File No.	211164	Committee Item No.	1
-		Board Item No. 3	

# **COMMITTEE/BOARD OF SUPERVISORS**

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Board of Supervisors Meeting	Date January 5, 2022  Date January 11, 2022				
Cmte Board					
□ Motion   □ Resolution   □ Ordinance   □ Legislative Digest   ☒ Budget and Legislative Analys   □ Youth Commission Report   □ Introduction Form   ☒ Department/Agency Cover Let   □ MOU   □ Grant Information Form   □ Grant Budget   □ Subcontract Budget   □ Subcontract Budget   □ Contract/Agreement   ☒ Form 126 - Ethics Commission   □ Award Letter   □ Application   □ Public Correspondence	ter and/or Report				
OTHER (Use back side if additional sp	ace is needed)				
☑       Original Agreement - 1/1/2020         ☑       Amendment No. 1 - 11/1/2020         ☐       ☐ <td< td=""><td></td></td<>					
Completed by:Brent JalipaDateDecember 29, 2021Completed by:Brent JalipaDateJanuary 7, 2022					

1	[Contract Amendment - San Francisco Public Health Foundation - Community Health Engagement - Not to Exceed \$20,027,567]
2	
3	Resolution approving Amendment No. 2 to the agreement between the San Francisco
4	Public Health Foundation and the Department of Public Health to provide program
5	administration and support services to the Community Health Engagement program, to
6	increase the contract amount by \$10,668,262 for a total amount not to exceed
7	\$20,027,567 for a total agreement term of January 1, 2020, through December 31, 2024,
8	to commence following approval by the Board of Supervisors, and to authorize DPH to
9	enter into amendments or modifications to the contract prior to its final execution by all
10	parties that do not materially increase the obligations or liabilities to the City and are
11	necessary to effectuate the purposes of the contract.
12	
13	WHEREAS, The Department of Public Health (DPH) selected the San Francisco Public
14	Health Foundation (SFPHF) through a Request For Qualifications to provide as needed
15	project based support services under an agreement with an initial term of five years, January

project based support services under an agreement with an initial term of five years, January 1, 2020, through December 31, 2024, and a not to exceed amount of \$3,061,930, subsequently amending the agreement to increase the agreement by \$6,297,375, for an amount not to exceed \$9,359,305; and

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WHEREAS, Under this agreement, the SFPHF provides program administration and support services to the Community Health Engagement program, which includes Community Health Engagement, Community and Home Injury Prevention Program for Seniors (CHIPPS), Violence Prevention, Vision Zero, End Hep C SF project, COVID 19 Community Outreach

Services, Dream Keeper's Initiative and District 5 Community Resource HUB; and

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1	WHEREAS, DPH wishes to increase the contract amount by \$10,668,262 for a total
2	amount not to exceed \$20,027,567; for a total agreement term of January 1, 2020, through
3	December 31, 2024; now, therefore, be it
4	RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public
5	Health and the Purchaser, on behalf of the City and County of San Francisco, to amend the
6	contract with the San Francisco Public Health Foundation to increase the contract amount by
7	\$10,668,262 for a total amount not to exceed \$20,027,567, for a total agreement term of
8	January 1, 2020, through December 31, 2024; and, be it
9	FURTHER RESOLVED, That the Board of Supervisors authorizes the
10	Department of Public Health to enter into any amendments or modifications to the
11	contract, prior to its final execution by all parties, that the Department determines, in
12	consultation with the City Attorney, are in the best interest of the City, do not otherwise
13	materially increase the obligations or liabilities of the City, are necessary or advisable to
14	effectuate the purposes of the contract, and are in compliance with all applicable laws;
15	and, be it
16	FURTHER RESOLVED, That within thirty (30) days of the contract amendment being
17	fully executed by all parties, the Director of Health and/or the Director of Office of Contract
18	Administration/Purchased shall provide the final contract to the Clerk of the Board for inclusion
19	in the official file (File No. 211164).
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21	RECOMMENDED:
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23	<u>/s/</u>
24	Grant Colfax, M.D.
25	Director of Health

Item 1	Department:
File 21-1164	Department of Public Health (DPH)

# **EXECUTIVE SUMMARY**

## **Legislative Objectives**

• The proposed resolution would approve Amendment No. 2 to the Community Health Engagement program administration and support services contract between the Department of Public Health (DPH) and the San Francisco Public Health Foundation (SFPHF), increasing the amount by \$10,668,262, for a total not to exceed \$20,027,567.

### **Key Points**

- DPH's Community Health Engagement program supports and promotes community-wide health and well-being, as well as community capacity building efforts through non-profit subcontractors. In 2019, DPH issued a Request for Proposals (RFP) to award a contract to one of five pre-qualified vendors to provide as needed project-based support services for the Community Health Engagement program. SFPHF was deemed the highest scoring responsive and responsible proposer and was awarded a contract for a term of five years, from January 2020 through December 2024, and an amount not to exceed \$3,061,930. In November 2020, DPH executed Amendment No. 1 to the contract, increasing the not-to-exceed amount by \$6,297,375, for a total not to exceed \$9,359,305, due to unanticipated COVID-19 program expenditures.
- Under the contract, SFPHF provides program administration and support services for various public health programs. The contract budget includes passthrough payments to subcontractors performing on the ground services, as well as overhead costs for SFPHF's administrative function. SFPHF currently administers contracts for 23 community-based organizations. Programs include Community Health Engagement, violence prevention, Vision Zero program to reduce traffic collisions and fatalities, Community and Home Injury Prevention Program for Seniors (CHIPPS), Hepatitis C prevention and treatment services, COVID-19 testing and treatment services, and HIV services.

# **Fiscal Impact**

The proposed Amendment No. 2 would increase the not-to-exceed amount of the SFPHF contract by \$10,668,262, for a total not to exceed \$20,027,567. Approximately 18 percent of contract expenditures are funded by City sources, and approximately 82 percent are funded by State and Federal funds.

#### 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's (DPH) Community Health Engagement program supports and promotes community-wide health and well-being, as well as community capacity building efforts through non-profit subcontractors. In October 2017, DPH issued a Request for Qualifications (RFQ) to identify qualified contractors to provide as needed project-based support services for the Community Health Engagement program. The RFQ advertised for a contract term of up to eight years, but did not specify a maximum contract amount, noting that funding would be based on the availability of funds for each project. DPH received seven responses and a scoring panel evaluated and scored them, as shown in Exhibit 1 below.<sup>1</sup>

Exhibit 1: Respondents and Scores from RFQ

Vendor	Score (Minimum 75 Points for Qualification)
San Francisco Public Health Foundation	93
San Francisco Study Center	92
HealthRIGHT 360	92
Public Health Foundation Enterprises, Inc. dba Heluna Health	90
Public Consulting Group, Inc.	82
Protiviti, Inc.	37
Ricoh USA, Inc.	32

Source: DPH

Five vendors were deemed to be qualified, meeting the minimum score of 75: (i) San Francisco Public Health Foundation; (ii) San Francisco Study Center; (iii) HealthRIGHT 360; (iv) Public Health Foundation Enterprises, Inc. dba Heluna Health; and (v) Public Consulting Group, Inc. In October 2019, DPH issued an abbreviated Request for Proposals (RFP) to award a contract to one of the five pre-qualified vendors. Three of the five pre-qualified vendors responded to the RFP and a different panel reviewed and scored them, as shown in Exhibit 2 below.<sup>2</sup>

<sup>&</sup>lt;sup>1</sup> The scoring panel consisted of a DPH Laguna Honda Hospital and Rehabilitation Center Manager, a DPH Population Health Division Health Program Coordinator, and a DPH Community Oriented Primary Care Health Program Coordinator.

<sup>&</sup>lt;sup>2</sup> The scoring panel consisted of a DPH Contract Development and Technical Assistant, a Department of Children, Youth, and their Families (DCYF) Health and Nutrition Services Coordinator, and an Office of Economic and Workforce Development (OEWD) Senior Community Development Specialist.

**Exhibit 2: Proposals and Scores from RFP** 

Proposer	Average Score
San Francisco Public Health Foundation	86.33
San Francisco Study Center	85.00
Public Health Foundation Enterprises, Inc. dba Heluna Health	83.00

Source: DPH

San Francisco Public Health Foundation (SFPHF) was deemed the highest scoring responsive and responsible proposer and was awarded a contact.

In January 2020, DPH executed a contract with SFPHF for a term of five years, from January 2020 through December 2024, and an amount not to exceed \$3,061,930. In November 2020, DPH executed Amendment No. 1 to the contract, increasing the not-to-exceed amount by \$6,297,375, for a total not to exceed \$9,359,305, with no change to the contract term. Neither the original contract nor Amendment No. 1 required Board of Supervisors approval because the contract did not exceed 10 years or \$10 million. According to Nora Macias, DPH Contract Analyst, the contract increases in Amendment No. 1 and the proposed Amendment No. 2 were needed because of COVID-19 program expenditures, which were not anticipated at the time the original contract was executed.

#### **DETAILS OF PROPOSED LEGISLATION**

The proposed resolution would approve Amendment No. 2 to the contract between DPH and SFPHF, increasing the contract amount by \$10,668,262, for a total not to exceed \$20,027,567. Amendment No. 2 would not change other material terms of the contract.

In the contract, SFPHF provides program administration and support services for various public health programs. The contract budget includes passthrough payments to subcontractors performing on the ground services, as well as overhead costs for SFPHF's administrative function. Programs administered by SFPHF include Community Health Engagement, violence prevention, Vision Zero program to reduce traffic collisions and fatalities, Community and Home Injury Prevention Program for Seniors (CHIPPS), Hepatitis C prevention and treatment services, COVID-19 testing and treatment services, and HIV services. SFPHF's responsibilities include issuance of an RFP for community-based organizations (already completed), management of subcontractors, program administration of subcontractors, capacity building and program support of subcontractors, and issuance of quarterly summary reports.

SFPHF currently administers contracts for 23 community-based organizations. The subcontractors for the various Community Health Engagement projects are CARECEN, Chinatown Community Development Center, Collective Impact, Curry Senior Center, Family Connection Center, Glide Foundation, Rebuilding Together SF, San Francisco AIDS Foundation, SF Community Health Centers, Senior and Disability Action, St. James Infirmary, Tenderloin Community Benefit Center, and Walk SF Foundation. The subcontractors for COVID-19 programs are Booker T. Washington Community Services, Chinese Hospital, Family and Child Empowerment Services, Mission Language and Vocational School, Mission Neighborhood Health Center, Rafiki Coalition, San Francisco AIDS Foundation, SF Community Health Centers, Southwest Community

Corporation, and YMCA Urban Services. SFPHF receives a five percent administrative fee for COVID-19 funding and a 10 percent administrative fee for non-COVID-19 funding, for an average fee of approximately 5.7 percent.

According to Michelle Ruggels, DPH Business Office Director, each subcontractor has a workplan specific to the goals of their programmatic area, with a DPH program lead assigned to each. SFPHF monitors compliance with each subcontractor's workplan deliverables and compliance with standard business practices, such as timely invoice submission, on a monthly basis. SFPHF shares these reports with DPH staff to ensure subcontractors are meeting expectations.

#### **FISCAL IMPACT**

The proposed resolution would increase the not-to-exceed amount of the SFPHF contract by \$10,668,262, for a total not to exceed \$20,027,567. The sources and uses of funds by year are shown in Exhibit 3 below.

**Exhibit 3: Sources and Uses of Funds by Year** 

Sources	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	Total
General Fund	\$49,417	\$577,329	\$745,050	\$640,383	\$640,383	\$2,652,562
CDC Grant	21,875	25,000	999,763	25,000	25,000	1,096,638
FEMA Reimbursement	0	3,573,564	9,430,050	0	0	13,003,614
State Funding	0	1,130,406	0	0	0	1,130,406
General Fund-	0	125,000	0	0	0	125,000
Addback <sup>3</sup>						
Dream Keeper's	0	111,069	188,931	0	0	300,000
Initiative <sup>4</sup>						
OEWD Work Order <sup>5</sup>	0	0	175,000	0	0	175,000
Subtotal	\$71,292	\$5,542,368	\$11,538,794	\$665,383	\$665,383	\$18,483,220
Contingency (12%)	0	0	1,384,655	79,846	79,846	1,544,347
Total Sources	\$71,292	\$5,542,368	\$12,923,449	\$745,229	\$745,229	\$20,027,567
Uses	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	Total
Community Health	\$39,000	\$554,413	\$620,050	\$615,383	\$615,383	\$2,444,229
Engagement- Various						
Hepatitis C Programs	32,292	178,322	345,000	50,000	50,000	655,614
COVID-19 Programs	0	4,809,633	10,398,744	0	0	15,208,377
OEWD Work Order	0	0	175,000	0	0	175,000
Subtotal	\$71,292	\$5,542,368	\$11,538,794	\$665,383	\$665,383	\$18,483,220
Contingency (12%)	0	0	1,384,655	79,846	79,846	1,544,347
Total Uses	\$71,292	\$5,542,368	\$12,923,449	\$745,229	\$745,229	\$20,027,567

Source: DPH

In developing the budget for the proposed Amendment No. 2, DPH has reduced the not-to-exceed amount of the contract by approximately \$1,179,463, reflecting actual contract

<sup>&</sup>lt;sup>3</sup> The Board of Supervisors addback funded COVID-19 testing provided by FACES SF Bayview Health.

<sup>&</sup>lt;sup>4</sup> The Dream Keepers Initiative redirects funding from the Police Department budget to provide services benefiting the African American community.

<sup>&</sup>lt;sup>5</sup> The OEWD work order, funded by the City's General Fund, supports the District 5 Community Resource Hub.

expenditures to date. A 12 percent contingency for expenditures starting in FY 2021-22 is included to account for unanticipated expenditures. According to Drew Murrell, DPH Deputy Finance Officer, DPH has not yet received anticipated reimbursements from the Federal Emergency Management Agency (FEMA) due to the timing of invoices.

# **RECOMMENDATION**

Approve the proposed resolution.

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

#### **Second Amendment**

THIS AMENDMENT (this "Amendment") is made as of **September 1<sup>st</sup>, 2021**, in San Francisco, California, by and between **SAN FRANCISCO PUBLIC HEALTH FOUNDATION** ("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 increase contract amount and update standard contractual clauses; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through **RFQ 36-2017 issued on October 3, 2019** and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number 46237 – 14/15 on December 3, 2018; and

WHEREAS, the City's <b>Board of S</b> u	upervisors approved this Agreement by	<b>Resolution Number</b>
on _	, 2021.	

NOW, THEREFORE, Contractor and the City 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 **January 1<sup>st</sup>**, **2020**, (Contract ID# 1000016941) between Contractor and City, as amended by the:

First Amendment, dated November 1st, 2020 (Contract ID# 1000016941).

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 the Agreement.**

The Agreement is hereby modified as follows:

2.1 **Article 1 Definitions**, is hereby amended in its entirety to read 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" or "the 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 the 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, personally-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).
- 1.6 "Contractor" or "Consultant" means San Francisco Public Health Foundation, 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102.
- 1.7 **"Deliverables"** means Contractor's work product 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 the City and Contractor either collectively or individually.
- 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.

# 2.2 **Article 3.3.1 Payment** of **Amendment #1** currently reads as follows:

#### Article 3 Financial Matters

## 3.3 Compensation.

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed Nine Million Three Hundred Fifty-Nine Thousand Three Hundred Five DOLLARS (\$9,359,305). The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

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

#### **Article 3** Financial Matters

# 3.3 Compensation.

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed Twenty Million Twenty-Seven Thousand Five Hundred Sixty-Seven DOLLARS (\$20,027,567). The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

# 2.3 **Article 4.3 Subcontracting**, is hereby amended in its entirety to read as follows:

#### **Article 4** Services and Resources

## 4.3 Subcontracting.

- 4.3.1 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.
- 4.3.2 City's execution of this Agreement constitutes its approval of the subcontractors listed below.
  - a. Subcontractors named in Appendices B
- 2.4 **Article 5 Insurance and Indemnity**, is hereby amended in its entirety to read as follows:

# **Article 5** Insurance and Indemnity

#### 5.1 Insurance.

- 5.1.1 **Required Coverages.** Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. 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.
- (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 Insurance, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness.
  - (d) Reserved. (Professional Liability Coverage)
  - (e) Reserved. (Technology Errors and Omissions Coverage)
- (f) Cyber and Privacy Insurance with limits of not less than \$5,000,000 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. (Pollution Liability Insurance)

Amendment: 09/01/2021

P-650 (11-20; DPH 4-18 BAA)

#### 5.1.2 Additional Insured Endorsements

- (a) The Commercial General Liability policy must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.
- (b) The Commercial Automobile Liability Insurance policy must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.
  - (c) Reserved. (Pollution Auto Liability Insurance Additional Insured

# **Endorsement)**

# 5.1.3 Waiver of Subrogation Endorsements

(a) The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.

# 5.1.4 Primary Insurance Endorsements

- (a) The Commercial General Liability 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. (Pollution Liability Insurance Primary Insurance

# **Endorsement)**

# 5.1.5 Other Insurance Requirements

- (a) Thirty (30) days' advance written notice shall be provided to the 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, for a period of three 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 the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the 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 and additional insured policy endorsements 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, its officers, agents and employees and the Contractor as additional insureds.

#### 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 claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with 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 personally 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; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) – (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is 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 and experts and related costs and City's costs of investigating any claims against the 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.

2.5 Article 13 Data and Security, is hereby amended in its entirety to read as follows:

## **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 **Confidential Information.** In the performance of Services, Contractor may have access to, or collect on City's behalf, City's proprietary or Confidential Information, the disclosure of which 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) (04-12-2018)
  - 1. SFDPH Attestation 1 PRIVACY (06-07-2017)
  - 2. SFDPH Attestation 2 DATA SECURITY (06-07-2017)
- 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.

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

# 13.5 Management of City Data and Confidential Information.

13.5.1 Use of City Data and Confidential Information. Contractor agrees to hold City's Data received from, or collected on behalf of, the City, in strictest confidence. Contractor shall not use or disclose City's Data except as permitted or required by the Agreement or as otherwise authorized in writing by the City. Any work using, or sharing or storage of, City's Data outside the United States is subject to prior written authorization by the City. Access to City's Data must be strictly controlled and limited to Contractor's staff assigned to this project on a need-to-know basis only. Contractor is provided a limited non-exclusive license to use the 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 the City Data or Confidential Information, 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, stored or transmitted by the service, for commercial purposes, advertising or advertising-related purposes, or for any purpose other than security or service delivery analysis that is not explicitly authorized.

13.5.2 **Disposition of Confidential Information**. Upon request of City or termination or expiration of this Agreement, and pursuant to any document retention period required by this Agreement, Contractor shall promptly, but in no event later than thirty (30) calendar days, return all data given to or collected by Contractor on City's behalf, which includes all original media. Once Contractor has received written confirmation from City that City's 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 subcontractors 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.

2.6 Article 15 Official Actions Relating to the Emergency; FEMA Assistance, is hereby amended in its entirety to read as follows:

# **Article 15** Official Actions Relating to the Emergency; FEMA Assistance.

- 15.1 Orders of Local, State or Federal Officials. City and Contractor mutually acknowledge that local, state, or federal authorities may issue official orders related to the COVID-19 epidemic, or take other official actions, subsequent to the execution of this Agreement that Parties to this Agreement cannot presently predict. City and Contractor mutually acknowledge and agree that this Agreement shall be subject to the provisions of any such official action or order ("Official Actions"), as they may be revised and updated. If the provisions of any such Official Actions materially impact the terms of this Agreement, the provisions of those Official Actions shall govern. Contractor shall stay updated on the status of the City Health Officer orders by checking the Department of Public Health website (sfdph.org) regularly.
- 15.2 **FEMA Assistance.** This is an acknowledgement that FEMA financial assistance will be requested by City and if provided will be used to fund all or a portion of this Agreement. Contractor shall comply with all applicable Federal law, regulations, executive orders, FEMA policies, procedures, and directives, including the FEMA Contract Requirements attached hereto as Appendix D and incorporated herein by reference.

The Appendices listed below are Amended as follows:

- 2.7 **Appendix A.** Appendix A is hereby replaced in its entirety by Appendix A, attached to this Amendment and incorporated within the Agreement.
- 2.8 **Appendix A-1.** Appendix A-1 is hereby replaced in its entirety by Appendix A-1, attached to this Amendment and incorporated within the Agreement.
- 2.9 **Appendix A-2.** Appendix A-2 is hereby replaced in its entirety by Appendix A-2, attached to this Amendment and incorporated within the Agreement.
- 2.10 **Appendix A-4.** Appendix A-4 is hereby replaced in its entirety by Appendix A-4, attached to this Amendment and incorporated within the Agreement.
- 2.11 **Appendix A-9.** Appendix A-9 is hereby added to this Amendment and fully incorporated within the Agreement.

- 2.12 **Appendix B.** Appendix B is hereby replaced in its entirety by Appendix B, attached to this Amendment and incorporated within the Agreement.
- 2.13 **Appendix B-1c.** Appendix B-1c is hereby replaced in its entirety by Appendix B-1c, attached to this Amendment and incorporated within the Agreement.
- 2.14 **Appendix B-1d.** Appendix B-1d is hereby replaced in its entirety by Appendix B-1d, attached to this Amendment and incorporated within the Agreement.
- 2.15 **Appendix B-2c.** Appendix B-2c is hereby replaced in its entirety by Appendix B-2c, attached to this Amendment and incorporated within the Agreement.
- 2.16 **Appendix B-2d.** Appendix B-2d is hereby replaced in its entirety by Appendix B-2d, attached to this Amendment and incorporated within the Agreement.
- 2.17 **Appendix B-3b.** Appendix B-3b is hereby replaced in its entirety by Appendix B-3b, attached to this Amendment and incorporated within the Agreement.
- 2.18 **Appendix B-3c.** Appendix B-3c is hereby replaced in its entirety by Appendix B-3c, attached to this Amendment and incorporated within the Agreement.
- 2.19 **Appendix B-3d.** Appendix B-3d is hereby replaced in its entirety by Appendix B-3d, attached to this Amendment and incorporated within the Agreement.
- 2.20 **Appendix B-4b.** Appendix B-4b is hereby replaced in its entirety by Appendix B-4b, attached to this Amendment and incorporated within the Agreement.
- 2.21 **Appendix B-4c.** Appendix B-4c is hereby added to this Amendment and fully incorporated within the Agreement.
- 2.22 **Appendix B-9.** Appendix B-9 is hereby added to this Amendment and fully incorporated within the Agreement.
- 2.23 **Appendix D.** Appendix D is hereby replaced in its entirety by Appendix D, attached to this Amendment and incorporated within the Agreement.

- 2.24 **Appendix E.** Appendix E is hereby replaced in its entirety by Appendix E Dated: OCPA & CAT v4-12-18 and Attestation forms 06-07-2017, attached to this Amendment and incorporated within the Agreement.
- 2.25 **Appendix F-1c.** Appendix F-1c is hereby replaced in its entirety by Appendix F-1c, attached to this Amendment and incorporated within the Agreement.
- 2.26 **Appendix F-1d.** Appendix F-1d is hereby replaced in its entirety by Appendix F-1d, attached to this Amendment and incorporated within the Agreement.
- 2.27 **Appendix F-2c.** Appendix F-2c is hereby replaced in its entirety by Appendix F-2c, attached to this Amendment and incorporated within the Agreement.
- 2.28 **Appendix F-2d.** Appendix F-2d is hereby replaced in its entirety by Appendix F-2d, attached to this Amendment and incorporated within the Agreement.
- 2.29 **Appendix F-3b.** Appendix F-3b is hereby replaced in its entirety by Appendix F-3b, attached to this Amendment and incorporated within the Agreement.
- 2.30 **Appendix F-3c.** Appendix F-3c is hereby replaced in its entirety by Appendix F-3c, attached to this Amendment and incorporated within the Agreement.
- 2.31 **Appendix F-3d.** Appendix F-3d is hereby replaced in its entirety by Appendix F-3d, attached to this Amendment and incorporated within the Agreement.
- 2.32 **Appendix F-4b.** Appendix F-4b is hereby replaced in its entirety by Appendix F-4b, attached to this Amendment and incorporated within the Agreement.
- 2.33 **Appendix F-4c.** Appendix F-4c is hereby added to this Amendment and fully incorporated within the Agreement.
- 2.34 **Appendix F-9.** Appendix F-9 is hereby added to this Amendment and fully incorporated within the Agreement.
- 2.35 **Appendix H.** Appendix H is hereby replaced in its entirety by Appendix H, attached to this Amendment and incorporated within the Agreement.

