

**CALIFORNIA SEXUALLY TRANSMITTED DISEASES PROGRAM**  
**Hepatitis C Virus Testing and Linkages to Care**  
**Demonstration Projects (RFA #15-10749)**  
**Awarded By**  
**THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter “Department”**  
**TO**  
**San Francisco Department of Public Health, hereinafter “Grantee”**  
**Implementing the project, “Hepatitis C Virus Testing and Linkages to Care**  
**Demonstration Project,” hereinafter “Project”**

**GRANT NUMBER 15-10965**

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

**AUTHORITY:** The Department has authority to grant funds for the Project under Health and Safety Code Section 131085(a).

**PURPOSE:** The Department shall provide a grant to and for the benefit of the Grantee. The purpose of the Grant is to implement the objectives in Goals 2 and 3 by increasing the local health jurisdictions’ and community-based organizations’ capacity for and delivery of HCV screening, testing, and linkages to care services and increasing community health centers’, federally qualified health centers’, rural health clinics’, and other primary care providers’ capacity for and delivery of hepatitis C clinical management and acceptance of hepatitis C care referrals as described and specified in the Scope of Work of the grant application, which is hereby incorporated to serve as the Project.

**GRANT AMOUNT:** The maximum amount payable under this Grant shall not exceed One Million, Three Hundred Sixty-Eight Thousand Dollars (\$1,368,000).

**TERM OF GRANT:** The term of the Grant shall begin on March 1, 2016 and terminates on June 30, 2018. No funds may be requested or invoiced for work performed or costs incurred after June 30, 2018.

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

| <b>California Department of Public Health</b>   | <b>Grantee: San Francisco Department of Public Health</b>                 |
|---|---|
| Name: Christine Johnson, Grant Manager  | Name: Tomás J. Aragón, MD, Dr. PH   |
| Address: P.O. Box 997377, MS 7320   | Address: 101 Grove Street, Room 308                                       |
| City, Zip: Sacramento, CA 95899-7377  | City, Zip: San Francisco, 94102   |
| Phone: (916) 552-9796   | Phone: (415) 787-2583   |
| Fax: (916) 440-5361   | Fax: N/A  |
| Email: <a href="mailto:christine.johnson@cdph.ca.gov">christine.johnson@cdph.ca.gov</a> | Email: <a href="mailto:tomas.aragon@sfdph.org">tomas.aragon@sfdph.org</a> |

Direct all inquiries to:

|   |   |
|---|---|
| <b>California Department of Public Health<br/>STD Control Branch</b>                    | <b>Grantee: San Francisco Department of Public Health</b>             |
| Attention: STD Control Branch   | Name: Katie Burk  |
| Address: P.O. Box 997377, MS 7320   | Address: 25 Van Ness Avenue, Suite 500                                |
| City, Zip: Sacramento, CA 95899-7377  | City, Zip: San Francisco, 94102                                       |
| Phone: (916) 552-9796   | Phone: (415) 437-6212   |
| Fax: (916) 440-5361   | Fax: (415) 431-7154   |
| Email: <a href="mailto:christine.johnson@cdph.ca.gov">christine.johnson@cdph.ca.gov</a> | Email: <a href="mailto:katie.burk@sfdph.org">katie.burk@sfdph.org</a> |

Either party may change its Project Representative upon written notice to the other party.

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

- Exhibit A GRANT APPLICATION  
The Grant Application provides the description of the project.
- Exhibit B BUDGET DETAIL AND PAYMENT PROVISIONS
- Exhibit C STANDARD GRANT CONDITIONS
- Exhibit D REQUEST FOR APPLICATIONS #15-10749  
Including all the requirements and attachments contained therein.
- Exhibit E GRANTEE’S WRITTEN MODIFICATIONS TO THE GRANT APPLICATION  
The approved SOW supersedes the proposed SOW in the Grant Application.
- Exhibit F Additional Provisions

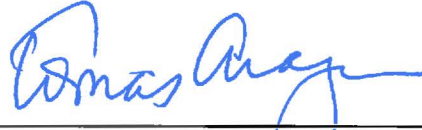
**GRANTEE REPRESENTATIONS:** The Grantee(s) accept all terms, provisions, and conditions of this grant, including those stated in the Exhibits incorporated by reference above. The Grantee(s) shall fulfill all assurances and commitments made in the application, declarations, other accompanying documents,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

