

## PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC HEALTHDept. Code: DPHType of Request: ☐ Initial ☒ Modification of an existing PSC (PSC # 2005-07/08)Type of Approval: ☐ Expedited ☐ Regular ☐ Annual ☒ Continuing ☐ (Omit Posting)Type of Service: HIV Health ServicesFunding Source: Federal, State, General FundPSC Original Approved Amount: \$300,000,000PSC Original Approved Duration: 07/01/2008 - continuousPSC Mod#1 Amount: \$150,000,000PSC Mod#1 Duration: 03/01/16 - continuousPSC Cumulative Amount Proposed: \$450,000,000PSC Cumulative Duration Proposed: 07/01/2008 - continuous**1. Description of Work****A. Scope of Work/Services to be Contracted Out:**

Contractors will provide the following services to residents of San Francisco affected by Human Immunodeficiency Virus (HIV): case management, advocacy, mental health psychosocial support, benefits eligibility, money management/representative payee, transportation/vouchers, emergency financial assistance, housing for youth & housing grants/subsidies; mental health & substance abuse srvs; primary medical care, including dementia & dental care; other health care, including residential site/home care, hospice care, attendant care, home infusion therapy, alternative/complementary therapies, fiscal administration/intermediary support, respite (child) care, case management, peer advocacy, assisted housing program, permanent HIV housing, crisis hotline, & nutrition counseling; delivered meals, grocery center, emergency food boxes, & food solicitation.

**Scope Change**

In collaboration with HIV System of Care division of the Department of Public Health programs, community based organizations will provide the following services to residents of the City and County of San Francisco affected by HIV who meet income eligibility requirements of the grantors and the Departments high risk and affected target populations. Services include ambulatory outpatient care, oral health care, medical case management, non-medical case management, peer advocacy, fiscal and administrative program support, technical assistance, treatment adherence services, outpatient mental health, outpatient substance use counseling, prevention with positives counseling, money management representative payee services, legal support advocacy services, benefits counseling, therapeutic monitoring, emergency financial assistance services, home health care hospice services, medical nutrition therapy, food bank, delivered meals, health education, risk reduction counseling, emergency housing, medical transportation, outreach, psychosocial support, referral and linkages, respite care, rehabilitation, treatment advocacy, facility based care, residential mental health, residential substance use services, detox, employment advocacy, hotline counseling, HIV consumer advocacy, grant writing, HIV Health Services Planning Council support. Funding will include Federal grants, State grants, local grants, and General Fund.

**B. Explain why this service is necessary and the consequence of denial:**

A wide spectrum of srvs are necessary to effectively deal with the multifaceted complex needs of persons with HIV, including health, mental health, psychosocial support, housing, benefits eligibility, & nutrition services. These services need to be accessible & culturally appropriate to persons from diverse ethnicities, cultures, genders, age groups, sexual orientations, & income levels, including homeless/indigent residents. These services help people with HIV maintain financial independence, prevent them from becoming homeless, provide mental health services & chemical dependency treatment. Denial of these services would seriously hinder the City's ability to provide services to persons living with HIV, including low income/indigent persons, women & children.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

Yes

D. Will the contract(s) be renewed?

It is anticipated that these contracts will be renewed depending on the availability of funding from our Federal, State and local grantors.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why:

These are continuing services essential to the delivery of Community Health Equity and Prevention services for the residents of the City and County of San Francisco who are affected by HIV and other communicable diseases.

## 2. **Reason(s) for the Request**

A. Display all that apply

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

☒ Services that require resources that the City lacks (e.g., office space, facilities or equipment with an operator).

Explain the qualifying circumstances:

These are highly specialized services supporting HIV and other communicable disease programs. Community based organizations provide a unique service to the community affected by HIV and other communicable disease, services are provided where they live and by peers who are experts in the delivery of Public Health services.

B. Reason for the request for modification:

To extend term, increase amount by \$150,000,000 for a new total of \$450,000,000, and to update the Description of Services language.

## 3. **Description of Required Skills/Expertise**

A. Specify required skills and/or expertise: Extensive experience & knowledge in the provision of comprehensive primary medical care, early intervention treatment, psychosocial support, counseling & crisis intervention services, dental care, case management, alternative medical approaches related to HIV treatment, a wide range of home health care & hospice care services, HIV-related health education, outreach, financial management services, HIV treatment advocacy, HIV & substance use related mental health & clinical treatment. Experience in providing rental assistance & access to emerging issues with housing support services.

B. Which, if any, civil service class(es) normally perform(s) this work? 2210, Dentist; 2230, Physician Specialist; 2585, Health Worker 1; 2589, Health Program Coordinator 1; 2626, Chief Dietitian; 2819, Assistant Health Educator; 2903, Eligibility Worker; 2910, Social Worker;

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

## 4. **If applicable, what efforts has the department made to obtain these services through available resources within the City?**

Not Applicable

## 5. **Why Civil Service Employees Cannot Perform the Services to be Contracted Out**

A. Explain why civil service classes are not applicable.

Civil Service classifications are not applicable as staffing is only one component of the overall services being provided. Staffing conforms with policy, funding, & legal mandates. In addition, Community Based

Organizations are part of the continuum of service providers required by Ryan White CARE Act of 1990.

- B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain: HIV-related services continue to change with the evolution of the disease. Therefore, it would not be practical to adopt new civil service classifications to perform this specialized work.

#### 6. **Additional Information**

- A. Will the contractor directly supervise City and County employee? If so, please include an explanation.  
No.
- B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.  
No training
- C. Are there legal mandates requiring the use of contractual services?  
No.
- D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.  
no
- E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.  
no
- F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.  
See attached list of current contractors.

7. **Union Notification:** On 04/25/16, the Department notified the following employee organizations of this PSC/RFP request:  
SEIU Local 1021; Professional & Tech Engrs, Local 21; Physicians and Dentists - 11AA;

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

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#### FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 2005-07/08

DHR Analysis/Recommendation:

07/18/2016

Commission Approval Required

Approved by Civil Service Commission with conditions

07/18/2016 DHR Approved for 07/18/2016