2.36 **Appendix I.** Appendix I is hereby added to this Amendment and fully incorporated within the Agreement.

#### **Article 3 Effective Date**

Each of the modifications set forth in Section 2 shall be effective on and after **the date of this Amendment.** 

# Article 4 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, Contractor and City have executed this Amendment as of the date first referenced above.

CITY	
Recommended by:	CONTRACTOR SAN FRANCISCO PUBLIC HEALTH FOUNDATION
Grant Colfax, MD Director of Health Department of Public Health	Permy Fordley Permy Pardley Executive Director 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102
Approved as to Form:	
Dennis J. Herrera City Attorney	City Supplier number: 0000011526
By: Deputy City Attorney	
Approved:	
Sailaja Kurella Acting Director of the Office of Contract Administration, and Purchaser	
By:	

# Appendix A Scope of Services

#### 1. Terms

#### A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Tracey Packer** / **Patricia Erwin**, 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 Zuckerberg 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. <u>Adequate Resources</u>:

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.

Appendix A 1 of 7 Contract ID# 1000016941

Amendment: 09/01/2021

# F. <u>Infection Control</u>, 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.

# G. <u>Aerosol Transmissible Disease Program, Health and Safety:</u>

- (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.

Appendix A 2 of 7 Contract ID# 1000016941

Amendment: 09/01/2021

- (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 staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

#### H. 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 Healthfunded 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."

#### I. **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	Program Administration for Community Health Engagement
Appendix A-2	Program Administration for Community Health Engagement
Appendix A-4	Program Administration for Community Health Engagement - COVID-19
Appendix A-5	Program Administration for Community Health Engagement – End Hep C SF & Hep C Lab
Appendix A-6	Program Administration for Community Health Engagement – COVID – 19 OPS Testing
Appendix A-7	Program Administration for Community Health Engagement – Dream Keeper Initiative

Appendix A 3 of 7 Contract ID# 1000016941 Appendix A-8 Program Administration for Community Health Engagement – End

**Hep C SF Community Navigation** 

Appendix A-9 Program Administration for Community Health Engagement –

**District 5 Community Resource HUB** 

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.

Appendix A 4 of 7 Contract ID# 1000016941

Amendment: 09/01/2021

Appendix A 01/01/2020 through 12/31/2024

Contractor/Vendor: San Francisco Public Health Foundation Program: Community Health Engagement

FY: 19/20 thru 24/25

#### **CONTRACT SUMMARY**

A-1/B-1

FY19-20

\$39,000

01/01/2020-

06/30/2020

6

B-3

FY19-20

\$22,917

-\$1,042

2/1/2020-

12/30/2020

520

N/A

Staff Hours

Contractor/Vendor:

San Francisco Public Health Foundation

Service Provider:

**Program Name:** 

**Total Contract Amount:** \$18,483,220

**Funding Source:** 

Grant CDC, GF HIV Prevention, GF Health Education, State.CDPH, GF BOS Addback, GF-FEMA, Dream Keeper's Initiative, and Work Order Community Health Engagement including COVID 19 Services, CHEP - End Hep C/Hep Community Engagement, Dream Keeper's Initiative,

A-1

**GF-Health Education** 

B-1b

FY21-22

\$620,050

7/1/2021-

6/30/22

132

10

Number of Subcontractors x months in fiscal year

B-1c

FY22-23

\$615,383

7/1/2022-

6/30/23

132

10

B-1d

FY23-24

\$615,383

7/1/2023-

6/30/24

132

10

B-1a

FY20-21

\$615,383

-\$60,970

7/1/2020-

6/30/21

132

10

FACES SF, and Community Services.

1 Hallidie Plaza, Suite 808

415-504-6738 ext.101

System of Care: CHEP

Program Code: N/A

**Provider Address: Provider Phone: Contact Person:** 

Penny Eardley RFQ 36-2017 [1/1/2020 to 12/31/2024] RFP# and Term:

Appendix A#: **Funding Source** Appendix B:

Year:

**Funding Amount: Unspent Funding:** 

**Funding Term:** Number of UOS:

Number of UDC/NOC: Definition of UOS:

**Target Population:** 

The San Francisco Public Health Foundation target population is the subcontractors participating in the CHEP Community Health Engagement Program.

**Description of Services:** 

The San Francisco Public Health Foundation will provide Program Management, Capacity Building and Subcontractor Management Services in support of the programs listed below serviced by the following contractors: Community Health Engagement, Violence Prevention, Vision Zero and Community and Home Injury Prevention Program for Seniors (CHIPPS).

Appendix A#: **Funding Source** Appendix B:

Year:

**Funding Amount: Unspent Funding:** 

**Funding Term:** 

Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

		GF- HIV Prevent	ion
n 3	D 3-	7	

B-2	B-2a	B-2b	B-2c	B-2d
FY19-20 \$10,417	FY20-21 \$25,000 -\$2,084	FY21-22 \$25,000	FY22-23 \$25,000	FY23-24 \$25,000
2/1/2020- 6/30/2020 234 n/a	7/1/2020- 6/30/2021 536 n/a	7/1/2021- 6/30/2022 536 n/a	7/1/2022- 6/30/2023 536 n/a	7/1/2023- 6/30/2024 536 n/a
Staff Hours				

**Target Population:** 

**Description of Services:** 

The San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF project. End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

CDC - Grant

B-3b

FY21-22

\$25,000

1/1/2022-

12/31/2022

567

N/A

B-3c

FY22-23

\$25,000

1/1/2023-

12/31/2023

567

N/A

Staff Hours

B-3d

FY23-24

\$25,000

1/1/2024-

12/31/2024

567

N/A

Staff Hours

Appendix A#: **Funding Source** Appendix B: Year:

**Funding Amount: Unspent Funding:** 

**Funding Term:** 

Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

**Target Population:** 

The San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF project.

Staff Hours Staff Hours

Amendment: 09/01/2021

B-3a

FY20-21

\$25,000

1/1/2021-

12/31/2021

567

N/A

Contractor/Vendor: San Francisco Public Health Foundation Program: Community Health Engagement

FY: 19/20 thru 24/25

Description of Services: End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

Appendix A#:
Funding Source
Appendix B:
Year:
Funding Amount:

Funding Amount: Unspent Funding:

Funding Term: Number of UOS:

Number of UDC/NOC:

Definition of UOS:

General Fund - FEMA, State - HUB&CI & CDC Grant

B-4a B-4a.1 B-4b B-4c

FY00 24 FY00 24 FY00 24 FY00 24

A-4

FY20-21 FY22/23 FY20-21 FY21-22 \$4.500.000 \$1,000,000 \$9,430,050 \$779,763 -\$926,436 8/1/2020 -9/1/2020 -07/01/21 01/01/22 6/30/2021 06/30/2021 6/30/22 5/30/23 59 14 120 12 8 2 10 1

Number of Subcontractors x months in fiscal year

**Target Population:** 

The San Francisco Public Health Foundation target population are the subcontractors participating in the services provided to San Franciscans that are disproportionately impated by COVID 19.

**Description of Services:** 

The San Francisco Public Health Foundation will provide Program Management, Capacity Building and Subcontractor Management Services to subcontractors who will respond to an application seeking COVID-19 community prevention, mitigation, and wellness programs that include focused outreach and mobile test site support, case investigation and contact tracing (CI/CT), community care for COVID-19 positive individuals, and a community partner CI/CT training center for vulnerable populations and the neighborhoods they live in.

A-5

State /CDPH & CDC Grant

Appendix A#:
Funding Source
Appendix B:
Year:

Funding Amount:

Funding Term:

Number of UOS: Number of UDC/NOC:

Definition of UOS:

| B-5 | B-5a | FY20-21 | FY21-22 | \$130,406 | \$80,000 | 7/17/2020- | 07/01/2021

7/17/2020- 07/01/2021- 07/01/21-6/30/2021 04/30/22 04/30/22 2080 12 1726 N/A N/A N/A

B-5a.1

FY21-22

\$115,000

1 Unit = 1 Hour

Target Population:
Description of Services:

Priority populations in San Francisco that are impacted by HIV and Hep C.

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF project.

A-6 GF BOS Addback

> **B-6** FY20-21

\$125,000 12/1/2020-

6/30/2021

4

Appendix A#:
Funding Source
Appendix B:

Appendix B: Year:

Funding Amount:

runuing Amount.

Funding Term:

Number of UOS: Number of UDC/NOC:

Definition of UOS:

1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year

Target Population: Description of Services: Priority populations in San Francisco that are disproportionately impacted by COVID 19 and adverse effects.

San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of COVID OPS Testing serviced by subcontractor FACES SF Bayview Health.

Appendix A#: Funding Source Appendix B:

Year:

Funding Amount: Unspent Funding:

Funding Term:

Number of UOS: Number of UDC/NOC: Definition of UOS: A-7
Dream Keeper's Initiative Grant
B-7
B-7a

FY20-21 FY21-22 \$300,000 \$188,931 -\$188,931 12/1/2020-6/30/2021 06/30/22 9 24 3 3

1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year

Target Population:

Priority populations in San Francisco that are disproportionately impacted by COVID 19 and adverse effects.

Appendix A 01/01/2020 through 12/31/2024

Contractor/Vendor: San Francisco Public Health Foundation Program: Community Health Engagement FY: 19/20 thru 24/25

Description of Services:	San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of the Dream Keeper's Initiative serviced by subcontractor: Rafiki Coaltion, YMCA Urban Services, and Southwest Community Corp.			
Appendix A# :	A-8			
Funding Source	GF GF			
Appendix B:	B-8			
Year:	FY21-22			
Funding Amount:	\$100,000			
Funding Term:	07/01/21 - 06/30/22			
Number of UOS:	42			
Number of UDC/NOC:	4			
Definition of UOS:	1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year			
Target Population:	Priority populations in San Francisco that are disproportionately impacted by HIV and Hep C.			
Description of Services:	San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of			
	the following subcontractor: St. James Infirmary, Glide Foundation, San Francisco AIDS Foundation, and TBD Subcontractor.			
Appendix A#:	A-9			
Funding Source	WO			
Appendix B:	B-9			
Year:	FY21-22			
Funding Amount:	\$175,000			
Funding Term:	07/01/21 -			
-	06/30/22			
Number of UOS:				
Number of UDC/NOC:				
Definition of UOS:	1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year			
Target Population:	Priority populations in San Francisco that are disproportionately impacted COVID 19 and it's adverse effects.			
Description of Services:	San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of			
	community services.			

Appendix A-1

**Appendix Term:** 01/01/2020-06/30/2024

**Funding Source: General Fund-Health Education** 

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102 415-504-6738 Fax: 415-520-0471 www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

#### 2. Nature of Document:

☐ Original ☐ Contract Amendment ☐ Revision to Program Budgets (RPB)
---

#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Program Management, Capacity Building and Subcontractor Management Services in support of the programs listed below serviced by the following contractors:

**Community Health Engagement:** The goal of the SFDPH Community Health Engagement Project is to support and promote community-wide health and well-being as well as community capacity building efforts. Subcontractor: TBD

**Community and Home Injury Prevention Program for Seniors (CHIPPS):** The goal of the Community & Home Injury Prevention Program for Seniors (CHIPPS) is to prevent falls and injuries to seniors living in San Francisco by providing fall prevention education, home safety devices, minor home repairs, and minor home modifications so seniors can live safely at home. Subcontractor: Rebuilding Together SF

**Violence Prevention**: The goal of this contract is to support comprehensive services offered by CARECEN's Second Chance Youth Program. The peer support groups create safe environments at local high schools and community spaces to actively engage in critical thinking, life-skills development, and fun, culturally affirming group activities. Subcontractor: CARECEN

**Vision Zero:** The goal of the Vision Zero – Community Engagement Program is to reduce traffic-related fatalities and severe injuries, especially to children, seniors, and people with disabilities. Subcontractors: Raimi and Associates, Walk SF Foundation – 2 programs, Senior and Disability Action, Chinatown Community Development Center, Lighthouse for the Blind and Visually Impaired, Portola Family Center, Tenderloin Community Benefit District

No use of technological services.

Appendix A-1 1 of 6 Contract ID# 1000016941

Amendment: 09/01/2021

Appendix A-1

**Appendix Term:** 01/01/2020-06/30/2024

**Funding Source: General Fund-Health Education** 

# 4. Target Population:

To provide Community Health Engagement services to all ethnicities and populations, with focused expertise to address the unique cultural needs of:

- Black, African American
- Asian, including Chinese
- Pacific Islander
- Latinx
- Youth and transitional-age youth
- Seniors
- Low-income populations
- Individuals experiencing health disparities
- Others as identified

# Community and Home Injury Prevention Program for Seniors (CHIPPS):

- Priority populations are all seniors over 65 years old who live in San Francisco.
  - Subcontractor: Rebuilding Together SF

#### **Violence Prevention:**

- "at/in risk" Latino youth between the ages of 14-18 years in the San Francisco Bay Area
  - Subcontractor: CARECEN

#### Vision Zero:

- Children
- Seniors
- People with disabilities
- Low-income populations
  - Subcontractors: Raimi and Associates, Walk SF Foundation 2 programs, Senior and Disability Action, Chinatown Community Development Center, Lighthouse for the Blind and Visually Impaired, Portola Family Center, Tenderloin Community Benefit District

# 5. Modality(s)/Intervention(s):

# 1 Unit = 1 subcontractor x number of months in the current fiscal year

Units of Service (UOS) Description 1/01/2020 to 6/30/2020	Units of Service (UOS)	Unduplicated Clients (UDC)
Community Health Engagement Program Administration		
Subcontractor: 18 Reasons	6	1
Total UOS Delivered	6	
Total UDC Served		1

Appendix A-1

**Appendix Term:** 01/01/2020-06/30/2024 **Funding Source:** General Fund-Health Education

Units of Service (UOS) Description 7/01/2020 to 6/30/2021	Units of Service in months (UOS)	Unduplicated Clients (UDC
Community Health Engagement Program Administration -	12	1
Subcontractors TBD (1)	12	1
<b>Community &amp; Home Injury Prevention Program for Seniors</b>		
<b>Program Administration -</b> Subcontractor: Rebuilding Together	12	1
San Francisco	12	
Violence Prevention Program Administration - Subcontractor:		1
CARECEN	12	
Vision Zero Program Administration		
Subcontractors: (8)		
Raimi and Associates	12	
Walk SF Foundation – 2 programs	24	
Senior and Disability Action	12	7
Chinatown Community Development Center	12	
Lighthouse for the Blind and Visually Impaired	12	
Portola Family Center	12	
Tenderloin Community Benefit District	12 (96)	
Total UOS Delivered	132 UOS	
Total UDC Served		10

Units of Service (UOS) Description 7/01/2021 to 6/30/2022	Units of Service in months (UOS)	Unduplicated Clients (UDC)
Community Health Engagement Program Administration - 1 Subcontractors	12	1
Community & Home Injury Prevention Program for Seniors Program Administration - 1 Subcontractors	12	1
Violence Prevention Program Administration -1 Subcontractors	12	1
Vision Zero Program Administration - 8 Subcontractors	96	7
Total UOS Delivered	132 UOS	
Total UDC Served		10

Appendix A-1

**Funding Source: General Fund-Health Education** 

**Appendix Term:** 01/01/2020-06/30/2024

Units of Service (UOS) Description 7/01/2022 to 6/30/2023	Units of Service in months (UOS)	Unduplicated Clients (UDC)
Community Health Engagement Administration - Subcontractors TBD	12	1
Community & Home Injury Prevention Program for Seniors Program Administration – 1 Subcontractors	12	1
Violence Prevention Program Administration – 1 Subcontractors	12	1
Vision Zero Program Administration – 8 Subcontractors	96	7
Total UOS Delivered	132 UOS	
Total UDC Served		10

Units of Service (UOS) Description 7/01/2023 to 6/30/2024	Units of Service in months (UOS)	Unduplicated Clients (UDC)
Community Health Engagement Program Administration- Subcontractors TBD	12	1
Community & Home Injury Prevention Program for Seniors Program Administration - 1 Subcontractors	12	1
Violence Prevention Program Administration – 1 Subcontractors	12	1
Vision Zero Program Administration - 8 Subcontractors	96	7
Total UOS Delivered	132 UOS	
Total UDC Served		10

# 6. Methodology:

# **Program Administration of Subcontractors**

- 1. Manage and disburse funds as directed by the Department as it applies to the Community Health Engagement Program.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contractor;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities;
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations;
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements

**Appendix Term:** 01/01/2020-06/30/2024

Appendix A-1

**Funding Source: General Fund-Health Education** 

# **Objectives and Measurements:**

SFPHF must submit an Annual Summary Report documenting achievement of all Objectives to System of Care Program Manager and the Business Office Contract Compliance (BOCC) within two months from the end of the contract year.

# A. Standardized Objectives:

"All objectives and descriptions of how objectives will be measured, are contained in the Fiscal Intermediary/Program Management document entitled: Fiscal Intermediary Performance Objectives FY19-20."

# FY 2019-2020 (six (6) months)

By June 30, 2020, SFPHF program staff will complete subcontractor's agreements as requested by CHEP program staff.

# FY 2020-2021 (twelve (12) months)

By August 1, 2020, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

# FY 2021-2022 (twelve (12) months)

By August 1, 2021, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### FY 2022-2023 (twelve (12) months)

By August 1, 2022, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### FY 2023-2024 (twelve (12) months)

By August 1, 2023, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### 7. Continuous Quality Improvement:

CHEP staff will work with the SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements.

To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

Amendment: 09/01/2021

**Appendix Term:** 01/01/2020-06/30/2024

Appendix A-1

**Funding Source: General Fund-Health Education** 

# 8. Required Language:

NA

# 9. Subcontractors & Consultants (for Fiscal Intermediary/Program Management ONLY):

- A. SFPHF is responsible for the performance of its subcontractors and consultants in this Agreement.
- B. SFPHF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFPHF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFPHF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Blood-borne Pathogen and Aerosol Transmissible Diseases. SFPHF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' Compensation laws and regulations.
- D. SFPHF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFPHF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFPH, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFPHF, and SFPHF acknowledges that it must comply with all requirements of the Agreements, regardless of whether they are listed again here in this Appendix.

Appendix A-1 6 of 6 Contract ID# 1000016941

Amendment: 09/01/2021

Appendix Term: 02/01/2020-12/31/2024
Funding Source: General Fund-HIV
Prevention/Grant CDC

Appendix A-2

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102 415-504-6738 Fax: 415-520-0471

www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

#### 2. Nature of Document:

☐ Original ☐ Contract Amendment ☐	Revision to Program Budgets (RPB)
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#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Human Resources Management/Support in support of the End Hep C SF project and as part of the Community Health Engagement goals. End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

No use of technological services.

# 4. Target Population:

To provide Community Engagement - HIV and Hep C services to all ethnicities and populations, with focused expertise to address the unique cultural needs of:

- Black, African American
- Asian, including Chinese
- Pacific Islander
- Latinx
- Youth and transitional-age youth
- Seniors
- Low-income populations
- Individuals experiencing health disparities
- Others as identified

# 5. Modality(s)/Intervention(s):

Units of Service (UOS) Description 2/01/2020 to 6/30/2020 B-2 2/01/2020 to 12/31/2020 B-3 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours General Fund HIV Prevention – B-2 Grant CDC – B-3	234 520	NA
Total UOS Delivered	754	

**Appendix Term:** 02/01/2020-12/31/2024

Funding Source: General Fund-HIV Prevention/Grant CDC

Appendix A-2

Total UDC Served Units of Service (UOS) Description 7/01/2020 to 6/30/2021 B-2a 1/01/2021 to 12/31/2021 B-3a	Units of Service (UOS)	Unduplicated Clients (UDC)
1 UOS = 1 Hour		
Program Administration – hours		
General Fund HIV Prevention – B-2a	536	
Grant CDC – B-3a	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Units of Service (UOS) Description 7/01/2021 to 6/30/2022 B-2b 01/01/2022to 12/31/2022 B-3a 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention – B-2b	536	
Grant CDC – B-3b	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Units of Service (UOS) Description 7/01/2022 to 6/30/2023 B-2c 01/01/2023 to 12/31/2023 B-3c 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention – B-2c	536	
Grant CDC – B-3c	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Units of Service (UOS) Description 7/01/2023 to 6/30/2024 B-2d 01/01/2024 to 12/31/2024 B-3d 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention – B-2d	536	
Grant CDC – B-3d	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Contractor Name: San Francisco Public Health Foundation Program Name: Community Health Engagement – Program

Administration

**Appendix Term:** 02/01/2020-12/31/2024

**Funding Source: General Fund-HIV** 

Prevention/Grant CDC

Appendix A-2

# 6. Methodology:

# **Program Administration**

- 1. Manage and disburse funds as directed by the Department as it applies to this project.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contract;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities;
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations;
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements.

### **Human Resources management**

Employ, supervise and evaluate performance of the End Hep C SF Program Coordinator. This position works from a remote office and supplies coordination to the End Hep C SF Coalition, including communication between partners, organizing meetings, creating communications on HIV and Hep C information to share with the public. The Program Coordinator works 40 hours per week and is supervised by the Executive Director of SFPHF.

### 7. Objectives and Measurements:

### A. Standardized Objectives:

Not applicable.

### **8.** Continuous Quality Improvement:

The SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements. To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

### 9. Required Language:

NA

# 10. Subcontractors & Consultants (for Fiscal Intermediary/Program Management ONLY): NA

Appendix A-4

**Appendix Term:** 08/01/2020-05/30/2023

Funding Source: General Fund-FEMA, State – HUB&CI & CDC

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102 415-504-6738 Fax: 415-520-0471 www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

#### 2. Nature of Document:

Original	Contract Amendment	Revision to Program Budgets (RPB)
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#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of the programs listed below serviced by subcontractors TBD by scored application. Subcontractors will respond to an application seeking COVID-19 community prevention, mitigation, and wellness programs that include focused outreach and mobile test site support, case investigation and contact tracing (CI/CT), community care for COVID-19 positive individuals, and a community partner CI/CT training center for vulnerable populations and the neighborhoods they live in.

No use of technological services.

### 4. Target Population:

To provide COVID 19 – Community Health Engagement services to all ethnicities and populations, with focused expertise to address the unique cultural needs of:

- Black/African American
- Asian
- Native Hawaiian/Pacific Islander
- Latino/a/x

- Native American/Indigenous community
- Others as Identified

Grant awards will be delineated by zip code targeting these neighborhoods:

- 94124 (Bayview-Hunter's Point)
- 94110 (Mission, Bernal Heights)
- 94134 (Visitacion Valley, Sunnydale, Portola)
- 94102 (Tenderloin)

- 94112 (Excelsior, Outer Mission, Crocker Amazon)
- 94115 (Western Addition)
- 94107 (Potrero Hill)
- 94127, 94132 (OMI/Lakeview)
- 94108 (Chinatown)

Appendix A-4 1 of 5 Contract ID# 1000016941

**Appendix Term:** 08/01/2020-05/30/2023

Appendix A-4

Funding Source: General Fund-FEMA, State – HUB&CI & CDC

# **Modality(s)/Intervention(s):**

# 1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year

Units of Service (UOS) Description 7/01/2020 to 6/30/2021	Units of Service (UOS)	Unduplicated Clients (UDC)
COVID 19 Community Outreach Services Program	3	n/a
Administration - Start-up Months which include the RFP Process		
08/01/2020 – 06/30/2021 – B-4a		
COVID 19 Community Outreach Services Program		
Administration - 7 Subcontractors will provide services to a		
selected neighborhood. $(7x7 \text{ months} = 49)$		
08/01/2020 - 06/30/2021 - B-4a	49	7
COVID 19 Community Outreach Services Program		
Administration - 1 subcontractor will provide training services		
for CT/CI candidates. (1x7months=7)	7	1
08/01/2020 – 06/30/2021 – B-4a	7	1
COVID 19 Community Outreach Services Program Administration - 2 Subcontractors will provide services to a		
selected neighborhood. (2x7 months = 14)		
09/01/2020 – 06/30/2021 – B-4a.1	14	2
Total UOS Delivered	73	
Total UDC Served		10
Units of Service (UOS) Description 7/01/2021 to 6/30/2022	Units of Service (UOS)	Unduplicated Clients (UDC)
COVID 19 Community Outreach Services Program		
Administration - 9 Subcontractors will provide services to a		
selected neighborhood. (9x12 months = 108)	100	0
07/01/2021 – 06/30/2022 – B-4b	108	9
COVID 19 Community Outreach Services Program Administration - 1 subcontractor will provide training services		
for CT/CI candidates. (1x12months=12) – B-4b		
07/01/2021 – 06/30/2022	12	1
Total UOS Delivered	120	
Total UDC Served		10

Appendix Term: 08/01/2020-05/30/2023

Appendix A-4

Funding Source: General Fund-FEMA, State – HUB&CI & CDC

Units of Service (UOS) Description 1/01/2022 to 5/30/2023	Units of Service (UOS)	Unduplicated Clients (UDC)
COVID 19 Community Outreach Services Program Administration Services and Subcontractors TBD as pandemic needs develop.		(ODC)
- B-4c	12	1
	12	1
Total UOS Delivered	12	
Total UDC Served		1

## 5. Methodology:

# **Program Administration of Subcontractors**

- 1. Manage and disburse funds as directed by the Department as it applies to the COVID 19 Community Outreach Services Program.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contractor;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities;
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations;
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements

### **Objectives and Measurements:**

SFPHF must submit an Annual Summary Report documenting achievement of all Objectives to System of Care Program Manager and the Business Office Contract Compliance (BOCC) within two months from the end of the contract year.