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

Executed By:

Date:

3/9/16



\_\_\_\_\_  
Tomás J. Aragón, MD, DrPH  
Health Officer, City & County of San Francisco  
Director, Population Health Division  
San Francisco Department of Public Health  
101 Grove Street, Room 308  
San Francisco, CA 94102

Date:

\_\_\_\_\_  
Yolanda Murillo, MHA, Chief  
Contracts Management Unit  
California Department of Public Health  
1616 Capitol Avenue, Suite 74.317  
MS 1802, P.O. Box 997377  
Sacramento, CA 95899-7377

## Mojica, Richelle-Lynn (DPH)

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**Subject:** FW: Grant #15-10965, County of San Francisco

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**From:** Johnson, Christine (CDPH-CID-DCDC-STD) <[Christine.Johnson@cdph.ca.gov](mailto:Christine.Johnson@cdph.ca.gov)>

**Sent:** Tuesday, March 1, 2016 9:53 AM

**To:** Burk, Katie (DPH)

**Cc:** Geckeler, Dara (DPH); Packer, Tracey (DPH); Shaikh, Sajid (DPH)

**Subject:** Grant #15-10965, County of San Francisco

Good morning,

Please find attached the above-referenced Contract #15-10965, Agreement between the California Department of Public Health and County of San Francisco for review and signature.

The Agreement is an Adobe Acrobat PDF document with "READ ONLY" attributes. If you encounter any problems please contact me immediately for assistance. Please do not alter this Agreement, but if necessary, all requests for changes/corrections must be submitted to CDPH for Contract Management Unit approval prior to Grantee signature.

To approve this Agreement print, sign, and return only the following checked items:

- Two (2) original copies of the Grant Agreement (CDPH 1299) signature page only (page three of the grant agreement); both copies must bear original signatures.**
- One (1) original copy of the Board Resolution/Order/Motion, ordinance, or other similar document authorizing execution of the agreement.**

Please return all requested original signed pages to this address:

California Department of Public Health  
STD Control Branch  
Attn: Christine Johnson, Grant Manager  
1616 Capitol Ave., MS 7320  
Sacramento, CA 95814

The anticipated start date of this Agreement is upon final execution through June 30, 2018; however, please be advised that this Agreement is not valid until final State approval has been obtained. In an effort to expedite this Agreement through the approval process, we request that the attached items be returned as soon as possible. Please let me know if you anticipate any delays in returning the signed Agreement. Upon final approval you will receive an executed copy along with Exhibit B, Attachment I budget and the monthly invoice template.

If you have any questions and/or concerns, please contact me at the number listed below.

Thank you,

**Christine Johnson**  
Contract/Procurement Analyst  
California Department of Public Health  
STD Control Branch, MS 7320  
P.O. Box 997377

## Mojica, Richelle-Lynn (DPH)

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**From:** Shaikh, Sajid (DPH)  
**Sent:** Tuesday, March 01, 2016 2:48 PM  
**To:** Mojica, Richelle-Lynn (DPH)  
**Subject:** Fw: Board Resolution for HCV Grant Award #15-10965

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

FYI, another communication with the state regarding BOS resolution needed before agreement can be executed.

thanks  
Sajid Shaikh  
Budget & Finance  
1380 Howard St, suite 423A  
San Francisco, CA 94103  
p: 415-255-3512  
F: 415-503-4710

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**From:** Johnson, Christine (CDPH-CID-DCDC-STD) <Christine.Johnson@cdph.ca.gov>  
**Sent:** Tuesday, March 1, 2016 2:27 PM  
**To:** Shaikh, Sajid (DPH); Burk, Katie (DPH)  
**Cc:** Geckeler, Dara (DPH); Melichar, John (DPH); Packer, Tracey (DPH)  
**Subject:** RE: Board Resolution for HCV Grant Award #15-10965

Good afternoon,

I sent the grant documents this morning and since then I've heard there may be an issue with the board resolution. I remember it was mentioned (below) that the Board requires an executed agreement, but we (CDPH) can't execute an agreement unless the grant documents have been signed by both parties and we have a board resolution.

The e-mail below mentioned pushing it through with the award letter. Will you be able to do that since we can't execute the agreement without the board resolution?

