

File No. 251132

Committee Item No. 7

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date December 10, 2025

Board of Supervisors Meeting Date _____

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Completed by: Brent Jalipa Date December 4, 2025

Completed by: Brent Jalipa Date _____

1 [Contract Amendment - Community Forward SF - Medical Respite and Sobering Center - Not
2 to Exceed \$32,262,830]

3 **Resolution approving Amendment No. 1 to the agreement between the City and County**
4 **of San Francisco, acting by and through, the Department of Public Health (DPH), and**
5 **Community Forward SF, to provide medical respite and sobering center services, to**
6 **extend the term by three years and six months from December 31, 2025, for a total term**
7 **of July 1, 2024, through June 30, 2029, and to increase the amount by \$22,263,326 for a**
8 **total not to exceed amount of \$32,262,830; and to authorize DPH to enter into**
9 **amendments or modifications to the agreement that do not materially increase the**
10 **obligations or liabilities to the City and are necessary to effectuate the purposes of the**
11 **agreement or this Resolution.**

12
13 WHEREAS, The Department of Public Health (DPH) was authorized under
14 Administrative Code, Section 21A.4 to procure from Service Providers directly, without the
15 approval of the Purchaser and without adhering to the requirements of Section 21.1 or
16 Chapter 14B of the Administrative Code, or any other applicable competitive procurement
17 requirement; and

18 WHEREAS, The contract is consistent with the Civil Service Commission's approval
19 obtained on September 6, 2024, under Personal Service Contract No. 48652-16/17; and

20 WHEREAS, On July 1, 2024, DPH and Community Forward SF entered into an
21 agreement for medical respite and sobering center services ("Original Agreement"); and

22 WHEREAS, The Original Agreement has a term of July 1, 2024, through December 31,
23 2025, and a not to exceed amount of \$9,999,504; and

1 WHEREAS, DPH wishes to amend the agreement by extending the term to June 30,
2 2029, and increasing the maximum expenditure by \$22,263,326 to \$32,262,830 (the “First
3 Amendment”); and

4 WHEREAS, The First Amendment is consistent with the Department of Human
5 Resources on behalf of the Civil Service Commission’s approval obtained on September 6,
6 2024, under PSC No. 48652-16/17; and

7 WHEREAS, Charter, Section 9.118(b) requires Board of Supervisors’ approval by
8 Resolution of any contract which, when entered into, extends over 10 years, and of any
9 contract which, when entered into, costs the City \$10,000,000 or more; and

10 WHEREAS, The proposed amendment contained in File No. 251132, is substantially in
11 final form, with all material terms and conditions included, and only remains to be executed by
12 the parties upon approval of this Resolution; now, therefore, be it

13 RESOLVED, That the Board of Supervisors hereby approves the amendment in
14 substantially the form contained in File No. 251132; and, be it

15 FURTHER RESOLVED, That the Board of Supervisors authorizes DPH to make any
16 modifications to the amendment, prior to its final execution by all parties, that DPH
17 determines, in consultation with the City Attorney, are consistent with this Resolution, in the
18 best interest of the City, do not materially increase the obligations or liabilities of the City, are
19 necessary or advisable to effectuate the purposes of the amendment, and are in compliance
20 with all applicable laws, including City’s Charter; and, be it

21 FURTHER RESOLVED, That within 30 days of the amendment being fully executed by
22 all parties, DPH shall submit to the Clerk of the Board of Supervisors a completely executed
23 copy for inclusion in File No. 251132; this requirement and obligation resides with the
24 Department, and is for purposes of having a complete file only, and in no manner affects the
25 validity of approved amendment.

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RECOMMENDED
/s/ Jenny Louie for
Daniel Tsai
Director of Health

Item 7
File 25-1132

Department:
Public Health

EXECUTIVE SUMMARY

Legislative Objectives

- The proposed resolution would approve Amendment No. 1 to the agreement between the Department of Public Health (DPH) and Community Forward SF (Community Forward) for operational support for the Medical Respite and Sobering Center to increase the maximum agreement amount by \$22,263,326 for a new total not-to-exceed amount of \$32,262,830, and to extend the term from December 2025 through June 2029.

Key Points

- The contract funds three programs: (1) the Medical Respite and Sobering Center (MRSC), (2) the Managed Alcohol Program, and (3) the SoMa Recover, Initiate, Support, Engage (SoMa RISE) transportation shuttle program. The program uses a hybrid service model in which DPH provides clinical services (medical personnel and social workers), while Community Forward provides operational support (facility management, meals, transportation, and security).
- The Medical Respite and Sobering Center provides short-term residential care (average 46 to 60 days) for individuals experiencing homelessness who are too ill or frail to recover from a physical illness or injury. Patients reside in gender-designated dorms or congregate rooms while accessing medical care and other supportive services. The goal of the program is to reduce the number of emergency room visits patients make and their contact with police and emergency medical services personnel.
- The Managed Alcohol Program (MAP) is being folded into the 75-bed Medical Respite facility, reducing program capacity from 20 to 10 beds due to a shift toward opioid and stimulant primary addictions over alcohol. This consolidation, which followed a pilot during COVID-19, facilitated shared overhead costs and resulted in a \$919,043 reduction in Proposition C funding and a reduction of 20 total beds from this contract.

Fiscal Impact

- The proposed amendment increases the total agreement amount by \$22,263,326, from an original not-to-exceed of \$9,999,504 to \$32,262,830. The programs together cost \$5.8 million per year in FY 2025-26 and are primarily funded by the General Fund.

Recommendation

- Approve the proposed resolution.

MANDATE STATEMENT

City Charter Section 9.118(b) states that any contract entered into by a department, board or commission that (1) has a term of more than ten years, (2) requires expenditures of \$10 million or more, or (3) requires a modification of more than \$500,000 is subject to Board of Supervisors approval.

BACKGROUND

The Department of Public Health (DPH) is responsible for promoting and protecting the health of a population by overseeing public health services, preventing disease, ensuring food and environmental safety, and responding to emergencies.

One program offered is medical respite, which provides short-term residential care (average 46 to 60 days) for individuals experiencing homelessness who are too ill or frail to recover from a physical illness or injury. This allows individuals to rest and recover in gender-designated dorms or congregate rooms while accessing medical care and other supportive services. The goal is to reduce the number of emergency room visits patients make and their contact with police and emergency medical services personnel.

Contract History

On July 1, 2024, DPH and Community Forward entered into an agreement with a term of July 1, 2024, through December 31, 2025 (18 months) and a not-to-exceed amount of \$9,999,504. The agreement funded medical respite, sobering services, and transportation aimed at stabilizing medically fragile individuals experiencing homelessness and those with substance use disorders. DPH selected Community Forward using Administrative Code Section 21A.4, which allows DPH to procure behavioral health and public health residential care and treatment services without adhering to competitive solicitation requirements through March 2029.

DPH initially procured Community Forward to provide services in 2013 using a competitive solicitation. After the procurement authority ended, the department used Administrative Code Section 21A.4, which allows DPH to contract with residential mental health treatment vendors without a competitive solicitation through February 2029, to contract with Community Forward because it controls the facilities at 1171, 1179, and 1185 Mission Street that have been renovated for these services.

The program uses a hybrid service model in which DPH provides clinical services (medical personnel and social workers), while Community Forward provides operational support (facility management, meals, transportation, and security). This structure splits responsibility, with the City retaining clinical authority and liability, while the contractor manages operational liability.

The initial agreement provided 75 respite beds, including 20 beds providing services for individuals with severe alcohol use disorder through the Managed Alcohol Program, 14 sobering center beds (supervised/controlled alcohol intake to prevent life-threatening withdrawal), and shuttle services connecting service hubs.

DETAILS OF PROPOSED LEGISLATION

The proposed resolution would approve Amendment No. 1 to the agreement between the Department of Public Health (DPH) and Community Forward SF (Community Forward) for operational support for the Medical Respite and Sobering Center to increase the maximum agreement amount by \$22,263,326 for a new total not-to-exceed amount of \$32,262,830, and to extend the term by three years and six months, for a total term of five years from July 1, 2024, to June 30, 2029.

Scope of Work

In the original agreement, services were broken down into three core components: (1) the Medical Respite and Sobering Center (MRSC), (2) the Managed Alcohol Program, and (3) the SoMa Recover, Initiate, Support, Engage (SoMa RISE) transportation shuttle program. In the new amendment, the Managed Alcohol Program is being consolidated into MRSC, and operational requirements will be modified to support the merging of populations and operations. Community Forward will continue to provide operational support (facility management, meals, transportation, and security) for MRSC and transportation services for SoMa RISE. Security services are provided 24 hours per day by a subcontractor.

Program Restructuring and Expansion

The Managed Alcohol Program was incorporated within the existing 75-bed Medical Respite facility and reducing its capacity from a maximum of 20 beds to 10 beds within the existing 75 bed Medical Respite Program. According to DPH, the decrease in capacity is driven by the fact that more individuals are struggling with opioid and stimulant addictions as their primary substance of choice, compared to alcohol. The Managed Alcohol Program began as a pilot program during COVID-19 in a stand-alone building. After pandemic requirements were reduced, DPH integrated the clients into the existing Medical Respite program and facility in August 2024. According to DPH, this transition facilitated the sharing of overhead costs (e.g., security, food services, billing staff, etc.), resulting in a \$919,043 reduction in Proposition C funding in FY 2024-25.¹ Because the Managed Alcohol Program beds are now included in the 75 total respite beds rather than in a stand-alone building, the total number of beds in the contract is decreasing from 95 to 75.

The Sobering Center's scope is expanded in the proposed amendment to include individuals recovering from an opioid overdose. Previously, the Sobering Center's services focused only on alcohol intoxication. The amendment also formalizes the Sobering Center as an alternate destination from emergency medical services. This aligns with California Triage to Alternate Destination laws (AB 438/SB 438), which allow ambulances to bypass ERs, provided rigorous state standards for staffing and monitoring are met.

¹ Proposition C funding refers to the 2018 "Our City, Our Home" Proposition ballot measures in San Francisco, California, that uses a business tax to fund homelessness services.

New Operational Requirements

The amendment codifies new operational mandates to enhance security, safety, and facility standards. Key changes include bathroom checks at least every 30 minutes using a "call and response" to verify consciousness and new protocols mandating searches of persons and property upon entry. This includes requesting that all clients surrender their weapons or firearms to staff and asking them to leave if they do not comply. Any weapons must then be surrendered to the San Francisco Police Department for secure logging and storage. According to DPH, implementing client searches and weapons removal at the Medical Respite and Sobering Center aligns the program with standard operations at other San Francisco shelters.

Furthermore, the amendment codifies requirements for food services, mandating staff food safety certifications, accommodating specialized diets such as diabetic and low-sodium diets, and requiring a minimum of 75 meals per mealtime. Transportation services are expanded to include rideshare options.

Justification for New Requirements

These new duties were introduced in response to escalating safety concerns. DPH reported that in "the last 6 months, there have been multiple safety incidents at the Medical Respite and Sobering Center involving clients bringing weapons into the facility," which were escalated by staff and their unions.

Security Protocols and Liability

The contract includes a subcontracting agreement with Winston Security Services, a private security firm, effective July 1, 2025. The contract specifies "1 Unarmed Guard daily" per shift, whose duties are to "log and report suspicious or criminal activity."

This scope does not authorize physical intervention to confiscate weapons. If a client is observed with a weapon, Winston Security or Community Forward staff will request that the item be surrendered. If a weapon is found unattended (e.g., on a patient's bed), staff will confiscate it. However, neither Winston Security nor Community Forward staff will engage in a physical confrontation with a patient to confiscate a weapon. If a patient refuses to surrender a weapon, 911 will be called if there is an active threat. If there is no active threat, the patient will be asked to leave the facility and considered trespassing if they refuse.

Furthermore, the Winston Security subcontract includes a clause limiting liability to cases of "sole negligence." This may leave Community Forward (and by extension, the City) liable for incidents where fault is shared or ambiguous.

Performance

The contract requires annual program monitoring, with performance objectives established by DPH's Whole Person Integrated Care.² According to DPH's FY 2023-24 program monitoring report, DPH conducted a site visit on January 16, 2025, where Community Forward was found to generally be in compliance with the contract's program objectives, outcomes, and compliance requirements. DPH's program monitoring resulted in both programs receiving an overall program score of four out of four or "commendable/exceeds standards."

MRSC met 100 percent of its performance objectives, units of service (58,337 hours), program compliance, and client satisfaction targets. The unduplicated client count target (1,287) was reported as "Met" by DPH because the contractor invoices the full budget regardless of utilization; however, the actual number of unduplicated clients served between the Medical Respite and the Sobering Center was 1,047. All programs in this contract bill for cost reimbursement rather than fee-for-service.

The SoMa RISE shuttle program was exempt from the performance objective, client satisfaction, and unduplicated client count section of the FY 2023-24 performance review due to its service type; however, it met its contracted units of service (5,446 out of 5,446) and was provided 20/20 applicable program compliance points.

There were no performance or service objectives for the Managed Alcohol Program in the reports provided by DPH. Of the total Unduplicated Client Count, 23 clients were served in the MAP program in FY24-25. These clients are reflected in the Sobering Center count below.

A breakdown of performance objective goals and results is detailed in Exhibit 1 below.

² Whole Person Integrated Care is a section of the SF Department of Public Health's Ambulatory Care division that brings together existing non-traditional primary care, urgent care, and behavioral health clinical services primarily serving people experiencing homelessness.

Exhibit 1: Performance Monitoring Goal and Result FY 2024-25

Program	Objective	Goal / Target	Result
Medical Respite & Sobering Center	Emergency Preparedness	Fire/earthquake plans, safety standards, key distribution points	Met
Medical Respite & Sobering Center	Shuttle Transportation	Shuttle priorities, van operating schedule, and usage report	Met
Medical Respite & Sobering Center	Food Service	Stock rotation, menu planning, and nutritional standards.	Met
Medical Respite & Sobering Center	Facilities Maintenance	Cleaning and maintenance schedules	Met
Medical Respite & Sobering Center	Units of Service	58,337 hours	58,337 hours
Sobering Center	Face to Face Encounters	1,000	1,864
Medical Respite	Respite Stays & Days	Total Respite Stays: 400 Total Respite Days: 18,000	Stays: 487 Days: 28,419
Medical Respite & Sobering Center	Unduplicated Clients	Medical Respite (MR): 887 Sobering Center (CR): 400 Total: 1,287	MR: 377 SC: 710 Total: 1087
Medical Respite & Sobering Center	Program Compliance	Declaration of Compliance, Admin Binder, Site Compliance	Met
Medical Respite & Sobering Center	Client Satisfaction	Completed survey and analyzed results	Met
Transportation Shuttle	Units of Service	5,446 hours	5,446 hours
Transportation Shuttle	Site/Premises Compliance	Declaration of Compliance, Admin Binder, Site Compliance	Met

Source: DPH

Fiscal Monitoring

The Mayor's Office of Housing and Community Development (MOHCD) reviewed Community Forward's compliance with the City's fiscal and compliance standards for non-profits in FY 2024-

25. A MOHCD letter dated June 13, 2025 found that Community Forward was in conformance with all City standards.

FISCAL IMPACT

The proposed amendment increases the total agreement amount by \$22,263,326, from an original not-to-exceed of \$9,999,504 to \$32,262,830 over the five-year term (July 1, 2024, through June 30, 2029).

The total budget includes a contingency of \$2,499,993 (approximately 10.5 percent of the projected budget for the last four years of the proposed term). This contingency is for unforeseen costs, such as facility emergencies or wage escalation, and requires a formal contract modification to access. The budget assumes year-over-year growth rates of approximately 1.4 percent to 2.4 percent for FY 2026-27 through FY 2028-29.

The estimated annual allocations are detailed in Exhibit 2.

Exhibit 2: Budget by Fiscal Year, FY 2024-25 to FY 2028-29

Fiscal Year	Projected Spending	% Change
FY 2024-25	\$6,048,162	
FY 2025-26	5,762,796	-4.7%
FY 2026-27	5,901,106	2.4%
FY 2027-28	5,983,575	1.4%
FY 2028-29	6,067,198	1.4%
<i>Subtotal</i>	<i>29,762,837</i>	
Contingency (10.5%)	2,499,993	
Total	\$32,262,830	

Source: DPH

Note: The original budget for FY 2024-25 was \$6,967,205; however, due to the consolidation of the Managed Alcohol Program into the Medical Respite and Sobering Center and the subsequent reduction in Proposition C funding, the figure cited above (\$6,048,162) reflects a decrease of \$919,043 from the baseline year.

The FY 2024-25 budget of \$5.76 million was primarily to pay for the Medical & Sobering Center Program (\$5.37 million). The Managed Alcohol Program was \$0.1 million and the Soma RISE transportation program was \$0.3 million in FY 2024-25.

Billing Methodology

The contract uses a cost-reimbursement model. The City pays the contractor for actual expenses (rent, salaries, utilities) up to the budget cap, regardless of utilization. If DPH referrals or clinical staffing shortages reduce the number of beds that can be safely used, the City must still pay Community Forward for fixed costs (e.g., \$968,980 annually for rent).

Medical Respite Bed Cost

Based on the FY 2025-26 MRSC budget of approximately \$5.37 million divided by 27,375 potential bed nights (75 beds x 365 days), the estimated cost per bed night for medical respite facility and support services is approximately \$196 at 100 percent occupancy and \$230 at 85 percent occupancy. Based on data provided by DPH on the total number of respite days, the average occupancy rate was 69 percent in FY 2023-24 and 90 percent in FY 2024-25.

Budget Savings from Program Consolidation

Compared to the original FY 2024-25 budget (\$6.97 million), the FY 2025-26 budget (\$5.76 million) reflects a reduction of \$1.20 million (17.3 percent) due to the consolidation of the MAP program and Medical Respite. DPH reduced the FY 2024-25 budget from \$6.97 million to \$6.05 million reflecting the MAP consolidation implemented in August 2024. DPH is proposing a further decrease of \$285,366 (4.7 percent) in FY 2025-26 due to the program consolidation.

Exhibit 3 provides a detailed cost breakdown comparing the original FY 2024-25 budget to the FY 2025-26 budget.

Exhibit 3: Change in Original Budget from Program Consolidation (FY 2024-25 vs. FY 2025-26)

Line Item	FY 2024-25 (Original)	FY 2025-26 (Proposed)	Difference	% Change
Salaries	\$2,342,044	\$2,038,737	(\$303,307)	-13.0%
Employee Benefits	\$702,614	\$550,459	(152,155)	-21.7%
Operating Expenses	\$3,013,781	\$2,423,300	(590,481)	-19.6%
Indirect Expenses (15%)	\$908,766	\$750,300	(158,466)	-17.4%
Total	\$6,967,205	\$5,762,796	(\$1,204,409)	-17.3%

Source: DPH

The savings are attributed to reductions in redundant security, food services, and staffing. Total staffing decreased by 7.84 full-time equivalent (FTE) positions (17.6 percent), from 44.61 to 36.77. This is driven primarily by the elimination of 7.49 FTE previously dedicated to the standalone Managed Alcohol Program and a reduction of 1.07 indirect (administrative) FTEs. Additionally, the budgeted employee benefits rate decreased from 30 percent in FY 2024-25 to 27 percent in FY 2025-26. DPH states this reduction reflects the actual costs of the benefits package.

Funding Sources

Proposition C funds are reduced by \$1.27 million, or 91.4 percent, due to program consolidation. In FY 2025-26, the contract is funded by the General Fund (93 percent), Proposition C revenues (7 percent), and the Opioid Settlement Fund (less than 1 percent). The year-over-year funding breakdown is provided in Exhibit 4. Because DPH civil service staff are the treatment providers in these programs, DPH bills Medi-Cal and other insurers directly and those revenues accrue to the Department.

Exhibit 4: Change in Funding Sources from Program Consolidation (FY 2024-25 vs. FY 2025-26)

Funding Source	FY 2024-25 Original	FY 2025-26 Proposed	Difference	% Change
General Fund	\$5,309,558	\$5,362,653	\$53,095	1.0%
Proposition C (Homeless Services)	1,390,037	119,357	(1,270,680)	-91.4%
Proposition C (MH Residential)	267,610	270,286	2,676	1.0%
Opioid Settlement Fund		10,500	10,500	
Total	\$6,967,205	\$5,762,796	(\$1,204,409)	-17.3%

Source: DPH

RECOMMENDATION

Approve the proposed resolution.

**City and County of San Francisco
Office of Contract Administration
Purchasing Division**

First Amendment

THIS AMENDMENT (this “Amendment”) is made as of January 1, 2026, in San Francisco, California, by and between **Community Forward SF** (“Contractor”), and the City and County of San Francisco, a municipal corporation (“City”), acting by and through its Director of the Office of Contract Administration.

Recitals

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the performance period, increase the contract amount, and update standard contractual clauses; and

WHEREAS, Department is authorized under Administrative Code Section 21A.4 to procure from Service Providers (as that term is defined in Section 21A.4(a)(6)) directly, without the approval of the Purchaser and without adhering to the requirements of Section 21.1 or Chapter 14B of the Administrative Code, or any other applicable competitive procurement requirement; and

WHEREAS, this Amendment is consistent with an approval obtained on September 6, 2024 from the Department of Human Resources on behalf of the Civil Service Commission under PSC number 48652-16/17 which authorizes the award of multiple agreements, the total value of which cannot exceed \$367,880,000 and the individual duration of which cannot exceed 12 years; and

WHEREAS, this Amendment is consistent with an approval obtained from the City’s Board of Supervisors under Resolution Number approved on in the amount of \$ for the period commencing July 1, 2024 and ending June 30, 2029; and

Now, THEREFORE, the parties agree as follows:

Article 1 Definitions

The following definitions shall apply to this Amendment:

1.1 Agreement. The term “Agreement” shall mean the Agreement dated July 1, 2024 between Contractor and City as amended by this First Amendment dated January 1, 2026.

1.2 Other Terms. Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

Article 2 Modifications to Scope of the Agreement

The Agreement is hereby modified as follows:

2.1 Term of the Agreement. Section 2.1 Term of the Agreement currently reads as follows:

2.1 The term of this Agreement shall commence on July 1, 2024 and expire on December 31, 2025, unless earlier terminated as otherwise provided herein.

Such a section is hereby amended in its entirety to read as follows:

2.1 The term of this Agreement shall commence on July 1, 2024 and expire on June 30, 2029, unless earlier terminated as otherwise provided herein.

2.2 Calculation of Charges. Section 3.3.1 Calculation of Charges currently reads as follows:

3.3.1 Calculation of Charges and Contract Not to Exceed Amount. The amount of this Agreement shall not exceed **Nine Million Nine Hundred Ninety-Nine Thousand Five Hundred Four Dollars (\$9,999,504)**, the breakdown of which appears in Appendix B, "Calculation of Charges." City shall not be liable for interest or late charges for any late payments. City will not honor minimum service order charges for any Services covered by this Agreement.

Such section is hereby amended in its entirety to read as follows:

3.3.1 Calculation of Charges and Contract Not to Exceed Amount. The amount of this Agreement shall not exceed **Thirty-Two Million Two Hundred Sixty-Two Thousand Eight Hundred Thirty Dollars (\$32,262,830)**, the breakdown of which appears in Appendix B, "Calculation of Charges." City shall not be liable for interest or late charges for any late payments. City will not honor minimum service order charges for any Services covered by this Agreement.

2.3 Appendices A and A-1. Appendices A and A-1 are hereby replaced in their entirety by Appendices A and A-1 dated January 1, 2026, attached to this Amendment One and fully incorporated within the Agreement. To the extent the Agreement refers to Appendices A and A-1 in any place, the true meaning shall be Appendices A and A-1 dated January 1, 2026 which is a correct and updated version.

2.4 Appendix B and B-1 to B-3. Appendix B and B-1 to B-3 are hereby replaced in their entirety by Appendix B and B-1 to B-3 dated January 1, 2026, attached to this Amendment One and fully incorporated within the Agreement. To the extent the Agreement refers to Appendix B and B-1 to B-3 in any place, the true meaning shall be Appendix B and B-1 to B-3, dated January 1, 2026 which is a correct and updated version.

2.5 Appendix D, Third Party Computer System Access Agreement. Appendix D dated November 20, 2023 is hereby deleted from the Agreement.

2.6 Appendix E, Business Associate Agreement. Appendix E is hereby replaced in its entirety by Appendix E dated January 1, 2026, attached to this Amendment One and fully incorporated within the Agreement. To the extent the Agreement refers to Appendix E in any place, the true meaning shall be Appendix E dated January 1, 2026 which is a correct and updated version.

Article 3 Updates of Standard Terms to the Agreement

2.6 Submitting False Claims. *The following is hereby added to Article 3 of the Agreement, replacing the previous Section 3.7 in its entirety.*

3.7 Contract Amendments; Budgeting Revisions.

3.7.1 Formal Contract Amendment: Contractor shall not be entitled to an increase in the Compensation or an extension of the Term unless the Parties agree to a Formal Amendment in accordance with the San Francisco Administrative Code and Section 11.5 (Modifications of this Agreement).

3.7.2 City Revisions to Program Budgets. The City shall have authority, without the execution of a Formal Amendment, to (1) purchase additional Services within the Statement of Work or (2) reallocate funding among the Services within the Statement of Work. Any change made under this Subsection 3.7.2 must not involve an increase in the Maximum Cost or Amount Not to Exceed or a change to the Term of this Agreement, and must be approved in writing by both Parties, by a person with legal authority to bind their respective Party to its terms. Contractor shall not proceed with any work contemplated in any revision to program budget until Contractor receives written notification from City to commence such work. All revisions to program budget will become part of this Agreement, after written execution by the Parties, which will then form the new baseline upon which future changes will be measured.

2.7 Business Associate Agreement. *The following is hereby added to Article 3 of the Agreement, replacing the previous Section 13.3 in its entirety.*

13.3 Business Associate Agreement. The Parties acknowledge that City is designated as a Hybrid Entity as defined in the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), and all Health Care Components of the City, including a City department involved in this Agreement, are required to comply with the HIPAA rules governing the access, use, disclosure, transmission, storage, and security of protected health information (PHI).

For purposes of this Agreement, Parties agree that if Contractor is performing a service or function for or on behalf of a City department that is a Health Care Component, where such service or function makes Contractor a Business Associate of City, Contractor must comply with the obligations and conditions contained in the Business Associate Agreement (“BAA”) that shall be attached to this Agreement as Appendix E, and incorporated as though fully set forth herein. Parties agree that if Contractor is not performing a service or function that makes Contractor a Business Associate of City, a BAA is not required and will not be attached to this Agreement. Appendix E will be reserved if a BAA is not required. Contractor, however, must still comply with any data privacy and security laws that apply to Contractor, including, but not limited to, HIPAA, CMIA (Cal. Civ. Code Sec. 56 et.seq.), Cal. Welf. & Inst. Code Sec. 5328, and 42 CFR Part 2.

Article 4 Effective Date

Effective Date. Each of the modifications set forth in Section 2 shall be effective on and after the effective date of the agreement.

Article 5 Legal Effect

Legal Effect. Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

CITY

Recommended by:

Daniel Tsai
Director of Health
Department of Public Health

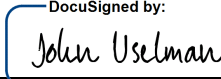
Approved as to Form:

David Chiu
City Attorney

By: _____
Arnulfo Medina
Deputy City Attorney

CONTRACTOR

COMMUNITY FORWARD SF

DocuSigned by:
 11/4/2025 | 11:25 AM PST

John Uselman
Co-Chief Executive Director

Supplier Number: 0000022483

Appendix A

Scope of Services

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Anthony Buckman**, Contract Administrator for the City, or his / her designee.

B. Reports:

Contractor shall submit written reports as requested by the City. The format for the content of such reports shall be determined by the City. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

For services solicited under a Group Purchasing Organization (GPO) the Contractor shall report all applicable sales under this agreement to the respective GPO.

C. Evaluation:

Contractor shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to meet the requirements of and participate in the evaluation program and management information systems of the City.

For contracts for the provision of services at San Francisco General or Laguna Honda Hospital and Rehabilitation Center, the evaluation program shall include agreed upon performance measures as specified in the Performance Improvement Plan and Performance Measure Grid which is presented in Attachment 1 to Appendix A. Performance measures are reported annually to the Zuckerberg San Francisco General performance improvement committees (PIPS and Quality Council) or the to the Administration Office of Laguna Honda Hospital and Rehabilitation Center.

The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. Possession of Licenses/Permits:

Contractor warrants the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Admission Policy:

Admission policies for the Services shall be in writing and available to the public. Except to the extent that the Services are to be rendered to a specific population as described in the programs listed in Section 2 of Appendix A, such policies must include a provision that clients are accepted for care without discrimination on the basis of race, color, creed, religion, sex, age, national origin, ancestry, sexual orientation, gender identification, disability, or AIDS/HIV status.

G. San Francisco Residents Only:

Only San Francisco residents shall be treated under the terms of this Agreement. Exceptions must have the written approval of the Contract Administrator.

H. Grievance Procedure:

Contractor agrees to establish and maintain a written Client Grievance Procedure which shall include the following elements as well as others that may be appropriate to the Services: (1) the name or title of the person or persons authorized to make a determination regarding the grievance; (2) the opportunity for the aggrieved party to discuss the grievance with those who will be making the determination; and (3) the right of a client dissatisfied with the decision to ask for a review and recommendation from the community advisory board or planning council that has purview over the aggrieved service. Contractor shall provide a copy of this procedure, and any amendments thereto, to each client and to the Director of Public Health or his/her designated agent (hereinafter referred to as "DIRECTOR"). Those clients who do not receive direct Services will be provided a copy of this procedure upon request.

I. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan for its employees, agents and subcontractors as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (<http://www.dir.ca.gov/title8/5193.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and recordkeeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of its employees, agents, subcontractors and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by its employees, agents and subcontractors, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

J. Aerosol Transmissible Disease Program, Health and Safety:

(1) Contractor must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (<http://www.dir.ca.gov/Title8/5199.html>), and demonstrate compliance with all requirements including,

but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(3) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(4) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their employees, agents, subcontractors including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

K. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

L. Client Fees and Third Party Revenue:

(1) Fees required by federal, state or City laws or regulations to be billed to the client, client's family, or insurance company, shall be determined in accordance with the client's ability to pay and in conformance with all applicable laws. Such fees shall approximate actual cost. No additional fees may be charged to the client or the client's family for the Services. Inability to pay shall not be the basis for denial of any Services provided under this Agreement.