### A. Standardized Objectives:

"All objectives and descriptions of how objectives will be measured, are contained in the Fiscal Intermediary/Program Management document entitled: Fiscal Intermediary Performance Objectives FY20-21."

#### FY 2020-2021

By December 1, 2020, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

**Appendix Term:** 08/01/2020-05/30/2023

Appendix A-4

Funding Source: General Fund-FEMA, State – HUB&CI & CDC

#### FY 2021-2022

By July 1, 2021, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### FY 2022-2023

By January 31, 2022, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

### 6. Continuous Quality Improvement:

CHEP staff will work with the SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements.

To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

### 7. Required Language:

NA

### 8. Subcontractors & Consultants:

- A. SFPHF is responsible for the performance of its subcontractors and consultants in this Agreement.
- B. SFPHF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFPHF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFPHF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Blood-borne Pathogen and Aerosol Transmissible Diseases. SFPHF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' Compensation laws and regulations.
- D. SFPHF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.

Appendix A-4 4 of 5 Contract ID# 1000016941

**Appendix Term:** 08/01/2020-05/30/2023

Appendix A-4

Funding Source: General Fund-FEMA, State – HUB&CI & CDC

E. SFPHF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.

- F. Any such subcontract agreements will be kept on file with SFPH, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFPHF, and SFPHF acknowledges that it must comply with all requirements of the Agreements, regardless of whether they are listed again here in this Appendix.

Contractor Name: San Francisco Public Health Foundation Program Name: Community Health Engagement – D5 Community Resource Hub – Program Administration Appendix A-9

**Appendix Term:** 07/01/2021-06/30/2022

**Funding Source: Work Order** 

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102 415-504-6738 Fax: 415-520-0471

www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

2	Nature	of Document:
4.	mature	or Document.

Original	Contract Amendment	Revision to Program Budgets (RPB)
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#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of a D5 Community Resource Hub serviced by subcontractors listed below:

• Collective Impact

No use of technological services.

### 4. Target Population:

To provide Community Health Engagement services to all ethnicities and populations, with focused expertise to address unique cultural needs of:

- Black/African American
- Asian
- Native Hawaiian/Pacific Islander
- Latino/a/x

- Native American/Indigenous community
- Others as Identified

Grant awards will be delineated by zip code targeting these neighborhoods:

• 94115 (Western Addition)

Contractor Name: San Francisco Public Health Foundation Program Name: Community Health Engagement – D5 Community Resource Hub – Program Administration

**Appendix Term:** 07/01/2021-06/30/2022

**Funding Source: Work Order** 

Appendix A-9

### 5. Modality(s)/Intervention(s):

### 1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year

Units of Service (UOS) Description B-9 (7/1/21 – 6/30/22)	Units of Service (UOS)	Unduplicated Clients (UDC)
Collective Impact 7/1/2021 – 6/30/2022 (1 month x 12 months)	12	1
Total UOS Delivered	12	
Total UDC Served		1

# 6. Methodology:

# **Program Administration of Subcontractors**

- 1. Manage and disburse funds as directed by the Department as it applies to the Community Outreach Services Program.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contractor;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities;
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations;
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements

### 7. Objectives and Measurements:

SFPHF must submit an Annual Summary Report documenting achievement of all Objectives to System of Care Program Manager and the Business Office Contract Compliance (BOCC) within two months from the end of the contract year.

### A. Standardized Objectives:

"All objectives and descriptions of how objectives will be measured, are contained in the Fiscal Intermediary/Program Management document entitled: Fiscal Intermediary Performance Objectives FY20-21."

### FY 2021-2022

By October 1, 2021, SFPHF staff will initiate subcontract management and program administration support of subcontractor.

## 8. Continuous Quality Improvement:

Contractor Name: San Francisco Public Health Foundation Program Name: Community Health Engagement – D5 Community Resource Hub – Program Administration

**Appendix Term:** 07/01/2021-06/30/2022

**Funding Source: Work Order** 

Appendix A-9

CHEP staff will work with the SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements.

To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

### 9. Required Language:

NA

#### 10. Subcontractors & Consultants:

- A. SFPHF is responsible for the performance of its subcontractors and consultants in this Agreement.
- B. SFPHF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFPHF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFPHF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Blood-borne Pathogen and Aerosol Transmissible Diseases. SFPHF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' Compensation laws and regulations.
- D. SFPHF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFPHF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFPHF, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFPHF, and SFPHF acknowledges that it must comply with all requirements of the Agreements, regardless of whether they are listed again here in this Appendix.

# Appendix B Calculation of Charges

## 1. Method of Payment

A. Contractor shall submit monthly invoices in the format attached in Appendix F, by the fifteenth (15th) working day of each month for reimbursement of the actual costs for Services of the immediately 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.

### 2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Appendix B	<b>Budget Summary</b>
Appendix B-1, B-1a, B-1b, B-1c, B-1d	Program Administration for Community Health Engagement
Appendix B-2, B-2a, B-2b, B-2c, B-2d	Program Administration for Community Health Engagement
Appendix B-3, B-3a, B-3b, B-3c, B-3d	Program Administration for Community Health Engagement
Appendix B-4a, B-4a.1, B-4b, B-4c	Program Administration for Community Health Engagement - COVID-19
Appendix B-5, B-5a, B-5a.1	Program Administration for Community Health Engagement – End Hep C SF & Hep C Lab
Appendix B-6	Program Administration for Community Health Engagement – COVID-19 OPS Testing
Appendix B-7, B-7a	Program Administration for Community Health Engagement – Dream Keeper's Initiative
Appendix B-8	Program Administration for Community Health Engagement – End Hep C SF Community Navigation
Appendix B-9	Program Administration for Community Health Engagement – District 5 Community Resource HUB

Amendment: 09/01/2021 1 of 5 Contract ID# 10000016941

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, \$1,544,347 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 executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. 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.

The maximum dollar for each term and funding source shall be as follows:

	<u>Term</u>	<u>Funding</u> Source	<u>Amount</u>
Original Agreement	01/01/2020 - 06/30/2020	General Fund	\$39,000
Original Agreement	02/01/2020 - 06/30/2020	General Fund	\$10,417
Original Agreement	02/01/2020 - 12/31/2020	CDC	\$22,917
Original Agreement	07/01/2020 - 06/30/2021	General Fund	\$615,383
Original Agreement	07/01/2020 - 06/30/2021	General Fund	\$25,000
Original Agreement	01/01/2021 - 12/31/2021	CDC	\$25,000
Original Agreement	07/01/2021 - 06/30/2022	General Fund	\$615,383
Original Agreement	07/01/2021 - 06/30/2022	General Fund	\$25,000
Original Agreement	01/01/2022 - 12/31/2022	CDC	\$25,000
Original Agreement	07/01/2022 - 06/30/2023	General Fund	\$615,383
Original Agreement	07/01/2022 - 06/30/2023	General Fund	\$25,000
Original Agreement	01/01/2023 - 12/31/2023	CDC	\$25,000
Original Agreement	07/01/2023 - 06/30/2024	General Fund	\$615,383
Original Agreement	07/01/2023 - 06/30/2024	General Fund	\$25,000
Original Agreement	01/01/2024 - 12/31/2024	CDC	\$25,000
Amendment #1	08/01/2020 - 06/30/2021	GF - FEMA	\$2,250,000
Amendment #1	08/01/2020 - 06/30/2021	GF - FEMA	\$2,000,000
Amendment #1	08/01/2020 - 06/30/2021	GF - FEMA	\$250,000
Amendment #1	09/01/2020 - 06/30/2021	State	\$1,000,000
Amendment #1	07/01/2020 - 12/31/2024	TBD	\$130,406
Revision to Program Budgets #1	07/01/2020 - 12/31/2024	TBD	-\$130,406
Revision to Program Budgets #1	07/17/2020 - 06/30/2021	CDPH	\$130,406
Revision to Program Budgets #1	12/01/2020 - 06/30/2021	GF	\$125,000
Revision to Program Budgets #1	12/01/2020 - 06/30/2021	Grant	\$300,000
Revision to Program Budgets #2	02/01/2020 - 12/31/2020	CDC	-\$1,042
Revision to Program Budgets #2	07/01/2020 - 06/30/2021	GF	-\$60,970
Revision to Program Budgets #2	07/01/2020 - 06/30/2021	GF	-\$2,084
Revision to Program Budgets #2	08/01/2020 - 06/30/2021	GF - FEMA	-\$926,436

Appendix B

Revision to Program Budgets #2	12/01/2020 - 06/30/2021	Grant	-\$188,931
Revision to Program Budgets #2	07/01/2021 - 06/30/2022	GF	\$4,667
Revision to Program Budgets #2	07/01/2021 - 04/30/2022	CDC	\$80,000
Revision to Program Budgets #2	07/01/2021 - 04/30/2022	CDC	\$115,000
Revision to Program Budgets #2	07/01/2021 - 06/30/2022	GF	\$100,000
Revision to Program Budgets #2	07/01/2021 - 06/30/2022	Grant	\$188,931
Revision to Program Budgets #2	07/01/2021 - 06/30/2022	GF - FEMA	\$2,616,664
Revision to Program Budgets #2	01/01/2022 - 12/31/2022	CDC	-\$25,000
Revision to Program Budgets #2	07/01/2022 - 06/30/2023	GF	-\$615,383
Revision to Program Budgets #2	07/01/2022 - 06/30/2023	GF	-\$25,000
Revision to Program Budgets #2	01/01/2023 - 12/31/2023	CDC	-\$25,000
Revision to Program Budgets #2	07/01/2023 - 06/30/2024	GF	-\$615,383
Revision to Program Budgets #2	07/01/2023 - 06/30/2024	GF	-\$25,000
Revision to Program Budgets #2	01/01/2024 - 12/31/2024	CDC	-\$25,000
Amendment #2	07/01/2021 - 06/30/2022	GF – FEMA	\$6,813,386
Amendment #2	07/01/2021 - 06/30/2022	WO	\$175,000
Amendment #2	01/01/2022 - 05/30/2023	CDC	\$779,763
Amendment #2	01/01/2022 - 12/31/2022	CDC	\$25,000
Amendment #2	07/01/2022 - 06/30/2023	GF	\$615,383
Amendment #2	07/01/2022 - 06/30/2023	GF	\$25,000
Amendment #2	01/01/2023 - 12/31/2023	CDC	\$25,000
Amendment #2	07/01/2023 - 06/30/2024	GF	\$615,383
Amendment #2	07/01/2023 - 06/30/2024	GF	\$25,000
Amendment #2	01/01/2024 - 12/31/2024	CDC	\$25,000
	Total	Award Amount:	\$18,483,220

Total Award Amount: \$18,483,220 Contingency 7/1/2021 – 12/31/2024: \$1,544,347 (This equals the total NTE) Total: \$20,027,567

- C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.
- D. A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date 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.
- **3.** 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.

Appendix B Amendment: 09/01/2021

Community Health 07/01/2021 - 06/30/2022 Engagement A-2/B-2b 07/01/2021 - 06/30/2022 563,684 Engagement Community Health A 1/B 1b 0.0% Community Health Engagement -Dream Keeper's 285,600 12/01/2020 -6/30/2021 A 7/B 7 nitiative Engagement COVID 19 - OPS Community Health 120,000 12/01/2020 06/30/2021 A-6/B-6 Testing Community Health Engagment-End Hep C SF 88,000 21,940 109,940 8,610 7/17/2020-06/30/2021 A 5/B 5 24.9% 1,000,000 09/01/2020-06/30/2021 COVID 19 Community A 4/B 4a 1 Outreach 4,250,000 08/01/2020-06/30/2021 COVID 19 Community A-4/B4a Outreach 0.0% 01/01/2021-12/31/2021 community Health Community Health Community Health Community Health Community Health Community Health 18,227 4,500 22,727 Engagement A 2/B 3a 24.7% 07/01/2020-06/30/2021 18,227 4,500 22,727 Engagement A 2/B 2a 24.7% 07/01/2020-06/30/2021 559,441 Engagement A-1/B-1a %0.0 17,850 20,833 DPH Section: CHEP - Community Health Equity and Promotion 02/01/2020-12/31/2020 2,983 Engagement A 2/B 3 16.7% Check one: [] Original Agreement [X] Amendment [] Revision to Program Budgets Agency/Contractor Name: San Francisco Public Health Foundation 8,033 1,437 9,470 02/01/2020-06/30/2020 Engagement A 2/B 2 17.9% 35,455 01/01/2020-06/30/2020 1000016941 Engagement A 1/B 1 %0.0 Total Personnel Expenses Program/Provider Name: Appendix Number: Salaries **Employee Benefits** Appendix Term: Employee Fringe Benefit Rate Operating Expense **EXPENSES** 

18,227 22,727 25,000

620,050

10.0%

10.0%

2.0%

4.2%

10.0%

%0.0

125,000

130,406

1,000,000

4,500,000

25,000 2,273

615,383

22,917

10,417

Total Expenses \$

10.0%

10.0%

10.0%

10.0%

10.0%

10.0%

22,727 2,273

563,684 56,366

285,600 14,400 300,000

120,000

1,000,000

4,250,000 250,000

22,727

22,727 2,273 25,000

559,441 55,942

20,833 2,084

9,470

35,455 3,545 39,000

Subtotal Direct Costs \$

ndirect Cost Amount

Indirect Cost Rate (%)

947

5,000

11,856 118,550

24.7%

REVENUES & FUNDING SOURCES													
DPH Funding Sources (select from drop-down list)	st)												
General Fund - Health Education	39,000			615,383								620,050	
General Fund - HIV Prevention		10,417			25,000								25,000
General Fund - FEMA							2,250,000						
General Fund - FEMA							2,000,000						
State-HUB&CI								1,000,000					
Generan Fund - FEMA							250,000						
Grant - CDC			22,917			25,000							
State/CDPH									130,406				
GR BOS Addback										125,000			
Dream Keeper's Initiative Grant											300,000		
CDC Grant 93.270													
Work Order													
Unspent Funding			(\$1,042)	(\$60,970)	(\$2,084)		(926,436)				(188,931)		
Total DPH Revenues \$	\$ 39,000	\$ 10,417 \$	\$ 21,875	\$ 554,413	\$ 22,916	\$ 25,000	\$ 3,573,564 \$	1,000,000	\$ 130,406	\$ 125,000	\$ 111,069	\$ 620,050	\$ 25,000
Total Revenues (DPH and Non-DPH) \$	\$ 39,000 \$	\$ 10,417 \$	\$ 21,875	\$ 554,413	\$ 22,916	\$ 25,000	\$ 3,573,564 \$	1,000,000	\$ 130,406	\$ 125,000	\$ 111,069	\$ 620,050	\$ 25,000
Cost Reimbursement (CR) or Fee-For-Service (FFS)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)

Contract ID# 1000016941

18,483,220 18,483,220

25,000 \$ 25,000 \$

\$ 69,767 \$ 82,621

25,000 \$ 25,000 \$

25,000 \$ 25,000 \$

615,383 \$ 615,383 \$

100,000 \$ 100,000

188,931 \$ 188,931

115,000 \$ 115,000 \$

9,430,050 \$

25,000 \$

25,000

80,000 80,000

25,000 \$ 9,430,050 \$

175,000 \$ 175,000 \$

25,000 \$ 25,000

615,383 \$ 615,383

(CR)

			Ī				334,699	79,277	413,976		0,610	1,586	1,068,097		2,683	2,505,199	210,417	9,813	2,000,000	1,000,000	250,000	122,917	130,406	125,000	488,931	195,000	175,000	9,463)	
ω	01/01/2020 - 12/31/2024	08/18/21		TOTALS	O ALS		334	5/	413		18,180,610	18,594,586	1,068	2.7%	19,662,683	2,505	210	12,459,813	2,000	1,000	250	122	130	125	488	195	175	(1,179,463)	
×	01/0	-	ŀ	£		I	\$	<b>\$</b>	\$		<b>₽</b>	\$	3 \$		\$ 0	+	_					0						$\dashv$	-
Appendix:	01/01/2020 Contract Term : 12/31/2024	Notification Date		Community Health Engagement	A 2/B 3d	01/01/2024-12/31/2024	\$ 18,227	\$ 4,500	\$ 22,727	24.7%	s	\$ 22,727	\$ 2,273	10.0%	\$ 25,000							25,000							
		Current Funding Notification Date:	İ	Community Hea <b>l</b> th Engagement	A-2/B-2d		\$ 18,227	\$ 4,500	\$ 22,727	24.7%	s	\$ 22,727	\$ 2,273	10.0%	\$ 25,000		25,000												
		S		Community Health Engagement	A-2/B-1d	07/N12023 - 06/30/2024   07/N1/2023 - 06/30/2024	- \$	- \$	s	%0"0	\$ 559,441	\$ 559,441	\$ 55,942	10.0%	\$ 615,383	615,383													
				COVID 19 Community Outreach	A-4/B-4c	01/01/2022-5/30/2023 0					\$ 742,632	\$ 742,632	\$ 37,131	2.0%	\$ 779,763			779,763											
				Community Health Engagement	A-2/B-3c		\$ 18,227	\$ 4,500	\$ 22,727	24.7%	\$	\$ 22,727	\$ 2,273	10.0%	\$ 25,000							25,000							
				Community Health Engagement	A 2/B 2c	77/01/2022 - 06/30/2023	\$ 18,227	\$ 4,500	\$ 22,727	24.7%	s	\$ 22,727	\$ 2,273	10.0%	\$ 25,000		25,000												
				Community Health Engagement	A 2/B 1c	77/01/2022 - 06/30/2023 (	- \$		s	%0.0	\$ 559,441	_	\$ 55,942	10.0%	\$ 615,383	615,383													
			İ	Community Health Engagement-D5 Resource Center	A-9/B-9	070112021 - 0650/2022 010112022 - 0650/2023 070112022 - 0650/2023 01012023-1251/2023					\$ 159,100	\$ 159,100	\$ 15,900	10.0%	\$ 175,000												175,000		
				Community Health Engagment-End Hep C SF	A-8/B-8	07/01/2021 - 06/30/2022					\$ 90,909	606'06 \$	\$ 9,091	10.0%	\$ 100,000		100,000												
				Community Health Engagement - Dream Keeper's Initiative	A-7/B-7a	07/01/2021 - 06/30/2022					\$ 179,941	\$ 179,941	8,990	2.0%	\$ 188,931										188,931				
				Community Health Engagment-End Hep C SF	A 5/B 5a 1	07/01/2021 - 04/30/2022	\$ 75,000	\$ 16,917	\$ 91,917	22.6%	\$ 12,629	\$ 104,546	\$ 10,454	10.0%	\$ 115,000											115,000			
				Community Health Engagment-End Hep C SF	A-5/B-5a	07/01/2021 - 04/30/2022			\$		\$ 72,727	\$ 72,727	\$ 7,273	10.0%	\$ 80,000											80,000			
				COVID 19 Community Outreach	A-4/B-4b	07.01.12021 - 06.500.2022   07.01.12021 - 04.50.0202   07.01.12021 - 04.50.0202   07.01.12021 - 06.50.0202			•		\$ 8,981,000	\$ 8,981,000	\$ 449,050	2.0%	\$ 9,430,050			9,430,050											
			ı			220	27	8	27		1	27	73		8			П				00						ヿ	-

01/01/2022-12/31/2022

Community Health Engagement A-2/B-3b

18,227 22,727 2,273 25,000

10.0%

22,727

24.7%

Contractor: SF Public Health	Foundation					Ap	pendix:	B-1c				
Program: Community Healt	h Engagem	ent					Append	ix Term:	7/1/2022-6/30/2023			
							Funding	Source:	GF- Health Education			
	UOS COST	ALLOCA	ATION BY SE	RVICE	MODE		v					
Service Modes:	Community Engagen Progra Administ	nent - am	Community Injury Preve Progra Administr	ention - m	Violen Prevent Progra Administ	ion - am	Vision Z Progra Administ	am				
Operating Expenses	Expense	%	Expense	%	Expense	%	Expense	%	Totals			
Total General Operating	1,504	25%	1,503	25%	1,503	25%	1,503	25%	6,013			
Consultants/Subcontractor: (13)												
Community Health Engagement - PA (1	106,700	100%							106,700			
Comm. Home Injury Prev PA (1)		0%	70,000	100%		0%		0%	70,000			
Violence Prevention-PA (1)		0%		0%	39,460	100%		0%	39,460			
Vision Zero - PA (10)		0%		0%		0%	337,268   100%		337,26			
Total Operating Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441			
Total Direct Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441			
Indirect Expenses 10.00%	10,820	19%	7,150	13%	4,096	7%	33,876	61%	55,942			
TOTAL EXPENSES	119,024	19%	78,653	13%	45,059	7%	372,647	61%	615,383			
TOTAL EXI ENGLS	119,024   19%		70,000	13 /0	40,000	7 70	372,047	0170	010,000			
Unit of Service Type	Subcont	ractor	Subcontra	actor	Subcontr	actor	Subconti	ractor				
Number of UOS per Service Mode	12		12		12		96		132			
Cost Per UOS by Service Mode	\$9,918	.67	\$6,554.	42	\$3,754	.92	\$3,881	.74	N/A			
Number of UDC/NOC per Service Mode	1		1		1		7		10			
									Rev: 02/18			

Contractor Name SF Public Health Foundation	Appendix:	B-1c
Program Name: Community Health Engagement	Appendix Term:	7/1/2022-6/30/2023
	Eunding Source:	GF- Health Education

# 2) OPERATING EXPENSES:

**General Operating:** 

Expense Item	Brief Description	Rate/Formula	(	Cost
Community Capacity Building & Engagement	Website maintenance, trainings, data purchases, audio conferencing services, meeting room rentals, surveys and project management software license, and books, office, incentives/'swag', meeting supplies, presentation materials, printing, and other.		\$	6,013
	Т	otal General Operating:	\$	6,013

# **Consultants/Subcontractors:**

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost	
Community Engagement	Program, evaluation, fund development and other consultants: Hourly rate to be based on experience and duties. Work to support the development, implementation, monitoring and evaluation of various capacity building projects and services. Includes consultants for Chronic Disease Prevention, Healthy Retail SF, Ped Safety/Active Transportation and other work related towards healthier communities.	\$ 8,891.67		
Consultants - TBD	Consultants and rate to be determined as identified.		\$ 106,700	
Raimi and Associates	Program evaluation services for Safe Routes to School and related services.	\$ 3,333.33	\$ 40,000	
CARECEN Violence Prev Groups	To provide violence prevention support groups and related activities for girls and young women.	\$ 3,288.33	\$ 39,460	
Rebuilding Together San Francisco	Supplies and labor costs associated with minor home repairs in seniors' and disabled persons' private residences as referred by DPH CHIPPS staff and associates.	\$ 5,833.33	\$ 70,000	
Walk SF Foundation - Families for Safe Streets	Families for Safe Streets (FSS) organizes and assists a group of people who have lost loved ones or been victims in traffic collisions; these individuals support the implementation of Vision Zero in San Francisco to prevent future crashes from happening.	\$ 8,316.17	\$ 99,794	
Walk SF Foundation - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$ 3,406.67	\$ 40,880	
-	based education of Vision Zero projects and services	\$ 3,406.67		
Safe Streets for Seniors Appendix B-1c	for senior and disabled communities.		\$ 40,880	