**Christine Johnson**  
Contract/Procurement Analyst  
California Department of Public Health  
STD Control Branch, MS 7320  
P.O. Box 997377  
Sacramento, CA 95899-7377  
Tel: (916) 552-9796 / Fax: (916) 440-5361  
E-mail: [christine.johnson@cdph.ca.gov](mailto:christine.johnson@cdph.ca.gov)

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**From:** Shaikh, Sajid (DPH) [mailto:sajid.shaikh@sfdph.org]  
**Sent:** Monday, February 01, 2016 8:37 AM  
**To:** Johnson, Christine (CDPH-CID-DCDC-STD); Burk, Katie (DPH)  
**Cc:** Geckeler, Dara (DPH); Melichar, John (DPH); Packer, Tracey (DPH); Otow, May (CDPH-CID-DCDC-STD)  
**Subject:** Re: Board Resolution for HCV Grant Award

Board Resolution process takes 2-3 mos. Earliest resolution will be done is mid-April. The Board requires an executed agreement but we will try to push it thru with the preliminary award letter. It would be great if the executed agreement is processed before the board hearing in mid-March.

thanks  
Sajid Shaikh  
Budget & Finance  
1380 Howard St, Suite 423A  
San Francisco, CA 94103  
p: 415-255-3512  
F: 415-503-4710

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**From:** Johnson, Christine (CDPH-CID-DCDC-STD) <[Christine.Johnson@cdph.ca.gov](mailto:Christine.Johnson@cdph.ca.gov)>  
**Sent:** Friday, January 29, 2016 2:37 PM  
**To:** Burk, Katie (DPH); Shaikh, Sajid (DPH)  
**Cc:** Geckeler, Dara (DPH); Melichar, John (DPH); Packer, Tracey (DPH); Otow, May (CDPH-CID-DCDC-STD)  
**Subject:** Board Resolution for HCV Grant Award

Good afternoon,

We need a board resolution for this grant award and we were wondering if you can give us an idea how long it would take? Would the Board issue the resolution based on the award letter or do you need the actual grant documents?

**Christine Johnson**  
Contract/Procurement Analyst  
California Department of Public Health  
STD Control Branch, MS 7320  
P.O. Box 997377  
Sacramento, CA 95899-7377  
Tel: (916) 552-9796 / Fax: (916) 440-5361  
E-mail: [christine.johnson@cdph.ca.gov](mailto:christine.johnson@cdph.ca.gov)



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## **Mojica, Richelle-Lynn (DPH)**

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**From:** Geckeler, Dara (DPH)  
**Sent:** Monday, March 07, 2016 9:51 AM  
**To:** Shaikh, Sajid (DPH); Mojica, Richelle-Lynn (DPH)  
**Subject:** Fw: Board Resolution for HCV Grant Award #15-10965

For the A&E package.

Dara L. Geckeler, MPH  
Community Health Equity & Promotion Branch  
Population Health Division  
San Francisco Department of Public Health  
25 Van Ness Avenue, 5th Floor  
San Francisco, CA 94102  
Ph: 415-437-6203  
Fax: 415-431-7154  
dara.geckeler@sfdph.org

New Health Care Options under the Affordable Care Act  
Three easy ways for San Francisco residents to learn more and enroll:  
1. Online [www.CoveredCA.com](http://www.CoveredCA.com)  
2. Call Covered California (800) 300-1506  
3. Visit SF Benefits Net at 1440 Harrison Street. M-F 8am-5pm

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**From:** Johnson, Christine (CDPH-CID-DCDC-STD) <Christine.Johnson@cdph.ca.gov>  
**Sent:** Friday, March 4, 2016 3:00 PM  
**To:** Geckeler, Dara (DPH)  
**Subject:** Board Resolution for HCV Grant Award #15-10965

Hi Dara,

Per the State Administrative Manual, Section 1208.2 (a), agreements to be signed by a county, city, district or other local public body must be authorized by a resolution, order, motion, or ordinance.

To be clear, the agencies of the State of California that provide grant funds to local governmental agencies require documentation of the Board's approval of the grant agreement before the agreement is executed by the awarding state agency.

Any questions, please let me know.

**Christine Johnson**  
Contract/Procurement Analyst  
California Department of Public Health  
STD Control Branch, MS 7320  
P.O. Box 997377  
Sacramento, CA 95899-7377  
Tel: (916) 552-9796 / Fax: (916) 440-5361