(2) Contractor agrees that revenues or fees received by Contractor related to Services performed and materials developed or distributed with funding under this Agreement shall be used to increase the gross program funding such that a greater number of persons may receive Services. Accordingly, these revenues and fees shall not be deducted by Contractor from its billing to the City.

M. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

N. Under-Utilization Reports:

For any quarter that Contractor maintains less than ninety percent (90%) of the total agreed upon units of service for any mode of service hereunder, Contractor shall immediately notify the Contract Administrator in writing and shall specify the number of underutilized units of service.

O. Quality Assurance:

Contractor agrees to develop and implement a Quality Assurance Plan based on internal standards established by Contractor applicable to the Services as follows:

- 1) Staff evaluations completed on an annual basis.
- 2) Personnel policies and procedures in place, reviewed and updated annually.
- 3) Board Review of Quality Assurance Plan.

P. Compliance With Grant Award Notices:

Contractor recognizes that funding for this Agreement is provided to the City through federal, state or private foundation awards. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, which agreements are incorporated by reference as though fully set forth.

Contractor agrees that funds received by Contractor from a source other than the City to defray any portion of the reimbursable costs allowable under this Agreement shall be reported to the City and deducted by Contractor from its billings to the City to ensure that no portion of the City's reimbursement to Contractor is duplicated.

2. Description of Services

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

Appendix A-1 Medical Respite and Alcohol Sobering Center and Managed Alcohol Program

3. Services Provided by Attorneys. Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

4. CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement."

5. No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

Community Forward SF
Medical Respite and Sobering Center

Appendix A-1
Contract Term 7/1/25-6/30/26

1. Identifiers:

Program Name: Medical Respite and Alcohol Sobering Center and Managed Alcohol Program

Program Address: 1171, 1179 and 1185 Mission St.
San Francisco, CA 94103

Telephone/FAX: 415-734-4200/415-241-1176

Website Address: www.communityforwardsf.org

Contractor Address: 1171 Mission Street,
San Francisco, CA 94103

Executive Director/Program Director: Sammie Rayner and John Uselman

Telephone: 415-(415) 241-1194

Email Address: Sammie.Rayner@communityforwardsf.org,
John.Uselman@communityforwardsf.org

2. Nature of Document:

First Amendment

3. Goal Statement:

The Medical Respite and Sobering Center (MRSCMAP) program will serve all ethnicities and populations in San Francisco. The Medical Respite and Sobering Center (MRSCMAP) is a collaboration between the SFDPH's Whole Person Integrated Care and Community Forward SF (CFSF). These programs work to provide temporary wrap around medical, social, and social supportive services to to provide a safe and stable place for people experiencing homelessness with serious health issues and substance use issues to stabilize.

4. Target Population:

These programs are designed to address the needs of residents of San Francisco with a focus on homeless individuals who have substance use disorders and are hospitalized in medical-surgical units or at risk of hospitalization. Medical Respite serves clients with chronic medical needs that cannot safely be addressed in shelters and that are typically rejected because of their needs. Incorporated within Medical Respite are ten beds utilized for Managed Alcohol Program (MAP) patients. MAP provides stabilization for individuals with severe alcohol use disorder who are not interested in stopping their use of alcohol. Further descriptions of Medical Respite services will include Managed Alcohol patients as well. While clients with psychiatric comorbidities will be accepted, the Medical Respite will not accept clients whose primary reason for hospitalization is psychiatric. Anyone requiring acute hospitalization or skilled nursing will not be accepted

into the program. Medical Respite serves medically frail clients who need assistance with chronic health management, medication adherence, and social services.

The Sobering Center provides a safe and stable place for people intoxicated on alcohol or opioids to safely sober and receive care coordination outside of the emergency departments, jails and off the streets. The Sobering Center is part of a state program that allows it to act as an alternate destination to the emergency department for emergency services (EMS), allowing EMS to bring clients directly to the Sobering Center, thus completely avoiding unnecessary emergency department admissions for acute alcohol intoxication.

5. Modality(s)/Intervention(s)

See Appendix B CRDC

6. Methodology:

Medical Respite has 75 respite beds to provide temporary shelter with supportive services for medically frail homeless persons leaving the hospital or the emergency department as well as individuals with severe alcohol use disorder. The Sobering Center provides safe temporary shelter and medical oversight for individuals acutely intoxicated on alcohol or opioids who are typically homeless. Hospitals, DPH Shelter Health, SFHOT, and other city and community providers refer clients to both facilities. SFDPH will provide clinical services for MRSCMAP, including medical personnel, social workers, and case managers.

- While Medical Respite capacity is 75 respite beds are our capacity, the average utilization may vary due to COVID-related cases or safety concerns following Health Orders and best practices.
 - Sobering has 14 beds.
- A. CFSF is not required to provide outreach, recruitment, promotion, and advertisement for MRSC. These services are provided to MRSC's clients through its partnership with DPH.
- B. Service Delivery Model: CFSF will provide quality supportive services for the Medical Respite and Sobering Center clients, including, but not limited to:
 1. Staffing for front desks at Medical Respite 24 hours per day, 7 days per week. Staffing for the Alcohol Sobering Center desk from 4pm to 8am 7 days per week. Monitors entrance/exit from the buildings, answers phones, provides facility navigation for clients.
 2. Provide materials and assistance for immediate client health and hygiene related needs, seeking nursing support as needed. Examples include laundry services, providing hygiene

products, etc. CFSF will coordinate with DPH on the purchasing of alcohol for Managed Alcohol patients.

3. Preparation and serving of nutritious meals including ordering food and supplies, facility food storage, cooking meals, serving meals, bussing tables, and cleaning & sanitizing dishware.
4. Assisting health care providers with client navigation and clinic flow at Medical Respite and Alcohol Sobering Center in a trauma informed manner.
5. Monitoring client belongings at bedside, ensuring clients bedside has appropriate amount of belongings and monitoring for and disposing of perishable or soiled items.
6. Assist with client admission process: orientation to the facility, overview of facility guidelines, support as needed to become acclimated to the facility including connections to appropriate clinical personnel.
7. Assist with client discharge process: support to pack of client belongings, support around behavioral health issues, and transportation to discharge location approved by the DPH treatment team.
8. Contractor staff will provide social activities twice weekly for Medical Respite clients (Bingo, game night, karaoke, etc)

B1: CFSF facilities department will provide maintenance and cleaning of the facility:

1. Maintain basic facility needs (maintain smoke detectors, lightbulbs, fire extinguishers etc), responding to repair requests and provide regular status updates.

Ensure that bathrooms are checked at least every 30 minutes including call and response to verify consciousness.

2. Provide Janitorial services 7am – 11pm 7 days/week at Respite and Sobering. Provide janitorial support overnight to Medical Respite and Alcohol Sobering as needed.
3. Laundering of client linens and belongings weekly, strip and clean bed area after client discharge

B2: Food Services: Preparation and serving of nutritious meals including ordering food and supplies, facility food storage, cooking meals, providing and serving meals, bussing and cleaning tables, and cleaning & sanitizing dishware in Medical Respite and Sobering

1. Staff with certifications in food safety to store food and prepare and serve meals in accordance with public health/food preparation guidelines
2. There should be a minimum of 75 meals at each meal time for MRSC clients. If there are less than 75 respite guests the surplus meals will be offered to clients in the Sobering Center
3. Ability to accommodate specialized diets, including diabetic, renal, low sodium, soft, blended, and pureed diets, vegetarian/vegan, allergies, and in accordance with other federal protections such as religious needs.
4. Serve meals to clients in the dining room with ability to accommodate food for clients who have appointments overlapping with mealtimes and provide oral rehydration beverages and snacks (and meals when available) for Sobering clients.

B3 Transportation:

1. Coordinates and provides transportations services to and from medical appointments and essential social services as determined by DPH from 8am-7pm Monday-Friday through drivers, vans and rideshare services.
2. Ensure that drivers have training around safety and the needs of Medical Respite clients (individuals with cognitive needs may need help with navigation, access to translation services to community with non English speakers).

B3: Safety services contracted through a third-party vendor (St. Anthony's or other approved vendor)

Safety and De-Escalation: Contractor shall ensure the general safety of the served population, staff, visitors, and property by providing staff trained in safety and de-escalation or through a security services provider 24 hours per day, 365 days per year at Medical Respite and Alcohol Sobering. At least one employee or independent contractor will be on site to provide security services. Safety and de-escalation shall include, but is not limited to:

- a. Greeting the served population, staff, visitors, and conducting search of persons and property prior to entering sites for potentially dangerous items;
- b. Guests must turn in all weapons to safety and de-escalation personnel at intake. Firearms will be turned over immediately to the San Francisco Police Department. Other weapons will be logged and stored by safety and de-escalation personnel in a safe and secure lockbox, logged and returned to guests upon the end of their stay in the program;

- c. Utilization of a system by which possessions may be checked, logged and safely and securely stored, as directed;
- d. Regular patrol of the site and surrounding program area, to ensure compliance with HSH's Good Neighbor Policy as described in the Good Neighbor Policies section;
 - 1. Safety services shall monitor the sidewalk in front of the facility for activities that may pose a risk to staff and clients entering and exiting the facility. Outside of the facility, safety services shall report suspicious or criminal activities to law enforcement or other appropriate first responders as it deems appropriate in its sole discretion.
- e. Utilization of a system with written documentation to ensure that the perimeter and other areas are checked on a scheduled and regular basis; and
- f. Assistance with conflict de-escalation and crisis management.
 - 1. Safety services shall monitor the interior of the facility at Medical Respite and Alcohol Sobering locations for disruptive behavior on the part of any client. This includes physical and verbal behavior that is potentially harmful to the environment, facility, or person of any client or employee.
 - 2. Safety services shall intervene with de-escalation techniques with the goal of resolving all situations without harm to anyone in the facility. When possible, Safety services shall intervene with intention to retain all clients safely within the program. If efforts toward that goal prove ineffective, in consultation with available Contractor and DPH staff members on site the Safety services employee shall escort the client or clients who present harmful behavior out of the building.
 - 3. Physical contact with clients shall be avoided unless safety services employee deems it necessary to prevent immediate violence. In such case, the minimum physical intervention necessary shall be employed. Under no circumstances will physical intervention be employed as punishment for past behavior or deterrent to future behavior. Under no circumstances shall a client be detained physically for the purposes of surrendering the client to law enforcement. Safety services will not enforce facility rules unrelated to the immediate safety of clients and staff and shall instead report any observed or suspected client rule violations to on site leadership (whether contractor or DPH).
 - 4. Limitations. Safety services will not physically respond to any violent behaviors or behaviors that could potentially be harmful or violent to its employee, independent contractor or affiliate. Physical response shall include, without limitation, any physical contact with or the use of any restraints on any person, including such person who might be a perpetrator or a suspect of committing any crime whatsoever. Safety Services are not a replacement of law enforcement. Any suspicious or criminal activities should be reported to the law enforcement or other first responders.

C. See Appendix B Salaries and Benefits page

7. Objectives and Measurements:

A. Standardized Objectives: All objectives and descriptions of how objectives will be measured are contained in the BHS document entitled Whole Person Integrated Care Performance Objectives for the applicable fiscal year.

8. Continuous Quality Improvement:

The CFSF Medical Respite Continuous Quality Assurance and Improvement activities will be outlined as directed in the FY 24-25 Declaration of Compliance. The CFSF Medical Respite Director of Support Services and CFSF's CEO monitor the program's quality, with feedback from DPH's medical staff.

1. Achievement of contract performance objectives and productivity:

CFSF Medical Respite Director of Support Services will ensure that CFSF supportive staff are trained, supervised, and evaluated to deliver services in a quality manner as measured by documents that outline plans and implementations of recruitment, training, supervision, scheduling, and routine performance appraisals. CFSF staff will be provided with development activities, training, and supervision to improve skills with a customer service orientation tailored to serving this multiply diagnosed behavioral and medically ill target population. There will be direct communication between CFSF leadership and MRSC program leadership (nurse managers, medical director, operations lead) to collaborate and fulfill contract obligations.

Formal training will be followed by role-playing and other activities to practice and integrate practical skills such as de-escalation. During FY 24-25, CFSF staff will receive at least 6 hours of relevant training to improve their ability to employ strategies that improve client care and interactions. Training includes Harm Reduction, CPR-First Aid, Management of Assaultive Behavior, De-escalation, Customer Service with a focus welcoming on first contact, Sexual Harassment, Professionalism, Ethics and Boundaries, Working with Difficult Clients, Anti-Abuse of Elders, and Cultural Competency. Additional role-specific training (i.e. Safe and Defensive Driving and Food and Sanitation for the drivers and cooks respectively) will be provided.

Program Review Measurement:

- Food Service Staff training certificates will be posted in the kitchen.
- Training will be verified through sign-in sheets that include the date of training and/or certificates of completion.
- Minutes at staff meetings will also verify training provided during staff meetings.
- Quarterly safety meetings and annual TB screenings for all staff are held.

- The CFSF's MRSC program will continue to identify and prioritize relevant program policies and then finalize policies as needed throughout each Fiscal Year. CFSF and the DPH Program Director/Nurse Manager will sign all policies. Staff will be trained in the implementation of established protocols. The program follows all applicable policies of the Health Commission, local, state, federal, and funding source policies, and requirements of Harm Reduction, DPH Privacy Policy, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction. These policies are reviewed regularly.

2. Services documentation:

- a. The Transportation schedule is posted in the lobby area of 1171 Mission and is updated daily. The quality of the Transportation service is measured by the following indicators recorded in transportation daily logs which are:
 - i. Number of total client transports.
 - ii. The number of missed transports, including reasons for them.
 - iii. Pick-up times will be no more than 60 minutes after the initial call, whenever possible, depending on weather and city traffic.
- b. The following indicators will measure the Quality of the Food service:
 - i. Ability to provide meals based on client medical/health needs.
 - ii. Attendance to nutritional guidelines.
 - iii. Client Satisfaction Survey with measurements of satisfaction with meals.
 - iv. Feedback on food from Community Meetings.
 - v. The Food Service will pass the annual DPH Food Safety Inspection.
- c. CFSF will maintain a clean, well-ordered facility. Monthly logs with spot checks will be maintained listing client areas. Staff will perform rounds to check duties completed and cleanliness of areas, and the Deputy Director will sign off on the entire list. Cleaning Schedules will be posted in client areas and will include a number to call if bathrooms or showers need attending to. A schedule will be developed for deep cleaning (floor stripping and waxing).

3. Cultural competency of staff and services:

- a. The program establishes annual cultural competency goals specific to the supportive role of the Medical Respite program. Staff attend other cultural competency training offered by the City as appropriate.
- b. Satisfaction surveys specifically address experiences of cultural competency with staff and are administered quarterly.

4. Satisfaction with services:

Community Forward SF
Medical Respite and Sobering Center

Appendix A-1
Contract Term 7/1/25-6/30/26

- a. The Medical Respite support staff have a complaint procedure for clients. All clients are given Guest Input forms, which can be submitted anonymously or non-anonymously for follow-up. Guest Input forms and other complaints are referred to the CFSF Director of Support Services for review. Responses are collaborative with DPH on-site management. All complaints are investigated, and the resolution is documented. Staff also complete Incident Reports when needed; incident reports are reviewed collaboratively.
- b. The CFSF Director of Support Services or Deputy Director will attend monthly Community Meetings as another means of receiving client feedback. The SVP of Programs will review monthly minutes of Community Meetings to ensure problems are addressed.
- c. Client satisfaction surveys are distributed quarterly and are collected and reviewed by the DPH Director of Operations to ensure transparency

5. Timely completion and use of outcome data:

- a. Monthly Medical Respite meetings focus on timely problem-solving and follow-through and provide a vehicle for strengthening the collaborative relationship between CFSF and DPH. The director and Deputy Director of Support Services will attend the meetings, and the SVP of Programs will attend as needed. DPH staff to attend are the DPH Medical Respite Director/Nurse Manager, DPH Medical Respite Operations Director, and other relevant staff as deemed appropriate. Minutes with follow-ups noted will be taken.

9. Capital Improvement N/A

10. Required Language: N/A

Appendix B Calculation of Charges

1. Method of Payment

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 3.3.1, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds. "General Fund Appendices" shall mean all those appendices which include General Fund monies.

(1) Fee For Service (Monthly Reimbursement by Certified Units at Budgeted Unit Rates)

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice

(1) Fee For Service Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those SERVICES rendered during the referenced period of performance. If SERVICES are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY. CITY'S final reimbursement to the CONTRACTOR at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only

those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

D. Upon the effective date of this Agreement, and contingent upon prior approval by the CITY'S Department of Public Health of an invoice or claim submitted by Contractor, and of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR not to exceed twenty-five per cent (25%) of the General Fund and Mental Health Service Act (Prop 63) portions of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of October 1 through March 31 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the CITY all or part of the initial payment for that fiscal year. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

2. Program Budgets and Final Invoice

A. Programs are listed below:

Appendix B-1	Medical Respite & Sobering Center (MRSC)
Appendix B-2	Managed Alcohol Program (MAP)
Appendix B-3	SoMa Recover, Initiate, Support, Engage (RISE)

B. CONTRACTOR understands that, of this maximum dollar obligation listed in section 3.3.1 of this Agreement, \$2,499,993 is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement as specified in Section 3.7 Contract Amendments; Budgeting Revisions. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, notwithstanding that for each fiscal year, the amount to be used in Appendix B,

Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

Contract Term	Estimated Funding Allocation
July 1, 2024 to June 30, 2025	\$ 6,048,162
July 1, 2025 to June 30, 2026	\$ 5,762,796
July 1, 2026 to June 30, 2027	\$ 5,901,106
July 1, 2027 to June 30, 2028	\$ 5,983,575
July 1, 2028 to June 30, 2029	\$ 6,067,198
SubTotal July 1, 2024 to June 30, 2029	\$ 29,762,837
Contingency	\$2,499,993
TOTAL July 1, 2024 to June 30, 2029	\$ 32,262,830

CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

3. Services of Attorneys

No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

4. State or Federal Medi-Cal Revenues

A. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.

B. CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement."

5. Reports and Services

No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY

may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.

Appendix B - DPH 1: Department of Public Health Contract Budget Summary

Version Update FY25-26

DHCS Legal Entity Number 011078		Document Date 1/1/2026		Appendix B, Page 1			
Legal Entity Name/Contractor Name Community Forward SF				Fiscal Year 2025-2026			
Contract ID Number 1000032803				Funding Notification Date 09/08/25			
Appendix Number	B-1	B-2	B-3	B-#	B-#	B-#	
Provider Number	389124	N/A	N/A				
Program Name	Medical & Sobering Center (MRSC)	Managed Alcohol Program (MAP)	SoMa, Recover, Initiate, Support, Engage (RISE)				
Program Code RU OR EPIC Bill Area	N/A	N/A	N/A				
Funding Term	7/1/25-6/30/26	7/1/25 - 6/30/26	7/1/25 - 6/30/26				
FUNDING USES							TOTAL
Salaries	\$ 1,868,432	\$ 15,400	\$ 154,905				\$ 2,038,737
Employee Benefits	\$ 504,477	\$ 4,158	\$ 41,824				\$ 550,459
Subtotal Salaries & Employee Benefits	\$ 2,372,909	\$ 19,558	\$ 196,729	\$ -	\$ -	\$ -	\$ 2,589,196
Operating Expenses	\$ 2,300,767	\$ 84,231	\$ 38,302				\$ 2,423,300
Capital Expenses	\$ -						\$ -
Subtotal Direct Expenses	\$ 4,673,676	\$ 103,789	\$ 235,031	\$ -	\$ -	\$ -	\$ 5,012,496
Indirect Expenses	\$ 699,477	\$ 15,568	\$ 35,255				\$ 750,300
Indirect %	15.0%	15.0%	15.0%	0.0%	0.0%	0.0%	15.0%
TOTAL FUNDING USES	\$ 5,373,153	\$ 119,357	\$ 270,286	\$ -	\$ -	\$ -	\$ 5,762,796
					Employee Benefits Rate		27.0%
BHS MENTAL HEALTH FUNDING SOURCES							
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
BHS SUD FUNDING SOURCES							
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
TOTAL BHS SUD FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
OTHER DPH FUNDING SOURCES							
WPIC General Fund	\$ 5,362,653						\$ 5,362,653
Opioid Settlement Fund	\$ 10,500						\$ 10,500
County Prop C Homeless Services		\$ 119,357					\$ 119,357
Prop C - MH Residential - Transit			\$ 270,286				\$ 270,286
TOTAL OTHER DPH FUNDING SOURCES	\$ 5,373,153	\$ 119,357	\$ 270,286	\$ -	\$ -	\$ -	\$ 5,762,796
TOTAL DPH FUNDING SOURCES	\$ 5,373,153	\$ 119,357	\$ 270,286	\$ -	\$ -	\$ -	\$ 5,762,796
NON-DPH FUNDING SOURCES							
							\$ -
							\$ -
TOTAL NON-DPH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	\$ 5,373,153	\$ 119,357	\$ 270,286	\$ -	\$ -	\$ -	\$ 5,762,796
Prepared By	Nora Espinoza			Phone Number	650-731-2481		

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number 01078						Appendix Number	B-1
Provider Name Community Forward SF						Page Number	2
Provider Number 389124						Fiscal Year	2025-2026
Contract ID Number 1000032803						Funding Notification Date	09/08/25
Program Name		Medical Respite & Sobering Center (MRSC)					
Program Code (RU)	OR EPIC Bill Area	N/A	N/A				
Mode (MH) or Modality (SUD)		SecPrev-19	SecPrev-19				
Service Description		SA-Sec Prev Outreach	SA-Sec Prev Outreach				
Funding Term (mm/dd/yy-mm/dd/yy):		7/1/25 - 6/30/26	7/1/25 - 6/30/26				
FUNDING USES						TOTAL	
Salaries & Employee Benefits	\$	2,372,909	\$	-	\$	2,372,909	
Operating Expenses	\$	2,290,267	\$	10,500	\$	2,300,767	
Capital Expenses						-	
Subtotal Direct Expenses	\$	4,663,176	\$	10,500	\$	4,673,676	
Indirect Expenses	\$	699,477			\$	699,477	
Indirect %		15.0%		0.0%		0.0%	
TOTAL FUNDING USES	\$	5,362,653	\$	10,500	\$	5,373,153	
BHS MENTAL HEALTH FUNDING SOURCES							
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$	-	\$	-	\$	-	
BHS SUD FUNDING SOURCES							
						\$ -	
						\$ -	
						\$ -	
						\$ -	
TOTAL BHS SUD FUNDING SOURCES	\$	-	\$	-	\$	-	
OTHER DPH FUNDING SOURCES							
WPIC General Fund	\$	5,362,653				\$ 5,362,653	
Opioid Settlement Fund			\$	10,500		\$ 10,500	
TOTAL OTHER DPH FUNDING SOURCES	\$	5,362,653	\$	10,500	\$	5,373,153	
TOTAL DPH FUNDING SOURCES	\$	5,362,653	\$	10,500	\$	5,373,153	
NON-DPH FUNDING SOURCES							
						\$ -	
TOTAL NON-DPH FUNDING SOURCES	\$	-	\$	-	\$	-	
TOTAL FUNDING SOURCES (DPH AND NON-DPH)		5,362,653		10,500		5,373,153	
BHS UNITS OF SERVICE AND UNIT COST							
Number of Beds Purchased							
SUD Only - Number of Outpatient Group Counseling Sessions							
SUD Only - Licensed Capacity for Narcotic Treatment Programs							
Payment Method		Cost Reimbursement (CR)	Cost Reimbursement (CR)				
Unduplicated Clients (UDC)	N/A	N/A					
DPH Units of Service		56,083	0				
Unit Type	Hours		Hours	0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$	95.62	\$	-	\$	-	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$	95.62	\$	-	\$	-	
						Total UDC	

Funding Notification Date	09/08/25
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Appendix B - DPH 4: Operating Expenses Detail

Contract ID Number

1000032803

Appendix Number

B-1

Program Name

Medical Respite & Sobering Center

Page Number

4

Program Code

N/A

Fiscal Year

2025-2026

Funding Notification Date

09/08/25

Expense Categories & Line Items	TOTAL	10000-210705-10000-10001997-0002	11650-210822-22553-10039527-0004	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity
Funding Term	7/1/25 - 6/30/26	7/1/25 - 6/30/26	7/1/25 - 6/30/26	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)
Rent	\$ 968,980.00	\$ 968,980.00					
Utilities (telephone, electricity, water, gas)	\$ 160,400.00	\$ 160,400.00					
Building Repair/Maintenance	\$ 90,000.00	\$ 90,000.00					
Occupancy Total:	\$ 1,219,380.00	\$ 1,219,380.00	\$ -	\$ -	\$ -	\$ -	\$ -
Office Supplies	\$ 4,000.00	\$ 4,000.00					
Photocopying	\$ 4,000.00	\$ 4,000.00					
Program Supplies	\$ 10,000.00	\$ 10,000.00					
Computer Hardware/Software	\$ 6,000.00	\$ 6,000.00					
Materials & Supplies Total:	\$ 24,000.00	\$ 24,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 6,000.00	\$ 6,000.00					
Insurance	\$ 78,000.00	\$ 78,000.00					
Janitorial Services	\$ 196,160.00	\$ 196,160.00					
Housekeeping Supplies	\$ 75,000.00	\$ 75,000.00					
Kitchen Costs	\$ 5,000.00	\$ 5,000.00					
Equipment Lease & Maintenance	\$ 10,000.00	\$ 10,000.00					
General Operating Total:	\$ 370,160.00	\$ 370,160.00	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ -						
Out-of-Town Travel	\$ -						
Field Expenses	\$ -						
Staff Travel Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Winston Security Services - 7/1/25 - 6/30/26 = \$40 p/hour x 24 hours p/day x 365 days p/year = \$350,400							
	\$ 350,400.00	\$ 350,400.00					
	\$ -						
Consultant/Subcontractor Total:	\$ 350,400.00	\$ 350,400.00	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):	\$ -						
Parking (fleet)	\$ 10,000.00	\$ 10,000.00					
Transportation Costs (maintenance, fuel, etc.)	\$ 66,000.00	\$ 66,000.00					
Client Related Costs	\$ 23,752.00	\$ 23,752.00					
Food & Preparation (Clients)	\$ 226,575.00	\$ 226,575.00					
Contingency Management Pilot (Snacks + Clients incentive)	\$ 10,500.00	\$ -	\$ 10,500.00				
(2 sessions p/week x 2 p/week for 10 participants for 12 weeks program)	\$ -						
Other Total:	\$ 336,827.00	\$ 326,327.00	\$ 10,500.00	\$ -	\$ -	\$ -	\$ -
TOTAL OPERATING EXPENSE	\$ 2,300,767.00	\$ 2,290,267.00	\$ 10,500.00	\$ -	\$ -	\$ -	\$ -

Appendix B - DPH 5: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number 01078		Appendix Number B-2				
Provider Name Community Forward SF		Page Number 5				
Provider Number 389124		Fiscal Year 2025-2026				
Contract ID Number 1000032803		Funding Notification Date 09/08/25				
Program Name Managed Alcohol Program (MAP)						
Program Code (RU) OR EPIC Bill Area	N/A					
Mode (MH) or Modality (SUD)	SecPrev-19					
Service Description	SA-Sec Prev Outreach					
Funding Term (mm/dd/yy-mm/dd/yy):	7/1/25 - 6/30/26					
FUNDING USES						TOTAL
Salaries & Employee Benefits	\$ 19,558	\$ -	\$ -			\$ 19,558
Operating Expenses	\$ 84,231	\$ -	\$ -			\$ 84,231
Capital Expenses	\$ -					\$ -
Subtotal Direct Expenses	\$ 103,789	\$ -	\$ -	\$ -	\$ -	\$ 103,789
Indirect Expenses	\$ 15,568					\$ 15,568
Indirect %	15.0%	0.0%	0.0%	0.0%	0.0%	15.0%
TOTAL FUNDING USES	\$ 119,357	\$ -	\$ -	\$ -	\$ -	\$ 119,357
BHS MENTAL HEALTH FUNDING SOURCES						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
BHS SUD FUNDING SOURCES						
						\$ -
						\$ -
						\$ -
						\$ -
TOTAL BHS SUD FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
OTHER DPH FUNDING SOURCES						
County Prop C Homeless Services	\$ 119,357					\$ 119,357
						\$ -
TOTAL OTHER DPH FUNDING SOURCES	\$ 119,357	\$ -	\$ -	\$ -	\$ -	\$ 119,357
TOTAL DPH FUNDING SOURCES	\$ 119,357	\$ -	\$ -	\$ -	\$ -	\$ 119,357
NON-DPH FUNDING SOURCES						
						\$ -
TOTAL NON-DPH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	119,357	-	-	-	-	119,357
BHS UNITS OF SERVICE AND UNIT COST						
Number of Beds Purchased						
SUD Only - Number of Outpatient Group Counseling Sessions						
SUD Only - Licensed Capacity for Narcotic Treatment Programs						
Payment Method	Cost Reimbursement (CR)					
Unduplicated Clients (UDC)	N/A					
DPH Units of Service	258	0				
Unit Type	Hours		0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 463.34	\$ -	\$ -	\$ -	\$ -	Total UDC
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 463.34	\$ -	\$ -	\$ -	\$ -	N/A

Appendix B - DPH 7: Operating Expenses Detail

Contract ID Number1000032803

Appendix NumberB-1

Program NameManaged Alcohol Program (MAP)

Page Number7

Program CodeN/A

Fiscal Year2025-2026

Funding Notification Date09/08/25

Expense Categories & Line Items	TOTAL	10582-210705-21531-10037398-0008	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity
Funding Term	7/1/25 - 6/30/26	7/1/25 - 6/30/26	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)
Rent	\$ -						
Utilities (telephone, electricity, water, gas)	\$ -						
Building Repair/Maintenance	\$ -						
Occupancy Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office Supplies	\$ -						
Photocopying	\$ -						
Program Supplies	\$ -						
Computer Hardware/Software	\$ -						
Materials & Supplies Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ -						
Insurance	\$ -						
Janitorial Services	\$ 30,000.00	\$ 30,000.00					
Housekeeping Supplies	\$ -						
Kitchen Costs	\$ -						
Equipment Lease & Maintenance	\$ -						
General Operating Total:	\$ 30,000.00	\$ 30,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ -						
Out-of-Town Travel	\$ -						
Field Expenses	\$ -						
Staff Travel Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate, Amounts, and Practitioner Type if Billable Provider)	\$ -						
	\$ -						
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):	\$ -						
Client Related Costs	\$ 19,231.00	\$ 19,231.00					
Food & Food Preparation (Clients)	\$ 35,000.00	\$ 35,000.00					
	\$ -						
	\$ -						
	\$ -	\$ -					
	\$ -						
Other Total:	\$ 54,231.00	\$ 54,231.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL OPERATING EXPENSE	\$ 84,231.00	\$ 84,231.00	\$ -	\$ -	\$ -	\$ -	\$ -

Note: Expense Categories (i.e., Occupancy, Materials & Supplies, etc.) may NOT be changed. However, default Expense Line Items may be edited or deleted as necessary to reflect the contractor's ledger accounts.