Amendment: 09/01/2021 2 Contract ID# 1000016941

Neighborhood subcontract for work to support the	\$	1,703.33		
community based education of Vision Zero projects and				
services for senior and disabled communities.			\$	20,440
Neighborhood subcontract for work to support the	\$	1,703.33		
, ,				
services for senior and disabled communities.			\$	20,440
Neighborhood subcontract for work to support the	\$	1,703.33		
, ,				
services for senior and disabled communities.			\$	20,440
Neighborhood subcontract for work to support the	\$	1,703.33		
services for senior and disabled communities.			\$	20,440
Neighborhood subcontract for work to support the	\$	1,703.33		
, ,				
services for senior and disabled communities.			¢	20.440
	_		Ф	20,440
Community-based subcontract for pedestrian safety outreach	\$	1,126.17		
in District 5.			\$	13,514
			•	- ,
	community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Community-based subcontract for pedestrian safety outreach	community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Community-based subcontract for pedestrian safety outreach  \$  Community-based subcontract for pedestrian safety outreach	community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Community-based subcontract for pedestrian safety outreach  \$ 1,703.33	community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.  \$ 1,703.33 \$ 1,703

Total Consultants/Subcontractors: \$ 553,428

TOTAL OPERATING EXPENSES: \$ 559,441

TOTAL DIRECT COSTS: \$ 559,441

# 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

Amount	
--------	--

	•	
Finance Manager, Accounting Assistant, Executive Director, Program Coordinator, rent, audit, supplies.	\$	55,942
	T	

Indirect Rate: 10.00%

TOTAL INDIRECT COSTS: \$ 55,942

TOTAL EXPENSES: \$ 615,383

Contractor: San Francisco Public Health Foundation Appendix: B-1d

 Program:
 Community Health Engagement
 Appendix Term:
 07/01/2023-06/30/2024

General Fund-Health

Funding Source: Education

### **UOS COST ALLOCATION BY SERVICE MODE**

Service Mod	Communi Engage Prog Adminis	ment - ram	Injury Preve Progra	Program		Violence Prevention - Program Administration		Prevention - Program		Zero - am ration	
Personnel Expenses	-	0%	-	0%	-	0%	-	0%	-		
Operating Expenses	Expense	%	Expense	%	Expense	%	Expense	%	Totals		
Total General Operating	1,504	25%	1,503	25%	1,503	25%	1,503	25%	6,013		
Consultants/Subcontractor: (1	3)										
Community Health Engageme	nt - F 106,700	100%							106,700		
Comm. Home Injury Prev PA	\ (1)	0%	70,000	100%		0%		0%	70,000		
Violence Prevention-PA (1)		0%		0%	39,460	100%		0%	39,460		
Vision Zero - PA (10)		0%		0%		0%	337,268	100%	337,268		
Total Operating Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441		
Total Direct Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441		
Indirect Expenses 10.00	% 10,820	19%	7,150	13%	4,096	7%	33,876	61%	55,942		
TOTAL EXPENSES	119,024	19%	78,653	13%	45,059	7%	372,647	61%	615,383		
Unit of Service T	ype Subcon	tractor	Subcontr	actor	Subconti	ractor	Subcont	ractor			
Number of UOS per Service M	ode 12	)	12		12		96		132		
Cost Per UOS by Service M		3.67	\$6,554.	42	\$3,754	.92	\$3,881	.74	N/A		
umber of UDC/NOC per Service N			1	1			7		10		
	•		•						Rev: 02/18		

Amendment: 09/01/2021 1 Contract ID# 1000016941

Contractor Name San Francisco Public Health Foundation Appendix: B-1d

Program Name: Community Health Engagement Appendix Term: 07/01/2023-06/30/2024

General Fund-Health

Funding Source: Education

2) OPERATING EXPENSES:

**General Operating:** 

Expense Item	Brief Description	Rate/Formula	Cost	
Community Capacity Building & Engagement	Website maintenance, trainings, data purchases, audio conferencing services, meeting room rentals, surveys and project management software license, and books, office, incentives/'swag', meeting supplies, presentation materials, printing, and other.		\$ 6,013	3
				7

Total General Operating: \$ 6,013

### **Consultants/Subcontractors:**

<b>Consult/Subcontractor Name</b>	Service Description	Rate/Formula	Cost
Community Engagement	Program, evaluation, fund development and other consultants: Hourly rate to be based on experience and duties. Work to support the development, implementation, monitoring and evaluation of various capacity building projects and services. Includes consultants for Chronic Disease Prevention, Healthy Retail SF, Ped Safety/Active Transportation and other work related towards healthier communities. Consultants and rate to be determined as identified.	\$ 8,891.67	
Consultants - TBD	Consultants and rate to be determined as identified.		\$ 106,700
Raimi and Associates	Program evaluation services for Safe Routes to School and related services.	\$ 3,333.33	\$ 40,000
CARECEN Violence Prev Groups	To provide violence prevention support groups and related activities for girls and young women.	\$ 3,288.33	\$ 39,460
Rebuilding Together San Francisco	Supplies and labor costs associated with minor home repairs in seniors' and disabled persons' private residences as referred by DPH CHIPPS staff and associates.	\$ 5,833.33	\$ 70,000
Walk SF Foundation - Families for Safe Streets	Families for Safe Streets (FSS) organizes and assists a group of people who have lost loved ones or been victims in traffic collisions; these individuals support the implementation of Vision Zero in San Francisco to prevent future crashes from happening.	\$ 8,316.17	\$ 99,794
Walk SF Foundation - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$ 3,406.67	\$ 40,880
Senior and Disability Action - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$ 3,406.67	\$ 40,880
Chinatown Community Development Center - Safe Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$ 1,703.33	\$ 20,440

Appendix B-1d

Curry Senior Center - Safe	Neighborhood subcontract for work to support the	•	1,703.33	
Streets for Seniors	community based education of Vision Zero projects and services for senior and disabled communities.			\$ 20,440
Lighthouse for the Blind and Visually Impaired - Safe	Neighborhood subcontract for work to support the community based education of Vision Zero projects and	•	1,703.33	
Streets for Seniors	services for senior and disabled communities.			\$ 20,440
	Neighborhood subcontract for work to support the community based education of Vision Zero projects and	•	1,703.33	
Streets for Seniors	services for senior and disabled communities.			\$ 20,440
Tenderloin Community Benefit District - Safe	Neighborhood subcontract for work to support the community based education of Vision Zero projects and	•	1,703.33	
Streets for Seniors	services for senior and disabled communities.			\$ 20,440
Walk SF Foundation - D5	Community-based subcontract for pedestrian safety outreach	\$	1,126.17	
Pedestrian Safety Outreach	in District 5.			\$ 13,514

**Total Consultants/Subcontractors: \$** 553,428

**TOTAL OPERATING EXPENSES: \$** 559,441

**TOTAL DIRECT COSTS: \$** 559,441

# 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

### **Amount**

Finance Manager, Accounting Assistant, Executive Director, Program Coordinator, rent, audit, supplies.	\$ 55,942

10.00% **Indirect Rate:** TOTAL INDIRECT COSTS: \$ 55,942

> **TOTAL EXPENSES: \$** 615,383

Contractor: San Francisco Public Health Foundation Appendix: B-2c

Program: Community Health Engagement Appendix Term: 07/01/2022-06/30/2023

Funding Source: **GF-HIV Prevention** 

### **UOS COST ALLOCATION BY SERVICE MODE**

Serv	vice Modes:	Progr Administ									
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals	
End Hep C SF Project Coordi	0.25	18,227	100%		0%	-	0%		0%	18,227	
Total FTE & Salaries	0.25	18,227	100%	-	0%	-	0%	-	0%	18,227	
Fringe Benefits	24.69%	4,500	100%	-	0%	-	0%	-	0%	4,500	
Total Personnel Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727	
Total Direct Expenses		22,727	100%	_	0%		0%	_	0%	22,727	
Indirect Expenses	10.00%	2,273	100%		0%		0%	_	0%	2,273	
TOTAL EXPENSES	1010070	25,000	100%	-	0%	-	0%	-	0%	25,000	
Unit of	Service Type	Hou	rs	0		0		0			
Number of UOS per	Service Mode	536	3							536	
Cost Per UOS by	Service Mode	\$46.6	35	\$0.00	)	\$0.0	0	\$0.0	0	N/A	
Number of UDC/NOC per	Service Mode	N/A	١								
	Rev: 02/18										

Contractor Name SF Public Health Foundation	Appendix:	B-2c
Program Name: Community Health Engagement	Appendix Term:	07/01/2022-06/30/20
	Funding Source:	GF-HIV Prevention

### 1a) SALARIES

Staff Position 1	End Hep C SF Project Coordinator					
Brief duties related to this program and clients served	Coordinates meetings, communications and events for and between coalition members.					
Degree, license (if applicable), experience	Bachelors degree, two years community health education experience.					
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	72,908	0.25	12	0.25	\$	18,227

Total FTE, Base: 0.25 Annualized: 0.25

### 1b) EMPLOYEE FRINGE BENEFITS:

Total Salaries: \$

18,227

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost
Social Security	\$ 1,394.37
Retirement	\$ 911.35
Medical	\$ 1,636.00
Dental	\$ 250.00
Unemployment Insurance	\$ 308.00
Disability Insurance	\$ -
Paid Time Off	\$
Other (specify):	\$

Total Fringe Benefit: \$ 4,500

Fringe Benefit %: 24.69%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 22,727

TOTAL DIRECT COSTS: \$ 22,727

### 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Finance Manager, Accounting Assistant, rent, audit, supplies.	\$ 2,273

Indirect Rate: 10.00%

TOTAL INDIRECT COSTS: \$ 2,273

TOTAL EXPENSES: \$ 25,000

Appendix B-2c

**Contractor: San Francisco Public Health Foundation** 

**Program: Community Health Engagement** 

Appendix:

B-2d

Appendix Term: 07/01/2023-6/30/2024

Funding Source: GF-HIV Prevention

### **UOS COST ALLOCATION BY SERVICE MODE**

Ser	vice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	18,227	100%		0%	-	0%		0%	18,227
Total FTE & Salaries	0.25	18,227	100%	-	0%	-	0%	-	0%	18,227
Fringe Benefits	24.69%	4,500	100%	-	0%	_	0%	-	0%	4,500
Personnel Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Total Direct Expenses	.	22,727	100%	_	0%		0%		0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	_	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of	Service Type	Hou	rs	0		0		0		
Number of UOS per	Service Mode	536	)							536
Cost Per UOS by	Service Mode	\$46.6	55	\$0.00		\$0.0	0	\$0.0	0	N/A
Number of UDC/NOC per	Service Mode	N/A	\							

1 Amendment: 09/01/2021 Contract ID# 1000016941

Contractor Name San Francisco Public Health Foundation	Appendix:	B-2d
Program Name: Community Health Engagement	Appendix Term:	07/01/2023-6/30/2024
	Funding Source:	General Fund-HIV Prevention
IFS		

### 1a) SALARIES

Staff Position 1	End Hep C SF Project	nd Hep C SF Project Coordinator					
Brief duties related to this program and clients served	Coordinates meetings, communications and events for and between coalition members.						
Degree, license (if applicable), experience	Bachelors degree, two years community health education experience.						
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total	
	72,908	0.25	12	0.25	\$		18,227

Total FTE, Base: 0.25 Annualized: 0.25

### 1b) EMPLOYEE FRINGE BENEFITS:

Total Salaries: \$

18,227

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost
Social Security	•
Retirement	\$ 911.35
Medical	\$ 1,636.00
Dental	\$ 250.00
Unemployment Insurance	\$ 308.00
Disability Insurance	\$ -
Paid Time Off	\$ -
Other (specify):	-

Total Fringe Benefit: \$ 4,500

Fringe Benefit %: 24.69%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 22,727

TOTAL DIRECT COSTS: \$ 22,727

### 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Ar	mount
Finance Manager, Accounting Assistant, rent, audit, supplies.	\$	2,273

Indirect Rate	10.00%
TOTAL INDIRECT COSTS	2,273

TOTAL EXPENSES: \$ 25,000

Appendix B-2d

Contractor: SF Public Health Foundation Appendix: B-3b

Program: Community Health Engagement Appendix Term: 1/1/2022-12/31/2022

Funding Source: Grant - CDC

### **UOS COST ALLOCATION BY SERVICE MODE**

Servi	ice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	18,227	100%		0%	-	0%		0%	18,227
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	0.25	18,227	100%	-	0%	-	0%	-	0%	18,227
Fringe Benefits	24.69%	4,500	100%	-	0%	-	0%	-	0%	4,500
Personnel Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Total Direct Expenses	s	22,727	100%	-	0%	-	0%	-	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of S	ervice Type	Hou	rs	0		0		0		
Number of UOS per S	Service Mode	567	7							567
Cost Per UOS by S	Service Mode	\$44.1	10	\$0.00	)	\$0.0	0	\$0.0	0	N/A
mber of UDC/NOC per S	Service Mode	N/A	4							Rev: 02/18

Appendix: B-3b
Appendix Term: 1/1/2022-12/31/202
Funding Source: Grant - CDC

### 1a) SALARIES

Staff Position 1	End Hep C SF Project	t Coordinator			
Brief duties related to this program and clients served		, communications a	nd events for and be	tween coalition members	
Degree, license (if applicable), experience	Bachelors degree, two	years community h	nealth education exp	erience.	
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	72,908	0.25	12	0.25	\$ 18,227

Total FTE, Base: 0.25 Annualized: 0.25

### 1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

<u> </u>	
Component	Cost
Social Security	\$ 1,394.73
Retirement	\$ 911.35
Medical	\$ 1,636.00
Dental	\$ 250.00
Unemployment Insurance	\$ 308.00
Disability Insurance	\$ -
Paid Time Off	\$ -
Other (specify):	\$ -

Total Fringe Benefit: \$ 4,500

**Total Salaries: \$** 

Fringe Benefit %: 24.69%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 22,727

TOTAL DIRECT COSTS: \$ 22,727

### 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

F	۱r	n	0	u	n

18,227

Finance Manager, Accounting Assistant, rent, audit, supplies.	\$ 2,273

Indirect Rate: 10.00%

TOTAL INDIRECT COSTS: \$ 2,273

TOTAL EXPENSES: \$ 25,000

Contractor: SF Public Health Foundation Appendix: B-3c

Program:Community Health EngagementAppendix Term:1/1/2023-12/31/2023

Funding Source: Grant -CDC

### **UOS COST ALLOCATION BY SERVICE MODE**

Serv	vice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	18,227	100%		0%	-	0%		0%	18,227
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	0.25	18,227	100%	-	0%	-	0%	-	0%	18,227
Fringe Benefits	24.69%	4,500	100%	-	0%	-	0%	-	0%	4,500
Personnel Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Total Direct Expenses	3	22,727	100%	-	0%	-	0%	-	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of	Service Type	Hou	rs	0		0		0		
Number of UOS per	Service Mode	567	7							567
Cost Per UOS by	Service Mode	\$44.1	0	\$0.00	)	\$0.0	0	\$0.0	0	N/A
umber of UDC/NOC per	Service Mode	N/A	١							
				-						Rev: 02/18

Amendment: 09/01/2021 1 Contract ID# 1000016941

		<b>BUDGET JUSTII</b>	FICATION .			
Contractor Name	SF Public Health Four	ndation		Appendix:	B-3c	2
	Community Health En					- 1/2023-12/31/2023
<b> </b>		9.9		Funding Source:		
Ia) SALARIES				. amamig coance		020
,						
Staff Position 1	End Hep C SF Project	Coordinator				
Brief duties related to this program	1	communications a	and events for and be	tween coalition members		
and clients served						
Degree, license (if applicable),	Bachelors degree, two	vears community	health education evo	arianca		
Схропопос	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	$\overline{}$	Total
	72,908	0.25	12	0.25	\$	18,227
	12,500	0.20	12	0.20	Ψ	10,221
	Total FTE, Base:	0.25	Annualized:	0.25		
Ib) EMPLOYEE FRINGE BENI	EEITQ.			Total Salaries:	¢	18,227
Components provided below a		dacted componen	to should reflect the		•	10,221
Components provided below at	e samples only. The but	ugeted componen	Component			
			Social Security			1,394.73
			Retirement			911.35
			Medical	_ '		1,636.00
			Dental			250.00
		l la a ac				
		Unen	nployment Insurance			308.00
			Disability Insurance			
			Paid Time Off	Ŧ		-
			Other (specify):	\$ Total Fringe Benefit:	<u>¢</u>	4,500
				rotai i illige bellelit.	Ψ	4,500
	_			Fringe Benefit %:		24.69%
	[	TOTAL SA	LARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
			ı -	OTAL DIDECT COCTO		20 707
WINDINGS AGOTO				OTAL DIRECT COSTS:	<u> </u>	22,727
I) INDIRECT COSTS						
Please list here the personnel a	nd ledger expenses tha	t are included in y	our snared costs?			A a 4
		- P			<u> </u>	Amount
Finance Manager, Accounting A	ssistant, rent, audit, sup	pplies.			\$	2,273
				Indirect Rate:		10.00%
			TO	TAL INDIRECT COSTS:	\$	2,273

Appendix B-3c Amendment: 09/01/2021 25,000

TOTAL EXPENSES: \$

Contractor: San Francisco Public Health Foundation Appendix: B-3d

 Program:
 Community Health Engagement
 Appendix Term:
 1/1/2024-12/31/2024

Funding Source: **Grant - CDC** 

### **UOS COST ALLOCATION BY SERVICE MODE**

Serv	ice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	18,227	100%		0%	-	0%		0%	18,227
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	0.25	18,227	100%	-	0%	-	0%	-	0%	18,227
Fringe Benefits	24.69%	4,500	100%	-	0%	-	0%	-	0%	4,500
Personnel Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Total Direct Expenses	<u>.                                      </u>	22,727	100%	_	0%	_	0%	_	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of S	Service Type	Hou	rs	0		0		0		
Number of UOS per S	Service Mode	567	7							567
Cost Per UOS by S	Service Mode	\$44.1	0	\$0.00	)	\$0.0	0	\$0.0	0	N/A
umber of UDC/NOC per	Service Mode	N/A	٨							
										Rev: 02/18

Amendment: 09/01/2021

		BUDGET JUSTI	FICATION			
Contractor Name	SF Public Health Four	ndation		Appendix:	B-3c	1
	Community Health Er					<u>-</u>  /2024-12/31/2024
		.9.9		Funding Source:		
a) SALARIES				J		
Staff Position 1	End Hep C SF Project	t Coordinator				
Brief duties related to this program and clients served	1	communications a	and events for and be	tween coalition members		
Degree, license (if applicable), experience	Bachelors degree, two	years community	health education exp	erience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	72,908	0.25	12	0.25	\$	18,227
	Total FTE, Base:	0.25	Annualized:	0.25		
b) EMPLOYEE FRINGE BENE	EFITS:			Total Salaries:	\$	18,227
Components provided below ar		dgeted component	ts should reflect the c	contractor's ledger accour	its.)	,
	· · · · [		Component	Cos	t	
			Social Security	\$		1,394.73
			Retirement	\$		911.35
			Medical	\$		1,636.00
			Dental	\$		250.00
		Unem	ployment Insurance	\$		308.00
			Disability Insurance	\$		-
			Paid Time Off	\$		-
			Other (specify):	\$		-
			, ; , , , , , , , , , , , , , , , , , ,	Total Fringe Benefit:	\$	4,500
	_			Fringe Benefit %:		24.69%
		TOTAL SA	LARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
			Т	OTAL DIRECT COSTS:	\$	22,727
e) INDIRECT COSTS Please list here the personnel a	nd ledger expenses tha	at are included in y	our shared costs?			Amount
Finance Manager, Accounting A	 ssistant rent audit sur	onlies			\$	2,273
	Solution, ront, dudit, out	·				
				Indirect Rate:		10.00%
			TO	TAL INDIRECT COSTS:	\$	2,273

Appendix B-3d

2

Contractor: San Francisc	o Public Healt	h Foun	dation		A	ppendix:	B-4b	
Program: COVID 19 Co	Program: COVID 19 Community Outreach Services							
Full Contract Term: 01/01/2020 to	Full Contract Term: 01/01/2020 to 12/31/2024							
	UOS COST AL	LOCAT	TON BY SER	VICE M	ODE			
Service Modes:	COVID 1 Commun Outreach Sei Progran Administra	ity rvices- n						
Personnel Expenses	-	0%	-	0%	-	0%	-	
Operating Expenses	Expense	%	Expense	%	Expense	%	Totals	
Consultants/Subcontractor:								
Covid 19 Community Outreach								
Servs.	8,981,000	100%					8,981,000	
Total Operating Expenses	8,981,000	100%	-				8,981,000	
Total Direct Expenses	8,981,000	100%	_				8,981,000	
Indirect Expenses 5.00%	449,050	100%	-				449,050	
TOTAL EXPENSES	9,430,050	100%	-				9,430,050	
He'f of October Toron	0 1				ļ			
Unit of Service Type		ctor	0		0		400	
Number of UOS per Service Mode	120	70	<u>фо</u> 00		#C 0		120	
Cost Per UOS by Service Mode	\$78,583.7	0	\$0.00		\$0.0	U	N/A	
umber of UDC/NOC per Service Mode	10						10	
							Rev: 02/18	

Amendment: 09/01/2021 1 Contrct ID# 1000016941

 Contractor Name
 San Francisco Public Health Foundation
 Appendix
 B-4b

 Program Name:
 COVID 19 Community Outreach Services
 Appendix Term:
 07/01/2021-06/30/2022

 Funding Source:
 Funding Source:
 General Fund - FEMA

### 2) OPERATING EXPENSES:

### Consultants/Subcontractors:

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
	Subcontractor delivering COVID 19 mitigation and		
	relief services to Western Addition residents affected		
	by the pandemic. Services include navigation to		
Booker T Washington	testing, support for families in isolation, contact		
Community Services	investigation and contact tracing.	12 months X \$28,512	\$ 342,149
	Subcontractor delivering COVID 19 mitigation and		
	relief services to Chinatown residents affected by the		
	pandemic. Services include navigation to testing,		
	support for families in isolation, contact investigation		
Chinese Hospital	and contact tracing.	12 months X \$28,513	\$ 342,158
·	Subcontractor delivering COVID 19 mitigation and	. ,	,
	relief services to Visitacion Valley, Sunnydale, and		
Family and Child	Portola residents affected by the pandemic. Services		
Empowerment Services	include navigation to testing, support for families in		
(FACES)	isolation, contact investigation and contact tracing.	12 months X \$135,437	\$ 1,625,249
(I AOLO)		12 IIIOIIIIIS A \$130,437	φ 1,020,249
	Subcontractor delivering COVID 19 mitigation and		
	relief services to Chinatown residents affected by the		
Missian Language and	pandemic. Services include navigation to testing,		
Mission Language and	support for families in isolation, contact investigation		
Vocational School	and contact tracing.	12 months X \$64,155	\$ 769,855
	Subcontractor delivering COVID 19 mitigation and		
	relief services to Excelsior, Outer Mission, and		
	Crocker Amazon residents affected by the pandemic.		
Mission Neighborhood Health	Services include navigation to testing, support for		
Center (MNHC)	families in isolation, contact investigation and contact	12 months X \$135,437	\$ 1,625,249
	Subcontractor delivering COVID 19 mitigation and		
	relief services to Bayview-Hunter's Point residents		
	affected by the pandemic. Services include navigation		
	to testing, support for families in isolation, contact		
Rafiki Coalition	investigation and contact tracing.	12 months X \$135,437	\$ 1,625,249
	Subcontractor delivering COVID 19 mitigation and	. ,	, ,
	relief services to Tenderloin residents affected by the		
	pandemic. Services include navigation to testing,		
	support for families in isolation, contact investigation		
SF Community Health Center	and contact tracing.	12 months X \$64,155	\$ 769,855
,	Subcontractor delivering COVID 19 mitigation and	12 111011111071 40 1,100	1.00,000
	relief services to Excelsior, OMI/Lakeview residents		
	affected by the pandemic. Services include navigation		
Southwest Community	I =		
Corporation	to testing, support for families in isolation, contact	12 months X \$64,100	\$ 769,206
Corporation	investigation and contact tracing.	12 111011(115 \(\text{A}\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Ψ 109,200
	Subcontractor delivering COVID 19 mitigation and		
	relief services to Potrero Hill residents affected by the		
	pandemic. Services include navigation to testing,		
VMCA Urban Sanisas	support for families in isolation, contact investigation	10 th - V #00 F10	h 040.450
YMCA Urban Services	and contact tracing.	12 months X \$28,513	\$ 342,158
	Subcontractor for training of culturally appropriate		
San Francisco AIDS	Contact Investigators/Contact tracers for the priority		
	populations.		
Foundation		12 months X \$64,156	\$ 769,872

