z. Lin.

Email: linja@mail.nih.gov Phone: 301-443-2229 Fax: 301-480-1956

Program Official: Cynthia I Grossman

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Email: grossmanc@mail.nih.gov Phone: 301-443-8962 Fax: 301-443-9719

SPREADSHEET SUMMARY GRANT NUMBER: 5R01MH096642-02

INSTITUTION: UNIVERSITY OF CALIFORNIA-SAN FRANCISCO

Facilities and Administrative Costs	Year 2	Year 3	Year 4	Year 5
F&A Cost Rate 1	26%	26%	26%	26%
F&A Cost Base 1	\$212,890	\$209,279	\$205,885	\$188,763
F&A Costs 1	\$55.351	\$54,413	\$53,530	\$49,078