Appendix B - DPH 8: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number 01078		Appendix Number B-3				
Provider Name Community Forward SF		Page Number 8				
Provider Number 389124		Fiscal Year 2025-2026				
Contract ID Number 1000032803		Funding Notification Date 09/08/25				
Program Name		SoMa, Recover, Initiate, Support, Engage (RISE)				
Program Code (RU) OR EPIC Bill Area		N/A				
Mode (MH) or Modality (SUD)		SecPrev-19				
Service Description		SA-Sec Prev Outreach				
Funding Term (mm/dd/yy-mm/dd/yy):		7/1/25 - 6/30/26				
FUNDING USES						TOTAL
Salaries & Employee Benefits	\$ 196,729	\$ -	\$ -			\$ 196,729
Operating Expenses	\$ 38,302	\$ -	\$ -			\$ 38,302
Capital Expenses	\$ -					\$ -
Subtotal Direct Expenses	\$ 235,031	\$ -	\$ -	\$ -	\$ -	\$ 235,031
Indirect Expenses	\$ 35,255					\$ 35,255
Indirect %	15.0%	0.0%	0.0%	0.0%	0.0%	15.0%
TOTAL FUNDING USES	\$ 270,286	\$ -	\$ -	\$ -	\$ -	\$ 270,286
BHS MENTAL HEALTH FUNDING SOURCES						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
BHS SUD FUNDING SOURCES						
						\$ -
						\$ -
						\$ -
						\$ -
TOTAL BHS SUD FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
OTHER DPH FUNDING SOURCES						
Prop C - MH Residential - Transit	\$ 270,286					\$ 270,286
						\$ -
TOTAL OTHER DPH FUNDING SOURCES	\$ 270,286	\$ -	\$ -	\$ -	\$ -	\$ 270,286
TOTAL DPH FUNDING SOURCES	\$ 270,286	\$ -	\$ -	\$ -	\$ -	\$ 270,286
NON-DPH FUNDING SOURCES						
						\$ -
TOTAL NON-DPH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	270,286	-	-	-	-	270,286
BHS UNITS OF SERVICE AND UNIT COST						
Number of Beds Purchased						
SUD Only - Number of Outpatient Group Counseling Sessions						
SUD Only - Licensed Capacity for Narcotic Treatment Programs						
Payment Method	Cost Reimbursement (CR)					
Unduplicated Clients (UDC)	N/A					
DPH Units of Service	4,913	0				
Unit Type	Hours	0	0	0	0	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 55.02	\$ -	\$ -	\$ -	\$ -	Total UDC
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 55.02	\$ -	\$ -	\$ -	\$ -	N/A

Funding Notification Date	09/08/25
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Position Title (List all staffing including intern/trainee staff who are not part of budget but contributing to units of service)	Practitioner Type (Select Non Billing provider if the position is not expected to bill this period)	TOTAL		10582-240645-21531-10037681-0001		Dept-Auth-Proj-Activity		Dept-Auth-Proj-Activity		Dept-Auth-Proj-Activity		Dept-Auth-Proj-Activity		Dept-Auth-Proj-Activity	
Funding Term		7/1/25 - 6/30/26		7/1/25 - 6/30/26		(mm/dd/yy-mm/dd/yy):		(mm/dd/yy-mm/dd/yy):		(mm/dd/yy-mm/dd/yy):		(mm/dd/yy-mm/dd/yy):		(mm/dd/yy-mm/dd/yy):	
Position Title	Practitioner Type (Select from Drop Down)	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
Vice President of Client Services	Non Billing Staffing	0.03	\$ 3,150.00	0.03	\$ 3,150.00										
Director Operations	Non Billing Staffing	0.02	\$ 2,560.00	0.02	\$ 2,560.00										
Operations Coordinator	Non Billing Staffing	0.02	\$ 1,405.00	0.02	\$ 1,405.00										
Transportation Supervisor	Non Billing Staffing	0.60	\$ 43,260.00	0.60	\$ 43,260.00										
Driver	Non Billing Staffing	2.00	\$ 104,530.00	2.00	\$ 104,530.00										
		0.00	\$ -												
		0.00	\$ -												
		0.00	\$ -												
		0.00	\$ -												
		0.00	\$ -												
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		0.00	\$ -												
		0.00	\$ -												
		0.00	\$ -												
		0.00	\$ -												
Totals:		2.67	\$ 154,905.00	2.67	\$ 154,905.00	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -
Employee Benefits:		27.00%	\$ 41,824.00	27.00%	\$ 41,824.35	0.00%		0.00%		0.00%		0.00%		0.00%	
TOTAL SALARIES & BENEFITS			\$ 196,729.00	\$ 196,729.00		\$ -		\$ -		\$ -		\$ -		\$ -	

Appendix B - DPH 10: Operating Expenses Detail

Contract ID Number1000032803Appendix NumberB-3

Program NameSoMa, Recover, Initiate, Support, EPage Number10

Program CodeN/AFiscal Year2025-2026

Funding Notification Date09/08/25

Expense Categories & Line Items	TOTAL	10582-240645-21531-10037681-0001	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity	Dept-Auth-Proj-Activity
Funding Term	7/1/25 - 6/30/26	7/1/25 - 6/30/26	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy):
Rent	\$ -						
Utilities (telephone, electricity, water, gas)	\$ 1,302.00	\$ 1,302.00					
Building Repair/Maintenance	\$ -						
Occupancy Total:	\$ 1,302.00	\$ 1,302.00	\$ -	\$ -	\$ -	\$ -	\$ -
Office Supplies	\$ 1,000.00	\$ 1,000.00					
Photocopying	\$ -						
Program Supplies	\$ -						
Computer Hardware/Software	\$ -						
Materials & Supplies Total:	\$ 1,000.00	\$ 1,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
Training/Staff Development	\$ 2,500.00	\$ 2,500.00					
Insurance	\$ 2,500.00	\$ 2,500.00					
Janitorial Services	\$ -						
Housekeeping Supplies	\$ -						
Kitchen Costs	\$ -						
Equipment Lease & Maintenance	\$ -						
General Operating Total:	\$ 5,000.00	\$ 5,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
Local Travel	\$ -						
Out-of-Town Travel	\$ -						
Field Expenses	\$ -						
Staff Travel Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate, Amounts, and Practitioner Type if Billable Provider)	\$ -	\$ -					
	\$ -						
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):	\$ -						
Transportation (maintenance, fuel, etc.)	\$ 31,000.00	\$ 31,000.00					
	\$ -						
	\$ -						
	\$ -						
	\$ -						
	\$ -						
Other Total:	\$ 31,000.00	\$ 31,000.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL OPERATING EXPENSE	\$ 38,302.00	\$ 38,302.00	\$ -	\$ -	\$ -	\$ -	\$ -

Note: Expense Categories (i.e., Occupancy, Materials & Supplies, etc.) may NOT be changed. However, default Expense Line Items may be edited or deleted as necessary to reflect the contractor's ledger accounts.

Appendix B - DPH 11: Capital Expenses Detail

Contract ID Number

Program Name

Program Code

Appendix Number

Page Number

Fiscal Year2025-2026

Funding Notification Date:09/08/25

1. Equipment

Item Description	Quantity	Serial #/VIN #	Unit Cost	Total Cost
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Total Equipment Cost				\$ -

2. Remodeling

Description	Total Cost
Total Remodeling Cost	\$ -
Total Capital Expenditure	\$ -

Appendix B - DPH 12: Contract-Wide Indirect Detail

Contractor Name Community Forward SF

Page Number 12

Contract ID Number 1000032803

Fiscal Year 2025-2026

Funding Notification Date 9/8/25

1. SALARIES & EMPLOYEE BENEFITS

Position Title	FTE	Amount
Co-CEO, SR	0.29	\$ 69,600.00
Co-CEO, JU	0.29	\$ 69,600.00
Chief of Staff	0.29	\$ 55,100.00
Vice President of Finance	0.29	\$ 55,100.00
Vice President of People	0.29	\$ 40,600.00
Vice President of Operations	0.29	\$ 40,600.00
Vice President of Advocacy	0.29	\$ 39,150.00
HR Director	0.29	\$ 31,900.00
HR Generalist	0.29	\$ 29,000.00
Finance Manager	0.29	\$ 33,350.00
IT Operations Manager	0.29	\$ 29,000.00
Executive Assistant	0.29	\$ 18,500.00

Subtotal: 3.48 \$ 511,500.00

Employee Benefits: 27.0% \$ 138,105.00

Total Salaries and Employee Benefits: \$ 649,605.00**2. OPERATING COSTS**

Expenses (Use expense account name in the ledger.)	Amount
Audti	\$ 13,050.00
Rent	\$ 31,221.00
Computer & Software Supplies	\$ 10,400.00
Telephone	\$ 13,050.00
Staff Training/Conference	\$ 15,660.00
Recruiting Costs	\$ 2,900.00
Subscriptions	\$ 3,480.00
Equipment Rental	\$ 2,320.00
Benefits management fees	\$ 8,614.00
Total Operating Costs	\$ 100,695.00

Total Indirect Costs \$ **750,300.00**

		UOS&UDC Allocations											
Contractor / Provider		Provider Name				Community Forward SF				Contract ID			
Total Funding Amount / Fiscal Year		Funding Amount				\$ 5,762,796				Fiscal Year 2025-2026			
Address / Phone													
Contact Person													
Program Name													
Appendix Number		B-1				B-2				B-3			
Program/ Appendix Funding Amount		\$5,373,153				\$119,357				\$270,286			
Funding Term		2025-2026				2025-2026				2025-2026			
		UOS		UDC		UOS		UDC		UOS		UDC	
Name of Mode (MH) or Modality (SUD)		SecPrev-19				SecPrev-19				SecPrev-19			
Write UOS formula calculation		FTE x 2080 x 46 weeks / 52		56,083 N/A		FTE x 2080 x 46 weeks / 52		258 N/A		FTE x 2080 x 46 weeks / 52		4,913 N/A	
Name of Mode (MH) or Modality (SUD)		SecPrev-19				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
Write UOS formula calculation		Write UOS formula calculation		0 N/A		Write UOS formula calculation				Write UOS formula calculation			
Name of Mode (MH) or Modality (SUD)		0				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
Write UOS formula calculation		Write UOS formula calculation		0		Write UOS formula calculation				Write UOS formula calculation			
Name of Mode (MH) or Modality (SUD)		0				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
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Name of Mode (MH) or Modality (SUD)		0				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
Write UOS formula calculation		Write UOS formula calculation		0		Write UOS formula calculation				Write UOS formula calculation			
Program Name													
Appendix Number		A-# / B-#				A-# / B-#				A-# / B-#			
Program/ Appendix Funding Amount		Program/ Appendix Funding Amount				Program/ Appendix Funding Amount				Program/ Appendix Funding Amount			
Funding Term		Funding Term				Funding Term				Funding Term			
		UOS		UDC		UOS		UDC		UOS		UDC	
Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
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Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
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Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)			
Write UOS formula calculation		Write UOS formula calculation				Write UOS formula calculation				Write UOS formula calculation			
Program Name													
Appendix Number		A-# / B-#				A-# / B-#							
Program/ Appendix Funding Amount		Program/ Appendix Funding Amount				Program/ Appendix Funding Amount							
Funding Term		Appendix Term				Appendix Term							
		UOS		UDC		UOS		UDC					
Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)							
Write UOS formula calculation		Write UOS formula calculation				Write UOS formula calculation							
Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)							
Write UOS formula calculation		Write UOS formula calculation				Write UOS formula calculation							
Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)							
Write UOS formula calculation		Write UOS formula calculation				Write UOS formula calculation							
Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)							
Write UOS formula calculation		Write UOS formula calculation				Write UOS formula calculation							
Name of Mode (MH) or Modality (SUD)		Name of Mode (MH) or Modality (SUD)				Name of Mode (MH) or Modality (SUD)							
Write UOS formula calculation		Write UOS formula calculation				Write UOS formula calculation							
Target Population													
Description of Services													

City and County of San Francisco
Business Associate Agreement

This Business Associate Agreement (“BAA”) supplements and is made a part of the Agreement by and between the City and County of San Francisco, a Hybrid Entity designated under HIPAA, referred herein as the Covered Entity (“CE”), and **Community Forward SF** (“Contractor”), the Business Associate (“BA”), dated **January 1, 2026** (the “Agreement”).

RECITALS

A. CE, by and through the Department of Public Health (DPH), wishes to disclose, allow access to, or allow collection of certain information to BA pursuant to the terms of the Agreement, some of which may constitute Protected Health Information (“PHI”) (defined below).

B. For purposes of the Agreement and this BAA, CE requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this BAA as a BA of CE.

C. CE and BA are committed to complying with all federal and state laws governing the confidentiality, privacy, and security of health information disclosed to BA pursuant to the Agreement, including, but not limited to the Standards for PHI under the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”), and regulations promulgated there under by the U.S. Department of Health and Human Services (the “HIPAA Regulations”) and other applicable laws with respect to health information, mental health information, and substance use treatment information, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the “California Regulations”), and 42 CFR Part 2.

D. CE is required to enter into an agreement containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations (“CFR”) and contained in this BAA.

E. BA enters into agreements with CE that require the CE to disclose to BA, or allow BA to create, collect, use, access, maintain, or transmit for or on CE’s behalf, certain identifiable health information. The parties desire to enter into this BAA to permit BA to disclose, create, collect, use, access, maintain, or transmit such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding regulations.

1. Definitions. For purposes of this BAA, the Parties agree that each term below and any capitalized term used in this BAA, but not otherwise defined, has the meaning given to that term in the HIPAA Rules (as defined below), and as each may be amended from time to time.

- a. **Breach** means the acquisition, access, use, or disclosure of PHI in a manner not permitted under the Privacy Rule which compromises the security or privacy of the PHI, as defined in 45 CFR §164.402.
- b. **Breach Notification Rule** means the portion of HIPAA set forth in Subpart D of 45 CFR Part 164.
- c. **Business Associate** means a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, but other than in the capacity of a member of the workforce of such covered entity or arrangement, as defined in 45 CFR §160.103.
- d. **Covered Entity** has the meaning given to such term under the Privacy Rule and the Security Rule, including 45 CFR §160.103.
- e. **Data Aggregation** means the combining of PHI by the BA with the PHI received by the BA in its capacity as a BA of one or more other covered entity, to permit data analyses that relate

City and County of San Francisco
Business Associate Agreement

to the Health Care Operations of the respective covered entities, and the meaning given to such term in 45 CFR §164.501.

- f. **Designated Record Set** has the meaning given to such term under the Privacy Rule, including 45 C.F.R. Section 164.501.
- g. **Electronic PHI or ePHI** means any PHI maintained or transmitted by electronic media as defined in 45 CFR §160.103.
- h. **Health Care** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.103.
- i. **Health Care Component** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.103.
- j. **Health Care Operations** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.501.
- k. **HIPAA Rules** means the Privacy, Security, Breach Notification, and Enforcement Rules set forth in 45 CFR Part 160 and Part 164.
- l. **Hybrid Entity** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.103.
- m. **Privacy Rule** means that portion of HIPAA set forth in 45 CFR Part 160 and Part 164, Subparts A and E.
- n. **Protected Health Information or PHI** has the meaning given to such term under the Privacy Rule, including 45 CFR §§160.103 and 164.501, limited to the information created, maintained, stored, transmitted, or received by BA from or on behalf of CE, or another BA of CE.
- o. **Security Incident** means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and as defined in the Security Rule, including 45 CFR §164.304.
- p. **Security Rule** means the Security Standards for the Protection of Electronic Health Information provided in 45 CFR Part 160 & Part 164, Subparts A and C.
- q. **Unsecured PHI** has the meaning given to such term under 42 U.S.C. §17932(h) and 45 CFR §164.402.

2. Obligations of Business Associate.

a. User Training. The BA shall provide, and shall ensure that BA subcontractors, provide, training on PHI privacy and security, including HIPAA and HITECH and its regulations, to each employee or agent that will access, use or disclose Protected Information, upon hire and/or prior to accessing, using or disclosing Protected Information for the first time, and at least annually thereafter during the term of the Agreement. BA shall maintain, and shall ensure that BA subcontractors maintain, records indicating the name of each employee or agent and date on which the PHI privacy and security trainings were completed. BA shall retain, and ensure that BA subcontractors retain, such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within fifteen (15) calendar days of a written request by CE.

b. Permitted Uses and Disclosures. BA may use, access, and/or disclose PHI only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. Further, BA may use, access, and/or disclose PHI as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE (see 45 CFR §§164.502, 164.504(e)(2), and 164.504(e)(4)(i)). If BA discloses PHI to a third party, if the disclosure is required by law, or otherwise BA must obtain, prior to making such disclosure, (i) reasonable written assurances from such third party that such PHI will be held confidential as provided under this BAA and used or further disclosed only as required by law or for the purpose for which it was disclosed to this third party and (ii) an agreement from this third party to notify BA

City and County of San Francisco
Business Associate Agreement

immediately of any breaches of the confidentiality of the PHI, to the extent it has knowledge of the breach.

c. Prohibited Uses and Disclosures. BA will not use, access, or disclose PHI other than as permitted or required by the Agreement, this BAA, and under the Privacy Rule, or as required by law. BA shall not directly or indirectly receive remuneration in exchange for PHI, except with the prior written consent of CE and as permitted under 42 U.S.C. §17935(d)(2), and, 45 CFR §164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided under the Agreement.

d. Appropriate Safeguards. BA will use appropriate safeguards to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and prevent any use or disclosure of PHI other than as permitted by the Agreement or this BAA, including, but not limited to, administrative, physical and technical safeguards under the Security Rule, including, but not limited to, 45 CFR §§164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA will comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 CFR §164.316, and 42 U.S.C. §17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. §17934(c).

e. Agreements with Subcontractors and Agents. BA will ensure that any of its agents and subcontractors that have access to, or which create, receive, maintain or transmit PHI for or on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.c. above (see 45 CFR §§164.504(e)(2) through (e)(5), and 164.308(b)). BA must mitigate the effects of any such violation.

f. Accounting of Disclosures. BA will document any disclosures of PHI made by it to account for such disclosures as required by 45 CFR §164.528(a). BA will also make available information related to such disclosures as would be required for CE to respond to a request for an accounting of disclosures in accordance with 45 CFR §164.528. At a minimum, BA will furnish CE the following with respect to any covered disclosures by BA: (i) the date of disclosure of PHI; (ii) the name of the entity or person who received PHI, and, if known, the address of such entity or person; (iii) a brief description of the PHI disclosed; and (iv) a brief statement of the purpose of the disclosure which includes the basis for such disclosure.

i. BA will furnish to CE information collected in accordance with this Section 2(e), within ten business days after written request by CE, to permit CE to make an accounting of disclosures as required by 45 CFR §164.528, or in the event that CE elects to provide an individual with a list of its business associates, BA will provide an accounting of its disclosures of PHI upon request of the individual, if and to the extent that such accounting is required under the HITECH Act or under HHS regulations adopted in connection with the HITECH Act.

ii. In the event an individual delivers the initial request for an accounting directly to BA, BA will forward such request to Covered Entity within ten (10) business days of receipt.

g. Access to PHI by Individuals. Upon request, BA agrees to provide CE copies of the PHI maintained by BA in a Designated Record Set in the time and manner designated by CE to enable CE to respond to an individual's request for access to PHI under 45 CFR §164.524. In the event any individual or personal representative requests access to the individual's PHI directly from BA, BA will forward that request to CE within ten (10) business days. Any disclosure of, or decision not to disclose, the PHI requested by an individual or a personal representative and compliance with the requirements applicable to an individual's right to obtain access to PHI shall be the sole responsibility of CE.

h. Amendment of PHI. Upon request and instruction from CE, BA will amend PHI or a record about an individual in a Designated Record Set that is maintained by, or otherwise within the

City and County of San Francisco
Business Associate Agreement

possession of, BA as directed by CE in accordance with procedures established by 45 CFR §164.526. Any request by CE to amend such information will be completed by BA within fifteen (15) business days of CE's request. If an individual request an amendment of PHI directly from BA or its agents or subcontractors, BA must forward any such request to CE within ten (10) business days. Any amendment of, or decision not to amend, the PHI or record as requested by an individual and compliance with the requirements applicable to an individual's right to request an amendment of PHI will be the sole responsibility of CE.

i. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining CE's or BA's compliance with HIPAA and this BAA.

j. Minimum Necessary. BA, its agents and subcontractors shall request, use, access, and disclose only the minimum amount of PHI necessary to accomplish the intended purpose of such use, access, or disclosure, or request. (see 42 U.S.C. Section 17935(b) and 45 CFR §164.514(d)).

k. Data Ownership. BA acknowledges that BA has no ownership rights with respect to the Protected Information provided by CE to BA or created, received, maintained or transmitted by BA or BA's agents or subcontractors under the Agreement, including any and all forms thereof.

l. Notification of Suspected or Actual Breach. BA shall notify CE within five (5) calendar days of any breach of PHI; any use or disclosure of PHI not permitted by the Agreement or this BAA; any Security Incident (except as otherwise provided below) related to PHI, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured PHI has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take prompt corrective action to cure any deficiencies and any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

i. Unsuccessful Security Incident Attempts: The Parties acknowledge and agree that this Section constitutes notification by BA to CE of the ongoing existence and occurrence of attempted Security Incidents that do not result in and/or that BA does not anticipate will result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system (including, for example, pings on BA's firewall, port scans, attempts to log onto a system or enter a database with an invalid password or username, denial-of-service attacks that do not result in the system being taken off-line, or malware such as worms or viruses). Unless requested by CE, no further notification of unsuccessful Security Incident attempts is required.

ii. Successful Security Incident Attempts: BA must notify the City within five (5) calendar days of any Security Incident attempt that results in, or that BA anticipates may result in, unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system (such as continuous and/or persistent Security Incident attempts or a suspicious pattern of Security Incident attempts).

iii. Written Request for Security Incident Report: Upon CE's request, BA must provide CE a written Security Incident Report that: (a) identifies the categories of Security Incident

City and County of San Francisco
Business Associate Agreement

attempts; (b) indicates whether BA believes its current defensive security measures are adequate to address Security Incidents, given the scope and nature of such attempts; and (c) if the security measures are not adequate, the measures BA will implement to address security inadequacies.

m. Breach Pattern or Practice by Business Associate's Subcontractors and Agents.

Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Agreement or this BAA, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

n. Audits, Inspection and Enforcement. Within ten (10) calendar days of a request by CE, BA will provide CE with a copy of its most recent independent HIPAA compliance report (AT-C 315), HITRUST certification or other similar mutually agreed upon independent standards-based third-party audit report. CE agrees not to re-disclose BA's audit report. If BA does not have such a report, BA will allow CE or its agents or subcontractors to conduct a reasonable inspection of the facilities, systems, books, records, agreements, policies and procedures relating to the use or disclosure of Protected Information pursuant to this BAA for the purpose of determining whether BA has complied with this BAA or maintains adequate security safeguards. BA shall notify CE within five (5) business days of learning that BA has become the subject of an audit, compliance review, or complaint investigation by the Office for Civil Rights or other state or federal data privacy or security-enforcement government entity.

3. Termination.

a. Material Breach. A breach by BA, or BA's agent or subcontractor, of any obligations under this BAA, as determined by CE, shall constitute a material breach of the Agreement and this BAA and shall provide grounds for immediate termination of the Agreement and this BAA, any provision in the Agreement to the contrary notwithstanding. (45 CFR §164.504(e)(2)(iii).)

b. Judicial or Administrative Proceedings. CE may terminate the Agreement and this BAA, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which BA has been joined.

c. Effect of Termination. Upon termination of the Agreement and this BAA for any reason, BA shall, at the option of CE, return or destroy all PHI that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such PHI. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this BAA to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible (45 C.F.R. §164.504(e)(2)(ii)(J)). If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI. Per the Secretary's guidance, the City will accept destruction of electronic PHI in accordance with the standards enumerated in the NIST SP 800-88, Guidelines for Media Sanitization. The City will accept destruction of PHI contained in paper records by shredding, burning, pulping, or pulverizing the records so that the PHI is rendered unreadable, indecipherable, and otherwise cannot be reconstructed.

City and County of San Francisco
Business Associate Agreement

d. Civil and Criminal Penalties. BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure of PHI in accordance with the HIPAA Regulations and the HITECH Act including, 42 U.S.C. §17934(c).

e. Disclaimer. CE makes no warranty or representation that compliance by BA with this BAA, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Agreement or this BAA may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the updated standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Agreement upon thirty (30) calendar days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

5. Litigation or Administrative Proceedings.

BA shall notify CE within forty-eight (48) hours of any litigation or administrative proceedings commenced against BA or its agents or subcontractors. In addition, BA shall make itself, and any subcontractors, employees and agents assisting BA in the performance of its obligations under the Agreement or this BAA, available to CE, at no cost to CE, to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against CE, its directors, officers or employees based upon a claimed violation of HIPAA, the HITECH Act, the HIPAA regulations, or other state or federal laws relating to security and privacy, except where BA or its subcontractor, employee or agent is a named adverse party.

6. No Third-Party Beneficiaries.

Nothing express or implied in the Agreement or this BAA is intended to confer, nor shall anything herein confer, upon any person other than CE, BA and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.

7. Interpretation.

The provisions of this BAA shall prevail over any provisions in the Agreement that may conflict or appear inconsistent with any provision in this BAA. This BAA and the Agreement shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HITECH Act, the HIPAA regulations, and other state and federal laws related to security and privacy of health information. The parties agree that any ambiguity in the terms of this BAA shall be resolved in favor of a meaning that complies and is consistent with HIPAA, the HITECH Act, the HIPAA regulations, and other state and federal laws related to security and privacy of health information.



Contract Amendment:

Community Forward SF - Medical Respite and Sobering Center

BOS Budget & Finance Committee

Dara Papo, Director, Whole Person Integrated Care, SFDPH

December 10, 2025

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Overview of Item



Community Forward SF - Medical Respite and Sobering Center

- **Contract Amendment Amount:** \$22,263,326
 - **Not-to-Exceed Amount:** \$32,262,830
- **Timeline:** July 1, 2024 – June 30, 2029
- **Contractor:** Community Forward SF

Overview of Item



Contract details: Community Forward partners with DPH to provide non-clinical services for the programs below.

- **Medical Respite:** Medical Respite serves medically frail clients who need assistance with chronic health management, medication adherence, and social services. Medical Respite has 75 beds.
- **Sobering Center:** The Sobering Center provides a safe and stable place for people intoxicated on alcohol or opioids to safely sober and receive care coordination outside of the emergency departments, jails and off the streets. The Sobering Center has 14 beds.



Conclusion

**DPH respectfully requests approval of this item.
Thank you!**

**City and County of San Francisco
Office of Contract Administration
Purchasing Division
City Hall, Room 430
1 Dr. Carlton B. Goodlett Place
San Francisco, California 94102-4685**

Agreement between the City and County of San Francisco and

**Community Forward SF
1000032803**

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This Agreement is made this 1st day of July 2024, in the City and County of San Francisco (“City”), State of California, by and between Community Forward SF (“Contractor”) and City.

Recitals

WHEREAS, the Department of Public Health (“Department”) wishes to provide temporary housing and medically oriented, substance abuse supportive services for homeless clients recovering from hospitalization and/or emergency room treatment, whose needs cannot be addressed in shelters; and

WHEREAS, Contractor represents and warrants that it is qualified to perform the Services required by City as set forth under this Agreement; and

WHEREAS, Department is authorized under Administrative Code Section 21A.4 to procure from Service Providers (as that term is defined in Section 21A.4(a)(6)) directly, without the approval of the Purchaser and without adhering to the requirements of Section 21.1 or Chapter 14B of the Administrative Code, or any other applicable competitive procurement requirement; and

WHEREAS, approval for the Agreement was obtained on September 06, 2024 from the Civil Service Commission under PSC number 48652-16/17 in the amount of \$367,880,000 for the period commencing July 1, 2017 and ending June 30, 2029; and

Now, THEREFORE, the parties agree as follows:

Article 1 Definitions

The following definitions apply to this Agreement:

1.1 **“Agreement”** means this contract document, including all attached appendices, and all applicable City Ordinances and Mandatory City Requirements specifically incorporated into this Agreement by reference as provided herein.

1.2 **“City”** means the City and County of San Francisco, a municipal corporation, acting by and through both its Director of the Office of Contract Administration or the Director’s designated agent, hereinafter referred to as “Purchasing” and **Department of Public Health**.

1.3 **“City Data”** means that data as described in Article 13 of this Agreement which includes, without limitation, all data collected, used, maintained, processed, stored, or generated by or on behalf of City in connection with this Agreement. City Data includes, without limitation, Confidential Information.

1.4 **“CMD”** means the Contract Monitoring Division of the City.