	Total Cons	ultants/Subcontractors:	\$	8,981,000
	TOTAL O	PERATING EXPENSES:	\$	8,981,000
			•	, ,
	-	TOTAL DIRECT COSTS:	\$	8.981.000

# 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	 Amount
Executive Director, Program Coordinator, Finance Manager, Accounting Assistant, rent, audit, supplies.	\$ 449,050

Indirect Rate:

5.00%

TOTAL INDIRECT COSTS: \$

449,050

TOTAL EXPENSES: \$

9,430,050

Amendment: 09/01/2021 3 Contrct ID# 1000016941

Contractor: San Francisco Public Health Foundation				Ar	pendix:	B-4c	
Program: COVID 19 Community Outreach Services				- '	•	01/01/2022-05/30/2023	
Full Contract Term: 01/01/2020 to 12/31/2024						General Fund - FEMA	
	UOS COST	ALLOC	ATION BY SI	ERVICE	_	,	
Service Modes:	COVID 19 Community Outreach Services- Program Administration						
Personnel Expenses	-	0%	-	0%	-	0%	-
Operating Expenses	Expense	%	Expense	%	Expense	%	Totals
Consultants/Subcontractor:							
TBD	742,632	100%					742,632
Total Operating Expenses	742,632	100%	-				742,632
Total Direct Expenses	742,632	100%	-				742,632
Indirect Expenses 5.00%	37,131	100%	-				37,131
TOTAL EXPENSES	779,763	100%	-				779,763
Unit of Service Type	Subcontr	actor	0		0		
Number of UOS per Service Mode	12						120
Cost Per UOS by Service Mode	\$64,980	.26	\$0.00		\$0.00		N/A
umber of UDC/NOC per Service Mode	1						10
	<u> </u>						Rev: 02/18

Contractor NameSan Francisco Public Health FoundationAppendixB-4cProgram Name:COVID 19 Community Outreach ServicesAppendix Term:01/01/2022-05/30/2023Funding Source:Funding Source:General Fund - FEMA

## 2) OPERATING EXPENSES:

### **Consultants/Subcontractors:**

ation and affected by to testing,	
to other	\$ 742,632
	742.632
	Total Consultants/Subcontractors: \$

TOTAL DIDEOT 000TO	_	= 40,000
I TOTAL OPERATING EXPENSES	: \$	142,632

TOTAL DIRECT COSTS: \$ 742,632

### 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount
Executive Director, Program Coordinator, Finance Manager, Accounting Assistant, rent, audit, supplies.	\$ 37,131

Indirect Rate:	5.00%	
TOTAL INDIRECT COSTS: \$	37,131	

TOTAL EXPENSES: \$ 779,763

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Contractor: San Francisco Public Health Foundation Appendix:					B-9		
Program: Commuity Health Engagement - D5 Community Resource Appendix Term:						07/01/2021-06/30/2022	
Full Contract Term: 01/01/2020 to 12/31/2024 Funding Source:					Work Order		
	UOS COST A	ALLOCA	TION BY SER	VICE N	IODE	•	
Service Modes:	Program Administration						
Personnel Expenses	-	0%	-	0%	-	0%	-
Operating Expenses	Expense	%	Expense	%	Expense	%	Totals
Consultants/Subcontractor:			•		1 '		
Collective Impact	159,100	100%		0%		0%	159,100
							-
		0%					-
		0%					-
Other (specify):		00/		201			
		0%		0%		0%	-
0		0%		0%		0%	-
Total Operating Expenses	159,100	100%	-	0%	-	0%	159,100
Total Direct Expenses	159,100	100%	-	0%	-	0%	159,100
Indirect Expenses 9.99%	15,900	100%					15,900
TOTAL EXPENSES	175,000	100%	-	0%	- 1	0%	175,000
Unit of Service Type	Subcontr	actor	0		0		
Number of UOS per Service Mode	12						42
Cost Per UOS by Service Mode	\$14,583.34		\$0.00		\$0.00	)	N/A
umber of UDC/NOC per Service Mode	1						4
					•		Rev: 02/18

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### **BUDGET JUSTIFICATION**

Contractor Name	San Francisco Public Health Foundation	Appendix:	B-9
Program Name:	Community Health Engagement - D5 Community Resource	Appendix Term:	07/01/2021-06/30/2022
		Funding Source:	Work Order
2) OPERATING EXPENSES:			
Consultants/Subcontractors:			
Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
Collective Impact	One-stop resource and information center for COVID-19	12 months X \$ 13,258	
·	relief and support in District 5. Services will include		
	assessments and assistance with Covid Vaccines, groceries		
	and supplies, small business support, eviction, and legal defense and financial assistance.		159,100
			,
	Total Consul	tants/Subcontractors:	\$ 159,100
Other:			
Expense Item	Brief Description	Rate/Formula	Cost
		Tatal Oth and	
		Total Other:	<u> </u>
	TOTAL C	PERATING EXPENSES:	\$ 159,100
		TOTAL DIRECT COSTS:	\$ 159,100
4) INDIRECT COSTS			_
Please list here the personnel a	nd ledger expenses that are included in your shared costs?		
			Amount
Finance Manager, Accounting A	ssistant, rent, audit, supplies.		\$ 15,900
		Indirect Rate:	9.99%
	TC	OTAL INDIRECT COSTS:	\$ 15,900
		TOTAL EXPENSES:	\$ 175,000

### APPENDIX D FEMA CONTRACT REQUIREMENTS

- 1. Contract Requirements. This contract may be eligible for FEMA funding. FEMA requires inclusion of the following contract provisions for procurement under exigent or emergency circumstances. The Parties must comply with these provisions as a minimum. In the event of a conflict with other provisions in this contract that address the same or a similar requirement, the provisions that are stricter and impose the greater duties upon Contractor shall apply.
- 2. Remedies for Breach. In addition to all other remedies included in this contract, Contractor shall, at a minimum, be liable to the City for all foreseeable damages it incurs as a result of Contractor violation or breach of the terms of this contract. This includes without limitation any costs incurred to remediate defects in Contractor's services and/or the additional expenses to complete Contractor's services beyond the amounts agreed to in this contract, after Contractor has had a reasonable opportunity to remediate and/or complete its services as otherwise set for in this contract. All remedies provided for in this contract 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.
- 3. Termination for Convenience. City shall have the option, in its sole discretion, to terminate this Contract, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination. The notice shall specify the date on which termination shall become effective. In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs reasonably necessary to effectuate demobilization from the work.
- 4. Termination for Cause. 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 contract for cause or to seek specific performance of all or any part of this contract. In addition, 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. City shall have the right to offset from any amounts due to Contractor under this contract or any other contract between City and Contractor all damages, losses, costs or expenses incurred by City as a result of such event of default and any liquidated damages due from Contractor pursuant to the terms of this contract or any other contract.
- 5. Work Hours and Safety Standards. If this contract is for a price in excess of \$100,000, and involves the employment of mechanics or laborers, Contractor agrees as follows:
- A. Overtime requirements. No contractor or subcontractor contracting for any part of the contract work which may require or involve the employment of laborers or mechanics shall require or permit any such laborer or mechanic in any workweek in which he or she is employed on such work to work in excess of forty hours in such workweek unless such laborer or mechanic

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receives compensation at a rate not less than one and one-half times the basic rate of pay for all hours worked in excess of forty hours in such workweek.

- B. Violation; liability for unpaid wages; liquidated damages. In the event of any violation of the clause set forth in paragraph (A) of this section the Contractor and any subcontractor responsible therefor shall be liable for the unpaid wages. In addition, Contractor and subcontractor(s) shall be liable to the United States for liquidated damages. Such liquidated damages shall be computed with respect to each individual laborer or mechanic, including watchmen and guards, employed in violation of the clause set forth in paragraph (A) of this section, in the sum of \$26 for each calendar day on which such individual was required or permitted to work in excess of the standard workweek of forty hours without payment of the overtime wages required by the clause set forth in paragraph (A) of this section.
- C. Withholding for unpaid wages and liquidated damages. The City shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld, from any moneys payable on account of work performed by the Contractor or subcontractor under any such contract or any other Federal contract with the same prime contractor, or any other federally-assisted contract subject to the Contract Work Hours and Safety Standards Act, which is held by the same prime contractor, such sums as may be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for unpaid wages and liquidated damages as provided in the clause set forth in paragraph (B) of this section.
- D. Subcontracts. The Contractor or subcontractor shall insert in any subcontracts the clauses set forth in paragraphs (A) through (D) of this section and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The Contractor shall be responsible for compliance by any subcontractor or lower tier subcontractor with the clauses set forth in paragraphs (A) through (D) of this section.
- E. This Section 5 does not apply to the purchase of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence.
- **6. Rights to Inventions.** If FEMA's funding for this contract meets the definition of "funding agreement," and if this contract constitutes a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment, or performance of experimental, developmental, or research work, the City agrees to comply with the requirements of 37 C.F.R. Part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements, and any implementing regulations issued by FEMA.
- 7. Clean Air Act. If this contract is for a price in excess of \$150,000, Contractor agrees as follows:
- A. The Contractor agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. § 7401 et seq.

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- B. The Contractor agrees to report each violation to the City and understands and agrees that the City will, in turn, report each violation as required to assure notification to the Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- C. The Contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.
- **8. Federal Water Pollution Act**. If this contract is for a price in excess of \$150,000, Contractor agrees as follows:
- A. The Contractor agrees to comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. 1251 et seq.
- B. The Contractor agrees to report each violation to the City and understands and agrees that the City will, in turn, report each violation as required to assure notification to the Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- C. The Contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.
- **9. Debarment and Suspension**. If this contract is for a price in excess of \$25,000, Contractor agrees as follows:
- A. This contract is a covered transaction for purposes of 2 C.F.R. pt. 180 and 2 C.F.R. pt. 3000. As such, the Contractor is required to verify that none of the Contractor's principals (defined at 2 C.F.R. § 180.995) or its affiliates (defined at 2 C.F.R. § 180.905) are excluded (defined at 2 C.F.R. § 180.940) or disqualified (defined at 2 C.F.R. § 180.935).
- B. The Contractor must comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, and must include a requirement to comply with these regulations in any lower tier covered transaction it enters into.
- C. This certification is a material representation of fact relied upon by the City. If it is later determined that the Contractor did not comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, in addition to remedies available to the City, the Federal Government may pursue available remedies, including but not limited to suspension and/or debarment.
- D. The Contractor agrees to comply with the requirements of 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C while this offer is valid and throughout the period of any contract that may arise from this offer. The Contractor further agrees to include a provision requiring such compliance in its lower tier covered transactions.

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### 10. Procurement of Recovered Materials

- A. In the performance of this contract, the Contractor shall make maximum use of products containing recovered materials that are EPA-designated items unless the product cannot be acquired:
  - i. Competitively within a timeframe providing for compliance with the contract performance schedule;
  - ii. Meeting contract performance requirements; or
  - iii. At a reasonable price.
- B. Information about this requirement, along with the list of EPA-designated items, is available at EPA's Comprehensive Procurement Guidelines web site, https://www.epa.gov/smm/comprehensive-procurement-guideline-cpg-program.
- C. The Contractor also agrees to comply with all other applicable requirements of Section 6002 of the Solid Waste Disposal Act."
- 11. Time and Material Contracts. To the extent this contract includes work that is paid on a time and material basis, such work must have a guaranteed maximum price (GMP). The GMP is set forth in the body of this contract. The GMP constitutes a ceiling price that Contractor exceeds at its own risk.
- 12. MBE/WBE Outreach. Contractor must, at a minimum, take the following affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used as Subcontractors on this Project:
- A. Place qualified small and minority businesses and women's business enterprises on Contractor's solicitation list for this Project;
- B. Assure that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources for this Project;
- C. Divide the subcontracts, when feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
- D. Establish delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises; and
- E. Use the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.
- 13. Access to Records. The following access to records requirements apply to this contract:
- A. The Contractor agrees to provide City, the FEMA Administrator, the Comptroller General of the United States, or any of their authorized representatives access to any books,

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documents, papers, and records of the Contractor which are directly pertinent to this contract for the purposes of making audits, examinations, excerpts, and transcriptions.

- B. The Contractor agrees to permit any of the foregoing parties to reproduce by any means whatsoever or to copy excerpts and transcriptions as reasonably needed.
- C. The Contractor agrees to provide the FEMA Administrator or his authorized representatives access to construction or other work sites pertaining to the work being completed under the contract.
- D. In compliance with the Disaster Recovery Act of 2018, the City and the Contractor acknowledge and agree that no language in this contract is intended to prohibit audits or internal reviews by the FEMA Administrator or the Comptroller General of the United States.
- 14. Department of Homeland Security Seal, Logo, and Flags. The Contractor shall not use the DHS seal(s), logos, crests, or reproductions of flags or likenesses of DHS agency officials without specific FEMA pre-approval.
- 15. Compliance with Federal Law, Regulations, and Executive Orders. This is an acknowledgement that FEMA financial assistance will be used to fund all or a portion of the contract. The Contractor will comply with all applicable Federal law, regulations, executive orders, FEMA policies, procedures, and directives.
- 16. No Obligation by Federal Government. The Federal Government is not a party to this contract and is not subject to any obligations or liabilities to the non-Federal entity, Contractor, or any other party pertaining to any matter resulting from the contract.
- 17. Program Fraud and False or Fraudulent Statements or Related Acts. The Contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to the Contractor's actions pertaining to this contract.

### 18. Byrd Anti-Lobbying Certification.

- A. Contractors who apply or bid for an award of \$100,000 or more shall file the required certification pursuant to the Byrd Anti-Lobbying Amendment, 31 U.S.C. §1352, as amended. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, officer or employee of Congress, or an employee of a Member of Congress in connection with obtaining any Federal contract, grant, or any other award covered by 31 U.S.C. § 1352. Each tier shall also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the recipient who in turn will forward the certification(s) to the awarding agency.
- B. If this contract is for a price of \$100,000 or more, Contractor, and its lower tiers, must sign and submit to the City the following certification:

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### APPENDIX A, 44 C.F.R. PART 18 – CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person 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 the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that 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 cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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.

The Contractor, San Francisco Public Health Foundation certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. Chap. 38, Administrative Remedies for False Claims and Statements, apply to this certification and disclosure, if any. DocuSigned by:

Penny Eardley Spanature of Contractor's Authorized Official

Penny Eardley, Executive Director Name and Title of Contractor's Authorized Official 10/14/2021 | 1:10:12 MDT

Date

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### 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:



### San Francisco Department of Public Health Business Associate Agreement

### 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 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



### San Francisco Department of Public Health Business Associate Agreement

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.
- **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



### San Francisco Department of Public Health Business Associate Agreement

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 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



### San Francisco Department of Public Health Business Associate Agreement

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 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



### San Francisco Department of Public Health Business Associate Agreement

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 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



### San Francisco Department of Public Health Business Associate Agreement

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.

- **I. 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 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



### San Francisco Department of Public Health Business Associate Agreement

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 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.
- **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



### San Francisco Department of Public Health Business Associate Agreement

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 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

Office of Compliance and Privacy Affairs San Francisco Department of Public Health 101 Grove Street, Room 330, San Francisco, CA 94102

Email: <a href="mailto:compliance.privacy@sfdph.org">compliance.privacy@sfdph.org</a>
Hotline (Toll-Free): 1-855-729-6040

Contractor Name:	Contractor	
	City Vendor ID	

## PRIVACY ATTESTATION

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 **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 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.			
۵	DOES YOUR ORGANIZATION		Yes	*°
⋖	A Have formal Privacy Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?			
В	B Have a Privacy Officer or other individual designated as the person in charge of investigating privacy breaches or related incidents?	ed incidents?		
	If Name &   Phone #       Email:			
	yes: Title:			
S	C Require health information Privacy Training upon hire and annually thereafter for all employees who have access to health information? [Retain	ealth 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.]	CPA at 1-855-729-6040.]		
Ο	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	owledging that they have received		
	health information privacy training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]			
Е	E   Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's	ain , transmit, or access SFDPH's		
	health information?			
F	F Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisorial authorization to do so	rvisorial authorization to do so		
	AND that health information is only transferred or created on encrypted devices approved by SFDPH Information Security staff?	curity staff?		

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

\*9

Yes

_	If A	If Applicable: DOES YOUR ORGANIZATION
_	G	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?
_	I	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.)
_		Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?
		Document each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations?

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.

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?

 $\checkmark$ 

	Date
	Signature
Name:	(print)
ATTESTED by Privacy Officer	or designated person

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

•		Date
e reviewed and approved by OCPA below		
wers must be rev		Signature
on. All "No" or "N/A" ansv		
sfdph.org	Name	(print)
compliance.privacy@sfdph.org for a consultati	EXCEPTION(S) APPROVED	by OCPA

Contractor Name:	Cor	tractor
	City	Vendor ID

## DATA SECURITY ATTESTATION

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 **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 to do so by SFDPH.

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.

DC	DOES YOUR ORGANIZATION	Yes	No*
Α	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]		
В	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:		
С	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)?		
Е	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?		
	If Name & Email:		
	yes: Title:		
ш	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.] [SFDPH data security training materials are available for use; contact OCPA at 1-855-729-6040.]		
9	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.]		
I	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's		
	health information?		
_	Have (or will have if/when applicable) a diagram of how SFDPH 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.

	Date
	Signature
Name:	(print)
ATTESTED by Data Security	Officer or designated person

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.

	Date
	Signature
Name	_
EXCEPTION(S) APPROVED by	OCPA

APPENDIX F-1c 07/01/2022 - 06/30/2023 PAGE A

		Contr	act ID#				ln <sup>-</sup>	voice Numb	ıber
Contractor: San Francisco Public Health	າ Found <i>⋷</i>		016941	]		'		A-1JUL22	
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Cor	ntract Purchase	Order No:			
Telephone: 415-504-6738				1	Fundi	ng Source:		GF	
Fax:		CH	IEP	Dr	epartment ID-Au				
Program Name: Community Health Engagem	nent			]	Project ID-A	٠,			
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DELIVERABLES		RACTED NOC		PERIOD NOC	TO DATE UOS NOC	TOT	TAL NOC		RABLES NOC
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Community Home Injury Prevention - Program Ad	12	1		†'		<b></b> '		12	1
Violence Prevention - Program Administration	12	1		T		<b>—</b>		12	1
Vision Zero - Program Administration	96	7		<u> </u>		<b>***</b>		96	7
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EXPENDITURES	BUD	OGET		ENSES PERIOD	EXPENSES TO DATE		OF DGET		AINING ANCE
Total Salaries (See Page B)						7			
Fringe Benefits									
Total Personnel Expenses									
Operating Expenses:									
Occupancy-(e.g., Rental of Property, Utilities,									
Building Maintenance Supplies and Repairs)			<u> </u>			#		<u> </u>	
Materials and Supplies-(e.g., Office,					<del></del>	1			
Postage, Printing and Repro., Program Supplies)			<u> </u>			#_		<u> </u>	
General Operating-(e.g., Insurance, Staff	\$6,0	013	1		4	1		\$6,01	13.00
Training, Equipment Rental/Maintenance)			<b>_</b>		-	#		ļ	
Staff Travel - (e.g., Local & Out of Town)			-			#		<del> </del>	
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Stipends, Facilitators)		<del></del>	<del> </del>	<del></del>	d <del></del>	+	<del></del>	<del> </del>	
					/	#			
Total Operating Expenses	\$559,	441						\$559,4	41.00
Capital Expenditures									
TOTAL DIRECT EXPENSES	\$559,	,						\$559,4	
Indirect Expenses	\$55,9	,						\$55,94	
TOTAL EXPENSES	\$615,	,383						\$615,3	383.00
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Other Adjustments (Enter as negative, if appropring REIMBURSEMENT	iate)								
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I certify that the information provided above is, to the best	,	0 .							
accordance with the budget approved for the contract cited		•	. under uie	provision	of that contract.	ull justification	A and Dack	кuр	
records for those claims are maintained in our office at the Signature: _		ndicated.				_	Date:		
Title:						_			
Send to: SFDPH Fiscal / Invoice Processin	-								
1380 Howard Street, 4th Floor, Su	uite 403	_							
San Francisco, CA 94103		By:		2 2 4	Signatory	_	Date:		

APPENDIX F-1c 07/01/2022 - 06/30/2023 PAGE B

						Invo	ice Number
			<b>Health Foundat</b>	ion		A-	1JUL22
Address:	1 Hallidie Plaza						
	San Francisco	, CA 94	1102	Contract P	Purchase Order No:		
Telephone:	415-504-6738					GF	
Fax:					Fund Source:		<u> </u>
				Departme	ent ID-Authority ID:		
Program Name:	Community He	alth En	gagement				
				Pro	oject ID-Activity ID:		
ACE Control #:					Invoice Period:	07/4/0	2 07/24/22
					ilivoice Period.	07/1/2	2 - 07/31/22
					FINAL Invoice		(check if Yes)
					·		
DETAIL PERSON	NEL EXPENDI	TURES	3				
PERSONNEL		FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
PERSONNEL		FIE	SALART	THIS PERIOD	TODATE	BUDGET	DALANCE
TOTAL SALARIES							
I certify that the information	•			•			
accordance with the budge records for those claims as				led under the provision o	t that contract. Full just	ification and b	ackup
records for those claims at	e maintained in our	onice at ti	ie address indicated.				
Contifical Div				Detai			
Certilled By:				Date:			
Title:							

APPENDIX F-1d 07/01/2023 - 06/30/2024 PAGE A

		Contra	ct ID#					Inv	voice Numl	ber
Contractor: San Francisco Public Health	ո Founda			]			[		A-1JUL2	3
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Coi	ntract Pur	chase C	order No:			
Telephone: 415-504-6738				1		Funding	Source:		GF	
Fax:		CH	EP	De	epartmen	t ID-Auti	ority ID:			
Program Name: Community Health Engagen	nent				•					
ACE Control #:					Proje		tivity ID:			
						Invoic	e Period:	07/1	/23 - 07/3	31/23
						FINA	L Invoice		(check if	Yes)
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DELIVERABLES	CONTR	RACTED NOC	THIS F UOS	PERIOD	TO E	NOC	TO1 UOS	AL NOC	DELIVEI UOS	NOC
Community Health Engagement - Program Admin	12	1 1	003	NOC	II	NOC	I I	NOC	12	1
Community Health Engagement - Program Admin Community Home Injury Prevention - Program Ad	12	1 1			╟──				12	1
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Violence Prevention - Program Administration	12	1 1	<u> </u>	-	<b> </b>				12	1
Vision Zero - Program Administration	96	7			⊩		<b></b>		96	7
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		NOC	n	NOC		NOC		NOC		NOC
Number of Clients for Appendix		10								10
EXPENDITURES	BUE	GET		NSES PERIOD	EXPE TO D		% (		REMA BALA	
Total Salaries (See Page B)					Ĭ					
Fringe Benefits					1					
Total Personnel Expenses										
Operating Expenses:					1					
Occupancy-(e.g., Rental of Property, Utilities,					1					
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$6,0	013			1				\$6,01	3.00
Training, Equipment Rental/Maintenance)	Ψ0,				1				Ψο,ο.	0.00
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Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$553	,428							\$553,4	28.00
Other - (Meals, Audit, Transportation Reimb,					1					
Stipends, Facilitators)										
Total Operating Expenses	\$559	,441							\$559,4	41.00
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$559	,441							\$559,4	41.00
Indirect Expenses	\$55,	942							\$55,94	12.00
TOTAL EXPENSES	\$615	,383							\$615,3	83.00
LESS: Initial Payment Recovery					NOTES					
Other Adjustments (Enter as negative, if appropr REIMBURSEMENT	iate)				1					
I certify that the information provided above is, to the best accordance with the budget approved for the contract cite records for those claims are maintained in our office at the Signature:	ed for service	es provided	•						кир	
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Send to: SFDPH Fiscal / Invoice Processir 1380 Howard Street, 4th Floor, S	_									
San Francisco, CA 94103		By:					_	Date:		
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APPENDIX F-1d 07/01/2023 - 06/30/2024 PAGE B

Contractor: San Fran	ncisco Public	Health Foundatio	n	ſ		ice Number
Address: 1 Hallidi	e Plaza, Suite	808		ا ٥ ا		
San Fran	ncisco, CA 94	102	Contract P	urchase Order No:		
Telephone: 415-504- Fax:	6738			Fund Source:		GF
Program Name: Commu	nity Health Eng	nagement	Departme	ent ID-Authority ID:		
	inty riealth Lin	gagement	Pro	oject ID-Activity ID:		
ACE Control #:				Invoice Period:	07/1/2	3 - 07/31/23
				FINAL Invoice		(check if Yes)
				•		
DETAIL PERSONNEL EXP	PENDITURES		·			
PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
TOTAL SALARIES  I certify that the information provided al	bove is, to the best	of my knowledge, com	pplete and accurate: th	e amount requested for	reimburseme	nt is in
accordance with the budget approved	for the contract cite	ed for services provided				
records for those claims are maintained	d in our office at the	e address indicated.				
Certified By:			Date:			

APPENDIX F-2c 07/01/2022 - 06/30/2023 PAGE A

		Contra	act ID#				In	voice Numl	ber
Contractor: San Francisco Public Health	n Founda		016941	]		ļ		A-2JUL22	
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Cor	ntract Purchase	Order No:			
Telephone: 415-504-6738	!			1	Fundir	ng Source:		GF	
Fax:		Сп	IEP	D€	epartment ID-Au	thority ID:			
Program Name: Community Health Engagen	nent				Project ID-A	Activity ID:			
ACE Control #:					Invoi	ice Period:	07/1	1/22 - 07/3	31/22
					FIN	AL Invoice		(check if	Yes)
	TOT	RACTED	THIS P	VERED PERIOD	DELIVERED TO DATE	TOT	OF OTAL	DELIVER	AINING ERABLES
DELIVERABLES  Dragram Administration	UOS	NOC	UOS	NOC	UOS NOC	UOS	NOC	UOS	NOC
Program Administration	536	N/A	<b>↓</b>	<del>                                     </del>	<del> </del>		<del></del>	536	N/A
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<u></u>		<u> </u>	<del></del>	+-	/ <del></del>	#		<u> </u>	<del></del>
		NOC		NOC	NOC		NOC		NOC
Number of Clients for Appendix		N/A		لللك			الستا	<u> </u>	N/A
EXPENDITURES	BUDO	GET		ENSES PERIOD	EXPENSES TO DATE		OF DGET		AINING ANCE
Total Salaries (See Page B)	\$18,2							\$18,22	
Fringe Benefits	\$4,5							\$4,50	
Total Personnel Expenses	\$22,7	727						\$22,72	27.00
Operating Expenses:						<b>⊐</b> ⊏			
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	<u> </u>					#			
Materials and Supplies-(e.g., Office,			<del> </del>	$\overline{}$	d <del></del>	1		<del> </del>	
Postage, Printing and Repro., Program Supplies)			<u> </u>		<u> </u>	1_		<u> </u>	
General Operating-(e.g., Insurance, Staff									
Training, Equipment Rental/Maintenance)									
Staff Travel - (e.g., Local & Out of Town)						1			
Consultant/Subcontractor  Other - (Meals Audit Transportation Reimh						+		lacksquare	
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					1	-		<b>├</b> ──	
Superius, i admitators)			<del> </del>	$\overline{}$	<del> </del>	1	——	<del> </del>	
Total Operating Expenses			<del> </del>		d <u></u>	╢		<del> </del>	
Capital Expenditures									
TOTAL DIRECT EXPENSES	\$22,7							\$22,72	
Indirect Expenses	\$2,2							\$2,27	
TOTAL EXPENSES	\$25,0	<u> </u>	<u> </u>			<u> </u>		\$25,00	<u>00.00</u>
LESS: Initial Payment Recovery			↓		NOTES:				
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)				<u> </u>				
I certify that the information provided above is, to the best	st of my knov	wledge, con	nplete and	accurate; f	the amount reques	ted for reimb	oursement f	is in	
accordance with the budget approved for the contract cite	•	•							
records for those claims are maintained in our office at the Signature:	ne address in	•		<u> </u>			Date:	·	
Title: _						_			
Send to: SFDPH Fiscal / Invoice Processin									
Send to: SFDPH Fiscal / Invoice Processii 1380 Howard Street, 4th Floor, S San Francisco, CA 94103	_	By.	-				Date:	-	
Attn: Contract Payments		By:		.41	Signatory)	_	Date:		

APPENDIX F-2c 07/01/2022 - 06/30/2023 PAGE B

SCO, CA 94102  Contract Purchase Order No:    GF							PAGE B
Plaza, Suite 808 isco, CA 94102 Contract Purchase Order No:    GF						Invo	oice Number
SCO, CA 94102  Contract Purchase Order No:    GF	Contractor: San Francisc	o Public ł	Health Foundation	on		Α	-2JUL22
Project ID-Activity ID:    Project ID-Activity ID:	Address: 1 Hallidie Pla						
Project ID-Activity ID:    Invoice Period:   07/1/22 - 07/31/22	San Francisc	o, CA 94	102	Contract F	urchase Order No:		
Project ID-Authority ID:    Invoice Period:   07/1/22 - 07/31/22	Telephone: 415-504-6738				Fund Source:		GF
NDITURES  BUDGETED EXPENSES EXPENSES BUDGET BALANCE  OT 0.25 \$18,227   \$18,227.00	Fax:						
Project ID-Activity ID:    Invoice Period:   07/1/22 - 07/31/22				Departme	ent ID-Authority ID:		
Invoice Period: 07/1/22 - 07/31/22  FINAL Invoice (check if Yes)  NDITURES  BUDGETED EXPENSES TO DATE BUDGET BALANCE  OT 0.25 \$18,227   \$18,227.00  S18,227.00	Program Name: Community H	lealth Enç	gagement				
NDITURES    BUDGETED   EXPENSES   EXPENSES   SOF   BUDGET   BALANCE     Dr   0.25   \$18,227				Pro	oject ID-Activity ID:		
NDITURES    BUDGETED   EXPENSES   EXPENSES   SOF   BUDGET   BALANCE     Dr   0.25   \$18,227	ACE Control #:				Invoice Period:	07/1/3	22 - 07/31/22
NDITURES    SUDGETED   EXPENSES   EXPENSES   BUDGET   BALANCE						017172	2 01/01/22
BUDGETED SALARY THIS PERIOD TO DATE BUDGET BALANCE OF 0.25 \$18,227 \$18,227.00					FINAL Invoice		(check if Yes)
BUDGETED SALARY THIS PERIOD TO DATE BUDGET BALANCE OF 0.25 \$18,227 \$18,227.00							
BUDGETED SALARY THIS PERIOD TO DATE BUDGET BALANCE OF 0.25 \$18,227 \$18,227.00							
FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE  OF 0.25 \$18,227 \$18,227 \$18,227.00	DETAIL PERSONNEL EXPEND	ITURES					1
or 0.25 \$18,227 \$18,227.00  \$18,227.00	PERSONNEL	FTE					
0.25 \$18,227	End Hep C SF Project Coordinator						
ve is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in the contract cited for services provided under the provision of that contract. Full justification and backup							
ve is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in the contract cited for services provided under the provision of that contract. Full justification and backup		+-+					
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the contract cited for services provided under the provision of that contract. Full justification and backup							
		s, to the best contract cite	of my knowledge, cor d for services provide				ent is in
	Title:						

APPENDIX F-2d 07/01/2023 - 06/30/2024 PAGE A

Contractor:	: San Francisco Public Healt	th Founda		act ID # 016941	1				A-2JUL2	
Address:	: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102		·		Cor	ntract Purchase	- Order No:			
	<b>Juli</b> 1				_					
Telephone: Fax:	: 415-504-6738 :	l	СН	IEP			ng Source:		GF	
Program Name:	: Community Health Engage	ment			De	epartment ID-A				
ACE Control #:	:	j				•	Activity ID:			
							oice Period:		1/23 - 07/3	
		TO:		טבו ו/	.coco		IAL Invoice		check if	f Yes) AINING
DELIVERABLES		TOT CONTRA UOS			VERED PERIOD NOC	DELIVERED TO DATE UOS NOC	TO	OF OTAL NOC		ERABLES NOC
Program Adminis	stration	536	N/A						536	N/A
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Number of Clients	for Appendix		N/A							N/A
EXPENDITURES	_	BUDG	GET		ENSES PERIOD	EXPENSES TO DATE		OF DGET		AINING ANCE
Total Salaries (S		\$18,2								227.00
Fringe Benefits  Total Person	nnel Expenses	\$4,5 \$22,7		<b>↓</b>		<b>├</b> ──				00.00 727.00
Operating Expe		Ψεε,	121	<del> </del>	—	<del> </del>	+		φεε,	21.00
Occupancy-	-(e.g., Rental of Property, Utilities,						世			
Building Mainter	nance Supplies and Repairs)	<u></u>		<u> </u>		<u> </u>	]		₽	
Materials an	nd Supplies-(e.g., Office,	<del> </del>		<b>├</b> ──	——	<b> </b>	-			$\overline{}$
	ng and Repro., Program Supplies)	<del> </del>		<u> </u>		<del></del>	<b>+</b>		<b></b>	
	erating-(e.g., Insurance, Staff oment Rental/Maintenance)	<del> </del>		<b>├</b> ──		<b> </b>			4	
Italining, Equip	Helit Relitat/Maintenance/	<del> </del>		<del></del>		<del></del>	<del> </del>		<del></del>	
Staff Travel	- (e.g., Local & Out of Town)									
Consultant/	/Subcontractor	<del> </del>		<b>├</b> ──		<b> </b>			4	
OUIIOUI.u	Subcontiactor	<del> </del>		<del></del>		<u> </u>	<del> </del>		<del></del>	
· · · · · · · · · · · · · · · · · · ·	ls, Audit, Transportation Reimb,									
Stipends, Facilita	ators)	<del> </del>		<b>↓</b>		<b> </b>				$\longrightarrow$
Total Operat	ting Expenses	<del> </del>		├		l	<del></del>		<b></b>	
Capital Expe	enditures									
TOTAL DIRECT		\$22,7 \$2.2		<del></del>		<b></b>	┰—			727.00 73.00
Indirect Expe TOTAL EXPEN		\$2,2 \$25,0		<del> </del>	——	<b> </b>	+			73.00 000.00
	l Payment Recovery		<del></del>	<del></del>		NOTES:			<u>                                     </u>	00.00
	tments (Enter as negative, if approp	priate)				1				
REIMBURSEM	<u>/IENT</u>			Ь		<u> </u>				
I certify that the info	formation provided above is, to the bes	st of my knov	wledge, com	nplete and	accurate; f	the amount reque	sted for reimh	oursement	is in	
accordance with the	ne budget approved for the contract cit	ted for service	es provided	•						
records for those cla	claims are maintained in our office at th Signature:						_	Date:	:	
	Title:						_		_	_
Send to:	OFFICIAL LINVOIDE Process	·								
	SFDPH Fiscal / Invoice Processi 1380 Howard Street, 4th Floor, S	-								
	San Francisco, CA 94103		Ву:	·				Date:	:	
	Attn: Contract Payments		-		ithorized	Signatory)	_			

APPENDIX F-2d 07/01/2023 - 06/30/2024 PAGE B

						PAGE E
					Invo	ice Number
Contractor: San Fran			ion		A-	-2JUL23
Address: 1 Hallidie						
San Fran	ncisco, CA 94	102	Contract I	Purchase Order No:		
Telephone: 415-504-	6720			Fund Source:		GF
Fax:	0/30			runa Source.		Gr
i dx.			Departm	ent ID-Authority ID:		
Program Name: Commur	nity Health Eng	gagement	opu			
-			Pr	oject ID-Activity ID:		
ACE Control #:						
				Invoice Period:	07/1/2	23 - 07/31/23
						le i i exe
				FINAL Invoice	,	(check if Yes)
DETAIL DEDOONNEL EVE	ENDITUDEO					
DETAIL PERSONNEL EXP	'ENDITURES	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
End Hep C SF Project Coordinate	ator 0.25	\$18,227				\$18,227.00
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TOTAL SALARIES	0.25	\$18,227				\$18,227.00
I certify that the information provided al	oove is, to the best	of my knowledge, co	omplete and accurate; t	ne amount requested for	reimburseme	
accordance with the budget approved f			ed under the provision of	of that contract. Full just	ification and b	packup
records for those claims are maintained	in our office at the	e address indicated.				
Certified By:			Date			
continue by.			Date			•
T:41-						

APPENDIX F-3b 01/01/2022 - 12/31/2022 PAGE A

Contractor	San Francisco Public Healt	h Founda		act ID #	1				A-2JAN2	
Address:	1 Hallidie Plaza, Suite 808	II i Ouiiuu	100000	7100-11	l Cor	atraat Durchae	a Order No		4-20AINZ	
	San Francisco, CA 94102				COL	ntract Purchase	) Oraer 140.			
Telephone: Fax:	415-504-6738	1	СН	IEP			ing Source:		CDC	
Program Name:	Community Health Engager	ment	<u></u>	!	De	epartment ID-A	-			
ACE Control #:		İ				•	-Activity ID:			
						Invo	oice Period:	01/1	1/22 - 01/3	31/22
							NAL Invoice		(check if	,
DELIVERABLES		TOT CONTR/ UOS			VERED PERIOD NOC	DELIVERED TO DATE UOS NO	TO	OF OTAL NOC		AINING ERABLES NOC
Program Adminis	stration	567	N/A						567	N/A
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	<u> </u>		NOC		NOC	NO		NOC		NOC
Number of Clients	for Appendix		NOC N/A		NOC	140.	<del></del>	NOC	П	NOC N/A
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EXPENDITURES	<b>;</b>	BUDO	CET		ENSES PERIOD	EXPENSES TO DATE		OF DGET		AINING ANCE
Total Salaries (	See Page B)	\$18,2		Triio .	EKIOD	10 DAIL		JGE I	-	227.00
Fringe Benefits		\$4,5	500			L	1		\$4,50	00.00
	nnel Expenses	\$22,7	727						\$22,7	727.00
Operating Expe		<u> </u>		<del></del>		<b></b>	그[		<b>_</b>	
	-(e.g., Rental of Property, Utilities, nance Supplies and Repairs)	<del> </del>		<b>├</b> ──	——	<b> </b>	-		╢	
Dunania	latice Supplies and	i <del></del>		<del></del>		<del> </del>	<u> </u>		<del> </del>	
	nd Supplies-(e.g., Office,	i								
Postage, Printin	ng and Repro., Program Supplies)	<u> </u>		<del></del>		<u> </u>	Д		ـــــــ	
General Ope	erating-(e.g., Insurance, Staff	<b>/</b>		<b>├</b> ──		<b></b>			╂	
	ment Rental/Maintenance)	<del> </del>		<u></u>		<del> </del>	<del></del>		<del> </del>	
	,	il								
Staff Travel	- (e.g., Local & Out of Town)			<b></b>			<b></b>			
Consultant/9	Subcontractor	<b>/</b>		<del></del>		<b></b>	-		╂	
	<u></u>	i		<u> </u>		<u> </u>	<b>—</b>		<del> </del>	
· · · · · · · · · · · · · · · · · · ·	s, Audit, Transportation Reimb,									
Stipends, Facilita	ators)	<u> </u>				4	_		<b>↓</b>	
Total Operat	ting Expenses	<del> </del>		<del></del>		<del></del>	<del></del>		╂	
Capital Expe	enditures									
TOTAL DIRECT	T EXPENSES	\$22,7								727.00
Indirect Expe		\$2,2 \$25.0		4		ــــــ				73.00
TOTAL EXPEN LESS: Initial	NSES[ ∣ Payment Recovery	\$25,0	<u> </u>	₩	$\overline{}$	NOTES:			<u>ΨΖυ,υ</u>	00.00
	tments (Enter as negative, if approp	oriate)		<b></b>		1.0.2				
REIMBURSEM						<u></u>				
accordance with the	ormation provided above is, to the best e budget approved for the contract cite laims are maintained in our office at th Signature:	ted for service he address in	ces provided ndicated.	•				on and back		
	Title:						_			
Send to:	SFDPH Fiscal / Invoice Processi	ing								
	1380 Howard Street, 4th Floor, S	_								
	San Francisco, CA 94103 Attn: Contract Payments		By:		th arizod	Signatory)	_	Date:		

APPENDIX F-3b 01/01/2022 - 12/31/2022 PAGE B

Contractor: San Francisco Public Health Foundation Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102		Invo	
Address: 1 Hallidie Plaza, Suite 808			ice Number
		A-	2JAN22
San Francisco, CA 94102	O- utus et Bronchese a Ouden Ne		
	Contract Purchase Order No		
Telephone: 415-504-6738	Fund Source	:	CDC
Fax:			
Brown Name Community Health Francisco	Department ID-Authority ID	:	
Program Name: Community Health Engagement	Project ID-Activity ID:		
ACE Control #:			
·	Invoice Period	01/1/2	2 - 01/31/22
	FINAL Invoice		(check if Yes)
	FINAL IIIVOICE	;	(check if Tes)
DETAIL PERSONNEL EXPENDITURES			
	ENSES EXPENSES PERIOD TO DATE	% OF BUDGET	REMAINING BALANCE
End Hep C SF Project Coordinator 0.25 \$18,227	ENIOD TO BATE	T DODGET	\$18,227.00
TOTAL OALABIEO			
TOTAL SALARIES 0.25 \$18,227  I certify that the information provided above is, to the best of my knowledge, complete and	d accurate: the amount requested for	or reimburseme	\$18,227.00

APPENDIX F-3c 01/01/2023 - 12/31/2023 PAGE A

	San Francisco Public Healt	th Founda		act ID # 016941	]		ı		A-2JAN2	
	1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Cor	ntract Purchase (	Order No:			
Talanhono	**= =0.4.0700				٦	Sundin	g Source:			
Telephone: 4 Fax:	415-504-6738	!	СН	IEP	De	Funding epartment ID-Aut	· .		CDC	
Program Name: (	Community Health Engager	ment			1	Project ID-Aut				
ACE Control #:		1				_	ce Period:		1/23 - 01/3	124/22
						HIVOIO	e Periou.	<u> </u>	/23 - 0 1/0	37/23
						FINA	AL Invoice	'	(check if	Yes)
DELIVERABLES		TOT CONTRA UOS			VERED PERIOD NOC	DELIVERED TO DATE UOS NOC		OF OTAL NOC		AINING ERABLES NOC
Program Administr	ration	567	N/A						567	N/A
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		<u> </u>	<u> </u>	<del></del>			<del> </del>		<u> </u>	<u> </u>
		( <u> </u>						<u>'</u>		
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			NOC		NOC	NOC		NOC		NOC
Number of Clients for	ior Appendix		N/A		اللكا					N/A
EXPENDITURES		BUDO			ENSES PERIOD	EXPENSES TO DATE		OF DGET	BALA	AINING ANCE
Total Salaries (So	ee Page B)	\$18,2							<del></del>	227.00
Fringe Benefits  Total Personr	nnel Expenses	\$4,5 \$22,7		<del></del>		<del></del>	╂		\$4,50 \$22,72	
Operating Expen	nses:						世			
	(e.g., Rental of Property, Utilities,	<u> </u>				<u> </u>	╁		1	
Building iviaimend	ance Supplies and Repairs)	<del></del>		<del>-</del>		<del></del>	<del>-</del>		<del>-</del>	
	d Supplies-(e.g., Office,	<b></b>				<b></b>				
Postage, Printing	g and Repro., Program Supplies)	<u> </u>		<b>_</b>		<u> </u>	<b>I</b>		1	
	erating-(e.g., Insurance, Staff ment Rental/Maintenance)									
Staff Travel -	- (e.g., Local & Out of Town)						1			
Consultant/S	Subcontractor									
Other - (Meals	s, Audit, Transportation Reimb,	<del> </del>	!			<b></b>			4	
Stipends, Facilitate		<del></del>		<u> </u>		<u> </u>	<del> </del>		<u> </u>	
				<b>_</b>			<b>_</b>		<del></del>	
Total Operatin Capital Expen		<del></del>		<del>-</del>		<del></del>	<del></del>		<del></del>	
TOTAL DIRECT		\$22,7					<del></del>		\$22,72	
Indirect Expen		\$2,2							\$2,27	73.00
TOTAL EXPENS	SES Payment Recovery	\$25,0	<u> </u>	₽		NOTES:			\$25,0	00.00
	ments (Enter as negative, if approp	priate)		<del></del>		NOTES.				
REIMBURSEME										
Loortify that the infor	rmation provided above is, to the bes	at of my know	wladde cor	and etelan	coourate: "	the amount request	and for reimb	reement	ic in	
,	budget approved for the contract cite	,	0 .	•						
records for those clair	aims are maintained in our office at th Signature: _		dicated.				_	Date:	·	
	Title:						_			
Send to:	SFDPH Fiscal / Invoice Processi	ing								-
1	1380 Howard Street, 4th Floor, S	•	_							
	San Francisco, CA 94103 Attn: Contract Payments		Ву:	/DDH A	thorized	Signatory)	_	Date:		

APPENDIX F-3c 01/01/2023 - 12/31/2023 PAGE B

							PAGE E
						Invo	ice Number
			Health Foundati	ion		A	-2JAN23
Address:	1 Hallidie Plaz				,		
	San Francisco	, CA 94	102	Contract I	Purchase Order No:		
Telenhone:	415-504-6738				Fund Source:		CDC
Fax:					r una cource.		ODO
				Departm	ent ID-Authority ID:		
Program Name:	Community He	ealth Eng	gagement		- '		
				Pr	oject ID-Activity ID:		
ACE Control #:					,		
					Invoice Period:	01/1/2	23 - 01/31/23
					FINAL Invoice		(check if Yes)
					FINAL IIIVOICE		(check if Tes)
DETAIL PERSONI	NEI EXPEND	ITURES					
DETAIL TEROOM	TEE EXI END	II OILLO	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL		FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
End Hep C SF Project	t Coordinator	0.25	\$18,227				\$18,227.00
TOTAL SALARIES		0.25	\$18 227				\$18 227 00
	provided above is,			omplete and accurate; the	ne amount requested for	reimburseme	
TOTAL SALARIES  I certify that the information accordance with the budge records for those claims and	t approved for the c	ontract cite	d for services provid				
Certified By:				Date:			

APPENDIX F-3d 01/01/2024 - 12/31/2024 PAGE A

		Contra	act ID #	_				ln	voice Numl	ber
Contractor: San Francisco Public Health	า Founda	100000	016941	]			1	/	A-2JAN2	4
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Cor	ntract Purch	hase C	rder No:			
Telephone: 415-504-6738	1			]	Fı	unding	g Source:		CDC	
Fax:		Сп	IEP	De	epartment II	D-Auth	nority ID:			
Program Name: Community Health Engagen	nent				Project	t ID-Ac	ctivity ID:			
ACE Control #:					ı	Invoice	e Period:[	01/1	1/24 - 01/3	31/24
						FINAI	L Invoice		(check if	Yes)
	TOT	RACTED	THIS P	VERED PERIOD	DELIVER TO DAT	TE	% ( TOT	TAL	DELIVER	AINING ERABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Program Administration	567	N/A	┦——	<b></b> -'	┦——		$\longleftarrow$		567	N/A
<del> </del>		<del></del>	╂	₩	╀	$\longrightarrow$	$\longmapsto$		<b>├</b> ──′	<del></del>
<del> </del>	,	<del></del>	╂	+	╀	$\longrightarrow$	$\longmapsto$	<i></i>	₩	$\vdash$
		<u> </u>	<b></b>	<b>—</b>	<b></b>			·	<u> </u>	
	<del></del> -	2100		2100			<del>-</del>	.100	<del>-</del>	*100
Number of Clients for Appendix		NOC N/A	П	NOC	п	NOC	<del>11 7</del>	NOC	П	NOC N/A
Number of Cheffs for Appendix		IN/A	ш	——		—			ш	IN/A
EXPENDITURES	BUDO			ENSES PERIOD	EXPENS TO DAT		% ( BUD(		BALA	AINING ANCE
Total Salaries (See Page B)	\$18,2								\$18,22	
Fringe Benefits	\$4,5		↓		<u> </u>		<u> </u>		\$4,50	
Total Personnel Expenses	\$22,7	<u>727                                   </u>	₽		₽		₩—		\$22,72	27.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	í					$\longrightarrow$	<b>├</b> ──	——	<b>├</b> ──	
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,			<b> </b>		<u> </u>				<u> </u>	
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff									<u> </u>	
Training, Equipment Rental/Maintenance)			↓		ــــــ		<b>└</b>		↓	
Staff Travel - (e.g., Local & Out of Town)							<b>_</b>		<b> </b>	
Consultant/Subcontractor			<u> </u>		<del> </del>		<u> </u>		<del></del>	
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)									<u> </u>	
T-1-1 Oner-ting Eunopope							<b>├</b> ──		<b>↓</b>	
Total Operating Expenses  Capital Expenditures			₩		₩	$\longrightarrow$	<del> </del>		₩	
TOTAL DIRECT EXPENSES	\$22,7	727	$\vdash$		╫──	$\overline{}$	1	<del></del>	\$22,72	27.00
Indirect Expenses	\$2,2								\$2,27	73.00
TOTAL EXPENSES	\$25,0								\$25,00	
LESS: Initial Payment Recovery					NOTES:	_				
Other Adjustments (Enter as negative, if appropring REIMBURSEMENT	riate)				<u> </u>					
I certify that the information provided above is, to the best	of my knov	··lodge con	-nlete and	accurate:	the amount re	caueste	of for reimb	reement	io in	
accordance with the budget approved for the contract cite		•								
records for those claims are maintained in our office at the Signature:	ne address in	•	unas.	ргол	Of thes		Juoun	Date:	·	
Title:							1	-		
Send to: SFDPH Fiscal / Invoice Processir	_									
1380 Howard Street, 4th Floor, S	uite 403	_						- ·		
San Francisco, CA 94103		By:			(Signatory)		-	Date:		