1.5 **“Confidential Information”** means confidential City information including, but not limited to, personal identifiable information (“PII”), protected health information (“PHI”), or individual financial information (collectively, “Proprietary or Confidential Information”) that is subject to local, state or federal laws restricting the use and disclosure of such information, including, but not limited to, Article 1, Section 1 of the California Constitution; the California Information Practices Act (Civil Code § 1798 et seq.); the California Confidentiality of Medical Information Act (Civil Code § 56 et seq.); the federal Gramm-Leach-Bliley Act (15 U.S.C. §§ 6801(b) and 6805(b)(2)); the privacy and information security aspects of the Administrative Simplification provisions of the federal Health Insurance Portability and Accountability Act (45

CFR Part 160 and Subparts A, C, and E of part 164); and San Francisco Administrative Code Chapter 12M (“Chapter 12M”). Confidential Information includes, without limitation, City Data.

1.6 **“Contractor”** means Community Forward SF, 1171 Mission Street. San Francisco, CA 94103.

1.7 **“Deliverables”** means Contractor’s or its subcontractors’ work product, including any partially-completed work product and related materials, resulting from the Services provided by Contractor to City during the course of Contractor’s performance of the Agreement, including without limitation, the work product described in the “Scope of Services” attached as Appendix A.

1.8 **“Mandatory City Requirements”** means those City laws set forth in the San Francisco Municipal Code, including the duly authorized rules, regulations, and guidelines implementing such laws that impose specific duties and obligations upon Contractor.

1.9 **“Party” and “Parties”** means City and Contractor either individually or collectively.

1.10 **“Services”** means the work performed by Contractor under this Agreement as specifically described in the “Scope of Services” attached as Appendix A, including all services, labor, supervision, materials, equipment, actions and other requirements to be performed and furnished by Contractor under this Agreement.

Article 2 Term of the Agreement

2.1 **Term.** The term of this Agreement shall commence on July 1, 2024 and expire on December 31, 2025, unless earlier terminated as otherwise provided herein.

Article 3 Financial Matters

3.1 Certification of Funds; Budget and Fiscal Provisions

3.1.1 **Termination in the Event of Non-Appropriation.** This Agreement is subject to the budget and fiscal provisions of Section 3.105 of the City’s Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City’s obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor’s assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.

3.1.2 **Maximum Costs.** City’s payment obligation to Contractor cannot at any time exceed the amount certified by City’s Controller for the purpose and period stated in such certification. Absent an authorized emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is City required to honor, any offered or

promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, “Modification of this Agreement.”

3.2 Authorization to Commence Work. Contractor shall not commence any work under this Agreement until City has issued formal written authorization to proceed, such as a purchase order, task order or notice to proceed. Such authorization may be for a partial or full scope of work.

3.3 Compensation.

3.3.1 Calculation of Charges and Contract Not to Exceed Amount. The amount of this Agreement shall not exceed **Nine Million Nine Hundred Ninety-Nine Thousand Five Hundred Four Dollars (\$9,999,504)**, the breakdown of which appears in Appendix B, “Calculation of Charges.” City shall not be liable for interest or late charges for any late payments. City will not honor minimum service order charges for any Services covered by this Agreement.

3.3.2 Payment Limited to Satisfactory Services. Contractor is not entitled to any payments until City approves the Services delivered. Payments to Contractor by City shall not excuse Contractor from its obligation to replace the unsatisfactory Services even if the unsatisfactory character was apparent or could have been detected at the time such payment was made. Non-conforming Services may be rejected by City and in such case must be replaced by Contractor without delay at no cost to City.

3.3.3 Withhold Payments. If Contractor fails to provide the Services in accordance with Contractor’s obligations under this Agreement, City may withhold any and all payments due to Contractor until such failure to perform is cured, and Contractor shall not stop work as a result of City’s withholding of payments as provided herein.

3.3.4 Invoice Format. Invoices submitted by Contractor under this Agreement must be in a form acceptable to the Controller and City and include a unique invoice number and a specific invoice date. Payment shall be made by City as specified in Section 3.3.8, or in such alternate manner as the Parties have mutually agreed upon in writing. All invoices must show the PeopleSoft Purchase Order ID Number, PeopleSoft Supplier Name and ID, Item numbers (if applicable), complete description of Services performed, sales/use tax (if applicable), contract payment terms and contract price. Invoices that do not include all required information or contain inaccurate information will not be processed for payment.

3.3.5 Reserved. (LBE Payment and Utilization Tracking System).

3.3.6 Getting paid by City for Services.

(a) City utilizes a commercial product through its banking partner to pay City contractors electronically. Contractors shall sign up to receive electronic payments to be paid under this Agreement. To sign up for electronic payments, visit [SF City Partner at sfgov.org](https://sfcitypartner.sfgov.org)

(b) At the option of City, Contractor may be required to submit invoices directly in the City’s financial and procurement system. Refer to <https://sfcitypartner.sfgov.org/pages/training.aspx> for more information.

3.3.7 Grant Funded Contracts.

(a) **Reserved. (Grant Terms)**

(b) **Disallowance.** If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed due to Contractor's non-compliance with the Grant Terms, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other agreement between Contractor and City.

(c) **Reserved. (Subgrantees)**

3.3.8 Payment Terms.

(a) **Payment Due Date.** Unless City notifies the Contractor that a dispute exists, Payment shall be made within 30 calendar days, measured from (1) the rendering of the Services or (2) the date of receipt of the invoice, whichever is later. Payment is deemed to be made on the date City issued a check to Contractor or, if Contractor agreed to electronic payment, the date City has posted electronic payment to Contractor.

(b) **Reserved. (Payment Discount Terms)**

3.4 Audit and Inspection of Records. Contractor agrees to maintain and make available to City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make copies of such books and records, and to make audits of all invoices, materials, payrolls, records or personnel and other data related to all other matters covered by this Agreement, whether funded in whole or in part under this Agreement. Contractor shall maintain such data and records in an accessible location and condition for a period of not less than five years after final payment under this Agreement or until after final audit has been resolved, whichever is later. The State of California or any Federal agency having an interest in the subject matter of this Agreement shall have the same rights as conferred upon City by this Section. Contractor shall include the same audit and inspection rights and record retention requirements in all subcontracts.

3.4.1 Contractor shall annually have its books of accounts audited by a Certified Public Accountant and a copy of said audit report and the associated management letter(s) shall be transmitted to the Director of Public Health or his /her designee within one hundred eighty (180) calendar days following Contractor's fiscal year end date. If Contractor expends \$750,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Said requirements can be found at the following website address: https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

3.4.2 If Contractor expends less than \$750,000 a year in Federal awards, Contractor is exempt from the single audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal Agency, pass-through entity and General Accounting Office. Contractor agrees to reimburse the City any cost adjustments necessitated by this audit report. Any audit report which addresses all or part of the period covered by this Agreement shall treat the service components identified in the detailed

descriptions attached to Appendix A and referred to in the Program Budgets of Appendix B as discrete program entities of the Contractor.

3.4.3 The Director of Public Health or his / her designee may approve a waiver of the audit requirement in Section 3.4.2 above, if the contractual Services are of a consulting or personal services nature, these Services are paid for through fee for service terms which limit the City's risk with such contracts, and it is determined that the work associated with the audit would produce undue burdens or costs and would provide minimal benefits. A written request for a waiver must be submitted to the DIRECTOR ninety (90) calendar days before the end of the Agreement term or Contractor's fiscal year, whichever comes first.

3.4.4 Any financial adjustments necessitated by this audit report shall be made by Contractor to the City. If Contractor is under contract to the City, the adjustment may be made in the next subsequent billing by Contractor to the City, or may be made by another written schedule determined solely by the City. In the event Contractor is not under contract to the City, written arrangements shall be made for audit adjustments.

3.5 **Submitting False Claims.** The full text of San Francisco Administrative Code Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Any contractor or subcontractor who submits a false claim shall be liable to City for the statutory penalties set forth in that section.

3.6 **Reserved. (Payment of Prevailing Wages)**

3.7 **Contract Amendments; Budgeting Revisions.**

3.7.1 **Formal Contract Amendment:** Contractor shall not be entitled to an increase in the Compensation or an extension of the Term unless the Parties agree to a Formal Amendment in accordance with the San Francisco Administrative Code and Section 11.5 (Modifications of this Agreement).

3.7.2 **City Revisions to Program Budgets:** The City shall have authority, without the execution of a Formal Amendment, to purchase additional Services and/or make changes to the work in accordance with the terms of this Agreement (including such terms that require Contractor's agreement), not involving an increase in the Compensation or the Term by use of a written City Revision to Program Budget.

3.7.3 **City Program Scope Reduction.** In order to preserve the Agreement and enable Contractor to continue to perform work albeit potentially on a reduced basis, the City shall have authority during the Term of the Agreement, without the execution of a Formal Amendment, to reduce scope, temporarily suspend the Agreement work, and/or convert the Term to month-to-month (Program Scope Reduction), by use of a written Revision to Program Budgets, executed by the Director of Health, or his or her designee, and Contractor. Contractor understands and agrees that the City's right to effect a Program Scope Reduction is intended to serve a public purpose and to protect the public fisc and is not intended to cause harm to or penalize Contractor. Contractor provides City with a full and final release of all claims arising from a Program Scope Reduction. Contractor further agrees that it will not sue the City for damages arising directly or indirectly from a City Program Scope Reduction

Article 4 Services and Resources

4.1 Services Contractor Agrees to Perform. Contractor agrees to perform the Services stated in **Appendix A, “Scope of Services.”** Officers and employees of City are not authorized to request and City is not required to compensate for Services beyond those stated.

4.2 Qualified Personnel. Contractor represents and warrants that it is qualified to perform the Services required by City, and that all Services will be performed by competent personnel with the degree of skill and care required by current and sound professional procedures and practices. Contractor will comply with City’s reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City’s request, must be supervised by Contractor. Contractor shall commit sufficient resources for timely completion within the project schedule.

4.3 Subcontracting. Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor is responsible for its subcontractors throughout the course of the work required to perform the Services. All subcontracts must incorporate the terms of Article 10 “Additional Requirements Incorporated by Reference” of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void. City’s execution of this Agreement constitutes its approval of the subcontractors listed below and/or in appendices.

a. Subcontractors named in Appendices B.

4.4 Independent Contractor; Payment of Employment Taxes and Other Expenses.

4.4.1 Independent Contractor. For the purposes of this Section 4.4, “Contractor” shall be deemed to include not only Contractor, but also any agent or employee of Contractor. Contractor acknowledges and agrees that at all times, Contractor is an independent contractor and is wholly responsible for the manner and means by which it performs the Services and work required under this Agreement. Contractor, and its agents and employees will not represent or hold themselves out to be employees of City at any time. Contractor shall not have employee status with City, nor be entitled to participate in any plans, arrangements, or distributions by City pertaining to or in connection with any retirement, health or other benefits that City may offer its employees. Contractor is liable for its acts and omissions. Contractor shall be responsible for all obligations and payments, whether imposed by federal, state or local law, including, but not limited to, FICA, income tax withholdings, unemployment compensation, insurance, and other similar responsibilities related to Contractor’s performing Services and work, or any agent or employee of Contractor providing same. Nothing in this Agreement shall be construed as creating an employment or agency relationship between City and Contractor, or any of its agents or employees. Contractor agrees to maintain and make available to City, upon request and during regular business hours, accurate books and accounting records demonstrating Contractor’s compliance with this Section. Should City determine that Contractor is not performing in accordance with the requirements of this Section, City shall provide Contractor with written notice of such failure. Within five (5) business days of Contractor’s receipt of such notice, and in accordance with Contractor policy and procedure, Contractor shall remedy the deficiency. Notwithstanding, if City believes that an action of Contractor warrants immediate

remedial action by Contractor, City shall contact Contractor and provide Contractor in writing with the reason for requesting such immediate action.

4.4.2 Payment of Employment Taxes and Other Expenses. Should City, in its discretion, or a relevant taxing authority such as the Internal Revenue Service or the State Employment Development Division, or both, determine that Contractor is an employee for purposes of collection of any employment taxes, the amounts payable under this Agreement shall be reduced by amounts equal to both the employee and employer portions of the tax due (and offsetting any credits for amounts already paid by Contractor which can be applied against this liability). City shall then forward those amounts to the relevant taxing authority. Should a relevant taxing authority determine a liability for past Services performed by Contractor for City, upon notification of such fact by City, Contractor shall promptly remit such amount due or arrange with City to have the amount due withheld from future payments to Contractor under this Agreement (again, offsetting any amounts already paid by Contractor which can be applied as a credit against such liability). A determination of employment status pursuant to this Section 4.4 shall be solely limited to the purposes of the particular tax in question, and for all other purposes of this Agreement, Contractor shall not be considered an employee of City. Notwithstanding the foregoing, Contractor agrees to indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them against any and all claims, losses, costs, damages, and expenses, including attorneys' fees, arising from this Section.

4.5 Assignment. The Services to be performed by Contractor are personal in character. This Agreement may not be directly or indirectly assigned, novated, or otherwise transferred unless first approved by City by written instrument executed and approved in the same manner as this Agreement. Any purported assignment made in violation of this provision shall be null and void.

4.6 Reserved. (Service Warranties)

4.7 Reserved. (Liquidated Damages)

4.8 Reserved. (Performance Bond)

4.9 Reserved. (Fidelity Bond).

4.10 Emergency - Priority 1 Service. In case of an emergency that affects any part of the San Francisco Bay Area, Contractor will give the City and County of San Francisco Priority 1 service with regard to the Services procured under this Agreement unless preempted by State and/or Federal laws. Contractor will make every good faith effort in attempting to deliver Services using all modes of transportation available. In addition, the Contractor shall charge fair and competitive prices for Services ordered during an emergency and not covered under the awarded Agreement.

Article 5 Insurance and Indemnity

5.1 Insurance.

5.1.1 Required Coverages. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

(a) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations. **P**

(b) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, “Combined Single Limit” for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

(c) Workers’ Compensation Liability Insurance, in statutory amounts, with Employers’ Liability Limits not less than \$1,000,000 each accident, injury, or illness.

(d) Professional Liability Insurance, applicable to Contractor’s profession, with limits not less than \$1,000,000 for each claim with respect to negligent acts, errors or omissions in connection with the Services.

(e) Reserved. Technology Errors and Omissions Liability Insurance

(f) Cyber and Privacy Liability Insurance with limits of not less than \$1,000,000 per claim. Such insurance shall include coverage for liability arising from theft, dissemination, and/or use of confidential information, including but not limited to, bank and credit card account information or personal information, such as name, address, social security numbers, protected health information or other personally identifying information, stored or transmitted in any form.

(g) **Reserved.**

(h) Blanket Fidelity Bond or Crime Policy with limits in the amount of Initial Payment included under this Agreement covering employee theft of money written with a per loss limit.

5.1.2 **Additional Insured.**

(a) The Commercial General Liability Insurance policy must include as Additional Insured the City and County of San Francisco, and its Officers, Agents, and Employees.

(b) The Commercial Automobile Liability Insurance policy must include as Additional Insured the City and County of San Francisco and its Officers, Agents, and Employees.

(c) **Reserved.**

5.1.3 **Waiver of Subrogation.** The Workers’ Compensation Liability Insurance policy(ies) shall include a waiver of subrogation in favor of City for all work performed by the Contractor, and its employees, agents and subcontractors.

5.1.4 **Primary Insurance.**

(a) The Commercial General Liability Insurance policy shall provide that such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that the insurance applies separately to each insured against whom claim is made or suit is brought.

(b) The Commercial Automobile Liability Insurance policy shall provide that such policies are primary insurance to any other insurance available to the

Additional Insureds, with respect to any claims arising out of this Agreement, and that the insurance applies separately to each insured against whom claim is made or suit is brought.

(c) **Reserved**

5.1.5 Other Insurance Requirements.

(a) Thirty (30) days' advance written notice shall be provided to City of cancellation, intended non-renewal, or reduction in coverages, except for non-payment for which no less than ten (10) days' notice shall be provided to City. Notices shall be sent to the City email address: insurance-contractsrm410@sfdph.org.

(b) Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, be maintained for a period of three (3) years beyond the expiration of this Agreement, to the effect that, should occurrences during the Agreement term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

(c) Should any of the required insurance be provided under a form of coverage that includes a general annual aggregate limit or provides that claims investigation or legal defense costs be included in such general annual aggregate limit, such general annual aggregate limit shall be double the occurrence or claims limits specified above.

(d) Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

(e) Before commencing any Services, Contractor shall furnish to City certificates of insurance including additional insured and waiver of subrogation status, as required, with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

(f) If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco and its officers, agents, and employees, and the Contractor as additional insureds and waive subrogation in favor of City, where required.

5.2 Indemnification.

5.2.1 Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all liabilities (legal, contractual, or otherwise), losses, damages, costs, expenses, or claims for injury or damages (collectively, "Claims"), arising from or in any way connected with Contractor's performance of the Agreement, including but not limited to, any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personal identifiable information, health information, disability and labor laws or

regulations; (iv) strict liability imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; except to the extent such indemnity is void or otherwise unenforceable under applicable law, and except where such Claims are the result of the active negligence or willful misconduct of City and are not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on, Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants, experts, and related costs, and City's costs of investigating any claims against City.

5.2.2 In addition to Contractor's obligation to indemnify City, Contractor specifically acknowledges and agrees that it has an immediate and independent obligation to defend City from any claim which actually or potentially falls within this indemnification provision, even if the allegations are or may be groundless, false or fraudulent, which obligation arises at the time such Claim is tendered to Contractor by City and continues at all times thereafter.

5.2.3 Contractor shall indemnify and hold City harmless from all loss and liability, including attorneys' fees, court costs and all other litigation expenses for any infringement of the patent rights, copyright, trade secret or any other proprietary right or trademark, and all other intellectual property claims of any person or persons arising directly or indirectly from the receipt by City, or any of its officers or agents, of Contractor's Services.

5.2.4 Under no circumstances will City indemnify or hold harmless Contractor.

Article 6 Liability of the Parties

6.1 **Liability of City.** CITY'S PAYMENT OBLIGATIONS UNDER THIS AGREEMENT SHALL BE LIMITED TO THE PAYMENT OF THE COMPENSATION PROVIDED FOR IN SECTION 3.3.1, "PAYMENT," OF THIS AGREEMENT. NOTWITHSTANDING ANY OTHER PROVISION OF THIS AGREEMENT, IN NO EVENT SHALL CITY BE LIABLE, REGARDLESS OF WHETHER ANY CLAIM IS BASED ON CONTRACT OR TORT, FOR ANY SPECIAL, CONSEQUENTIAL, INDIRECT OR INCIDENTAL DAMAGES, INCLUDING, BUT NOT LIMITED TO, LOST PROFITS, ARISING OUT OF OR IN CONNECTION WITH THIS AGREEMENT OR THE SERVICES PERFORMED IN CONNECTION WITH THIS AGREEMENT.

6.2 **Liability for Use of Equipment.** City shall not be liable for any damage to persons or property as a result of the use, misuse or failure of any equipment used by Contractor, or any of its subcontractors, or by any of their employees, even though such equipment is furnished, rented or loaned by City.

6.3 **Liability for Incidental and Consequential Damages.** Contractor shall be responsible for incidental and consequential damages resulting in whole or in part from Contractor's acts or omissions.

Article 7 Payment of Taxes

7.1 Contractor to Pay All Taxes. Except for any applicable California sales and use taxes charged by Contractor to City, Contractor shall pay all taxes, including possessory interest taxes levied upon or as a result of this Agreement, or the Services delivered pursuant hereto. Contractor shall remit to the State of California any sales or use taxes paid by City to Contractor under this Agreement. Contractor agrees to promptly provide information requested by City to verify Contractor's compliance with any State requirements for reporting sales and use tax paid by City under this Agreement.

7.2 Possessory Interest Taxes. Contractor acknowledges that this Agreement may create a "possessory interest" for property tax purposes. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to timely report on behalf of City to the County Assessor the information required by San Francisco Administrative Code Section 23.39, as amended from time to time, and any successor provision. Contractor further agrees to provide such other information as may be requested by City to enable City to comply with any reporting requirements for possessory interests that are imposed by applicable law.

7.3 Withholding. Contractor agrees that it is obligated to pay all amounts due to City under the San Francisco Business and Tax Regulations Code during the term of this Agreement. Pursuant to Section 6.10-2 of the San Francisco Business and Tax Regulations Code, Contractor further acknowledges and agrees that City may withhold any payments due to Contractor under this Agreement if Contractor is delinquent in the payment of any amount required to be paid to City under the San Francisco Business and Tax Regulations Code. Any payments withheld under this paragraph shall be made to Contractor, without interest, upon Contractor coming back into compliance with its obligations.

Article 8 Termination and Default

8.1 Termination for Convenience

8.1.1 City shall have the option, in its sole discretion, to terminate this Agreement, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination ("Notice of Termination"). The Notice of Termination shall specify the date on which termination of the Agreement shall become effective ("Termination Date").

8.1.2 Upon receipt of the Notice of Termination, Contractor shall commence and perform, with diligence, all actions necessary on the part of Contractor to affect the termination of this Agreement on the Termination Date and to minimize the liability of Contractor and City to third parties as a result of the termination. All such actions shall be subject to the prior approval of City. Such actions may include any or all of the following, without limitation:

- (a) Completing performance of any Services that City requires Contractor to complete prior to the Termination Date.
- (b) Halting the performance of all Services on and after the Termination Date.
- (c) Cancelling all existing orders and subcontracts by the Termination Date, and not placing any further orders or subcontracts for materials, Services, equipment or other items.

(d) At City's direction, assigning to City any or all of Contractor's right, title, and interest under the orders and subcontracts cancelled. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the cancellation of such orders and subcontracts.

(e) Subject to City's approval, settling all outstanding liabilities and all claims arising out of the cancelled orders and subcontracts.

(f) Taking such action as may be necessary, or as City may direct, for the protection and preservation of any property related to this Agreement which is in the possession of Contractor and in which City has or may acquire an interest.

8.1.3 Within 30 days after the Termination Date, Contractor shall submit to City an invoice, which shall set forth each of the following as a separate line item:

(a) The reasonable cost to Contractor, without profit, for all Services provided prior to the Termination Date, for which City has not already made payment. Reasonable costs may include a reasonable allowance for actual overhead, not to exceed a total of 10% of Contractor's direct costs for Services. Any overhead allowance shall be separately itemized. Contractor may also recover the reasonable cost of preparing the invoice.

(b) A reasonable allowance for profit on the cost of the Services described in the immediately preceding subsection (a), provided that Contractor can establish, to the satisfaction of City, that Contractor would have made a profit had all Services under this Agreement been completed, and provided further, that the profit allowed shall in no event exceed 5% of such cost.

(c) The reasonable cost to Contractor of handling and returning material or equipment delivered to City or otherwise disposed of as directed by City.

(d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of such materials and not otherwise recovered by or credited to City, and any other appropriate credits to City against the cost of the Services or other work.

8.1.4 In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the Termination Date, except for those costs specifically listed in Section 8.1.3. Such non-recoverable costs include, but are not limited to, anticipated profits on the Services under this Agreement, post-termination employee salaries, post-termination administrative expenses, post-termination overhead or unabsorbed overhead, attorneys' fees or other costs relating to the prosecution of a claim or lawsuit, prejudgment interest, or any other expense which is not reasonable or authorized under Section 8.1.3.

8.1.5 In arriving at the amount due to Contractor under this Section, City may deduct: (i) all payments previously made by City for Services covered by Contractor's final invoice; (ii) any claim which City may have against Contractor in connection with this Agreement; (iii) any invoiced costs or expenses excluded pursuant to the immediately preceding subsection 8.1.4; and (iv) in instances in which, in the opinion of City, the cost of any Service performed under this Agreement is excessively high due to costs incurred to remedy or replace defective or rejected Services, the difference between the invoiced amount and City's estimate of the reasonable cost of performing the invoiced Services in compliance with the requirements of this Agreement.

8.1.6 City's payment obligation under this Section shall survive termination of this Agreement.

8.2 Termination for Default; Remedies.

8.2.1 Each of the following shall constitute an immediate event of default ("Event of Default") under this Agreement:

(a) Contractor fails or refuses to perform or observe any term, covenant or condition contained in any of the following Sections of this Agreement:

3.5	Submitting False Claims.	10.10	Alcohol and Drug-Free Workplace
4.5	Assignment	10.13	Working with Minors
Article 5	Insurance and Indemnity	11.10	Compliance with Laws
Article 7	Payment of Taxes	Article 13	Data and Security
Appendix E	Business Associate Agreement		

(b) Contractor fails or refuses to perform or observe any other term, covenant or condition contained in this Agreement, including any obligation imposed by ordinance or statute and incorporated by reference herein, and such default is not cured within ten days after written notice thereof from City to Contractor. If Contractor defaults a second time in the same manner as a prior default cured by Contractor, City may in its sole discretion immediately terminate the Agreement for default or grant an additional period not to exceed five days for Contractor to cure the default.

(c) Contractor (i) is generally not paying its debts as they become due; (ii) files, or consents by answer or otherwise to the filing against it of a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction; (iii) makes an assignment for the benefit of its creditors; (iv) consents to the appointment of a custodian, receiver, trustee or other officer with similar powers of Contractor, or of any substantial part of Contractor's property; or (v) takes action for the purpose of any of the foregoing.

(d) A court or government authority enters an order (i) appointing a custodian, receiver, trustee or other officer with similar powers with respect to Contractor, or with respect to any substantial part of Contractor's property; (ii) constituting an order for relief or approving a petition for relief, reorganization or arrangement, any other petition in bankruptcy or for liquidation, or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction; or (iii) ordering the dissolution, winding-up or liquidation of Contractor.

8.2.2 **Default Remedies.** On and after any Event of Default, City shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement. In addition, where applicable, City shall have the right (but no obligation) to cure (or cause to be cured) on behalf of Contractor any Event of Default. Contractor shall pay to City on demand all costs and expenses incurred by City in effecting such cure, with interest thereon from the date of incurrence at the maximum rate then permitted by law. Further, in accordance with San Francisco Administrative Code Section 10.27.1 (Controller may Offset), City shall have the right to offset from any amounts due to Contractor under this Agreement or any other agreement

between City and Contractor: (i) all damages, losses, costs or expenses incurred by City as a result of an Event of Default; and (ii) any liquidated damages levied upon Contractor pursuant to the terms of this Agreement; and (iii), any damages imposed by any ordinance or statute that is incorporated into this Agreement by reference, or into any other agreement with City.

8.2.3 All remedies provided for in this Agreement may be exercised individually or in combination with any other remedy available hereunder or under applicable laws, rules and regulations. The exercise of any remedy shall not preclude or in any way be deemed to waive any other remedy. Nothing in this Agreement shall constitute a waiver or limitation of any rights that City may have under applicable law.

8.2.4 Any notice of default must be sent in accordance with Article 11.

8.3 **Non-Waiver of Rights.** The omission by either Party at any time to enforce any default or right reserved to it, or to require performance of any of the terms, covenants, or provisions hereof by the other Party at the time designated, shall not be a waiver of any such default or right to which the Party is entitled, nor shall it in any way affect the right of the Party to enforce such provisions thereafter.

8.4 Rights and Duties upon Termination or Expiration.

8.4.1 This Section and the following Sections of this Agreement listed below, shall survive termination or expiration of this Agreement:

3.3.2	Payment Limited to Satisfactory Services	8.2.2	Default Remedies
3.3.7(a)	Grant Funded Contracts – Disallowance	9.1	Ownership of Results
3.4	Audit and Inspection of Records	9.2	Works for Hire
3.5	Submitting False Claims	11.7	Agreement Made in California; Venue
Article 5	Insurance and Indemnity	11.8	Construction
6.1	Liability of City	11.9	Entire Agreement
6.3	Liability for Incidental and Consequential Damages	11.10	Compliance with Laws
Article 7	Payment of Taxes	11.11	Severability
8.1.6	Payment Obligation	Article 13	Data and Security
Appendix E	Business Associate Agreement		

8.4.2 Subject to the survival of the Sections identified in Section 8.4.1, above, if this Agreement is terminated prior to expiration of the term specified in Article 2, this Agreement shall be of no further force or effect. Contractor shall transfer title to City, and deliver in the manner, at the times, and to the extent, if any, directed by City, any work in progress, completed work, supplies, equipment, and other materials produced as a part of, or acquired in connection with the performance of this Agreement, and any completed or partially completed work which, if this Agreement had been completed, would have been required to be furnished to City.

Article 9 Rights in Deliverables

9.1 Ownership of Results. Any interest of Contractor or its subcontractors in the Deliverables, any partially-completed Deliverables, and related materials, shall become the property of and will be transmitted to City. Unless expressly authorized in writing by City, Contractor may not retain and use copies for reference and as documentation of its experience and capabilities.

9.2 Works for Hire. All copyrights in Deliverables that are considered works for hire under Title 17 of the United States Code, shall be the property of City. If any such Deliverables are ever determined not to be works for hire under federal law, Contractor hereby assigns all Contractor's copyrights to such Deliverables to City, agrees to provide any material and execute any documents necessary to effectuate such assignment, and agrees to include a clause in every subcontract imposing the same duties upon its subcontractors. With City's prior written approval, Contractor and its subcontractors may retain and use copies of such works for reference and as documentation of their respective experience and capabilities provided that any such use is in conformance with the confidentiality provisions of this Agreement.

Article 10 Additional Requirements Incorporated by Reference

10.1 Laws Incorporated by Reference. The full text of the laws listed in this Article 10, including enforcement and penalty provisions, are incorporated by reference into this Agreement. The full text of the San Francisco Municipal Code provisions incorporated by reference in this Article and elsewhere in the Agreement ("Mandatory City Requirements") are available at http://www.amlegal.com/codes/client/san-francisco_ca/.

10.2 Conflict of Interest. By executing this Agreement, Contractor certifies that it does not know of any fact which constitutes a violation of Section 15.103 of the City's Charter; Article III, Chapter 2 of City's Campaign and Governmental Conduct Code; Title 9, Chapter 7 of the California Government Code (Section 87100 *et seq.*); or Title 1, Division 4, Chapter 1, Article 4 of the California Government Code (Section 1090 *et seq.*), and further agrees promptly to notify City if it becomes aware of any such fact during the term of this Agreement.

10.3 Prohibition on Use of Public Funds for Political Activity. In performing the Services, Contractor shall comply with San Francisco Administrative Code Chapter 12G, which prohibits funds appropriated by City for this Agreement from being expended to participate in, support, or attempt to influence any political campaign for a candidate or for a ballot measure. Contractor is subject to the enforcement and penalty provisions in Chapter 12G.