APPENDIX F-3d 01/01/2024 - 12/31/2024 PAGE B

A	cice Number -2JAN24 CDC
:	
:	CDC
:	CDC
:	CDC
:	
:	
01/1/2	
	24 - 01/31/24
	1/.11-:63/)
<u> </u>	(check if Yes)
% OF	REMAINING
BUDGET	\$18,227.00
	φ10,227.00
1	
<u> </u>	\$18,227.00
	% OF BUDGET

APPENDIX F-4b 07/01/2021 - 06/30/2022 PAGE A

Contractor: San Francisco Public Health	h Founda		act ID # 016941	1				Numice Number A-4JUL2	
Address: 1 Hallidie Plaza, Suite 808	11 *** ,		7102	Lor	· Durchass	C-der No		<u> </u>	<u>'</u>
San Francisco, CA 94102				Con	ntract Purchase	Order No.			
Telephone: 415-504-6738 Fax:	!	СН	IEP			ng Source:		GF - FEM	IA
Program Name: Community Health Engagen	ment - CC	VID 19		De	epartment ID-Au	- ,			
ACE Control #:	ı				Project ID-A	- '			
-					Invoi	ice Period:	07/1	1/21 - 07/3	31/21
					FIN/	AL Invoice		(check if	
DELIVERABLES	TOT CONTRA UOS			VERED PERIOD NOC	DELIVERED TO DATE UOS NOC	TO	OF OTAL NOC		AINING ERABLES NOC
COVID 19 Community Outreach Services - Progra	120	10						120	10
<del></del>	<u>'</u>	<u> </u>	<b>_</b>	<u> </u>	<del></del>	<b>↓</b>	<u> </u>	<del></del>	<u> </u>
<del> </del>		<del></del>	<del> </del>	<del>  "</del>	<del></del>	<del> </del>	<del></del>	<del> </del>	+
						<del></del>			
		<u> </u>		'لــــــــــــــــــــــــــــــــــــ		<u></u>			
		NOC		NOC	NOC	;	NOC		NOC
Number of Clients for Appendix		10							10
EXPENDITURES	BUDO	GET		ENSES PERIOD	EXPENSES TO DATE		OF DGET		AINING ANCE
Total Salaries (See Page B)									
Fringe Benefits  Total Personnel Expenses					<del> </del>				
Operating Expenses:			<del>-</del>		<del></del>	+		<del></del>	
Occupancy-(e.g., Rental of Property, Utilities,									
Building Maintenance Supplies and Repairs)			1	/	4	┦		₽	
Materials and Supplies-(e.g., Office,			₩		<del> </del>	+		₩	
Postage, Printing and Repro., Program Supplies)	<del></del>		H		<u> </u>	<b>+</b>		<b> </b>	
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)			<u> </u>		<b></b>	#		<u> </u>	
Staff Travel - (e.g., Local & Out of Town)			<b> </b>		<b></b>	#		#	
Consultant/Subcontractor	\$8,981	1,000	#		<b></b>	#		\$8,981	,000.00
Other - (Meals, Audit, Transportation Reimb,			<del>-</del>		<del></del>	<del> </del>		₩	
Stipends, Facilitators)									
Total Operating Expenses	\$8,981	4 000			4			€8 081	,000.00
Capital Expenditures	ψυ,υυ.		<del></del>		<del></del>	+		\$0,55.,	000.00
TOTAL DIRECT EXPENSES	\$8,981								,000.000
Indirect Expenses	\$449, \$0,430		₽		<u> </u>	Т——			050.00
TOTAL EXPENSES  LESS: Initial Payment Recovery	\$9,430	<u>J,050</u>	<del> </del>		NOTES:			\$9,430,	,050.00
Other Adjustments (Enter as negative, if appropriate and appro	oriate)		<u> </u>		10120				
REIMBURSEMENT									
I certify that the information provided above is, to the best	of my knov	···lodge cor	lete and	accurate:	the amount regues	tod for reim!	bursement	in in	
accordance with the budget approved for the contract cite	•	-	•		•				
records for those claims are maintained in our office at the Signature: _	ne address in	•				_	Date:	·	
Title: _						_			
Send to: SFDPH Fiscal / Invoice Processin	inq								
1380 Howard Street, 4th Floor, S	•								
San Francisco, CA 94103 Attn: Contract Payments		Ву:	/DDU A	thorizod	Signatory)	_	Date:		
Attn: Contract Payments		(DPH Ar	∡thorized '	Signatory)					

APPENDIX F-4b 07/01/2021 - 06/30/2022 PAGE B

Address: 1 Halldide Plaza, Suite 808 San Francisco, CA 94102 Contract Purchase Order No:  Telephone: 415-504-6738 Fax:  Program Name: Community Health Engagement - COVID 19  ACE Control #:  Department ID-Authority ID:  Invoice Period:  O7/1/21 - 07/31/21  FINAL Invoice  (check if Yes)  DETAIL PERSONNEL EXPENDITURES  PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BUDGET THIS PERIOD TO DATE BUDGET B	Contractor: San Francisco Public Health Foundation							Invoice Number A-4JUL21		
Tolephone: 415-504-6738 Fax:  Program Name: Community Health Engagement - COVID 19  ACE Control #:  Invoice Period:  O77/1/21 - O7/31/21  FINAL Invoice  Ocheck if Yes)  DETAIL PERSONNEL EXPENDITURES  PERSONNEL  FTE  SALARY  THIS PERIOD  FOR REMAINING BALANCE  BUDGETED  FYE SALARY  THIS PERIOD  FOR REMAINING BALANCE  BUDGETED  FOR REMAINING BALANCE  FOR REMAINING BA										
Program Name: Community Health Engagement - COVID 19  ACE Control #:	,	Sali Fialicisco	, CA 32	102	Contract i	urchase order No.				
Program Name: Community Health Engagement - COVID 19 ACE Control #:	Telephone:	415-504-6738				Fund Source:	GF	- FEMA		
Project ID-Activity ID:    Invoice Period:	Fax:									
ACE Control #:						ent ID-Authority ID:				
ACE Control #:    Invoice Period:   07/1/21 - 07/31/21	Program Name:	Community He	alth En	gagement - CO		oioot ID Activity ID:				
DETAIL PERSONNEL EXPENDITURES  PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE	ACE Control #-				]	oject iD-Activity iD:				
DETAIL PERSONNEL EXPENDITURES PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE	AGE GOILLOI #.[				_	Invoice Period:	07/1/2	21 - 07/31/21		
PERSONNEL  FTE  BUGGETED SALARY THIS PERIOD TO DATE BUDGET BALANCE  HIS PERIOD TO DATE BUDGET BALANCE  REMAINING BALANCE  THIS PERIOD TO DATE BUDGET BALANCE  REMAINING BALANCE  TO DATE BUDGET BALANCE  REMAINING BALANCE  TO DATE BUDGET BALANCE  REMAINING BALANCE  TO DATE BUDGET BALANCE  REMAINING BALANCE  TO DATE BUDGET BALANCE  REMAINING BALANCE  TO DATE BUDGET BALANCE BALANCE  TO DATE BUDGET BALANCE BALANCE BALANCE  TO DATE BUDGET BALANCE BA						FINAL Invoice		(check if Yes)		
PERSONNEL    FTE   SALARY   THIS PERIOD   TO DATE   BUDGET   BALANCE	DETAIL PERSONN	IEL EXPENDI	TURES	3						
T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.  Certified By: Date:	PERSONNEL		FTE							
T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.  Certified By:										
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T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.  Certified By:										
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T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.  Certified By:	TOTAL SALARIES									
records for those claims are maintained in our office at the address indicated.  Certified By: Date:	I certify that the information									
Certified By: Date:	•			•		of that contract. Full just	ification and b	packup		
	records for those claims are	mamamed in our o	onice at tr	ie address indicated.						
	Certified By:				Date:					

APPENDIX F-4c 01/01/2022 - 05/30/2023 PAGE A

Contractor: San Francisco Public Health	n Founda	<b>Contra</b>				[		voice Num A-4JAN2	
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Con	tract Purchase (	Order No:			
Telephone: 415-504-6738		СП	EP		Funding	Source:		CDC	
Fax:  Program Name: Community Health Engagen	ment - CC		<u> </u>	De	partment ID-Aut	hority ID:			
	none - oo	7715 10			Project ID-A	ctivity ID:			
ACE Control #:					Invoic	e Period:	01/1	/22 - 01/3	31/22
					FINA	L Invoice		(check if	Yes)
DELIVERABLES	TOT CONTRA UOS		DELIV THIS P UOS		DELIVERED TO DATE UOS NOC	% ( TO) UOS			AINING RABLES NOC
COVID 19 Community Outreach Services - Progra	12	1		1100	100		1100	12	1
								ll	
		NOC		NOC	NOC		NOC		NOC
Number of Clients for Appendix		1							1
EXPENDITURES	BUD	GET	EXPE THIS P		EXPENSES TO DATE	% ( BUD			AINING ANCE
Total Salaries (See Page B) Fringe Benefits								-	
Total Personnel Expenses									
Operating Expenses:									
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)									
Materials and Supplies-(e.g., Office,									
Postage, Printing and Repro., Program Supplies)									
General Operating-(e.g., Insurance, Staff									
Training, Equipment Rental/Maintenance)									
Staff Travel - (e.g., Local & Out of Town)									
Consultant/Subcontractor	\$742,	,632						\$742,6	632.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)						<del> </del>		<b></b>	
,									
Total Operating Expenses  Capital Expenditures	\$742,	,632						\$742,6	32.00
TOTAL DIRECT EXPENSES	\$742,	,632						\$742,6	32.00
Indirect Expenses	\$37,							\$37,1	
TOTAL EXPENSES  LESS: Initial Payment Recovery	\$779,	,763			NOTES:			\$779,7	763.00
Other Adjustments (Enter as negative, if approp	riate)								
REIMBURSEMENT									
I certify that the information provided above is, to the best accordance with the budget approved for the contract cite		-			•				
records for those claims are maintained in our office at the address indicated.  Signature:						_	Date:		
Title: _						_			
Send to: SFDPH Fiscal / Invoice Processin	ng								
1380 Howard Street, 4th Floor, S	uite 403	Б.					D-4		
San Francisco, CA 94103 Attn: Contract Payments		Ву:		thorized	Signatory)	-	Date:		

APPENDIX F-4c 01/01/2022 - 05/30/2023 PAGE B

Contractor: San Address: 1 Ha San Telephone: 415 Fax: Program Name: Cor ACE Control #:	Invoice Number A-4JAN22  CDC  01/1/22 - 01/31/22					
DETAIL PERSONNEL	EXPENDITURES			FINAL Invoice		(check if Yes)
PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
. L.VOINILL		UNLAINT	THIST ENIOD	TODATE	DODGET	DALANOL
	++					
TOTAL SALARIES						
I certify that the information prov	ided above is, to the best	of my knowledge, c	omplete and accurate; th	e amount requested for	reimburseme	nt is in
accordance with the budget app				f that contract. Full justi	ification and b	ackup
records for those claims are mai	ntained in our office at th	e address indicated.				
Title:						

# DEPARTMENT OF PUBLIC HEALTH CONTRACTOR MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE

APPENDIX F-9 07/01/2021 - 06/30/2022 PAGE A

			act ID#	7					voice Numl	
Contractor: San Francisco Public Healtl Address: 1 Hallidie Plaza, Suite 808	n Founda	100000	016941	J			I		A-9JUL2	1
San Francisco, CA 94102				Cor	ntract Pur	rchase C	Order No:			
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Fax:	_!		IEP	_	epartment	t ID-Aut	nority ID:			
Program Name: Community Health Engager	nent - D5	Commu	nity Res	ource H		ect ID-A	ctivity ID:	Γ		
ACE Control #:	ı					Invoic	e Period:	07/1	1/21 - 07/3	31/21_
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Number of Clients for Appendix		1								1
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Fringe Benefits ,										_
Total Personnel Expenses										_
Operating Expenses:			<u> </u>		<u> </u>				<u> </u>	
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)							<del></del>			
Materials and Supplies-(e.g., Office,			<del>-</del>		<del></del>		<del></del>		<del></del>	
Postage, Printing and Repro., Program Supplies)	<u> </u>		<u> </u>				<del>-</del>			_
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)			<u> </u>		<u></u>		<del></del>			
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$159,	,100	<b>-</b>		-		<b>-</b>		\$159,1	00.00
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Stipends, Facilitators)										
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Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)				<u> </u>					
I certify that the information provided above is, to the bes	at of my knov	wledae, cor	anlete and	accurate;	the amount	+ requests	ad for reimb	·ursement i	ie in	
accordance with the budget approved for the contract cite		-	•							
records for those claims are maintained in our office at the Signature:	he address in	•	- <u>-</u>	p.c.			juo	Date:	·	
Title:							-			
Send to: SFDPH Fiscal / Invoice Processii 1380 Howard Street, 4th Floor, S	_	_								
San Francisco, CA 94103		By:			l Signatory)		_	Date:	:	

# DEPARTMENT OF PUBLIC HEALTH CONTRACTOR MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE

APPENDIX F-9 07/01/2021 - 06/30/2022 PAGE B

Address: Telephone: Fax:	Community Heal	Suite 8 A 941	08 02	Contract F Departm Community Resou	Purchase Order No: Fund Source: ent ID-Authority ID: irce Hub oject ID-Activity ID: Invoice Period:	A	WO 21 - 07/31/21
DETAIL PERSON			BUDGETED	EXPENSES	FINAL Invoice	% OF	(check if Yes)
PERSONNEL	<u>F</u>	TE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
					-		
TOTAL SALARIES							
I certify that the information	n provided above is, to t	he best o	of my knowledge, c	omplete and accurate: the	ne amount requested for	reimburseme	ent is in
accordance with the budge records for those claims an	et approved for the contr	act cited	I for services provid				
Certified By:				Date:			
Title:							

# OFFICE OF THE MAYOR SAN FRANCISCO



#### LONDON N. BREED MAYOR

# PROCLAMATION BY THE MAYOR DECLARING THE EXISTENCE OF A LOCAL EMERGENCY

WHEREAS, California Government Code Sections 8550 et seq., San Francisco Charter Section 3.100(13) and Chapter 7 of the San Francisco Administrative Code empower the Mayor to proclaim the existence of a local emergency, subject to concurrence by the Board of Supervisors as provided in the Charter, in the case of an emergency threatening the lives, property or welfare of the City and County or its citizens; and

WHEREAS, The United States has confirmed cases of individuals who have a severe acute respiratory illness caused by a novel (new) coronavirus ("COVID-19" or "the virus") first detected in Wuhan, Hubei Province, People's Republic of China ("China"). The virus was first reported in China on December 31, 2019. As of February 24, 2020, the World Health Organization ("WHO") has reported approximately 77,262 confirmed cases of COVID-19 in China, more than the number of confirmed cases of Severe Acute Respiratory Syndrome (SARS) during its 2003 outbreak. An additional 2,069 cases have been confirmed across 29 other countries; in many of these cases, the infected individuals had not visited China. More than 2,500 people have died from the virus, including 23 outside of China. The number of confirmed cases has continued to escalate dramatically over a short period of time; and

WHEREAS, WHO officials now report that sustained human-to-human transmission of the virus is occurring. Transmission from an asymptomatic individual has been documented. Although the majority of individuals infected with COVID-19 recover from the disease without special treatment, approximately 1 in 6 may become seriously ill. Manifestations of severe disease have included severe pneumonia, acute respiratory distress syndrome, septic shock, and multi-organ failure. Approximately 2% of the people confirmed infected with COVID-19 have died; and

WHEREAS, On January 30, 2020, WHO declared the COVID-19 outbreak a public health emergency of international concern, and on January 31, 2020, the U.S. Department of Health and Human Services declared a Public Health Emergency for the United States; and

WHEREAS, The Centers for Disease Control and Prevention ("CDC") has determined that the virus presents a serious public health threat, requiring coordination among state

## OFFICE OF THE MAYOR SAN FRANCISCO



#### LONDON N. BREED MAYOR

and local health departments to ensure readiness for potential health threats associated with the virus; and

WHEREAS, The CDC has issued guidance to local and State health departments, including San Francisco's Department of Public Health ("DPH"), concerning risk assessment and public health management of persons with potential exposure to COVID-19. These guidelines require DPH to make extraordinary efforts to monitor ongoing communicable disease threats and prepare for management of individuals who may have been exposed to COVID-19; and

WHEREAS, DPH, the Department of Emergency Management, and other City partners have been working successfully and diligently to implement CDC guidelines, but now require additional tools and resources to protect the public health given the current state of the epidemic and the need for a sustained response; and

WHEREAS, The City's Director of Public Health has determined that DPH cannot comply with the CDC's guidance without immediate action beyond the City's ordinary response capabilities, including directing personnel and resources from other City departments to assist with the ongoing and developing threat of COVID-19; and

WHEREAS, Conditions of extreme peril to the safety of persons and property have arisen; and

WHEREAS, The Mayor does hereby proclaim that the aforesaid conditions of extreme peril warrant and necessitate the proclamation of the existence of a local emergency,

### NOW, THEREFORE,

I, London N. Breed, Mayor of the City and County of San Francisco, proclaim the existence, effective immediately on February 25, 2020, of an emergency within the City and County threatening the lives, property or welfare of the City and County and its citizens;

#### It is further ordered that:

(1) All City and County officers and employees take all steps requested by the Director of Public Health to prevent the spread of COVID-19 and to prevent or alleviate illness or death due to the virus; and

# Office of the Mayor san Francisco



#### LONDON N. BREED MAYOR

(2) All City and County officers and employees take all steps requested by the Director of Public Health to qualify the City for reimbursement from the Federal Emergency Management Agency and for other state and federal relief as may be available to reimburse the City for the expenses it incurs in addressing this emergency; and

### I further proclaim and order that:

By the terms of this emergency declaration the government of the City and County of San Francisco is organized under the provisions of the Incident Command System (ICS), which system forms an essential part of the City's Emergency Operations Plan. The head of each City department and agency shall observe his or her proper relationship in the command structure outlined by the system and shall respond to the orders and requests of the Lead Department designated to exercise supervision over his or her department during the course of this emergency;

Because of the extreme peril to its residents and visitors, the Governor of the State of California is hereby requested to include the area of the City and County of San Francisco in any emergency declaration by the State, and is further requested to ensure that the City and County is included in any emergency declaration that may be issued by the President of the United States.

### And I further proclaim and order that:

This declaration of a local emergency shall continue to exist until it is terminated by the Mayor or the Board of Supervisors. All departments of the City and County of San Francisco are strictly ordered to cooperate with the requests for material and personnel resources that may emanate from the Incident Command Staff of the City and County which is located in the Emergency Command Center of the City and County of San Francisco.

DATED: 2/25/2020

London N. Breed

Mayor of San Francisco

### **COVID Fiscal ESA Invoice Template** for Reporting Hours of Existing Employees Deployed to **COVID Response**

	Contractor Name:	San Franc	cisco Public He	alth							
ţoţ	Contract ID/PO ID:	10000169	1000016941								
trac	213 RR#:	0007168					-				
For Contractor	Invoice Billing Period:	-	021 - 06/30/20	22							
Ā	Invoice No./ Invoice Amt:				\$			_			
	Complete the 214s Details tab first, (an populate the 214s Summary table below		ense Detail is applic	able) and the data w	<i>i</i> ill au	tomatically					
	214s Summary Table										
	Name	Position	No. of Hour	rs Rate	S	Subtotal		CI/CT			
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	Materials and Su		\$					-			
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	Staff Travel		\$ \$					-			
	Other Expens		\$ Operating \$					<del>-</del>			
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	Total Salaries & Operating Exppense		\$								
	Fringe Benefits Percentage/Total Fri			0% /	\$			-			
	Indirect Cost Percentage / Total Indi	irect Cost:		0% /	\$			-			
	Invoice Total:		\$								
For Contractor	I certify that the information provided above accordance with the contract approved fo	or services provided		of that contract. Full jus							
Con	Signature:		Date:								
١ۻ	Nama & Titlo:										

Signature: Date: Name&Title:

_	Reviewed an	d Approved for Payment:		
5	Signature:		Date:	
5	Name & Title:			
			•	

#### CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH MODIFIED ACTIVITY LOG (ICS 214)

1. Incident Name:			2. Operational Period (Saturda	ay to Friday)			
COVID-	19 ACTIVA	TION	Date From:	Dat	te To:		
3. Title of Organizational Unit or Resource designator:		nal Unit or	4. Unit Leader name and ICS	5. Home Agency (and Unit):			
6. Activated Employees Information:			DSW#:				
Employee Name			Employee ICS Position	Employee ICS Position Regular (total of b			
7. Activity I	Log:				,		
		□ 0508 DPH DC	OC ACTIVATION	□ 0801 MED	ICAL SURGE/FIEL	IELD HOSPITALS	
Activities'	' Table:	□ 0802 EMS TF			NT OF DISTRIBN, F		
		□ 0804 ENVIRO	ON HEALTH ASSESS/CONTROL	□ 0805 BEH	AVIORAL/MENTAL	CARE/SRV	
Date	Military Time	e Incident Ac	tivity Description:			Incident HRs	
9 Prepared	hv: Namo:		Job Class/Title				
8. Prepared by: Name: Signature:			Date/Time:	<b>.</b>			

#### CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH MODIFIED ACTIVITY LOG (ICS 214)

1. Incident Name: COVID-19 ACTIVATION			2. Operational Period: Date From:	Date To:
7. Activity	Log (continua	tion):		
Date	Military Time	Activity Description	on:	Incident HRs
8. Prepared	l by: Name:		Job Class/Title:	
	Signature	:	Date/Time:	



### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/29/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy

li ti	If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).									
PRO	DUCER	***************************************			CONTACT Katherine Berkman					
Cal	ender-Robinson Company, Inc.				PHONE (415) 978-3800 FAX (445-078-0005					70 0005
026	7063				E-MAIL khardman@s-lash					178-3825
233	Sansome St. Ste 508				ADDRES	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
Sar	Francisco			CA 94104				RDING COVERAGE Alliance of CA (NIAC)		NAIC #
INSL	RED	·			INSURER	I I a shift a	Fire Insurance			
	San Francisco Public Health F	ounda	tion		INSURER					19682
1 Hallidie Plaza #808					INSURER C : AXIS Insurance Company					
					INSURER					
	San Francisco			CA 94102	INSURER					
				NUMBER: CL211292875				REVISION NUMBE	R:	
C	IIS IS TO CERTIFY THAT THE POLICIES OF DICATED NOTWITHSTANDING ANY REQUESTIFICATE MAY BE ISSUED OR MAY PER CLUSIONS AND CONDITIONS OF SUCH PATTYPE OF INSURANCE	TAIN, T	HE IN	SURANCE AFFORDED BY THI BUTS SHOWN MAY HAVE BEEN	CONTRAC E POLICIE N REDUCE	OT OR OTHER IS DESCRIBE ID BY PAID CI	R DOCUMENT' D HEREIN IS S LAIMS,			
	COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER		POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	
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	CLAIMS-MADE OCCUR							PREMISES (Ea occurren		·
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	OF N. ACCOSCATE AND ACCOSCATE	-		2021-01142-NPO		02/04/2021	02/04/2022	PERSONAL & ADV INJU		
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	POLICY JECT LOC							PRODUCTS - COMPIOP	<del></del>	0,000
	AUTOMOBILE LIABILITY	+-					· · · · · · · · · · · · · · · · · · ·	COMBINED SINGLE LIM	\$	
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	AUTOS ONLY HIRED NON-OWNED					02/04/2021	UZ/U4/ZUZZ	BODILY INJURY (Per acc PROPERTY DAMAGE		
	AUTOS ONLY AUTOS ONLY							(Per accident)	<u> </u>	
_	X UMBRELLA LIAB X OCCUR	+	-						\$	000
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	DED RETENTION \$ 10,000	$\dashv$				02/04/2021	02/04/2022	AGGREGATE	s 1,000	000,
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	AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE THE							X PER STATUTE	OTH- ER	
8	OFFICER/MEMBER EXCLUDED?  (Mandatory in NH)	NIA		57WECAF3VEB		04/19/2021	04/19/2022	E L. EACH ACCIDENT	s 1,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below					Ì		E.L. DISEASE - EA EMPL		
	DESCRIPTION OF OPERATIONS below	+		· <b>* *</b>				E.L. DISEASE - POLICY I	IMIT s 1,000	,000
С	Cyber Liability			P-001-000153129-03		06/01/2021	06/01/2022	Each claim	\$ 5,00	000,00
]					-			Aggregate	\$ 5,00	00,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  City & County of San Francisco and the Dept. of Public Health and all respective officers, agents & employees are included as additional insured as per the attached endorsement										
CER	TIFICATE HOLDER			<del>П. С</del> овиродина описопия опис в на пред пред пред пред пред пред пред пред	CANCE	LLATION				
City & County of San Francisco Dept. of Public Health 101 Grove Street #402					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE				BEFORE	
San Francisco CA 94102					Karhum Berlin					

Named Insured: San Francisco Public Health Foundation

Policy: 2021-01142-NPO

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### SCHEDULE

Name of Person or Organization:

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy, and for which a certificate of insurance naming such person or organization as additional insured has been issued, but only with respect to their liability arising out of their requirements for certain performance placed upon you, as a non-profit organization, in consideration for funding or financial contributions you receive from them. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for

"bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your on-going operations; or
- B. In connection with your premises owned by or rented to you

THE INSURANCE provided under this endorsement is primary & noncontributory to any other valid & collectible insurance carried by the additional insured entity and this insurance will apply separately to each insured against whom a claim is made or a suit is brought.