10.4 Consideration of Salary History. Contractor shall comply with San Francisco Labor and Employment Code Article 141, the Consideration of Salary History Ordinance or "Pay Parity Act." Contractor is prohibited from considering current or past salary of an applicant in determining whether to hire the applicant or what salary to offer the applicant to the extent that such applicant is applying for employment to be performed on this Agreement or in furtherance of this Agreement, and whose application, in whole or part, will be solicited, received, processed or considered, whether or not through an interview, in City or on City property. The ordinance also prohibits employers from (1) asking such applicants about their current or past salary or (2) disclosing a current or former employee's salary history without that employee's authorization unless the salary history is publicly available. Contractor is subject to the enforcement and penalty provisions in Article 141. Information about and the text of Article 141 is available on the web at <https://sfgov.org/olse/consideration-salary-history>. Contractor is

required to comply with all of the applicable provisions of Article 141, irrespective of the listing of obligations in this Section.

10.5 **Nondiscrimination Requirements.**

10.5.1 Nondiscrimination in Contracts. Contractor shall comply with the provisions of San Francisco Labor and Employment Code Articles 131 and 132. Contractor shall incorporate by reference in all subcontracts the provisions of Sections 131.2(a), 131.2(c)-(k), and 132.3 of the San Francisco Labor and Employment Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Articles 131 and 132.

10.5.2 Nondiscrimination in the Provision of Employee Benefits. San Francisco Labor and Employment Code Article 131.2 applies to this Agreement. Contractor does not as of the date of this Agreement, and will not during the term of this Agreement, in any of its operations in San Francisco, on real property owned by San Francisco, or where work is being performed for City elsewhere in the United States, discriminate in the provision of employee benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees, subject to the conditions set forth in San Francisco Labor and Employment Code Article 131.2.

10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance. Contractor shall comply with all applicable provisions of Chapter 14B ("LBE Ordinance"). Contractor is subject to the enforcement and penalty provisions in Chapter 14B.

10.7 Minimum Compensation Ordinance. Labor and Employment Code Article 111 applies to this Agreement. Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Labor and Employment Code Article 111, including a minimum hourly gross compensation, compensated time off, and uncompensated time off. Contractor is subject to the enforcement and penalty provisions in Article 111. Information about and the text of Article 111 is available on the web at <http://sfgov.org/olse/mco>. Contractor is required to comply with all of the applicable provisions of Article 111, irrespective of the listing of obligations in this Section. By signing and executing this Agreement, Contractor certifies that it complies with Article 111.

10.8 Health Care Accountability Ordinance. Labor and Employment Code Article 121 applies to this contract. Contractor shall comply with the requirements of Article 121. For each Covered Employee, Contractor shall provide the appropriate health benefit set forth in Article 121.3 of the HCAO. If Contractor chooses to offer the health plan option, such health plan shall meet the minimum standards set forth by the San Francisco Health Commission. Information about and the text of Article 121, as well as the Health Commission's minimum standards, is available on the web at <http://sfgov.org/olse/hcao>. Contractor is subject to the enforcement and penalty provisions in Article 121. Any Subcontract entered into by Contractor shall require any Subcontractor with 20 or more employees to comply with the requirements of the HCAO and shall contain contractual obligations substantially the same as those set forth in this Section.

10.9 First Source Hiring Program. Contractor must comply with all of the applicable provisions of the First Source Hiring Program, Chapter 83 of the San Francisco Administrative

Code, that apply to this Agreement; and Contractor is subject to the enforcement and penalty provisions in Chapter 83.

10.10 Alcohol and Drug-Free Workplace. City reserves the right to deny access to, or require Contractor to remove from, City facilities personnel of any Contractor or subcontractor who City has reasonable grounds to believe has engaged in alcohol abuse or illegal drug activity which in any way impairs City's ability to maintain safe work facilities or to protect the health and well-being of City employees and the general public. City shall have the right of final approval for the entry or re-entry of any such person previously denied access to, or removed from, City facilities. Illegal drug activity means possessing, furnishing, selling, offering, purchasing, using or being under the influence of illegal drugs or other controlled substances for which the individual lacks a valid prescription. Alcohol abuse means possessing, furnishing, selling, offering, or using alcoholic beverages, or being under the influence of alcohol.

Contractor agrees in the performance of this Agreement to maintain a drug-free workplace by notifying employees that unlawful drug use is prohibited and specifying what actions will be taken against employees for violations; establishing an on-going drug-free awareness program that includes employee notification and, as appropriate, rehabilitation. Contractor can comply with this requirement by implementing a drug-free workplace program that complies with the Federal Drug-Free Workplace Act of 1988 (41 U.S.C. § 701) and/or California Drug-Free Workplace Act of 1990 Cal. Gov. Code, § 8350 et seq.

10.11 Limitations on Contributions. By executing this Agreement, Contractor acknowledges its obligations under Section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with, or is seeking a contract with, any department of City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, for a grant, loan or loan guarantee, or for a development agreement, from making any campaign contribution to (i) a City elected official if the contract must be approved by that official, a board on which that official serves, or the board of a state agency on which an appointee of that official serves; (ii) a candidate for that City elective office; or (iii) a committee controlled by such elected official or a candidate for that office, at any time from the submission of a proposal for the contract until the later of either the termination of negotiations for such contract or twelve months after the date City approves the contract. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than ten percent (10%) in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor certifies that it has informed each such person of the limitation on contributions imposed by Section 1.126 by the time it submitted a proposal for the contract, and has provided the names of the persons required to be informed to the City department with whom it is contracting.

10.12 Reserved. (Slavery Era Disclosure)

10.13 Working with Minors. Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to City involving the supervision or discipline of minors or

where Contractor, or any subcontractor, will be working with minors in an unaccompanied setting on more than an incidental or occasional basis, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for such positions and/or prohibiting employment of certain persons including but not limited to California Penal Code Section 290.95. In the event of a conflict between this Section and Section 10.14, “Consideration of Criminal History in Hiring and Employment Decisions,” of this Agreement, this Section shall control.

10.14 Consideration of Criminal History in Hiring and Employment Decisions.

10.14.1 Contractor agrees to comply fully with and be bound by all of the provisions of Article 142, “City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions,” of the San Francisco Labor and Employment Code (“Article 142”), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Article 142 are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of Article 142 is available on the web at <http://sfgov.org/olse/fco>. Contractor is required to comply with all of the applicable provisions of Article 142, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Article 142.

10.14.2 The requirements of Article 142 shall only apply to a Contractor’s or Subcontractor’s operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, and shall apply when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco. Article 142 shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.

10.15 Nonprofit Contractor Requirements.

10.15.1 **Good Standing.** If Contractor is a nonprofit organization, Contractor represents that it is in good standing with the California Attorney General’s Registry of Charitable Trusts and will remain in good standing during the term of this Agreement. Contractor shall immediately notify City of any change in its eligibility to perform under the Agreement. Upon City’s request, Contractor shall provide documentation demonstrating its compliance with applicable legal requirements. If Contractor will use any subcontractors to perform the Agreement, Contractor is responsible for ensuring they are also in compliance with the California Attorney General’s Registry of Charitable Trusts for the duration of the Agreement. Any failure by Contractor or its subcontractors to remain in good standing with applicable requirements shall be a material breach of this Agreement.

10.15.2 **Public Access to Nonprofit Records and Meetings.** If Contractor is a nonprofit organization, provides Services that do not include services or benefits to City employees (and/or to their family members, dependents, or their other designated beneficiaries), and receives a cumulative total per year of at least \$250,000 in City or City-administered funds, Contractor must comply with the City’s Public Access to Nonprofit Records and Meetings requirements, as set forth in Chapter 12L of the San Francisco Administrative Code, including the remedies provided therein.

10.16 Food Service Waste Reduction Requirements. Contractor shall comply with the Food Service Waste Reduction Ordinance, as set forth in San Francisco Environment Code Chapter 16, including but not limited to the remedies for noncompliance provided therein.

10.17 Distribution of Beverages and Water.

10.17.1 Sugar-Sweetened Beverage Prohibition. The scope of Services in this Agreement includes the sale, provision, or distribution of beverages to or on behalf of City. Contractor agrees that it shall not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.17.2 Packaged Water Prohibition. The scope of Services includes the sale, provision, or distribution of water to or on behalf of City. Contractor agrees that it shall not sell, provide, or otherwise distribute Packaged Water, as defined by San Francisco Environment Code Chapter 24, as part of its performance of this Agreement.

10.18 Tropical Hardwood and Virgin Redwood Ban. Pursuant to San Francisco Environment Code Section 804(b), City urges Contractor not to import, purchase, obtain, or use for any purpose, any tropical hardwood, tropical hardwood wood product, virgin redwood or virgin redwood wood product.

Article 11 General Provisions

11.1 Notices to the Parties. Unless otherwise indicated in this Agreement, all written communications sent by the Parties may be by U.S. mail or e-mail, and shall be addressed as follows:

To CITY:	Office of Contract Management and Compliance Department of Public Health 101 Grove Street, Room 410 San Francisco, California 94102	e-mail: David.Folmar@sfdph.org
And:	Anthony Buckman CONTRACT DEVELOPMENT AND TECHNICAL ASSISTANCE 1380 HOWARD STREET SAN FRANCISCO, CA 94112	e-mail: Anthony.Buckman@sfdph.org
To CONTRACTOR:	COMMUNITY FORWARD SF 1171 MISSION STREET SAN FRANCISCO, CA 94103	e-mail: Kara.Zordel@communityforwardsf.org

Any notice of default or data breach must be sent by certified mail or other trackable written communication, and also by e-mail, with the sender using the receipt notice feature. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party at least ten (10) days prior to the effective date of such change. If email notification is used, the sender must specify a receipt notice.

11.2 Compliance with Laws Requiring Access for People with Disabilities.

11.2.1 Contractor acknowledges that, pursuant to the Americans with Disabilities Act (ADA), programs, services and other activities provided by a public entity to the public, whether directly or through a contractor, must be accessible to people with disabilities. Contractor shall provide the services specified in this Agreement in a manner that complies with the ADA and all other applicable federal, state and local disability rights legislation. Contractor agrees not to discriminate against people with disabilities in the provision of services, benefits or activities provided under this Agreement and further agrees that any violation of this prohibition on the part of Contractor, its employees, agents or assigns will constitute a material breach of this Agreement.

11.2.2 Contractor shall adhere to the requirements of (i) the Americans with Disabilities Act of 1990, as amended (42 U.S.C. Sec. 1201 et seq.), (ii) Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Sec. 794d), (iii) Section 255 of the Communications Act Guidelines, (iv) the applicable Revised Section 508 Standards published by the U.S. Access Board (<https://www.access-board.gov/ict/>), and (v) the Web Content Accessibility Guidelines (WCAG) 2.1, Level AA, as amended from time to time. Contractor shall ensure that all information content and technology provided under this Agreement fully conforms to the applicable Revised 508 Standard, as amended from time to time, prior to delivery and before the City's final acceptance of the Services and/or Deliverables.

11.3 **Incorporation of Recitals.** The matters recited above are hereby incorporated into and made part of this Agreement.

11.4 **Sunshine Ordinance.** Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the California Public Records Act, (California Government Code § 7920 et seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state, or local law.

11.5 **Modification of this Agreement.** This Agreement may not be modified, nor may compliance with any of its terms be waived, except by written instrument executed and approved in the same manner as this Agreement.

11.6 Dispute Resolution Procedure.

11.6.1 **Negotiation; Alternative Dispute Resolution.** The Parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement. Disputes will not be subject to binding arbitration. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of City. Neither Party will be entitled to legal fees or costs for matters resolved under this Section.

11.6.2 **Government Code Claim Requirement.** No suit for money or damages may be brought against City until a written claim therefor has been presented to and rejected by City in conformity with the provisions of San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq. Nothing set forth in this Agreement shall operate to toll, waive or excuse Contractor's compliance with the California Government Code

Claim requirements set forth in San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq.

11.6.3 Health and Human Service Contract Dispute Resolution Procedure.

The Parties shall resolve disputes that have not been resolved administratively by other departmental remedies in accordance with the Dispute Resolution Procedure set forth in Appendix G incorporated herein by this reference.

11.7 Agreement Made in California; Venue. The formation, interpretation and performance of this Agreement shall be governed by the laws of the State of California. Venue for all litigation relative to the formation, interpretation and performance of this Agreement shall be in San Francisco.

11.8 Construction. All paragraph captions are for reference only and shall not be considered in construing this Agreement.

11.9 Entire Agreement. This contract including the appendices, sets forth the entire Agreement between the Parties, and supersedes all other oral or written provisions. This Agreement may be modified only as provided in Section 11.5, “Modification of this Agreement.”

11.10 Compliance with Laws. Contractor shall keep itself fully informed of City’s Charter, codes, ordinances and duly adopted rules and regulations of City and of all state, and federal laws in any manner affecting the performance of this Agreement, and must at all times comply with such local codes, ordinances, and regulations and all applicable laws as they may be amended from time to time.

11.11 Severability. Should the application of any provision of this Agreement to any particular facts or circumstances be found by a court of competent jurisdiction to be invalid or unenforceable, then (i) the validity of other provisions of this Agreement shall not be affected or impaired thereby, and (ii) such provision shall be enforced to the maximum extent possible so as to effect the intent of the Parties and shall be reformed without further action by the Parties to the extent necessary to make such provision valid and enforceable.

11.12 Cooperative Drafting. This Agreement has been drafted through a cooperative effort of City and Contractor, and both Parties have had an opportunity to have the Agreement reviewed and revised by legal counsel. No Party shall be considered the drafter of this Agreement, and no presumption or rule that an ambiguity shall be construed against the Party drafting the clause shall apply to the interpretation or enforcement of this Agreement.

11.13 Order of Precedence. The Parties agree that this Agreement, including all appendices, sets forth the Parties’ complete agreement. If the Appendices to this Agreement include any standard printed terms from Contractor, Contractor agrees that in the event of discrepancy, inconsistency, gap, ambiguity, or conflicting language between City’s terms and Contractor’s printed terms attached, City’s terms in this Agreement shall take precedence, followed by the procurement issued by the department (if any), Contractor’s proposal, and Contractor’s printed terms, respectively. Any hyperlinked terms included in Contractor’s terms shall have no legal effect.

11.14 Notification of Legal Requests. Contractor shall immediately notify City upon receipt of any subpoenas, service of process, litigation holds, discovery requests and other legal requests (“Legal Requests”) related to any City Data under this Agreement, and in no event later than twenty-four (24) hours after Contractor receives the request. Contractor shall not respond to

Legal Requests related to City without first notifying City other than to notify the requestor that the information sought is potentially covered under a non-disclosure agreement. Contractor shall retain and preserve City Data in accordance with City's instruction and requests, including, without limitation, any retention schedules and/or litigation hold orders provided by City to Contractor, independent of where City Data is stored.

Article 12 Department Specific Terms

12.1 Third Party Beneficiaries. No third parties are intended by the parties hereto to be third party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.

12.2 Exclusion Lists and Employee Verification. Upon hire and monthly thereafter, Contractor will check the exclusion lists published by the Office of the Inspector General (OIG), General Services Administration (GSA), and the California Department of Health Care Services (DHCS) to ensure that any employee, temporary employee, volunteer, consultant, or governing body member responsible for oversight, administering or delivering state or federally-funded services who is on any of these lists is excluded from (may not work in) your program or agency. Proof of checking these lists must be retained for seven years.

12.3 Prevention of Fraud, Waste and Abuse. Contractor shall comply with all laws designed to prevent fraud, waste, and abuse, including, but not limited to, provisions of state and Federal law applicable to healthcare providers and transactions, such as the False Claims Act (31 U.S.C. § 3729 et seq.), the Anti-Kickback Statute (42 U.S.C. § 1320a-7b(b)), the Physician Self-Referral Law (Stark Law, 42 U.S.C. § 1395nn), and California Business & Professions Code § 650. Contractor shall immediately notify City of any suspected fraud, waste, and abuse under state or federal law.

12.4 Certification Regarding Lobbying.

12.4.1 Contractor certifies to the best of its knowledge and belief that: No federally appropriated funds have been paid or will be paid, by or on behalf of Contractor to any persons for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the entering into of any federal cooperative agreement, or the extension, continuation, renewal, amendment, or modification of a federal contract, grant, loan or cooperative agreement.

12.4.2 If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan or cooperative agreement, Contractor shall complete and submit Standard Form -111, "Disclosure Form to Report Lobbying," in accordance with the form's instructions.

12.4.3 Contractor shall require the language of this certification be included in the award documents for all subawards at all tiers, (including subcontracts, subgrants, and contracts under grants, loans and cooperation agreements) and that all subrecipients shall certify and disclose accordingly.

12.4.4 This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a

prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

12.5 Materials Review. Contractor agrees that all materials, including without limitation print, audio, video, and electronic materials, developed, produced, or distributed by personnel or with funding under this Agreement shall be subject to review and approval by the Contract Administrator prior to such production, development or distribution. Contractor agrees to provide such materials sufficiently in advance of any deadlines to allow for adequate review. City agrees to conduct the review in a manner which does not impose unreasonable delays on Contractor's work, which may include review by members of target communities.

12.6 Emergency Response. Contractor will develop and maintain an Agency Disaster and Emergency Response Plan containing Site Specific Emergency Response Plan(s) for each of its service sites. The Plan should include site specific plans to respond at the time of an emergency (emergency response plans) and plans to continue essential services after a disaster (continuity of operations plans). The agency-wide plan should address disaster coordination between and among service sites. Contractor will update the Agency/site(s) plan as needed and Contractor will train all employees regarding the provisions of the plan for their Agency/site(s). Contractor will attest on its annual Community Programs' Contractor Declaration of Compliance whether it has developed and maintained an Agency Disaster and Emergency Response Plan, including a site specific emergency response plan and a continuity of operations plan for each of its service sites. Contractor is advised that Community Programs Contract Compliance Section staff will review these plans during a compliance site review. Information should be kept in an Agency/Program Administrative Binder, along with other contractual documentation requirements for easy accessibility and inspection.

In a declared emergency, Contractor's employees shall become emergency workers and participate in the emergency response of Community Programs, Department of Public Health. Contractors are required to identify and keep Community Programs staff informed as to which two staff members will serve as Contractor's prime contacts with Community Programs in the event of a declared emergency.

Article 13 Data and Security

13.1 Nondisclosure of Private, Proprietary or Confidential Information.

13.1.1 Protection of Private Information. If this Agreement requires City to disclose "Private Information" to Contractor within the meaning of San Francisco Administrative Code Chapter 12M, Contractor and subcontractor shall use such information only in accordance with the restrictions stated in Chapter 12M and in this Agreement and only as necessary in performing the Services. Contractor is subject to the enforcement and penalty provisions in Chapter 12M.

13.1.2 City Data; Confidential Information. In the performance of Services, Contractor may have access to, or collect on City's behalf, City Data, which may include proprietary or Confidential Information that if disclosed to third parties may damage City. If City discloses proprietary or Confidential Information to Contractor, or Contractor collects such information on City's behalf, such information must be held by Contractor in confidence and used only in performing the Agreement. Contractor shall exercise the same standard of care to

protect such information as a reasonably prudent contractor would use to protect its own proprietary or Confidential Information.

13.2 **Reserved. (Payment Card Industry (“PCI”) Requirements)**

13.3 **Business Associate Agreement.** The parties acknowledge that City is a Covered Entity as defined in the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and is required to comply with the HIPAA Privacy Rule governing the access, use, disclosure, transmission, and storage of protected health information (PHI) and the Security Rule under the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”).

The parties acknowledge that CONTRACTOR will:

1. ☒ **Do at least one** or more of the following:
 - A. Create, receive, maintain, or transmit PHI for or on behalf of CITY/SFDPH (including storage of PHI, digital or hard copy, even if Contractor does not view the PHI or only does so on a random or infrequent basis); or
 - B. Receive PHI, or access to PHI, from CITY/SFDPH or another Business Associate of City, as part of providing a service to or for CITY/SFDPH, including legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial; or
 - C. Transmit PHI data for CITY/SFDPH and require access on a regular basis to such PHI. (Such as health information exchanges (HIEs), e-prescribing gateways, or electronic health record vendors)

FOR PURPOSES OF THIS AGREEMENT, CONTRACTOR IS A BUSINESS ASSOCIATE OF CITY/SFDPH, AS DEFINED UNDER HIPAA. CONTRACTOR MUST COMPLY WITH AND COMPLETE THE FOLLOWING ATTACHED DOCUMENTS, INCORPORATED TO THIS AGREEMENT AS THOUGH FULLY SET FORTH HEREIN:

- a. **Appendix E** SFDPH Business Associate Agreement (BAA) (1-10-2024)
 1. SFDPH Attachment 1 Privacy Attestation (06-07-2017)
 2. SFDPH Attachment 2 Data Security Attestation (06-07-2017)
 3. SFDPH Attachment 3 Protected Information Destruction Order Purge Certification (01-10-2024)

2. ☐ **NOT do any of the activities listed above in subsection 1;**

Contractor is not a Business Associate of CITY/SFDPH. Appendix E and attestations are not required for the purposes of this Agreement.

13.4 **Management of City Data.**

13.4.1 Use of City Data. Contractor agrees to hold City Data received from, or created or collected on behalf of, City, in strictest confidence. Contractor shall not use or disclose City Data except as permitted or required by the Agreement or as otherwise authorized in writing by City. Any work by Contractor or its authorized subcontractors using, or sharing or storage of, City Data outside the United States is prohibited, absent prior written authorization by City. Access to City Data must be strictly controlled and limited to Contractor's staff assigned to this project on a need-to-know basis only. City Data shall not be distributed, repurposed or shared across other applications, environments, or business units of Contractor. Contractor is provided a limited non-exclusive license to use City Data solely for performing its obligations under the Agreement and not for Contractor's own purposes or later use. Nothing herein shall be construed to confer any license or right to City Data, by implication, estoppel or otherwise, under copyright or other intellectual property rights, to any third-party. Unauthorized use of City Data by Contractor, subcontractors or other third-parties is prohibited. For purpose of this requirement, the phrase "unauthorized use" means the data mining or processing of data and/or machine learning from the data, stored or transmitted by the service, for unrelated commercial purposes, advertising or advertising-related purposes, or for any purpose that is not explicitly authorized other than security or service delivery analysis.

13.4.2 Disposition of City Data. Upon request of City or termination or expiration of this Agreement, Contractor shall promptly, but in no event later than thirty (30) calendar days, return all City Data given to, or collected or created by Contractor on City's behalf, which includes all original media. Once Contractor has received written confirmation from City that City Data has been successfully transferred to City, Contractor shall within ten (10) business days clear or purge all City Data from its servers, any hosted environment Contractor has used in performance of this Agreement, including its subcontractor's environment(s), work stations that were used to process the data or for production of the data, and any other work files stored by Contractor in whatever medium. Contractor shall provide City with written certification that such purge occurred within five (5) business days of the purge. Secure disposal shall be accomplished by "clearing," "purging" or "physical destruction," in accordance with National Institute of Standards and Technology (NIST) Special Publication 800-88 or most current industry standard.

13.5 Ownership of City Data. The Parties agree that as between them, all rights, including all intellectual property rights, in and to City Data and any derivative works of City Data is the exclusive property of City.

13.6 Loss or Unauthorized Access to City's Data; Security Breach Notification. Contractor shall comply with all applicable laws that require the notification to individuals in the event of unauthorized release of PII, PHI, or other event requiring notification. Contractor shall notify City of any actual or potential exposure or misappropriation of City Data (any "Leak") within twenty-four (24) hours of the discovery of such, but within twelve (12) hours if the Data Leak involved PII or PHI. Contractor, at its own expense, will reasonably cooperate with City and law enforcement authorities to investigate any such Leak and to notify injured or potentially injured parties. Contractor shall pay for the provision to the affected individuals of twenty-four (24) months of free credit monitoring services, if the Leak involved information of a nature reasonably necessitating such credit monitoring. The remedies and obligations set forth in this subsection are in addition to any other City may have. City shall conduct all media communications related to such Leak.

13.7 Protected Health Information. Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

Article 14 MacBride And Signature

14.1 MacBride Principles – Northern Ireland. The provisions of San Francisco Administrative Code Chapter 12F are incorporated herein by this reference and made part of this Agreement. By signing this Agreement, Contractor confirms that Contractor has read and understood that City urges companies doing business in Northern Ireland to resolve employment inequities and to abide by the MacBride Principles, and urges San Francisco companies to do business with corporations that abide by the MacBride Principles.

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement on the day first mentioned above.

CITY

CONTRACTOR

Recommended by:

COMMUNITY FORWARD SF

DocuSigned by:

142006282BEB48B 10/17/2024 | 10:19 AM PDT
Grant Colfax, MD
Director of Health
Department of Public Health

DocuSigned by:

116FAC86589A45A 10/11/2024 | 10:03 AM PDT
KARA ZORDEL
Executive Director

Supplier Number: 0000022483

Approved as to Form:

David Chiu
City Attorney

By: DocuSigned by:

71CE6E756B6346E... 10/17/2024 | 9:21 AM PDT
Arnulfo Medina
Deputy City Attorney

Appendices

- | | | | |
|----|--------------------------------------|----|--------------------|
| A: | Scope of Services | F: | Invoices |
| B: | Calculation of Charges | G: | Dispute Resolution |
| C: | Reserved. (Insurance Waiver) | | |
| D: | System Access Agreement | | |
| E: | Business Associate Agreement (HIPAA) | | |

Appendix A Scope of Services

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Anthony Buckman**, Contract Administrator for the City, or his / her designee.

B. Reports:

Contractor shall submit written reports as requested by the City. The format for the content of such reports shall be determined by the City. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

For services solicited under a Group Purchasing Organization (GPO) the Contractor shall report all applicable sales under this agreement to the respective GPO.

C. Evaluation:

Contractor shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to meet the requirements of and participate in the evaluation program and management information systems of the City.

For contracts for the provision of services at San Francisco General or Laguna Honda Hospital and Rehabilitation Center, the evaluation program shall include agreed upon performance measures as specified in the Performance Improvement Plan and Performance Measure Grid which is presented in Attachment 1 to Appendix A. Performance measures are reported annually to the Zuckerberg San Francisco General performance improvement committees (PIPS and Quality Council) or the to the Administration Office of Laguna Honda Hospital and Rehabilitation Center.

The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. Possession of Licenses/Permits:

Contractor warrants the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Admission Policy:

Admission policies for the Services shall be in writing and available to the public. Except to the extent that the Services are to be rendered to a specific population as described in the programs listed in Section 2 of Appendix A, such policies must include a provision that clients are accepted for care without discrimination on the basis of race, color, creed, religion, sex, age, national origin, ancestry, sexual orientation, gender identification, disability, or AIDS/HIV status.

G. San Francisco Residents Only:

Only San Francisco residents shall be treated under the terms of this Agreement. Exceptions must have the written approval of the Contract Administrator.

H. Grievance Procedure:

Contractor agrees to establish and maintain a written Client Grievance Procedure which shall include the following elements as well as others that may be appropriate to the Services: (1) the name or title of the person or persons authorized to make a determination regarding the grievance; (2) the opportunity for the aggrieved party to discuss the grievance with those who will be making the determination; and (3) the right of a client dissatisfied with the decision to ask for a review and recommendation from the community advisory board or planning council that has purview over the aggrieved service. Contractor shall provide a copy of this procedure, and any amendments thereto, to each client and to the Director of Public Health or his/her designated agent (hereinafter referred to as "DIRECTOR"). Those clients who do not receive direct Services will be provided a copy of this procedure upon request.

I. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan for its employees, agents and subcontractors as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (<http://www.dir.ca.gov/title8/5193.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and recordkeeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of its employees, agents, subcontractors and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and

procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by its employees, agents and subcontractors, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

J. Aerosol Transmissible Disease Program, Health and Safety:

(1) Contractor must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (<http://www.dir.ca.gov/Title8/5199.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(3) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(4) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their employees, agents, subcontractors including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

K. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

L. Client Fees and Third Party Revenue:

(1) Fees required by federal, state or City laws or regulations to be billed to the client, client's family, or insurance company, shall be determined in accordance with the client's ability to pay and in conformance with all applicable laws. Such fees shall approximate actual cost. No additional fees may be charged to the client or the client's family for the Services. Inability to pay shall not be the basis for denial of any Services provided under this Agreement.

(2) Contractor agrees that revenues or fees received by Contractor related to Services performed and materials developed or distributed with funding under this Agreement shall be used to increase the gross program funding such that a greater number of persons may

receive Services. Accordingly, these revenues and fees shall not be deducted by Contractor from its billing to the City.

M. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

N. Under-Utilization Reports:

For any quarter that Contractor maintains less than ninety percent (90%) of the total agreed upon units of service for any mode of service hereunder, Contractor shall immediately notify the Contract Administrator in writing and shall specify the number of underutilized units of service.

O. Quality Assurance:

Contractor agrees to develop and implement a Quality Assurance Plan based on internal standards established by Contractor applicable to the Services as follows:

- 1) Staff evaluations completed on an annual basis.
- 2) Personnel policies and procedures in place, reviewed and updated annually.
- 3) Board Review of Quality Assurance Plan.

P. Compliance With Grant Award Notices:

Contractor recognizes that funding for this Agreement is provided to the City through federal, state or private foundation awards. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, which agreements are incorporated by reference as though fully set forth.

Contractor agrees that funds received by Contractor from a source other than the City to defray any portion of the reimbursable costs allowable under this Agreement shall be reported to the City and deducted by Contractor from its billings to the City to ensure that no portion of the City's reimbursement to Contractor is duplicated.

2. **Description of Services**

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

- | | |
|--------------|--|
| Appendix A-1 | Medical Respite & Sobering Center (MRSC) |
| Appendix A-2 | Managed Alcohol Program (MAP) |
| Appendix A-3 | SoMa Recover, Initiate, Support, Engage (RISE) |

3. Services Provided by Attorneys. Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

4. CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement.”

5. No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

Community Forward SF
Medical Respite and Sobering Center

Appendix A-1
Funding Term 7/1/24-6/30/25

1. Identifiers:

Program Name: Medical Respite and Sobering Center
Program Address: 1171, 1179 and 1185 Mission St.
San Francisco, CA 94103
Telephone/FAX: 415-734-4200/415-241-1176
Website Address: www.communityforwardsf.org

Contractor Address: 1171 Mission Street,
San Francisco, CA 94103
Executive Director/Program Director: Kara Zordel
Telephone: 415-(415) 241-1194
Email Address: kara.zordel@communityforwardsf.org

2. Nature of Document:

Original

3. Goal Statement:

The Medical Respite and Sobering Center (MRS) is a collaboration between the SFDPH Community Oriented Primary Care (COPC) and Community Forward SF (CFSF). Medical Respite provides temporary coordinated health and social supportive services to stabilize, transition, and improve the health status of medically fragile persons recovering from hospitalization and/or Emergency Department visits. The Sobering Center provides coordinated health and social, supportive services to stabilize homeless persons suffering from substance abuse and addiction.

4. Target Population:

The program is designed to address the needs of residents of San Francisco with a focus on homeless individuals who have substance use disorders and are hospitalized in medical-surgical units. Medical Respite serves clients with chronic medical needs that cannot safely be addressed in shelters and that are typically rejected because of their needs. While clients with psychiatric comorbidities will be accepted, the Medical Respite will not accept clients whose primary reason for hospitalization is psychiatric. Anyone requiring acute hospitalization or skilled nursing will not be accepted into the program. Medical Respite serves medically frail clients who need assistance with chronic health management, medication adherence, and social services. The Sobering Center prioritizes inebriated individuals who often are homeless and picked up on the streets. They are provided with a safe place to sober up with medical monitoring and referrals for ongoing care.

5. Modality(s)/Intervention(s)

See Appendix B CRDC

6. Methodology:

Medical Respite has 75 respite beds to provide temporary housing with supportive services for medically frail homeless persons leaving the hospital or the emergency department. The Sobering Center provides safe temporary shelter and medical oversight for inebriated individuals who are typically homeless. Hospitals, DPH Emergency Shelter Nursing Team shelter referrals, and SFHOT refer clients to both facilities. SFDPH will provide clinical services for MRSC, including medical personnel, social workers, and case managers.

- While 75 respite beds are our capacity, the average utilization is 65 beds due to safety concerns with distancing with COVID-related cases. This number fluctuates depending on the total number of positive cases in the facility at any given time.
- We have been closely following DPH guidelines and the Order of The Health Officer of The City and County of San Francisco and putting in place protocols that allow our clients and staff to be in a safe environment. This includes and is not limited to conducting fewer group activities, offering rapid testing for our clients and staff onsite, ensuring proper protocols with outside visitors at the front desk, following through and keeping records of vaccination mandates, ensuring all guidelines are followed by onsite staff and participants (e.g., screening, distancing, isolation, and quarantine).

- A. CFSF is not required to provide outreach, recruitment, promotion, and advertisement for MRSC. These services are provided to MRSC's clients through its partnership with DPH.
- B. At admission, CFSF will provide all clients orientation to the facility, a clean and freshly laundered bed, instruction on the facility rules, and support as needed to become acclimated to the facility
- C. Service Delivery Model: CFSF will provide quality supportive services for the Medical Respite and Sobering Center clients, including, but not limited to:
 - a. Medical respite workers staff the desks at 1171 and 1179 Mission St. 24 hours per day, 7 days per week. A CFSF worker staffs the Sobering Center desk at 1185 Mission from 3 pm to 7 am, 7 days per week.
 - This staffing structure changed during COVID-19 as follows: 1179 Mission St. entrance closed; Assistant Managers are using the desk, and a CSS Security guard usually staffs the Sobering Center desk.
 - b. Materials and assistance for immediate client health and hygiene related needs, seeking nursing support as needed.
 - c. Preparation and serving of nutritious meals including ordering food and supplies, facility food storage, cooking meals, serving meals, bussing tables, and cleaning & sanitizing dishware.
 - d. Assisting health care providers with client navigation throughout the building.

- e. Monitoring client belongings at their bedside.
- f. CFSF facilities department will provide maintenance and cleaning of the facility.
- g. Laundering of client linens and belongings weekly.
- h. The transportation team will provide transportation to and from appointments and other essential services to Medical Respite clients Monday through Friday from 7:00 a.m. to 6:00 p.m. Two vans and two drivers will be available at all times to ensure transportation for Medical Respite clients. The team will follow updated protocols and procedures.
- i. Coordinate with DPH concerning life safety issues.
- j. Safety services contracted through a third-party vendor, St. Anthony's. Security personnel will monitor the facility 24 hours daily, 365 days per year.
 - At least one employee or independent contractor of Security personnel will be on-site to provide security services.
 - Security personnel shall monitor the sidewalk in front of the facility for activities that may pose a risk to staff and clients entering and exiting the facility. Outside the facility, security personnel shall report suspicious or criminal activities to law enforcement or other appropriate first responders as they deem appropriate at their sole discretion and provide such other support as security personnel deem appropriate at their sole discretion.
 - Security personnel shall monitor the facility's interior at 1171, 1179, and 1185 Mission St. for disruptive behavior on the part of any CFSF client. This includes physical and verbal behavior that is potentially harmful to the environment, facility, or person of any CFSF client or employee. Security personnel shall intervene with de-escalation techniques to resolve all situations without harm to anyone in the facility. Security personnel shall intervene to safely retain all CFSF clients within the program when possible. If efforts toward that goal prove ineffective, in consultation with available CFSF and DPH staff members on-site, the security personnel employee shall escort the client or clients who present harmful behavior out of the building. Physical contact with clients shall be avoided unless security personnel employee deems it necessary to prevent immediate violence. In such a case, the minimum physical intervention necessary shall be employed. Under no circumstances will physical intervention be employed as punishment for past behavior or as a deterrent to future behavior. Under no circumstances shall a client be detained physically to surrender the client to law enforcement. Security personnel will not enforce facility rules unrelated to the immediate safety of clients and staff and shall instead report any observed or suspected client rule violations to CFSF's management staff.
 - Limitations. Security personnel will not physically engage in any violent behaviors and/or interactions that could potentially be harmful or violent to the employee, independent contractor, or affiliate by any person. Physical response shall include, without limitation, any physical contact

with or using any restraints on any person. The security personnel are not a replacement for law enforcement. Any suspicious or criminal activities should be reported to law enforcement or other first responders by the Neighbor. At client discharge, CFSF provides bedside assistance, packing of client belongings, support for behavioral health issues, security to oversee precipitous discharge, and transportation to discharge location approved by the DPH treatment team.

D. See Appendix B Salaries and Benefits page

7. Objectives and Measurements:

A. Standardized Objectives: All objectives and descriptions of how objectives will be measured are contained in the BHS document entitled Whole Person Integrated Care Performance Objectives FY 24-25.

8. Continuous Quality Improvement:

The CFSF Medical Respite Continuous Quality Assurance and Improvement activities will be outlined as directed in the FY 24-25 Declaration of Compliance. The CFSF Medical Respite Director of Support Services and CFSF's CEO monitor the program's quality, with feedback from DPH's medical staff.

1. Achievement of contract performance objectives and productivity:

CFSF Medical Respite Director of Support Services will ensure that CFSF supportive staff are trained, supervised, and evaluated to deliver services in a quality manner as measured by documents that outline plans and implementations of recruitment, training, supervision, scheduling, and routine performance appraisals. CFSF staff will be provided with development activities, training, and supervision to improve skills with a customer service orientation tailored to serving this multiply diagnosed behavioral and medically ill target population.

Formal training will be followed by role-playing and other activities to practice and integrate practical skills such as de-escalation. During FY 24-25, CFSF staff will receive at least 6 hours of relevant training to improve their ability to employ strategies that improve client care and interactions. Training includes Harm Reduction, CPR-First Aid, Management of Assaultive Behavior, De-escalation, Customer Service with a focus welcoming on first contact, Sexual Harassment, Professionalism, Ethics and Boundaries, Working with Difficult Clients, Anti-Abuse of Elders, and Cultural Competency. Additional role-specific training (i.e. Safe and Defensive Driving and Food and Sanitation for the drivers and cooks respectively) will be provided.

Program Review Measurement:

- Food Service Staff training certificates will be posted in the kitchen.
- Training will be verified through sign-in sheets that include the date of training and/or certificates of completion.
- Minutes at staff meetings will also verify training provided during staff meetings.
- Quarterly safety meetings and annual TB screenings for all staff are held.
- The CFSF's MRSC program will continue to identify and prioritize relevant program policies and then finalize policies as needed throughout each Fiscal Year. CFSF and the DPH Program Director/Nurse Manager will sign all policies. Staff will be trained in the implementation of established protocols. The program follows all applicable policies of the Health Commission, local, state, federal, and funding source policies, and requirements of Harm Reduction, DPH Privacy Policy, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction. These policies are reviewed regularly.

2. Services documentation:

- a. The Transportation schedule is posted in the lobby area of 1171 Mission and is updated daily. The quality of the Transportation service is measured by the following indicators recorded in transportation daily logs which are:
 - i. Number of total client transports.
 - ii. The number of missed transports, including reasons for them.
 - iii. Pick-up times will be no more than 60 minutes after the initial call, whenever possible, depending on weather and city traffic.
- b. The following indicators will measure the Quality of the Food service:
 - i. Ability to provide meals based on client medical/health needs.
 - ii. Attendance to nutritional guidelines.
 - iii. Client Satisfaction Survey with measurements of satisfaction with meals.
 - iv. Feedback on food from Community Meetings.
 - v. The Food Service will pass the annual DPH Food Safety Inspection.
- c. CFSF will maintain a clean, well-ordered facility. Monthly logs with spot checks will be maintained listing client areas. Staff will perform rounds to check duties completed and cleanliness of areas, and the Deputy Director will sign off on the entire list. Cleaning Schedules will be posted in client areas and will include a number to call if bathrooms or showers need attending to. A schedule will be developed for deep cleaning (floor stripping and waxing).

3. Cultural competency of staff and services:

- a. The program establishes annual cultural competency goals specific to the supportive role of the Medical Respite program. Staff attend other cultural competency training offered by the City as appropriate.

- b. Satisfaction surveys specifically address experiences of cultural competency with staff and are administered quarterly.

4. Satisfaction with services:

- a. The Medical Respite support staff have a complaint procedure for clients. All clients are given Guest Input forms, which can be submitted anonymously or non-anonymously for follow-up. Guest Input forms and other complaints are referred to the CFSF Director of Support Services for review. Responses are collaborative with DPH on-site management. All complaints are investigated, and the resolution is documented. Staff also complete Incident Reports when needed; incident reports are reviewed collaboratively.
- b. The CFSF Director of Support Services or Deputy Director will attend monthly Community Meetings as another means of receiving client feedback. The SVP of Programs will review monthly minutes of Community Meetings to ensure problems are addressed.
- c. Client satisfaction surveys are distributed quarterly and are collected and reviewed by the DPH Director of Operations to ensure transparency

5. Timely completion and use of outcome data:

- a. Monthly Medical Respite meetings focus on timely problem-solving and follow-through and provide a vehicle for strengthening the collaborative relationship between CFSF and DPH. The director and Deputy Director of Support Services will attend the meetings, and the SVP of Programs will attend as needed. DPH staff to attend are the DPH Medical Respite Director/Nurse Manager, DPH Medical Respite Operations Director, and other relevant staff as deemed appropriate. Minutes with follow-ups noted will be taken.

6. Capital Improvement N/A

7. Required Language: N/A

Community Forward SF
Managed Alcohol Program (MAP) Site #42

Appendix A-2
Funding Term 7/1/24-6/30/25

1. Identifiers

Program Name: **Managed Alcohol Program**
Program Address: 1171 Mission St
San Francisco, CA 94103
Telephone/FAX: 415-241-1199/415-241-1176
Website Address: www.communityforwardsf.org

Contractor Address: 1171 Mission Street,
San Francisco, CA 94103
Executive Director/Program Director: Kara Zordel
Telephone: 415-(415) 241-1194
Email Address: kara.zordel@communityforwardsf.org

2. Nature of Document:

Original

3. Goal Statement:

The Managed Alcohol Program is a collaboration of SFDPH Community Oriented Primary Care (COPC), and Community Forward SF (CFSF). The managed alcohol program is one method to minimize harm for those with alcohol use disorder. By prescribing limited quantities of alcohol, the model aims to prevent potentially life-threatening effects of alcohol withdrawal, such as seizures and injuries. It provides temporary coordinated health and social supportive services to stabilize, transition and improve the health status of adults experiencing homelessness and high users of urgent emergent healthcare services.

4. Target Population:

The program prioritizes residents of San Francisco with a focus on vulnerable individuals with alcohol use disorders who are experiencing homelessness.

5. Modality(s)/Intervention(s)

See Appendix B CRDC

6. Methodology:

The Medical Alcohol Program has 20 beds maximum to provide temporary housing with supportive services for vulnerable individuals with alcohol use disorders who are experiencing homelessness. Clients are referred by hospitals, shelter referrals from the DPH Emergency Shelter Nursing Team, and SFHOT. SFDPH will provide clinical services for MRSC including medical personnel, social workers, and case managers.

Community Forward SF
Managed Alcohol Program (MAP) Site #42

Appendix A-2
Funding Term 7/1/24-6/30/25

- A. CFSF is not required to provide outreach, recruitment, promotion, and advertisement for MRSC. These services are provided to clients of MRSC through its partnership with DPH.
- B. At admission CFSF will provide all clients orientation to the facility, a clean and freshly laundered bed, instruction on the facility rules, and support as needed to become acclimated to the facility

C. Service Delivery Model:

CFSF shall provide services and operations to ensure the health and safety of participants and the security, cleanliness, and maintenance of the Managed Alcohol Program, following Department of Public Health (DPH) requirements and guidelines.

A. Participant Support: CFSF shall provide participant support, including, but not limited to:

- 1. Participant intake, including completion of forms and acknowledgment of the Participant Agreement/Site Rules, room assignment, and orientation to the site;
- 2. Operations include entry and exits, mail, phone, and technology coordination;
- 3. Wellness checks and connections to care for anyone demonstrating symptoms of physical or behavioral health needs;
- 4. Health screening, including temperature checks following SF DPH COVID-19 protocol requirements;
- 5. Maintenance and distribution of operational and participant supplies;
- 6. Reasonable accommodations, transfers, and other supports; and
- 7.. CFSF and DPH teams will be in close communication to coordinate the monthly purchase of alcohol for the MAP program.
- 8. Facilitate activities/ non-clinical groups quarterly to enhance socialization

B. Program Support: CFSF shall provide programmatic support, including, but not limited to:

- 1. Onboarding and orienting onsite staff (e.g., Grantee staff, subcontractors, other service providers) to program documents, policies, and procedures;

2. Hiring and supervision of onsite staff and any subcontractors; and
3. Data entry and reporting.

C. Building Operations: In a City-leased Site and shall coordinate with the City and hotel/motel management staff to provide building operations services.

1. Maintain facilities and systems in full compliance with requirements of the law, local standards, and in accordance with DPH requirements and guidelines to protect the health and safety of participants and staff (e.g., smoke/carbon monoxide detectors, fire exits, smoking and animal relief areas, pest control, access to hygiene).
2. Maintain and create Site logs, records of entry and exit, and manage key access for participants, partner agencies and onsite staff.
3. Laundry: provide laundry services for participants.
4. Janitorial/Facilities provide janitorial services that meet or exceed the DPH and CCC requirements and standards.
5. Furnishings and Participant Supplies: maintain and provide furnishings (e.g., towels/linens) and supplies (e.g., menstrual and oral hygiene products; soap) for participants.
6. Personal Protective Equipment (PPE): be responsible for monitoring PPE utilization and supply of PPE, and for placing restocking orders from the CCC.
7. Biohazard Cleaning: coordinate through the CCC with Janitorial(s) to ensure that sites receive deep cleaning when a room or unit that is housing a COVID-19 positive participant turns over; when a participant becomes symptomatic; or in the event of a death on Site.
8. Meals: CFSF will be responsible for providing nutritious meals for guests and/making sure meals are appropriate to guest needs with dietary restrictions.
9. Storage: provide space for secure and pest-free storage of participant belongings, as appropriate for the Site.

D. Service Requirements

A. Health Standards and Use of PPE:

1. To prevent the spread of COVID-19, Grantee shall ensure that all onsite Site team members (e.g., staff and subcontractors) view the City-produced online safety training.
2. Ensure that all onsite staff and participants always use appropriate PPE in accordance with the most up to date DPH requirements.
3. Ensure all DPH requirements and guidelines are followed by onsite staff and participants (e.g., screening, distancing, isolation and quarantine)

E. Security/De-Escalation: provide security and de-escalation to ensure the safety of participants and staff and protection of property. See

- a. Safety services contracted through a third-party vendor, 24 hours per day, 365 days per year.
 - i. At least one employee or independent contractor will be on site to provide security services.
 - ii. SAF shall monitor the sidewalk in front of the facility for activities that may pose a risk to staff and clients entering and exiting the facility. Outside of the facility, security personnel shall report suspicious or criminal activities to law enforcement or other appropriate first responders as it deems appropriate in its sole discretion and provide such other support as security deems appropriate in its sole discretion.
 - iii. Security personnel shall monitor the interior of the facility at 1171, 1179, and 1185 Mission St. for disruptive behavior on the part of any CFSFs' client. This includes physical and verbal behavior that is potentially harmful to the environment, facility, or person of any CFSF client or employee. Security shall intervene with de-escalation techniques with the goal of resolving all situations without harm to anyone in the facility. When possible, security shall intervene with intention to retain all CFSF clients safely within the program. If efforts toward that goal prove ineffective, in consultation with available CFSF and DPH staff members on site the security employee shall escort the client or clients who present harmful behavior out of the building. Physical contact with clients shall be avoided unless a security employee deems it necessary to prevent immediate violence. In such cases, the minimum physical intervention necessary shall be employed. Under no circumstances will physical intervention be employed as punishment for past behavior or deterrent to future behavior. Under no circumstances shall a client be detained physically for the purposes of surrendering the client to law enforcement. Security will not enforce facility rules unrelated to the immediate safety of clients and staff and shall instead report any observed or suspected client rule violations to CFSF's management staff.

- iv. Limitations. Security will not physically respond to any violent behaviors or behaviors that could potentially be harmful or violent to its employee, independent contractor or affiliate by any person. Physical response shall include, without limitation, any physical contact with or the use of any restraints on any person. The Client Safety Services are not a replacement for law enforcement. Any suspicious or criminal activities should be reported to the law enforcement or other first responders by the Neighbor.
- E. At client discharge CFSF provides bedside assistance, packing of client belongings, support for behavioral health issues, security to oversee precipitous discharge.
- F. See Appendix B Salaries and Benefits page

7. Objectives and Measurements:

A. Standardized Objectives: All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled Whole Person Integrated Care Performance Objectives FY 24-25.

8. Continuous Quality Improvement:

The CFSF Medical Respite Continuous Quality Assurance and Improvement activities will be outlined as directed in the FY 24-25 Declaration of Compliance. The quality of the program is monitored by the CFSF Medical Respite Director of Client Services and CFSF's Sr. VP of Programs with feed-back from DPH's medical staff.

1. Achievement of contract performance objectives and productivity:

CFSF Medical Respite Director of Client Services will ensure that CFSF supportive staff are trained, supervised, and evaluated to deliver services in a quality manner as measured by documents that outline plans and implementations of recruitment, training, supervision, scheduling, and routine performance appraisals. CFSF staff will be provided with development activities, training and supervision to improve skills with a customer service orientation tailored to serving this multiply diagnosed behavioral and medically ill target population.

Formal training will be followed by role playing and other activities to practice and integrate practical skills such as de-escalation. During FY 24-25 CFSF staff will receive a minimum of 6 hours of relevant training to improve staff's ability to employ strategies that improve client care and interactions. Training include Harm Reduction, CPR-First Aid, Management of Assaultive Behavior; De-escalation, Customer Service with a focus welcoming on first contact, Sexual Harassment, Professionalism, Ethics and Boundaries, Working with Difficult Clients, Anti-Abuse of Elders and Cultural Competency. Additional role-specific

training (i.e. Safe and Defensive Driving and Food and Sanitation for the drivers and cooks respectively) will be provided.

Program Review Measurement: Verification of training will be provided by sign-in sheets including the date of training and/ or certificates of completion. Minutes at staff minutes will also verify training provided during staff meetings.

Quarterly safety meetings are held and there are annual TB screenings for all staff.

The CFSF MRSC program will continue to identify, prioritize relevant program policies and then finalize policies as needed throughout each Fiscal Year. All policies will be signed off by the CFSF Sr. VP of Programs and the DPH Program Director/Nurse Manager. Staff will be trained in the implementation of established protocols. The program follows all applicable policies of the Health Commission, local, state, federal and funding source policies, and requirements of Harm Reduction, DPH Privacy Policy, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency and Client Satisfaction. These policies are reviewed on a regular basis.

2. Services documentation:

- a. CFSF will maintain a clean, well-ordered facility. Monthly logs with spot checks will be maintained listing client areas, staff performing rounds to check duties completed and cleanliness of areas and sign off the entire list by the Deputy Director. Cleaning Schedules will be posted in client areas and will include a number to call if bathrooms or showers need attending. A schedule will be developed for deep cleaning (floor stripping and waxing).

3. Cultural competency of staff and services:

- a. The program establishes annual cultural competency goals specific to their supportive role of the Medical Respite program. Staff attend other cultural competency training offered by the City as appropriate.
- b. Satisfaction surveys specifically address experiences of cultural competency with staff and are administered quarterly.

4. Satisfaction with services:

- a. The Medical Respite support staff have a complaint procedure in place for clients. All clients are given Guest Input forms, which can be submitted anonymously or non-anonymously for follow-up. Guest Input forms and other complaints are referred to the CFSF Director of Client Services for review. Responses are collaborative with DPH on-site management. All complaints are investigated, and the resolution is documented. Staff also complete Incident Reports when needed; incident reports are reviewed collaboratively.

Community Forward SF
Managed Alcohol Program (MAP) Site #42

Appendix A-2
Funding Term 7/1/24-6/30/25

- b. The CFSF Director of Client Services or Deputy Director will attend monthly Community Meetings as another means of receiving client feedback. The Director of Client Services Sr. VP of Programs and Deputy Director will review monthly minutes of Community Meetings to ensure problems are addressed.
- c. Client satisfaction surveys are distributed quarterly, and are collected and reviewed by the DPH Director of Operations to assure transparency

5. Timely completion and use of outcome data:

- a. Monthly Medical Respite meetings with a focus on timely problem solving and follow through, as well as providing a vehicle for strengthening the collaborative relationship between CFSF and DPH. Meetings will be attended by CFSF Medical Respite Director of Client Services, CFSF Sr. VP of Programs DPH, Medical Respite Director/Nurse Manager, DPH Medical Respite Operations Director and other relevant staff as deemed appropriate. Minutes with follow-ups noted will be taken.

9. Capital Improvement N/A

10. Required Language: N/A

Appendix B Calculation of Charges

1. Method of Payment

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 3.3.1, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, “General Fund” shall mean all those funds which are not Work Order or Grant funds. “General Fund Appendices” shall mean all those appendices which include General Fund monies.

(1) Fee For Service (Monthly Reimbursement by Certified Units at Budgeted Unit Rates)

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice

(1) Fee For Service Reimbursement:

A final closing invoice, clearly marked “FINAL,” shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those SERVICES rendered during the referenced period of performance. If

SERVICES are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY. CITY'S final reimbursement to the CONTRACTOR at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

D. Upon the effective date of this Agreement, and contingent upon prior approval by the CITY'S Department of Public Health of an invoice or claim submitted by Contractor, and of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR not to exceed twenty-five per cent (25%) of the General Fund and Mental Health Service Act (Prop 63) portions of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of October 1 through March 31 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the CITY all or part of the initial payment for that fiscal year. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

2. Program Budgets and Final Invoice

A. Programs are listed below:

- Appendix B-1 Medical Respite & Sobering Center (MRSC)
- Appendix B-2 Managed Alcohol Program (MAP)
- Appendix B-3 SoMa Recover, Initiate, Support, Engage (RISE)

B. CONTRACTOR understands that, of this maximum dollar obligation listed in section 3.3.1 of this Agreement, \$0.00 is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to

this Agreement as specified in Section 3.7 Contract Amendments; Budgeting Revisions. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, notwithstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

Contract Term	Estimated Funding Allocation
July 1, 2024 to June 30, 2025	\$ 6,967,205
July 1, 2025 to Dec 31, 2025 To Be Enc	\$ 3,031,714
SubTotal July 1, 2024 to Dec 31, 2025	\$ 9,998,919
Contingency	\$0
TOTAL July 1, 2024 to Dec 31, 2025	\$ 9,998,919

CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

3. Services of Attorneys

No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

4. State or Federal Medi-Cal Revenues

A. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.

B. CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement."

5. Reports and Services

No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.

Community Forward SF
SoMa RISE Transportation Shuttle Services

Appendix A-3
Funding Term 7/1/24-6/30/25

1. Identifiers:

Program Name: **SoMa Recover, and Sobering Center (RISE) Transportation Shuttle Services**

Program Address: 1171 Mission St.

San Francisco, CA 94103

Telephone/FAX: 415-241-1199/415-241-1176

Website Address: www.communityforwardsf.org

Contractor Address: 1171 Mission Street,

San Francisco, CA 94103

Executive Director/Program Director: Kara Zordel

Telephone: 415-(415) 241-1194

Email Address: kara.zordel@communityforwardsf.org

2. Nature of Document:

Original

3. Goal Statement:

Provide transportation shuttle services for SoMa RISE guests who have been referred to Community Forward SF to be transported to various DPH Health and Community services. This service will operate from 8:00 AM through 6:00 PM, Monday through Friday, and Saturday and Sunday 8 AM - 4 PM.

4. Target Population:

The CFSF SoMa RISE Shuttle services is designed to address the transportation needs of residents of San Francisco with a focus on individuals who are receiving services at SoMa Rise. The SoMa RISE Program welcomes intoxicated people who are struggling with substance use from the streets to a safe place indoors. SoMa RISE staff can help participants connect with medical care, mental health and substance use and housing services.

5. Modality(s)/Intervention(s)

See Appendix B-3 CRDC

6. Methodology:

A. CFSF transportation team is not required to provide outreach, recruitment, promotion, and advertisement for this program.

B. Service Delivery Model: CFSF will provide quality shuttle transportation services for all identified SoMa RISE guests including, but not limited to:

- A. Shuttle services will be provided 8:00 AM through 6:00 PM, Monday through Friday, and Saturday and Sunday 8 AM - 4 PM. The shuttle will run three (3) designated, two (2) hour loops for SoMa RISE guests between San Francisco Department of Public Health (DPH) facilities/programs/services, food & shelter services, urgent care centers, and hospitals.
 - B. Shuttle pick-up and drop off locations include but are not limited to the following:
 - a. SoMa RISE – 1076 Howard (Pick Up Location)
 - b. GLIDE Memorial – 330 Ellis Street
 - c. Medical Respite – 1171 Mission Street
 - d. Mission Neighborhood Health Center – 240 Shotwell Street
 - e. Sobering Center - 1171 Mission St.
 - f. Tom Waddell Health Center – 101 Grove Street
 - g. Zuckerberg San Francisco General Hospital – 1001 Potrero Avenue
 - h. Gubbio project - 1661 15th Street
 - i. SFBHS Pharmacy
 - j. Bus stations/BART to get to appointments or a safe place to stay
 - C. CFSF transportation team will offer three two-hour shuttle loops that start and end at SoMa RISE and the schedule is as follows (exact loop times are subject to change based on community services.)
 - D. Morning: 8:00 – 10:00 AM
 - E. Afternoon: 12:00 AM – 2:00 PM
 - F. Evening: 4:00 AM – 6:00 PM
 - G. CFSF transportation team and SoMa RISE will develop an exclusion criterion that both teams will enforce with clients receiving this service to ensure a smooth ride for all guests.
 - H. CFSF Dispatching station will be staffed from Monday-Friday from 8am - 5pm. The CFSF Dispatcher will ensure clear communication with the transportation team to provide quality shuttle services for our clients
 - I. Maintenance and cleaning of the shuttle van will be conducted routinely.
- C. See Appendix B Salaries and Benefits page

7. Objectives and Measurements:

- A. **Standardized Objectives:** All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled Adult and Older Adult Performance Objectives FY 24-25.

8. Continuous Quality Improvement:

The CFSF Transportation services Continuous Quality Assurance and Improvement activities are part of the Medical Respite and Sobering Center transportation services and will be outlined as directed in the FY 24-25 Declaration of Compliance. The quality of the program is monitored by the CFSF Medical Respite Director of Client Services, and CFSF's Sr. VP of Programs with feed-back from DPH's medical staff.

1. Achievement of contract performance objectives and productivity:

With support of the CFSF Director of Client Services and the Deputy Director, the Transportation Supervisor will ensure that CFSF transportation team are trained, supervised, and evaluated to deliver services in a quality manner as measured by documents that outline plans and implementations of recruitment, training, supervision, scheduling, and routine performance appraisals. CFSF staff will be provided with development activities, training and supervision to improve skills with a customer service orientation tailored to serving this multiply diagnosed behavioral and medically ill target population.

Formal training will be followed by role playing and other activities to practice and integrate practical skills such as de-escalation. During FY 24/25 CFSF staff will receive a minimum of 6 hours of relevant training to improve staff's ability to employ strategies that improve client care and interactions. Training include Harm Reduction, CPR-First Aid, Management of Assaultive Behavior; De-escalation, Customer Service with a focus welcoming on first contact, Sexual Harassment, Professionalism, Ethics and Boundaries, Working with Difficult Clients, Anti-Abuse of Elders and Cultural Competency. Additional role-specific training (i.e. Safe and Defensive Driving for the drivers) will be provided.

Program Review Measurement:

- Quarterly safety meetings are held and there are annual TB screenings for all staff.
- The CFSF Transportation team and SoMa RISE will continue to identify, prioritize relevant program policies and then finalize policies as needed throughout each Fiscal Year. Staff will be trained in the implementation of established protocols. The program follows all applicable policies of the Health Commission, local, state, federal and funding source policies, and requirements of Harm Reduction, DPH Privacy Policy, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency and Client Satisfaction. These policies are reviewed on a regular basis.

2. Services documentation:

- a. The Transportation schedule is posted in the lobby area of 1171 Mission and is updated daily. The quality of the Transportation service is measured by the following indicators recorded in transportation daily logs which are:
 - i. Number of total client transports.
 - ii. Number of missed transports including reasons.

- iii. Pick up times will be no more than 60 minutes after the initial call whenever possible depending on weather and city traffic.
- b. CFSF will maintain a clean vehicle for this shuttle transportation service. Cleaning duties will be included in each driver's schedule at the end or beginning of the day.
- c. CFSF Transportation Supervisor will ensure that all required vehicle routine maintenance is conducted timely and will keep all vehicle documentation in an administrative binder.

3. Cultural competency of staff and services:

- a. The program establishes annual cultural competency goals specific to their supportive role of the Medical Respite program. Staff attend other cultural competency training offered by the City as appropriate.
- b. Satisfaction surveys specifically address experiences of cultural competency with staff and are administered quarterly.

4. Satisfaction with services:

- a. The Medical Respite support staff have a complaint procedure in place for clients. All clients are given Guest Input forms, which can be submitted anonymously or non-anonymously for follow-up. Guest Input forms and other complaints are referred to the CFSF Director of Client Services and SVP of Programs for review. All complaints are investigated, and the resolution is documented.
- b. Staff will complete Incident Reports when needed; incident reports are reviewed collaboratively.

5. Timely completion and use of outcome data:

- a. Regular check-ins with the transportation team with a focus on timely problem solving and follow through will be put in place.

6. Capital Improvement N/A

7. Required Language: N/A

Appendix B - DPH 1: Department of Public Health Contract Budget Summary

DHCS Legal Entity Number		01078		Document Date		7/1/2024		Appendix B, Page 1	
Contractor Name		Community Forward SF				Fiscal Year		2024-2025	
Contract ID Number		1000032803		Funding Notification Date		08/14/24			
Appendix Number	A-1/B-1	A-2/B-2	A-3/B-3						
Provider Number	389124	N/A	N/A						
Program Name	Medical Respite & Sobering Center (MRSC)	Managed Alcohol Program (MAP)	SoMa Recover, Initiate, Support, Engage (RISE)						
Program Code	N/A	N/A	N/A						
Funding Term	7/1/24 - 6/30/25	7/1/24 - 6/30/25	7/1/24 - 6/30/25						
FUNDING USES								TOTAL	
Salaries	1,756,202	438,219	147,623					2,342,044	
Employee Benefits	526,861	131,466	44,287					702,614	
Subtotal Salaries & Employee Benefits	2,283,063	569,685	191,910					3,044,658	
Operating Expenses	2,333,944	639,043	40,794					3,013,781	
Capital Expenses								-	
Subtotal Direct Expenses	4,617,007	1,208,728	232,704					6,058,439	
Indirect Expenses	692,551	181,309	34,906					908,766	
Indirect %	15.0%	15.0%	15.0%					15.0%	
TOTAL FUNDING USES	5,309,558	1,390,037	267,610					6,967,205	
							Employee Benefits Rate	30.00%	
BHS MENTAL HEALTH FUNDING SOURCES									
MH SF HB Transit (Prop C)			267,610					267,610	
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	-	-	267,610				-	267,610	
BHS SUD FUNDING SOURCES									
	-							-	
								-	
TOTAL BHS SUD FUNDING SOURCES	-	-	-				-	-	
OTHER DPH FUNDING SOURCES									
County General Fund	5,309,558							5,309,558	
County Prop C / OCOH		1,390,037						1,390,037	
								-	
								-	
TOTAL OTHER DPH FUNDING SOURCES	5,309,558	1,390,037	-				-	6,699,595	
TOTAL DPH FUNDING SOURCES	5,309,558	1,390,037	267,610				-	6,967,205	
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	5,309,558	1,390,037	267,610				-	6,967,205	
Prepared By Nora Espinoza Phone Number (650) 731-2481									

CHECK: FUNDING USES = FUNDING SOURCES
(Should always be 0)

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number <u>01078</u>				Appendix Number <u>B-1</u>	
Provider Name <u>Community Forward SF</u>				Page Number <u>2</u>	
Provider Number <u>389124</u>				Fiscal Year <u>2024-2025</u>	
				Funding Notification Date <u>08/14/24</u>	
Program Name		Medical Respite & Sobering Center (MRSC)			
Program Code		N/A			
Mode/SFC (MH) or Modality (SUD)		SecPrev-19			
Service Description		SA-Sec Prev Outreach			
Funding Term		7/1/24 - 6/30/25			
FUNDING USES					TOTAL
Salaries & Employee Benefits		2,283,063	-	-	2,283,063
Operating Expenses		2,333,944			2,333,944
Capital Expenses					-
Subtotal Direct Expenses		4,617,007			4,617,007
Indirect Expenses		692,551			692,551
TOTAL FUNDING USES		5,309,558			5,309,558
BHS SUD FUNDING SOURCES					
					-
					-
TOTAL BHS SUD FUNDING SOURCES		-	-	-	-
DPH FUNDING SOURCES					
Dept-Auth-Proj-Activity					
County General Fund	10000-210705-10000-10001997-0002	5,309,558			5,309,558
					-
					-
TOTAL DPH FUNDING SOURCES		5,309,558	-	-	5,309,558
TOTAL DPH FUNDING SOURCES		5,309,558	-	-	5,309,558
Payment Method		Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)
DPH Units of Service		54,906	0	0	0
Unit Type		Hours	Hours	Hours	Hours
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)		96.70	-	-	-
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)		96.70	-	-	-
Published Rate (Medi-Cal Providers Only)					Total UDC
Unduplicated Clients (UDC)		1,287	N/A	N/A	1,287

CHECK: FUNDING USES = FUNDING SOURCES (Should always be ZERO)

FORMULA: DPH UNITS

- - - - -
- - - - -

Appendix B - DPH 3: Salaries & Employee Benefits Detail

Program Name MRSC
Program Code N/A

Appendix Number B-1
Page Number 3
Fiscal Year 2024-2025
Funding Notification Date 08/14/24

		MRSC									
		TOTAL		Dept-Auth-Proj-Activity 10000-210705-10000- 10001997-0002							
Funding Term		7/1/24 - 6/30/25		7/1/24 - 6/30/25							
Position Title	FTE	Salaries	FTE	Salaries						FTE	Salaries
COO - Chief Opearations Officer	0.17	31,483	0.17	31,483							
Vice President of Programs	0.24	36,506	0.24	36,506							
Director of Operations	0.24	24,338	0.24	24,338							
Director of Compliance	0.22	23,198	0.22	23,198							
Director of Support Services	0.65	65,000	0.65	65,000							
Deputy Director of Support Services	1.00	80,000	1.00	80,000							
Assistant Managers	2.00	140,000	2.00	140,000							
Guest Services Specialist (GSS)	16.50	801,840	16.50	801,840							
Culinary Operations Manager	0.90	70,200	0.90	70,200							
Culinary Assistant Manager	1.00	75,000	1.00	75,000							
Cook	2.20	123,552	2.20	123,552							
Transportation Supervisor	0.50	35,000	0.50	35,000							
Dispatcher	0.50	26,499	0.50	26,499							
Driver	2.50	124,800	2.50	124,800							
Facilities Manager	1.00	85,000	1.00	85,000							
Operations Coordinator	0.22	13,786	0.22	13,786							
	-	-									
	-	-									
	-	-									
	-	-									
	-	-									
	-	-									
Totals:	29.84	1,756,202	29.84	1,756,202			-	-	-	-	-
Employee Benefits:	30.00%	526,861	30.00%	526,861			0.00%	-	30.00%	-	30.00%
TOTAL SALARIES & BENEFITS		2,283,063		2,283,063			-		-		-

Appendix B - DPH 4: Operating Expenses Detail

Program Name MRSC, SoMa RISE & MAP
 Program Code N/A

Appendix Number B-1
 Page Number 4
 Fiscal Year 2024 - 2025
 Funding Notification Date 08/14/24

Expense Categories & Line Items	TOTAL	MRSC				
		<u>Dept-Auth-Proj-Activity</u> 10000-210705-10000- 10001997-0002				
Funding Term	7/1/24 - 6/30/25	7/1/24 - 6/30/25				
Rent	933,492	933,492				
Utilities (telephone, electricity, water, gas)	164,695	164,695				
Building Repair/Maintenance	102,000	102,000				
Occupancy Total:	1,200,187	1,200,187				-
Office Supplies	11,500	11,500				
Photocopying	-					
Program Supplies	26,981	26,981				
Computer Hardware/Software	3,000	3,000				
Materials & Supplies Total:	41,481	41,481				-
Insurance	70,507	70,507				
Janitorial Services	210,080	210,080				
Housekeeping/Janitorial Supplies	85,000	85,000				
Kitchen Costs	11,320	11,320				
Equipment Lease & Maintenance	6,400	6,400				
Staff Training/Development	21,409	21,409				
General Operating Total:	404,716	404,716				-
Local Travel	-	-				
Out-of-Town Travel	-					
	-					
Staff Travel Total:	-	-				-
St. Anthony's Security Services Rate: \$40 x 24 hrs x 364 days = \$349,440 for each program	349,440	349,440				
	-					
Consultant/Subcontractor Total:	349,440	349,440		-	-	-
Parking (Fleet)	9,120	9,120				
Transportation Costs (fleet maintenance, fuel, et	89,000	89,000				
Client Related costs	40,000	40,000				
Food & Food Preparation (Clients)	200,000	200,000				
Other Total:	338,120	338,120		-	-	-
TOTAL OPERATING EXPENSE	2,333,944	2,333,944		-	-	-

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)						
DHCS Legal Entity Number 01078			Appendix Number		B-2	
Provider Name Community Forward SF			Page Number		5	
Provider Number N/A			Fiscal Year		2024-2025	
			Funding Notification Date		08/14/24	
		Managed Alcohol Program (MAP)				
Program Name						
Program Code		N/A				
Mode/SFC (MH) or Modality (SUD)		SecPrev-19				
Service Description		SA-Sec Prev Outreach				
Funding Term		7/1/24 - 6/30/25				
FUNDING USES						TOTAL
Salaries & Employee Benefits		569,685				569,685
Operating Expenses		639,043				639,043
Capital Expenses						-
Subtotal Direct Expenses		1,208,728			-	1,208,728
Indirect Expenses		181,309				181,309
TOTAL FUNDING USES		1,390,037	-		-	1,390,037
BHS MENTAL HEALTH FUNDING SOURCES	Dept-Auth-Proj-Activity					
						-
						-
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		-	-		-	-
BHS SUD FUNDING SOURCES	Dept-Auth-Proj-Activity					
						-
						-
TOTAL BHS SUD FUNDING SOURCES		-	-		-	-
DPH FUNDING SOURCES	Dept-Auth-Proj-Activity					
County Prop C / OCOH	10582-210705-21531-10037398-0008	1,390,037				1,390,037
						-
TOTAL DPH FUNDING SOURCES		1,390,037	-	-	-	1,390,037
TOTAL DPH FUNDING SOURCES		1,390,037	-	-	-	1,390,037
TOTAL FUNDING SOURCES (DPH AND NON-DPH)		1,390,037	-	-	-	1,390,037
BHS UNITS OF SERVICE AND UNIT COST						
		Cost Reimbursement (CR)	Cost Reimbursement (CR)			
Payment Method						
DPH Units of Service		14,039	0			
Unit Type		Hours	Hours			
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)		99.01	-			
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)		99.01	-			
Published Rate (Medi-Cal Providers Only)						Total UDC
Unduplicated Clients (UDC)		N/A	N/A			N/A

CHECK: FUNDING USES = FUNDING SOURCES (Should always be ZERO)

FORMULA: DPH UNITS

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			MAP		Funding Notification Date								08/14/24	
	TOTAL		Dept-Auth-Proj-Activity 10582-210705-21531- 10037398-0008											
Funding Term	7/1/24 - 6/30/25		7/1/24 - 6/30/25											
Position Title	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries		
COO - Chief Operations Officer	0.04	8,049	0.04	8,049										
Vice President of Programs	0.06	9,333	0.06	9,333										
Director of Operations	0.06	6,222	0.06	6,222										
Director of Compliance	0.06	5,931	0.06	5,931										
Director of Support Services	0.35	35,000	0.35	35,000										
Deputy Director	1.00	80,000	1.00	80,000										
Guest Services Specialists (GSS)	5.50	263,120	5.50	263,120										
Operations Coordinator	0.06	3,524	0.06	3,524										
Maintenance Tech	0.50	27,040	0.50	27,040										
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Appendix B - DPH 4: Operating Expenses Detail

Program Name MAP
Program Code N/A

Appendix Number B-2
Page Number 7
Fiscal Year 2024-2025

Funding Notification Date 08/14/24

		MAP				
Expense Categories & Line Items	TOTAL	Dept-Auth-Proj-Activity 10582-210705-21531- 10037398-0008				
Funding Term	7/1/2024 - 6/30/2025	7/1/2024 - 6/30/2025				
Rent	-					
Utilities (telephone, electricity, water, gas)	10,777	10,777				
Building Repair/Maintenance	6,960	6,960				
Occupancy Total:	17,737	17,737	-	-	-	-
Office Supplies	1,400	1,400				
Photocopying	-					
Program Supplies	2,000	2,000				
Computer Hardware/Software	7,000	7,000				
Materials & Supplies Total:	10,400	10,400	-	-	-	-
Insurance	4,343	4,343				
Janitorial	76,440	76,440				
Houskeeping/Janitorial Supplies	5,342	5,342				
Kitchen Costs	5,000	5,000				
Equipment Rental / Maintenance	1,800	1,800				
Staff Training/Development	8,541	8,541				
General Operating Total:	101,466	101,466	-	-	-	-
Local Travel	-	-				
Out-of-Town Travel	-					
Field Expenses	-					
Staff Travel Total:	-	-	-	-	-	-
	-					
St. Anthony's Security Services Rate: \$40 x 24 hours x 365	349,440	349,440				
Consultant/Subcontractor Total:	349,440	349,440	-	-	-	-
Client Related Costs	60,000	60,000				
Food & Food Preparation (Clients)	80,000	80,000				
Laundry (Clients)	20,000	20,000				
Other Total:	160,000	160,000	-	-	-	-
TOTAL OPERATING EXPENSE	639,043	639,043	-	-	-	-

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Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number <u>01078</u>			Appendix Number <u>B-3</u>		
Provider Name <u>Community Forward SF</u>			Page Number <u>8</u>		
Provider Number <u>N/A</u>			Fiscal Year <u>2024-2025</u>		
			Funding Notification Date <u>08/14/24</u>		
Program Name		SoMa Recover, and Sobering Center (RISE) Transportation Shuttle Services			
Program Code					
Mode/SFC (MH) or Modality (SUD)		SecPrev-19			
Service Description		SA-Sec Prev Outreach			
Funding Term		7/1/24 - 6/30/25			
FUNDING USES		TOTAL			
Salaries & Employee Benefits		191,910		191,910	
Operating Expenses		40,794		40,794	
Capital Expenses				-	
Subtotal Direct Expenses		232,704		232,704	
Indirect Expenses		34,906		34,906	
TOTAL FUNDING USES		267,610		267,611	
BHS MENTAL HEALTH FUNDING SOURCES					
Dept-Auth-Proj-Activity					
MH SF HB Transit (Prop C)	240645-21531-10037681-0001	267,610			267,610
					-
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		267,610			-
BHS SUD FUNDING SOURCES					
Dept-Auth-Proj-Activity					
					-
					-
TOTAL BHS SUD FUNDING SOURCES		-	-	-	-
DPH FUNDING SOURCES					
Dept-Auth-Proj-Activity					
					-
					-
TOTAL DPH FUNDING SOURCES		-	-	-	-
TOTAL DPH FUNDING SOURCES		267,610	-	-	267,610

TOTAL FUNDING SOURCES (DPH AND NON-DPH)		267,610	-	-	-	267,610
BHS UNITS OF SERVICE AND UNIT COST						
	Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
	DPH Units of Service	5,446				
	Unit Type	Hours	Hours	Hours		
	Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	49.14	-	-		
	Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	49.14	-	-		
	Published Rate (Medi-Cal Providers Only)					Total UDC
	Unduplicated Clients (UDC)	N/A	N/A	N/A		N/A

CHECK: FUNDING USES = FUNDING SOURCES (Should always be ZERO)1.00

FORMULA: DPH UNITS- - - -

	TOTAL		Dept-Auth-Proj-Activity 240645-21531-10037681- 0001									
Funding Term	7/1/2024 - 6/30/2025		7/1/2024 - 6/30/2025									
Position Title	FTE	Salaries	FTE	Salaries					FTE	Salaries	FTE	Salaries
COO - Chief Operations Officer	0.01	2,738	0.01	2,738								
Vice President of Programs	0.02	3,174	0.02	3,174								
Director of Operations	0.02	2,116	0.02	2,116								
Director of Compliance	0.02	2,017	0.02	2,017								
Operations Coordinator	0.02	1,199	0.02	1,199								
Transportation Supervisor	0.50	35,000	0.50	35,000								
Dispatcher	0.50	26,499	0.50	26,499								
Driver	1.50	74,880	1.50	74,880								
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Totals:	2.59	147,623	2.59	147,623	-	-	-	-	-	-	-	-
Employee Benefits:	30.00%	44,287	30.00%	44,287	0.00%	-	0.00%	-	0.00%	-	0.00%	-
TOTAL SALARIES & BENEFITS	191,910		191,910		-		-		-		-	

Appendix B - DPH 4: Operating Expenses Detail

Program Name SOMA
 Program Code N/A

Appendix Number B-3
 Page Number 10
 Fiscal Year 2024-2025
 Funding Notification Date 08/14/24

Expense Categories & Line Items	TOTAL	SoMa RISE				
		Dept-Auth-Proj-Activity 240645-21531- 10037681-0001				
Funding Term	7/1/2024 - 6/30/2025	7/1/2024 - 6/30/2025				
Rent	-	-				
Utilities (telephone, electricity, water, gas)	435	435				
Building Repair/Maintenance	-	-				
Occupancy Total:	435	435		-	-	-
Office Supplies	431	431				
Photocopying	-					
Program Supplies	-					
Computer Hardware/Software	-					
Materials & Supplies Total:	431	431		-	-	-
Training/Staff Development	1,310	1,310				
Insurance	943	943	-			
Laundry	-	-				
Permits	-	-				
Equipment Lease & Maintenance	-	-				
General Operating Total:	2,253	2,253	-	-	-	-
Local Travel	-					
Out-of-Town Travel	-					
Field Expenses	-					
Staff Travel Total:	-	-		-	-	-
	-					
	-					
Consultant/Subcontractor Total:	-	-		-	-	-
Transportation Costs (parking, fuel, maintenanc	37,675	37,675				
	-	-				
	-					
Other Total:	37,675	37,675	-	-	-	-
TOTAL OPERATING EXPENSE	40,794	40,794	-	-	-	-

Appendix B - DPH 6: Contract-Wide Indirect Detail

Contractor Name	Community Forward SF	Page Number	11
Contract ID Number	1000032803	Fiscal Year	2024-2025
		Funding Notification Date	08/14/24

1. SALARIES & EMPLOYEE BENEFITS

Position Title	FTE	Amount
CEO - Chief Executive Officer	0.35	84,000
CFO - Chief Financial Officer	0.35	77,000
COO - Chief Operations Officer	0.35	16,625
Vice President of Talent Acquisition & Training	0.35	45,500
Vice President of Public Affairs	0.35	31,850
Vice President of Operations	0.35	43,750
Executive Assistant	0.35	36,750
Director of Finance	0.35	52,500
Human Resources Director	0.35	38,500
Sr. Accountant, AR	0.35	35,000
Sr. Accountant	0.35	35,000
HR Generalist	0.35	31,500
IT Operations Technician	0.35	35,000
	Subtotal:	4.55 562,975
	Employee Benefits:	30.0% 168,893
	Total Salaries and Employee Benefits:	731,868

2. OPERATING COSTS

Expenses (Use expense account name in the ledger.)	Amount
Occupancy	38,150
Utilities	19,985
Audit	14,000
Insurance	17,584
Payroll & Benefits Management Fees	15,855
Office & Other Supplies	20,020
Leadership Training	13,825
Recruitment	4,550
Other Operations / Admin Costs	32,929
	-
	-
	-
	-
Total Operating Costs	176,898
Total Indirect Costs	908,766

Appendix C
Reserved
Insurance Waiver

Appendix D

System Access Agreement

Appendix D
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
THIRD PARTY COMPUTER SYSTEM ACCESS AGREEMENT
(SAA)

SFDPH SAA

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TERMS AND CONDITIONS

The following terms and conditions govern Third Party access to San Francisco Department of Public Health (“Department” and/or “City”) Computer Systems. Third Party access to Department Computer Systems and Department Confidential Information is predicated on compliance with the terms and conditions set forth herein.

SECTION 1 - “THIRD PARTY” CATEGORIES

1. **Third Party In General:** means an entity seeking to access a Department Computer System. Third Party includes, but is not limited to, Contractors (including but not limited to Contractor’s employees, agents, subcontractors), Researchers, and Grantees, as further defined below. Category-specific terms for Treatment Providers, Education Institutions, and Health Insurers are set forth Sections 4 through 6, herein.
2. **Treatment Provider:** means an entity seeking access to Department Computer Systems in order to obtain patient information necessary to provide patient treatment, billing, and healthcare operations, including access for Physician Practices, Hospitals, Long Term Care Facilities, and Nursing Homes.
3. **Education Institution:** means an entity seeking access to Department Computer Systems to support the training of its students while performing education activities at Department facilities.
4. **Health Insurer:** means an entity seeking access to provide health insurance or managed care services for Department patients.

SECTION 2 - DEFINITIONS

1. **“Agreement”** means an Agreement between the Third Party and Department that necessitates Third Party’s access to Department Computer System. Agreement includes, but is not limited to, clinical trial agreements, accreditation agreements, affiliation agreements, professional services agreements, no-cost memoranda of understanding, and insurance network agreements.
2. **“Department Computer System”** means an information technology system used to gather and store information, including Department Confidential Information, for the delivery of services to the Department.
3. **“Department Confidential Information”** means information contained in a Department Computer System, including identifiable protected health information (“PHI”) or personally identifiable information (“PII”) of Department patients.
4. **“Third Party”** and/or **“Contractor”** means a Third Party Treatment Provider, Education Institution, and/or Health Insurer, under contract with the City.
5. **“User”** means an individual who is being provided access to a Department Computer Systems on behalf of Third Party. Third Party Users include, but are not limited to, Third Party’s employees, students/trainees, agents, and subcontractors.

SECTION 3 – GENERAL REQUIREMENTS

1. **Third Party Staff Responsibility.** Third Party is responsible for its work force and each Third Party User’s compliance with these Third Party System Access Terms and Conditions.
2. **Limitations on Access.** User’s access shall be based on the specific roles assigned by Department to ensure that access to Department Computer Systems and Department Confidential Information is limited to the minimum necessary to perform under the Agreement.

3. **Qualified Personnel.** Third Party and Department (i.e., training and onboarding) shall ensure that Third Party Users are qualified to access a Department Computer System.

4. **Remote Access/Multifactor Authentication.** Department may permit Third Party Users to access a Department Computer System remotely. Third Party User shall use Department's multifactor authentication solution when accessing Department systems remotely or whenever prompted.

5. **Issuance of Unique Accounts.** Department will issue a unique user account for each User of a Department Computer System. Third Party User is permitted neither to share such credentials nor use another user's account.

6. **Appropriate Use.** Third Party is responsible for the appropriate use and safeguarding of credentials for Department Computer System access issued to Third Party Users. Third Party shall take the appropriate steps to ensure that their employees, agents, and subcontractors will not intentionally seek out, download, transfer, read, use, or disclose Department Confidential Information other than for the use category described in Section 1 – "Third Party" Categories.

7. **Notification of Change in Account Requirements.** Third Party shall promptly notify Department via Third Party's Report for DPH Service Desk (dph.helpdesk@sfdph.org) in the event that Third Party or a Third Party User no longer has a need to use Department Computer Systems(s), or if the Third Party User access requirements change. Such notification shall be made no later than one (1) business day after determination that use is no longer needed or that access requirements have changed.

8. **Assistance to Administer Accounts.** The Parties shall provide all reasonable assistance and information necessary for the other Party to administer the Third Party User accounts.

9. **Security Controls.** Third Party shall appropriately secure Third Party's computing infrastructure, including but not limited to computer equipment, mobile devices, software applications, and networks, using industry standard tools to reduce the threat that an unauthorized individual could use Third Party's computing infrastructure to gain unauthorized access to a Department Computer System. Third Party shall also take commercially reasonable measures to protect its computing infrastructure against intrusions, viruses, worms, ransomware, or other disabling codes. General security controls include, but are not limited to:

a **Password Policy.** Third Party must maintain a password policy based on information security best practices for password length, complexity, and reuse. Third Party credentials used to access Third Party networks and systems must be configured for a password change no greater than every 90 calendar days.

b **Workstation/Laptop Encryption.** All Third Party-owned or managed workstations, laptops, tablets, smart phones, and similar devices that access a Department Computer System must be configured with full disk encryption using a FIPS 140-2 certified algorithm.

c **Endpoint Protection Tools.** All Third Party-owned or managed workstations, laptops, tablets, smart phones, and similar devices that access a Department Computer System must maintain a current installation of comprehensive anti-virus, anti-malware, anti-ransomware, desktop firewall, and intrusion prevention software with automatic updates scheduled at least daily.

d **Patch Management.** To correct known security vulnerabilities, Third Party shall install security patches and updates in a timely manner on all Third Party-owned workstations, laptops, tablets, smart phones, and similar devices that access Department Computer Systems based on Third Party's risk assessment of such patches and updates, the technical requirements

of Third Party's computer systems, and the vendor's written recommendations. If patches and updates cannot be applied in a timely manner due to hardware or software constraints, mitigating controls must be implemented based upon the results of a risk assessment.

e **Mobile Device Management.** Third Party shall ensure both corporate-owned and personally owned mobile devices have Mobile Device Management (MDM) installed. Given the prevalence of restricted data in Third Party's environment, all mobile devices used for Third Party's business must be encrypted. This applies to both corporate-owned and privately-owned mobile devices. At a minimum, the MDM should: Enforce an entity's security policies and perform real-time compliance checking and reporting; Enforce strong passwords/passcodes for access to mobile devices; Perform on-demand remote wipe if a mobile device is lost or stolen; Mandate device encryption.

10. **Auditing Accounts Issued.** Department reserves the right to audit the issuance and use of Third Party User accounts. To the extent that Department provides Third Party with access to tools or reports to audit what Department Confidential Information a Third Party User has accessed on a Department Computer System, Third Party must perform audits on a regular basis to determine if a Third Party User has inappropriately accessed Department Confidential Information.

11. **Assistance with Investigations.** Third Party must provide all assistance and information reasonably necessary for Department to investigate any suspected inappropriate use of a Department Computer Systems or access to Department Confidential Information. The Department may terminate a Third Party' User's access to a Department Computer System following a determination of inappropriate use of a Department Computer System.

12. **Inappropriate Access, Failure to Comply.** If Third Party suspects that a Third Party User has inappropriately accessed a Department Computer System or Department Confidential Information, Third Party must immediately, and within no more than one (1) business day, notify Department.

13. **Policies and Training.** Third Party must develop and implement appropriate policies and procedures to comply with applicable privacy, security and compliance rules and regulations. Third Party shall provide appropriate training to Third Party Users on such policies. Access will only be provided to Third Party Users once all required training is completed.

14. **Third Party Data User Confidentiality Agreement.** Before Department Computer System access is granted, as part of Department's compliance, privacy, and security training, each Third Party User must complete Department's individual user confidentiality, data security and electronic signature agreement form. The agreement must be renewed annually.

15. **Corrective Action.** Third Party shall take corrective action upon determining that a Third Party User may have violated these Third Party System Access Terms and Conditions.

16. **No Technical or Administrative Support.** Except as provided herein or otherwise agreed, the Department will provide no technical or administrative support to Third Party or Third Party User(s) for Department Computer System access; provided, however, that the foregoing does not apply to technical or administrative support necessary to fulfill Third Party's contractual and/or legal obligations, or as required to comply with the terms of this Agreement.

SECTION 4 – ADDITIONAL REQUIREMENTS FOR TREATMENT PROVIDERS

1. **Permitted Access, Use and Disclosure.** Treatment Providers and Treatment Provider Users shall access Department Confidential Information of a patient/client in accordance with applicable

privacy rules and data protection laws. Requests to obtain data for research purposes require approval from an Institutional Review Board (IRB).

2. **Redisclosure Prohibition.** Treatment Providers may not redisclose Department Confidential Information, except as otherwise permitted by law.

3. **HIPAA Security Rule.** Under the HIPAA Security Rule, Treatment Providers must implement safeguards to ensure appropriate protection of protected/electronic health information (PHI/EHI), including but not limited to the following:

- a) Ensure the confidentiality, integrity, and security of all PHI/EHI they create, receive, maintain or transmit when using Department Computer Systems;
- b) Identify and protect against reasonably anticipated threats to the security or integrity of the information;
- c) Protect against reasonably anticipated, impermissible uses or disclosures; and
- d) Ensure compliance by their workforce.

SECTION 5 – ADDITIONAL REQUIREMENTS FOR EDUCATION/TEACHING INSTITUTIONS

1. **Education Institution is Responsible for its Users.** Education Institutions shall inform Education Institution Users (including students, staff, and faculty) of their duty to comply with the terms and conditions herein. Department shall ensure that all Education Institution Users granted access to a Department Computer System shall first successfully complete Department's standard staff training for privacy and compliance, information security and awareness, and software-application specific training before being provided User accounts and access to Department Computer Systems.

2. **Tracking of Training and Agreements.** Department shall maintain evidence of all Education Institution Users (including students, staff, and faculty) having successfully completed Department's standard staff training for privacy and compliance and information security and awareness. Such evidence shall be maintained for a period of five (5) years from the date of graduation or termination of the Third Party User's access.

SECTION 6 – ADDITIONAL REQUIREMENTS FOR HEALTH INSURERS

1. **Permitted Access, Use and Disclosure.** Health Insurers and Health Insurer Users may access Department Confidential Information only as necessary for payment processing and audits, including but not limited to quality assurance activities, wellness activities, care planning activities, and scheduling.

2. **Member / Patient Authorization.** Before accessing, using, or further disclosing Department Confidential Information, Health Insurers must secure all necessary written authorizations from the patient / member or such individuals who have medical decision-making authority for the patient / member.

SECTION 7 - DEPARTMENT'S RIGHTS

1. **Periodic Reviews.** Department reserves the right to perform regular audits to determine if a Third Party's access to Department Computer Systems complies with these terms and conditions.

2. **Revocation of Accounts for Lack of Use.** Department may revoke any account if it is not used for a period of ninety (90) days.

3. **Revocation of Access for Cause.** Department and Third Party reserves the right to suspend or terminate a Third Party User's access to Department Computer Systems at any time for cause, i.e., the Parties determined that a Third-Party User has violated the terms of this Agreement and/or Applicable law.

4. **Third Party Responsibility for Cost.** Each Third Party is responsible for its own costs incurred in connection with this Agreement or accessing Department Computer Systems.

SECTION 8 - DATA BREACH; LOSS OF CITY DATA.

1. **Data Breach Discovery.** Following Third Party's discovery of a breach of City Data disclosed to Third Party pursuant to this Agreement, Third Party shall notify City in accordance with applicable laws. Third Party shall:

- i. mitigate, to the extent practicable, any risks or damages involved with the breach or security incident and to protect the operating environment; and
- ii. comply with any requirements of federal and state laws as applicable to Third Party pertaining to the breach of City Data.

2. **Investigation of Breach and Security Incidents.** To the extent a breach or security system is identified within Third Party's System that involves City Data provided under this Agreement, Third Party shall investigate such breach or security incident. For the avoidance of doubt, City shall investigate any breach or security incident identified within the City's Data System. To the extent of Third Party discovery of information that relates to the breach or security incident of City Data, Third Party User shall inform the City of:

- i. the City Data believed to have been the subject of breach;
- ii. a description of the unauthorized persons known or reasonably believed to have improperly used, accessed or acquired the City Data;
- iii. to the extent known, a description of where the City Data is believed to have been improperly used or disclosed; and
- iv. to the extent known, a description of the probable and proximate causes of the breach or security incident;

3. **Written Report.** To the extent a breach is identified within Third Party's System, Third Party shall provide a written report of the investigation to the City as soon as practicable; provided, however, that the report shall not include any information protected under the attorney-client privileged, attorney-work product, peer review laws, and/or other applicable privileges. The report shall include, but not be limited to, the information specified above, as well as information on measures to mitigate the breach or security incident.

4. **Notification to Individuals.** If notification to individuals whose information was breached is required under state or federal law, Third Party shall cooperate with and assist City in its notification (including substitute notification) to the individuals affected by the breach

5. **Sample Notification to Individuals.** If notification to individuals is required, Third Party shall cooperate with and assist City in its submission of a sample copy of the notification to the Attorney General.

6. **Media Communications.** The Parties shall together determine any communications related to a Data Breach.

7. **Protected Health Information.** Third Party and its subcontractors, agents, and employees shall comply with all federal and state laws regarding the transmission, storage and protection of all PHI disclosed to Third Party by City. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of PHI given to Third Party by City, Third Party shall indemnify City for the amount of such fine or penalties or damages, including costs of notification, but only in proportion to and to the extent that such fine, penalty or damages are caused by or result from the impermissible acts or omissions of Third Party. This section does not apply to the extent fines or penalties or damages were caused by the City or its officers, agents, subcontractors or employees.

Attachment 1 to SAA
System Specific Requirements

I. For Access to Department Epic through Care Link the following terms shall apply:

A. Department Care Link Requirements:

1. Connectivity.
 - a) Third Party must obtain and maintain an Internet connection and equipment in accordance with specifications provided by Epic and/or Department. Technical equipment and software specifications for accessing Department Care Link may change over time. Third Party is responsible for all associated costs. Third Party shall ensure that Third Party Data Users access the System only through equipment owned or leased and maintained by Third Party.
2. Compliance with Epic Terms and Conditions.
 - a) Third Party will at all times access and use the System strictly in accordance with the Epic Terms and Conditions. The following Epic Care Link Terms and Conditions are embedded within the Department Care Link application, and each Data User will need to agree to them electronically upon first sign-in before accessing Department Care Link:
3. Epic-Provided Terms and Conditions
 - a) Some short, basic rules apply to you when you use your EpicCare Link account. Please read them carefully. The Epic customer providing you access to EpicCare Link may require you to accept additional terms, but these are the rules that apply between you and Epic.
 - b) Epic is providing you access to EpicCare Link, so that you can do useful things with data from an Epic customer's system. This includes using the information accessed through your account to help facilitate care to patients shared with an Epic customer, tracking your referral data, or otherwise using your account to further your business interests in connection with data from an Epic customer's system. However, you are not permitted to use your access to EpicCare Link to help you or another organization develop software that is similar to EpicCare Link. Additionally, you agree not to share your account information with anyone outside of your organization.

II. For Access to Department Epic through Epic Hyperspace the following terms shall apply:

A. Department Epic Hyperspace:

1. Connectivity.
 - a) Third Party must obtain and maintain an Internet connection and required equipment in accordance with specifications provided by Epic and Department. Technical equipment and software specifications for accessing Department Epic Hyperspace will change over time. You may request a copy of required browser, system, and connection requirements from the Department IT division. Third Party is responsible for all associated costs. Third Party shall ensure that Third Party Data Users access the System in accordance with the terms of this agreement.
2. Application For Access and Compliance with Epic Terms and Conditions.
 - a) Prior to entering into agreement with Department to access Department Epic Hyperspace, Third Party must first complete an Application For Access with Epic Systems Corporation of Verona, WI. The Application For Access is found at:

<https://userweb.epic.com/Forms/AccessApplication>. Epic Systems Corporation notifies Department, in writing, of Third Party's permissions to access Department Epic Hyperspace prior to completing this agreement. Third Party will at all times access and use the system strictly in accordance with the Epic Terms and Conditions.

III. For Access to Department myAvatar the following terms shall apply:

A. Department myAvatar

1. Connectivity.

- a. Third Party must obtain an Internet connection and required equipment in accordance with specifications provided by Department. Technical equipment and software specifications for accessing Department myAvatar will change over time. You may request a copy of required browser, system, and connection requirements from the Department IT division. Third Party is responsible for all associated costs. Third Party shall ensure that Third Party Data Users access the System only through equipment owned or leased and maintained by Third Party.

2. Information Technology (IT) Support.

- a. Third Party must have qualified and professional IT support who will participate in quarterly CBO Technical Workgroups.

3. Access Control.

- a. Access to the BHS Electronic Health Record is granted based on clinical and business requirements in accordance with the Behavioral Health Services EHR Access Control Policy (6.00-06). The Access Control Policy is found at:
<https://www.sfdph.org/dph/files/CBHSPolProcMnl/6.00-06.pdf>
- b. Applicants must complete the myAvatar Account Request Form found at
https://www.sfdph.org/dph/files/CBHSdocs/BHISdocs/UserDoc/Avatar_Account_Request_Form.pdf
- c. All licensed, waived, registered and/or certified providers must complete the Department credentialing process in accordance with the DHCS MHSUDS Information Notice #18-019.

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

This Business Associate Agreement (“BAA”) supplements and is made a part of the contract by and between the City and County of San Francisco, the Covered Entity (“CE”), and Contractor, the Business Associate (“BA”) (the “Agreement”). To the extent that the terms of the Agreement are inconsistent with the terms of this BAA, the terms of this BAA shall control.

RECITALS

A. CE, by and through the San Francisco Department of Public Health (“SFDPH”), wishes to disclose certain information to BA pursuant to the terms of the Agreement, some of which may constitute Protected Health Information (“PHI”) (defined below).

B. For purposes of the Agreement, CE requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this BAA as a BA of CE.

C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”), and regulations promulgated there under by the U.S. Department of Health and Human Services (the “HIPAA Regulations”) and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the “California Regulations”).

D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations (“C.F.R.”) and contained in this BAA.

E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this BAA to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this BAA, the parties agree as follows:

1. Definitions.

a. **Breach** means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall

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have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

b. Breach Notification Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. Business Associate is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, but other than in the capacity of a member of the workforce of such covered entity or arrangement, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. Covered Entity means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. Data Aggregation means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. Designated Record Set means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. Electronic Protected Health Information means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this BAA, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. Electronic Health Record means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

i. Health Care Operations shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

j. Privacy Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

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k. Protected Health Information or PHI means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this BAA, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

l. Protected Information shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.

m. Security Incident means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

n. Security Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

o. Unsecured PHI means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

2. Obligations of Business Associate.

a. Attestations. Except when CE's data privacy officer exempts BA in writing, the BA shall complete the following forms, attached and incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1) and Data Security (Attachment 2) within sixty (60) calendar days from the execution of the Agreement. If CE makes substantial changes to any of these forms during the term of the Agreement, the BA will be required to complete CE's updated forms within sixty (60) calendar days from the date that CE provides BA with written notice of such changes. BA shall retain such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

b. User Training. The BA shall provide, and shall ensure that BA subcontractors, provide, training on PHI privacy and security, including HIPAA and HITECH and its regulations, to each employee or agent that will access, use or disclose Protected Information, upon hire and/or prior to accessing, using or disclosing Protected Information for the first time, and at least annually thereafter

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during the term of the Agreement. BA shall maintain, and shall ensure that BA subcontractors maintain, records indicating the name of each employee or agent and date on which the PHI privacy and security trainings were completed. BA shall retain, and ensure that BA subcontractors retain, such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

c. Permitted Uses. BA may use, access, and/or disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. Further, BA shall not use Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].

d. Permitted Disclosures. BA shall disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this BAA and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2 (n) of this BAA, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

e. Prohibited Uses and Disclosures. BA shall not use or disclose Protected Information other than as permitted or required by the Agreement and BAA, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the Protected Information solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section

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164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

f. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Agreement or this BAA, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

g. Business Associate's Subcontractors and Agents. BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.f. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

h. Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least seven (7) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request

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for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

i. Access to Protected Information. BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

j. Amendment of Protected Information. Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

k. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

l. Minimum Necessary. BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

m. Data Ownership. BA acknowledges that BA has no ownership rights with respect to the Protected Information.

n. Notification of Breach. BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the BAA; any

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Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents.

Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

a. Material Breach. A breach by BA of any provision of this BAA, as determined by CE, shall constitute a material breach of the Agreement and this BAA and shall provide grounds for immediate termination of the Agreement and this BAA, any provision in the AGREEMENT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii).]

b. Judicial or Administrative Proceedings. CE may terminate the Agreement and this BAA, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.

c. Effect of Termination. Upon termination of the Agreement and this BAA for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If

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return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this BAA to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI. Per the Secretary's guidance, the City will accept destruction of electronic PHI in accordance with the standards enumerated in the NIST SP 800-88, Guidelines for Media Sanitization. The City will accept destruction of PHI contained in paper records by shredding, burning, pulping, or pulverizing the records so that the PHI is rendered unreadable, indecipherable, and otherwise cannot be reconstructed.

d. Civil and Criminal Penalties. BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure or Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

e. Disclaimer. CE makes no warranty or representation that compliance by BA with this BAA, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Agreement or this BAA may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the updated standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Agreement upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

5. Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible access, use or disclosure

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of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days from City's written notice to BA of such fines, penalties or damages.

Attachment 1 – SFDPH Privacy Attestation, version 06-07-2017

Attachment 2 – SFDPH Data Security Attestation, version 06-07-2017

Attachment 3 – Protected Information Destruction Order Purge Certification 01-10-2024

Office of Compliance and Privacy Affairs
San Francisco Department of Public Health
101 Grove Street, Room 330, San Francisco, CA 94102
Email: compliance.privacy@sfdph.org
Hotline (Toll-Free): 1-855-729-6040

Contractor Name:		Contractor City Vendor ID	
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PRIVACY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFDPH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFDPH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions below in Section IV on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...							Yes	No*
A	Have formal Privacy Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?							
B	Have a Privacy Officer or other individual designated as the person in charge of investigating privacy breaches or related incidents?							
	If yes:	Name & Title:		Phone #		Email:		
C	Require health information Privacy Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFDPH privacy training materials are available for use; contact OCPA at 1-855-729-6040.]							
D	Have proof that employees have signed a form upon hire and annually thereafter, with their name and the date, acknowledging that they have received health information privacy training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]							
E	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's health information?							
F	Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisory authorization to do so AND that health information is only transferred or created on encrypted devices approved by SFDPH Information Security staff?							

II. Contractors who serve patients/clients and have access to SFDPH PHI, must also complete this section.

If Applicable: DOES YOUR ORGANIZATION...		Yes	No*
G	Have (or will have if/when applicable) evidence that SFDPH Service Desk (628-206-SERV) was notified to de-provision employees who have access to SFDPH health information record systems within 2 business days for regular terminations and within 24 hours for terminations due to cause?		
H	Have evidence in each patient's / client's chart or electronic file that a Privacy Notice that meets HIPAA regulations was provided in the patient's / client's preferred language? (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms may be required and are available from SFDPH.)		
I	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?		
J	Document each disclosure of a patient's/client's health information for purposes <u>other than</u> treatment, payment, or operations?		
K	When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Privacy Rule) are obtained PRIOR to releasing a patient's/client's health information?		

III. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Privacy Officer or designated person	Name: (print)		Signature		Date	
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IV. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at **1-855-729-6040** or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
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Contractor Name:		Contractor City Vendor ID	
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DATA SECURITY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFPDH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFPDH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions in Section III below on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...						Yes	No*
A	Conduct assessments/audits of your data security safeguards to demonstrate and document compliance with your security policies and the requirements of HIPAA/HITECH at least every two years? [Retain documentation for a period of 7 years]						
B	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?						
	Date of last Data Security Risk Assessment/Audit:						
	Name of firm or person(s) who performed the Assessment/Audit and/or authored the final report:						
C	Have a formal Data Security Awareness Program?						
D	Have formal Data Security Policies and Procedures to detect, contain, and correct security violations that comply with the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH)?						
E	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?						
	If yes:	Name & Title:		Phone #			
F	Require Data Security Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFPDH data security training materials are available for use; contact OCPA at 1-855-729-6040.]						
G	Have proof that employees have signed a form upon hire and annually, or regularly, thereafter, with their name and the date, acknowledging that they have received data security training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]						
H	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFPDH's health information?						
I	Have (or will have if/when applicable) a diagram of how SFPDH data flows between your organization and subcontractors or vendors (including named users, access methods, on-premise data hosts, processing systems, etc.)?						

II. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Data Security Officer or designated person	Name: (print)		Signature		Date	
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III. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at **1-855-729-6040** or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
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Attachment 3 to Appendix E

Protected Information Destruction Order
Purge Certification - Contract ID # _____

In accordance with section 3.c (Effect of Termination) of the Business Associate Agreement, attached as Appendix E to the Agreement between the City and Contractor dated _____ (“Agreement”), the City hereby directs Contractor to destroy all Protected Information that Contractor and its agents and subcontractors (collectively “Contractor”) still maintain in any form. Contractor may retain no copies of destroyed Protected Information.” Destruction must be in accordance with the guidance of the Secretary of the U.S. Department of Health and Human Services (“Secretary”) regarding proper destruction of PHI.

Electronic Data: Per the Secretary’s guidance, the City will accept destruction of electronic Protected Information in accordance with the standards enumerated in the NIST SP 800-88, Guidelines for Data Sanitization (“NIST”).

Hard-Copy Data: Per the Secretary’s guidance, the City will accept destruction of Protected Information contained in paper records by shredding, burning, pulping, or pulverizing the records so that the Protected Information is rendered unreadable, indecipherable, and otherwise cannot be reconstructed.

Contractor hereby certifies that Contractor has destroyed all Protected Information as directed by the City in accordance with the guidance of the Secretary of the U.S. Department of Health and Human Services (“Secretary”) regarding proper destruction of PHI.

So Certified

Signature

Title:

Date:

Appendix F

Invoice

Contractor shall submit invoices according to the procedures established by the Department of Public Health.

The Invoice Analyst for the City shall email the Contractor the appropriate invoice template to use.

Failure to use the provided invoice template by the City may result in delayed payments.

Appendix G

Dispute Resolution Procedure

For Health and Human Services Nonprofit Contractors

9-06

Introduction

The City Nonprofit Contracting Task Force submitted its final report to the Board of Supervisors in June 2003. The report contains thirteen recommendations to streamline the City's contracting and monitoring process with health and human services nonprofits. These recommendations include: (1) consolidate contracts, (2) streamline contract approvals, (3) make timely payment, (4) create review/appellate process, (5) eliminate unnecessary requirements, (6) develop electronic processing, (7) create standardized and simplified forms, (8) establish accounting standards, (9) coordinate joint program monitoring, (10) develop standard monitoring protocols, (11) provide training for personnel, (12) conduct tiered assessments, and (13) fund cost of living increases. The report is available on the Task Force's website at http://www.sfgov.org/site/npcontractingtf_index.asp?id=1270. The Board adopted the recommendations in February 2004. The Office of Contract Administration created a Review/Appellate Panel ("Panel") to oversee implementation of the report recommendations in January 2005.

The Board of Supervisors strongly recommends that departments establish a Dispute Resolution Procedure to address issues that have not been resolved administratively by other departmental remedies. The Panel has adopted the following procedure for City departments that have professional service grants and contracts with nonprofit health and human service providers. The Panel recommends that departments adopt this procedure as written (modified if necessary to reflect each department's structure and titles) and include it or make a reference to it in the contract. The Panel also recommends that departments distribute the finalized procedure to their nonprofit contractors. Any questions or concerns about this Dispute Resolution Procedure should be addressed to purchasing@sfgov.org.

Dispute Resolution Procedure

The following Dispute Resolution Procedure provides a process to resolve any disputes or concerns relating to the administration of an awarded professional services grant or contract between the City and County of San Francisco and nonprofit health and human services contractors.

Contractors and City staff should first attempt to come to resolution informally through discussion and negotiation with the designated contact person in the department.

If informal discussion has failed to resolve the problem, contractors and departments should employ the following steps:

- **Step 1** The contractor will submit a written statement of the concern or dispute addressed to the Contract/Program Manager who oversees the agreement in question. The

writing should describe the nature of the concern or dispute, i.e., program, reporting, monitoring, budget, compliance or other concern. The Contract/Program Manager will investigate the concern with the appropriate department staff that are involved with the nonprofit agency's program, and will either convene a meeting with the contractor or provide a written response to the contractor within 10 working days.

- Step 2 Should the dispute or concern remain unresolved after the completion of Step 1, the contractor may request review by the Division or Department Head who supervises the Contract/Program Manager. This request shall be in writing and should describe why the concern is still unresolved and propose a solution that is satisfactory to the contractor. The Division or Department Head will consult with other Department and City staff as appropriate, and will provide a written determination of the resolution to the dispute or concern within 10 working days.
- Step 3 Should Steps 1 and 2 above not result in a determination of mutual agreement, the contractor may forward the dispute to the Executive Director of the Department or their designee. This dispute shall be in writing and describe both the nature of the dispute or concern and why the steps taken to date are not satisfactory to the contractor. The Department will respond in writing within 10 working days.

In addition to the above process, contractors have an additional forum available only for disputes that concern implementation of the thirteen policies and procedures recommended by the Nonprofit Contracting Task Force and adopted by the Board of Supervisors. These recommendations are designed to improve and streamline contracting, invoicing and monitoring procedures. For more information about the Task Force's recommendations, see the June 2003 report at http://www.sfgov.org/site/npcontractingtf_index.asp?id=1270.

The Review/Appellate Panel oversees the implementation of the Task Force report. The Panel is composed of both City and nonprofit representatives. The Panel invites contractors to submit concerns about a department's implementation of the policies and procedures. Contractors can notify the Panel after Step 2. However, the Panel will not review the request until all three steps are exhausted. This review is limited to a concern regarding a department's implementation of the policies and procedures in a manner which does not improve and streamline the contracting process. This review is not intended to resolve substantive disputes under the contract such as change orders, scope, term, etc. The contractor must submit the request in writing to purchasing@sfgov.org. This request shall describe both the nature of the concern and why the process to date is not satisfactory to the contractor. Once all steps are exhausted and upon receipt of the written request, the Panel will review and make recommendations regarding any necessary changes to the policies and procedures or to a department's administration of policies and procedures.

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC HEALTH

Dept. Code: DPH

Type of Request: ☐ Initial ☒ Modification of an existing PSC (PSC # 48652 - 16/17)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Substance Use Disorder (SUD) Treatment Services

Funding Source: State Drug MediCal, General Fund

PSC Original Approved Amount: \$192,080,000 PSC Original Approved Duration: 07/01/17 - 06/30/22 (5 years)

PSC Mod#1 Amount: \$175,800,000 PSC Mod#1 Duration: 07/01/22-06/30/27 (5 years 1 day)

PSC Mod#2 Amount: no amount added PSC Mod#2 Duration: 07/01/27-06/30/28 (1 year 1 day)

PSC Mod#3 Amount: no amount added PSC Mod#3 Duration: 07/01/28-06/30/29 (1 year)

PSC Cumulative Amount Proposed: \$367,880,000 PSC Cumulative Duration Proposed: 12 years 2 days

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

These services will be provided by contractors responding to a new RFP to create a Drug Medi-Cal Organized Delivery System (DMC-ODS) pilot, which tests a new paradigm for the organized delivery of health care services for Medicaid eligible individuals with a substance use disorder. Its purpose is to demonstrate how such a system will increase the success of DMC beneficiaries while decreasing other system health care costs. Critical elements include:

--Providing a continuum of care modeled after the American Society of Addiction Medicine (ASAM) Criteria for Substance Use Disorder (SUD) treatment services, which describes specific service levels within Opioid Treatment, Intensive Outpatient, and Residential SUD services;

--Increasing local control and accountability, creating utilization controls, and increasing program oversight and integrity;

--Requiring evidence-based practices and increasing coordination with other systems of care, including primary care and mental health;

--Expanding the SUD treatment workforce by including Licensed Practitioners of Healing Arts; and

--Providing more intensive services for the criminal justice population.

Services will:

--Prioritize services to specific populations, including persons who are Black/African American, homeless, incarcerated or involved with the criminal/juvenile justice systems/Drug Court, adolescents aged 10-18 years old, Transitional Aged Youth (TAY) aged 18-24 years old, Lesbian/Gay/Bisexual/Transgender/Queer/Questioning/Intersex/Ally/Two-Spirit, Pregnant/Parenting women with children, and/or whose primary substance is alcohol.

--Prioritize services in specific geographic areas, including Hayes Valley/Tenderloin/North of Market, South of Market, Bernal Heights/Inner Mission/94110, Bayview Hunter's Point/94124, and Southeast/Visitation Valley/Sunnydale/94134

--Include patient engagement and peer support, medication assisted treatment, withdrawal management, case management, and recovery services and supports, with appropriate integration of adolescent-specific

considerations, pregnant women and women with dependent children residential treatment requirements, evidence-based practices, DMC-ODS compliant policies and regulations, electronic health records and data systems, evaluation and quality improvement, workforce development and staffing, ancillary treatment and outreach services.

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

The State funding that San Francisco receives for Substance Use Disorder treatment is now the result of California's Medi-Cal waiver, which received Federal approval August 2015 and was rolled out to counties in steps throughout 2016. This waiver allows counties to support a much wider range of options to people with low incomes who are on Medi-Cal. Without this funding, San Francisco's funding for SUD treatment would be severely limited and people needing these services would likely be untreated and/or require significant increases in repetitive primary care and mental health treatment, experiencing worsening symptoms, requiring more expensive treatment, and escalating mortality rates.

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.

PSC 48652-16/17

D. Will the contract(s) be renewed?

Yes, as funding is available.

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:

The Department expects the need for the services to continue.

2. Reason(s) for the Request

A. Display all that apply

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

Explain the qualifying circumstances:

The City does not have the facilities (including buildings for residential services) or capacity to provide these services, which provide an integral part of the City's system of care for people with substance abuse disorder diagnoses.

B. Reason for the request for modification:

To align the duration with the anticipated contract term.

3. Description of Required Skills/Expertise

A. Specify required skills and/or expertise: Contractors must provide services responsive to the requirements and goals of the new DMC-ODS pilot founded on values of a trauma-informed system of care, the practice of cultural humility and of whole person care, utilizing multi-dimensional assessments as specified by the American Society of Addiction Medicine (ASAM) criteria and an evidence-based, clinically/outcomes-driven treatment model that is person-centered, based on the person's illness and level of functioning, operating within the broad and flexible continuum of care, providing individualized treatment that can be stepped up or down to different care levels, and implemented with an interdisciplinary team approach in collaboration with the person's medical home, behavioral health clinics, and other services providers. All providers must also meet State and City requirements for Drug Medi-Cal certification, harm reduction, cultural and linguistic competency, Americans with Disabilities Act and other access requirements, as well as have the ability to serve priority service populations and geographic service areas.

B. Which, if any, civil service class(es) normally perform(s) this work? 2110, Medical Records Clerk; 2305, Psychiatric Technician; 2320, Registered Nurse; 2328, Nurse Practitioner; 2552, Dir of Act, Therapy & Vol

Svcs; 2574, Clinical Psychologist; 2585, Health Worker 1; 2586, Health Worker 2; 2587, Health Worker 3; 2588, Health Worker 4; 2589, Health Program Coordinator 1; 2591, Health Program Coordinator 2; 2593, Health Program Coordinator 3; 2822, Health Educator; 2908, Hospital Eligibility Worker; 2910, Social Worker; 2913, Program Specialist; 2915, Program Specialist Supervisor; 2920, Medical Social Worker; 2930, Psychiatric Social Worker; 2935, Sr Marriage, Fam & Cld Cnslr;

- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: Yes, contractors will provide their own treatment and office space, including buildings for residential treatment, as licensed/required by the State.

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.
Existing civil service classes are already overburdened with the current maximum level of delivery of local government-based services which can be provided by the City and County. The remainder of the substance use disorder treatment services within the City's system of care must be based in and often is best performed by community based organizations with the experience, focus, and often the trust of and credibility in the community, who are able to operate the flexible, grassroots-oriented programs.
- 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: No, there are existing classifications performing this work, however, the demand for services exceeds the capacity of City facilities to provide them, so the City uses contractors to meet as many of the clients' needs as possible.

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.
The purpose of the services is does not include formal training of civil service staff, however, there may be transfer of knowledge through City staff's close coordination and collaboration with providers.
- 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.
Please see attached list of current contractors.

7. Union Notification: On 05/30/24, the Department notified the following employee organizations of this PSC/RFP request:

SEIU Local 1021; SEIU 1021 Miscellaneous; Professional & Tech Engrs, SFAPP; Professional & Tech Engrs, Local 21; Prof & Tech Eng, Local 21; Management & Superv Local 21; Architect & Engineers, Local 21;

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

Name: Reanna Albert Phone: 628-271-6178 Email: reanna.albert@sfdph.org

Address: 101 Grove Street, Room 307, San Francisco, CA 94103

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 48652 - 16/17

DHR Analysis/Recommendation:

Commission Approval Not Required

Approved by DHR on 09/06/2024



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102

Phone: 415.252.3100 . Fax: 415.252.3112

ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 251132

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Reanna Albert	628-271-6198
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	reanna.albert@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Community Forward SF	TELEPHONE NUMBER (415) 223-1430
STREET ADDRESS (including City, State and Zip Code) 1171 MISSION STREET 2ND FLOOR, SF, CA 94103	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 251132
DESCRIPTION OF AMOUNT OF CONTRACT \$32,262,830		
NATURE OF THE CONTRACT (Please describe) Provide medical respite and sobering center services.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
☐	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
☒	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
☐	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Nguyen	QuynhChi	Board of Directors
2	Flynn	Bradley	Board of Directors
3	Burns	Ryan	Board of Directors
4	Blume	Brooke	Board of Directors
5	Bloomin	Rose	Board of Directors
6	Hameed	Qimmah	Board of Directors
7	Lin-Arlow	June	Board of Directors
8	Manuchehri	Parvin	Board of Directors
9	Ramsey	Patrick	Board of Directors
10	Rayner	Sammie	CEO
11	Uselman	John	CEO
12	Houston	Felicia	Other Principal Officer
13			
14			
15			
16			
17			
18			
19			

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39			
40			
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☐ Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK

DATE SIGNED

BOS Clerk of the Board



San Francisco Department of Public Health

Daniel Tsai
Director of Health

City and County of San Francisco
Daniel Lurie, Mayor

November 10, 2025

Angela Calvillo, Clerk of the Board
Board of Supervisors
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102-4689

Dear Ms. Calvillo:

Please find attached a proposed resolution for Board of Supervisors approval of an amendment to the agreement between the Department of Public Health and Community Forward SF, in the amount of \$32,262,830.

This contract agreement requires Board of Supervisors approval under San Francisco Charter Section 9.118.

The following is a list of accompanying documents:

- Proposed Resolution
- Proposed Amendment 1
- Original Agreement
- Form SFEC-126
- PSC 48652-1617

For questions on this matter, please contact me at (628) 271-6178, reanna.albert@sfdph.org.

Thank you for your time and consideration.

Sincerely,

Reanna Albert

Reanna Albert
Senior Contracts Analyst
Office of Contracts Management and Compliance
DPH Business Office

cc: Daniel Tsai, Director of Health
Jenny Louie, Chief Operating Officer
Michelle Ruggels, Director, DPH Business Office

The mission of the San Francisco Department of Public Health is to protect and promote the health of all San Franciscans.

We shall ~ Assess and research the health of the community ~ Develop and enforce health policy ~ Prevent disease and injury ~

~ Educate the public and train health care providers ~ Provide quality, comprehensive, culturally-proficient health services ~ Ensure equal access to all ~

reanna.albert@sfdph.org – office 621-271-6178 – fax 415 252-3088

101 Grove Street, Room 410, San Francisco, CA 94102