CG 2026 (07/04)

**POLICY NUMBER:** 

2021-01142-NPO

COMMERCIAL AUTO LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies the insurance provided under the following:

#### COMMERCIAL AUTOMOBILE LIABILITY COVERAGE PART

#### SCHEDULE

Name of Person or Organization:

All entities named in the attached certificate of insurance

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of automobiles owned, leased, hired or borrowed by or on behalf of the Contractor.



### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT - CALIFORNIA

Policy Number: 57 WEC AF3VEB

**Endorsement Number:** 

Effective Date: 04/19/21

Effective hour is the same as stated on the Information Page of the policy.

Named Insured and Address: San Francisco Public Health Foundation

1 HALLIDIE PLZ STE 808 SAN FRANCISCO CA 94102

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be 5 % of the California workers' compensation premium otherwise due on such remuneration.

#### SCHEDULE

#### Person or Organization

**Job Description** 

City & County of San Francisco Department of Public Health 101 Grove St Ste A02 San Francisco, CA 94102 001

Countersigned b

Authorized Representative

Form WC 04 03 06

(1) Printed in U.S.A.

Process Date: 03/19/21

Policy Expiration Date: 04/19/22

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

#### SAN FRANCISCO PUBLIC HEALTH FOUNDATION

This Agreement is made this 1<sup>st</sup> day of January, 2020, in the City and County of San Francisco, State of California, by and between the San Francisco Public Health Foundation, 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102, non-profit entity, ("Contractor") and City.

#### Recitals

WHEREAS, the **Department of Public Health** ("Department") wishes to secure services for **As-Needed Project Based Support Services – Category I. Program Administration and Support Services;** and,

WHEREAS, this Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through RFQ 36-2017 a request for Qualification ("RFQ") issued on October 3, 2019, in which City selected Contractor as one of the highest qualified scorer pursuant to the RFQ; and

WHEREAS, there is no Local Business Entity ("LBE") subcontracting participation requirement for this Agreement; 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, the City's Civil Service Commission approved Contract number 46237 – 14/15 on **December 3, 2018**;

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 which are specifically incorporated into this Agreement by reference as provided herein.

- 1.2 "City" or "the 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 "CMD" means the Contract Monitoring Division of the City.
- 1.4 "Confidential Information" means confidential City information including, but not limited to, personally-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).
- 1.5 "Contractor" or "Consultant" means San Francisco Public Health, 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102.
- 1.6 "Deliverables" means Contractor's work product resulting from the Services that are 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.
- 1.7 "Effective Date" means the date upon which the City's Controller certifies the availability of funds for this Agreement as provided in Section 3.1.
- 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" mean the City and Contractor either collectively or individually.
- 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 The term of this Agreement shall commence on **January 1**<sup>st</sup>, **2020** and expire on **December 31**<sup>st</sup>, **2024**, unless earlier terminated as otherwise provided herein.
- 2.2 The City has **three (3)** options to renew the Agreement for a period of one year each. The City may extend this Agreement beyond the expiration date by exercising an option at the City's sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, "Modification of this Agreement."

Option 1: 01/01/2025 - 12/31/2025 Option 2: 01/01/2026 - 12/31/2026 Option 3: 01/01/2027 - 12/31/2027

#### Article 3 Financial Matters

Non-Appropriation. This Agreement is subject to the budget and fiscal provisions 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.

3.2 **Guaranteed Maximum Costs.** The 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 the 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."

#### 3.3 Compensation.

- 3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed Three Million Sixty-One Thousand Nine Hundred Thirty DOLLARS (\$3,061,930). The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.
- 3.3.2 **Payment Limited to Satisfactory Services.** Contractor is not entitled to any payments from City until **Department of Public Health** approves Services, including any furnished Deliverables, as satisfying all of the requirements of this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory Deliverables, including equipment, components, materials, or Services even if the unsatisfactory character of such Deliverables, equipment, components, materials, or Services may not have been apparent or detected at the time such payment was made. Deliverables, equipment, components, materials and Services that do not conform to

the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

- 3.3.3 **Withhold Payments.** If Contractor fails to provide Services in accordance with Contractor's obligations under this Agreement, the City may withhold any and all payments due 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 furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City as specified in Section 3.3.6, or in such alternate manner as the Parties have mutually agreed upon in writing.

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

#### 3.3.6 Getting paid by the City for goods and/or services.

- (a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through, the City's Automated Clearing House (ACH) payments service/provider. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit www.sfgov.org/ach.
- (b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

#### 3.3.7 Federal and/or State Funded Contracts.

(a) **Disallowance**. If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, 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.

#### (b) Reserved. (Grant Terms)

3.4 Audit and Inspection of Records. Contractor agrees to maintain and make available to the City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make excerpts and transcripts from 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 fewer than five years, unless required for a longer duration due to Federal, State, or local requirements of which the City will notify contractor in writing, 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: <a href="https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200">https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200</a> main 02.tpl.

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.

- 3.4.2 The Director of Public Health or his / her designee may approve a waiver of the audit requirement in Section 3.4.1 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.
- 3.4.3 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 Chapter 21, Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Pursuant to San Francisco Administrative Code §21.35, any contractor or subcontractor who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

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

#### Article 4 Services and Resources

- 4.1 **Services Contractor Agrees to Perform**. Contractor agrees to perform the Services provided for in Appendix A, "Scope of Services." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for, Services beyond the Scope of Services listed in Appendix A, unless Appendix A is modified as provided in Section 11.5, "Modification of this Agreement."
- 4.2 **Qualified Personnel**. Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. 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 adequate resources to allow timely completion within the project schedule specified in this Agreement.

#### 4.3 Subcontracting.

- 4.3.1 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.
- 4.3.2 City's execution of this Agreement constitutes its approval of the subcontractors listed below.
  - a. Rebuilding Together SF
  - b. CARECEN
  - c. Raimi & Associates
  - d. Walk SF Foundation
  - e. Senior Disability Action
  - f. Chinatown Community Development Center
  - g. Lighthouse For the Blind and Visually Impaired
  - h. Portola Family Center
  - i. Tenderloin Community Benefit District
  - j. Curry Senior Center
  - k. Additional Subcontractors To Be Determined

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

4.4.1 **Independent Contractor**. For the purposes of this Article 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 or any agent or employee of Contractor shall be deemed at all times to be an independent contractor and is wholly responsible for the manner in which it performs the services and work requested by City under this Agreement. Contractor, its agents, and employees will not represent or hold themselves out to be employees of the City at any time. Contractor or any agent or employee of 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 or any agent or employee of Contractor is liable for the acts and omissions of itself, its employees and its agents. 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 agent or employee of Contractor. Any terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Contractor's work only, and not as to the means by which such a result is obtained. City does not retain the right to control the means or the method by which Contractor performs work under this Agreement. 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, or any agent or employee of Contractor, is not performing in accordance with the requirements of this Agreement, 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, or any agent or employee 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 save 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. Neither this Agreement, nor any duties or obligations hereunder, may be directly or indirectly assigned, novated, hypothecated, transferred, or delegated by Contractor, or, where the Contractor is a joint venture, a joint venture partner, (collectively referred to as an "Assignment") unless first approved by City by written instrument executed and approved in the same manner as this Agreement in accordance with the Administrative Code. The City's approval of any such Assignment is subject to the Contractor demonstrating to City's reasonable satisfaction that the proposed transferee is: (i) reputable and capable,

financially and otherwise, of performing each of Contractor's obligations under this Agreement and any other documents to be assigned, (ii) not forbidden by applicable law from transacting business or entering into contracts with City; and (iii) subject to the jurisdiction of the courts of the State of California. A change of ownership or control of Contractor or a sale or transfer of substantially all of the assets of Contractor shall be deemed an Assignment for purposes of this Agreement. Contractor shall immediately notify City about any Assignment. Any purported Assignment made in violation of this provision shall be null and void.

4.6 Warranty. Contractor warrants to City that the Services will be performed with the degree of skill and care that is required by current, good and sound professional procedures and practices, and in conformance with generally accepted professional standards prevailing at the time the Services are performed so as to ensure that all Services performed are correct and appropriate for the purposes contemplated in this Agreement.

#### **Article 5** Insurance and Indemnity

#### 5.1 Insurance.

- 5.1.1 **Required Coverages.** Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. 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) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and
- (b) 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; and
- (c) 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.
  - (d) Reserved. (Professional Liability Coverage)
  - (e) Reserved. (Technology Errors and Omissions Coverage)
- (f) Contractor shall maintain in force during the full life of the agreement Cyber and Privacy 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.
- 5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.
- 5.1.3 Contractor's Commercial General Liability and Commercial Automobile Liability Insurance policies 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.

- 5.1.4 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."
- 5.1.5 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, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.
- 5.1.6 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.
- 5.1.7 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.
- 5.1.8 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements 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.
- 5.1.9 The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.
- 5.1.10 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, its officers, agents and employees and the Contractor as additional insureds.
- 5.2 **Indemnification**. 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 claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with 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 personally 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; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) (v) above) arises directly or indirectly from Contractor's performance of this

Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is 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, except where such breach is the result of the active negligence or willful misconduct of City. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.

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.

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.

#### **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 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 the City to verify Contractor's compliance with any State requirements for reporting sales and use tax paid by City under this Agreement.
- 7.2 Contractor acknowledges that this Agreement may create a "possessory interest" for property tax purposes. Generally, such a possessory interest is not created unless the Agreement entitles the Contractor to possession, occupancy, or use of City property for private gain. If such a possessory interest is created, then the following shall apply:
- 7.2.1 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that Contractor, and any permitted successors and assigns, may be subject to real property tax assessments on the possessory interest.
- 7.2.2 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that the creation, extension, renewal, or assignment of this Agreement may result in a "change in ownership" for purposes of real property taxes, and therefore may result in a revaluation of any possessory interest created by this Agreement. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report on behalf of the City to the County Assessor the information required by Revenue and Taxation Code section 480.5, as amended from time to time, and any successor provision.
- 7.2.3 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that other events also may cause a change of ownership of the possessory interest and result in the revaluation of the possessory interest. (see, e.g., Rev. & Tax. Code section 64, as amended from time to time). Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report any change in ownership to the County Assessor, the State Board of Equalization or other public agency as required by law.
- 7.2.4 Contractor further agrees to provide such other information as may be requested by the City to enable the 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 the 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 the 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. The notice shall specify the date on which termination shall become effective.
- 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 effect the termination of this Agreement on the date specified by City and to minimize the liability of Contractor and City to third parties as a result of 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) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.
- (b) Terminating all existing orders and subcontracts, and not placing any further orders or subcontracts for materials, Services, equipment or other items.
- (c) At City's direction, assigning to City any or all of Contractor's right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.
- (d) Subject to City's approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.
- (e) Completing performance of any Services that City designates to be completed prior to the date of termination specified by City.
- (f) Taking such action as may be necessary, or as the 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 specified 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 prior to the specified termination date, for which Services City has not already tendered 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 material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.
- (d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of 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 specified by City, 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 the 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

(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 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 or (iii) ordering the dissolution, winding-up or liquidation of Contractor.
- 8.2.2 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. 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 the 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 by registered mail to the address set forth in 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	9.1	Ownership of Results
3.3.7(a)	Grant Funded Contracts - Disallowance	9.2	Works for Hire
3.4	Audit and Inspection of Records	11.6	Dispute Resolution Procedure
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, including any drawings, plans, specifications, blueprints, studies, reports, memoranda, computation sheets, computer files and media or other documents prepared by Contractor or its subcontractors for the purposes of this agreement, shall become the property of and will be transmitted to City. However, unless expressly prohibited elsewhere in this Agreement, Contractor may retain and use copies for reference and as documentation of its experience and capabilities.
- 9.2 Works for Hire. If, in connection with Services, Contractor or its subcontractors creates Deliverables including, without limitation, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, blueprints, source codes, or any other original works of authorship, whether in digital or any other format, such works of authorship shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in such works shall be the property of the City. If any Deliverables created by Contractor or its subcontractor(s) under this Agreement are ever determined not to be works for hire under U.S. law, Contractor hereby assigns all Contractor's copyrights to such Deliverables to the 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 subcontractor(s). With City's prior written approval, Contractor and its subcontractor(s) may retain and use copies of such works for reference and as documentation of their respective experience and capabilities.

#### 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 the 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 the 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.
- Administrative Code Chapter 12K, 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 the 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 Chapter 12K. Information about and the text of Chapter 12K 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 12K, irrespective of the listing of obligations in this Section.

#### 10.5 Nondiscrimination Requirements

- 10.5.1 Non Discrimination in Contracts. Contractor shall comply with the provisions of Chapters 12B and 12C of the San Francisco Administrative Code. Contractor shall incorporate by reference in all subcontracts the provisions of Sections12B.2(a), 12B.2(c)-(k), and 12C.3 of the San Francisco Administrative Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Chapters 12B and 12C.
- 10.5.2 Nondiscrimination in the Provision of Employee Benefits. San Francisco Administrative Code 12B.2. 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 the 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 Administrative Code Section12B.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**. If Administrative Code Chapter 12P applies to this contract, Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Administrative Code Chapter 12P, including a minimum hourly gross compensation, compensated time off, and uncompensated time off. Contractor is subject to the enforcement and penalty provisions in Chapter 12P. Information about and the text of the Chapter 12P is available on the web at http://sfgov.org/olse/mco. Contractor is required to comply with all of the applicable provisions of 12P, irrespective of the listing of obligations in this Section. By signing and executing this Agreement, Contractor certifies that it complies with Chapter 12P.
- 10.8 **Health Care Accountability Ordinance.** If Administrative Code Chapter 12Q applies to this contract, Contractor shall comply with the requirements of Chapter 12Q. For each Covered Employee, Contractor shall provide the appropriate health benefit set forth in Section 12Q.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 the Chapter 12Q, 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 Chapter 12Q. 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 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 California Drug-Free Workplace Act of 1990 Cal. Gov. Code, § 8350 et seq., if state funds involved.

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 the 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 the 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 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. In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, 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 the 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 Chapter 12T, "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code ("Chapter 12T"), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at http://sfgov.org/olse/fco. Contractor is required to comply with all of the applicable provisions of 12T, 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 Chapter 12T.

- 10.14.2 The requirements of Chapter 12T 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. Chapter 12T 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 **Public Access to Nonprofit Records and Meetings.** If Contractor receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds and is a non-profit organization as defined in Chapter 12L of the San Francisco Administrative Code, 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**. 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.** 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), the 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.
  - 10.19 Reserved. (Preservative Treated Wood Products)

#### 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 402

San Francisco, California 94102 e-mail: Nora.macias@sfdph.org

And: Tomás Aragón MD/Patricia Erwin

PHD CHEP

25 VAN NESS, SUITE 500 SAN FRANCISCO, CA 94102

e-mail: patricia.erwin@sfdph.org

To CONTRACTOR: San Francisco Public Health Foundation

1 Hallidie Plaza, Suite 808

San Francisco, CA 94102 e-mail: peardley@sfphf.org

Any notice of default must be sent by registered mail. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party. If email notification is used, the sender must specify a receipt notice.

- 11.2 **Compliance with Americans with Disabilities Act**. Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including but not limited to Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.
- 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 §6250 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 as noted in Section 11.1, "Notices to Parties," regarding change in personnel or place, and 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. If the Parties are unable to resolve the dispute, then, pursuant to San Francisco Administrative Code Section 21.36, Contractor may submit to the Contracting Officer a written request for administrative review and documentation of the Contractor's claim(s). Upon such request, the Contracting Officer shall promptly issue an administrative decision in writing, stating the reasons for the action taken and informing the Contractor of its right to judicial review. If agreed by both Parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. If the parties do not mutually agree to an alternative dispute resolution process or such efforts do not resolve the dispute, then either Party may pursue any remedy available under California law. 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 the 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 the City until a written claim therefor has been presented to and rejected by the 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 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 the City's Charter, codes, ordinances and duly adopted rules and regulations of the 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 (a) the validity of other provisions of this Agreement shall not be affected or impaired thereby, and (b) 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.** Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, implementing task orders, the RFQ, and Contractor's proposal dated **October 3, 2019.** The RFQ and Contractor's proposal are incorporated by reference as though fully set forth herein. Should there be a conflict of terms or conditions, this Agreement and any implementing task orders shall control over the RFQ and the Contractor's proposal. If

the Appendices to this Agreement include any standard printed terms from the Contractor, Contractor agrees that in the event of discrepancy, inconsistency, gap, ambiguity, or conflicting language between the City's terms and Contractor's printed terms attached, the City's terms shall take precedence, followed by the procurement issued by the department, Contractor's proposal, and Contractor's printed terms, respectively.

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 all data given to Contractor by City in the performance of this Agreement ("City Data" or "Data"), or which in any way might reasonably require access to City's Data, and in no event later than 24 hours after it 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 the City's instruction and requests, including, without limitation, any retention schedules and/or litigation hold orders provided by the City to Contractor, independent of where the 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 Certification Regarding Lobbying.

CONTRACTOR certifies to the best of its knowledge and belief that:

- A. 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.
- B. 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.

- C. 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.
- D. 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.

#### 12.4 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.

#### 12.5 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 **Confidential Information.** In the performance of Services, Contractor may have access to City's proprietary or Confidential Information, the disclosure of which to third parties may damage City. If City discloses proprietary or Confidential Information to Contractor, 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 Healthcare 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:



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) (04-12-2018)
  - 1. SFDPH Attestation 1 PRIVACY (06-07-2017)
  - 2. SFDPH Attestation 2 DATA SECURITY (06-07-2017)

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 and Confidential Information

13.4.1 Access to City Data. City shall at all times have access to and control of all data given to Contractor by City in the performance of this Agreement ("City Data" or "Data"), and shall be able to retrieve it in a readable format, in electronic form and/or print, at any time, at no additional cost.

13.4.2 Use of City Data and Confidential Information. Contractor agrees to hold City's Confidential Information received from or created on behalf of the City in strictest confidence. Contractor shall not use or disclose City's Data or Confidential Information except as permitted or required by the Agreement or as otherwise authorized in writing by the City. Any work using, or sharing or storage of, City's Confidential Information outside the United States is subject to prior written authorization by the City. Access to City's Confidential Information must be strictly controlled and limited to Contractor's staff assigned to this project on a need-to-know basis only. Contractor is provided a limited non-exclusive license to use the City Data or Confidential Information 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 the City Data or Confidential Information, by implication, estoppel or otherwise, under copyright or other intellectual property rights, to any third-party. Unauthorized use of City Data or Confidential Information by Contractor, subcontractors or other thirdparties is prohibited. For purpose of this requirement, the phrase "unauthorized use" means the data mining or processing of data, stored or transmitted by the service, for commercial purposes, advertising or advertising-related purposes, or for any purpose other than security or service delivery analysis that is not explicitly authorized.

13.4.3 **Disposition of Confidential Information.** Upon termination of Agreement or request of City, Contractor shall within forty-eight (48) hours return all Confidential Information which includes all original media. Once Contractor has received written confirmation from City that Confidential Information has been successfully transferred to City, Contractor shall within ten (10) business days purge all Confidential Information from its servers, any hosted environment Contractor has used in performance of this Agreement, 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.

13.5 **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

Administrative Code §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 the 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** 

Recommended by:

DocuSigned by:
Gry Wagner

Grafff Copfax, MD Director of Health

Department of Public Health

Approved as to Form:

Dennis J. Herrera City Attorney

Docusigned by:

By: Simpson, lowise S

-BD54D8494945City Attorney

Approved:

— Docusigned by: Linda Repola

42Ebarics Degrafinried

Director of the Office of Contract Administration, and

Purchaser

**Appendices** 

A: Scope of Services

B: Calculation of Charges

C: Insurance Reserved

D: Grant Terms Reserved

E: HIPAA Business Associate Agreement

F: Invoices

G: Dispute Resolution

**CONTRACTOR** 

SAN FRANCISCO PUBLIC HEALTH FOUNDATION

DocuSigned by:

Punny Eardly

Executive Director
1 Hallidie Plaza, Suite 808
San Francisco, CA 94102

Supplier ID: 0000011526

# Appendix A Scope of Services

#### 1. Terms

#### A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Tomás Aragón**, **MD** / **Patricia Erwin**, 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. <u>Infection Control</u>, 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.

#### G. 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 staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

#### H. 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."

### I. 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 Program Administration for Community Health Engagement

  Appendix A-2 Program Administration for Community Health Engagement
- 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.

Contractor/Vendor: San Francisco Public Health Foundation Program: Community Health Engagement FY: 19/20 thru 24/25

#### CONTRACT SUMMARY

Contractor/Vendor: Service Provider:

Total Contract Amount:

**Funding Source:** Program Name:

System of Care:

**Program Code:** 

**Provider Address: Provider Phone: Contact Person:** 

RFP# and Term:

Appendix A#: **Funding Source** Appendix B: Year:

**Funding Amount:** 

**Funding Term:** Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

Target Population:

**Description of Services:** 

Appendix A#: **Funding Source** Appendix B:

Year:

**Funding Amount:** 

**Funding Term:** 

Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

**Target Population:** 

Description of Services:

Appendix A#: Funding Source Appendix B: Year:

**Funding Amount:** 

**Funding Term:** 

Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

**Target Population:** 

Description of Services:

San Francisco Public Health Foundation

\$2,733,865

Grant CDC, GF HIV Prevention, GF Health Education

Community Health Engagement CHEP

N/A

1 Hallidie Plaza, Suite 808 415-504-6738 ext.101 Penny Eardley

RFQ 36-2017 [1/1/2020 to 12/31/2024]

GF-Health Education

A-1/B-1 B-1a B-1b B-1c B-1d FY20-21 FY19-20 FY22-23 FY23-24 FY21-22 \$39,000 \$615.383 \$615,383 \$615,383 \$615,383 01/01/2020-7/1/2020-7/1/2021 7/1/2022-7/1/2023-06/30/2020 6/30/21 6/30/22 6/30/23 6/30/24 6 132 132 132 132 10 10 10 10 Number of Subcontractors x months in fiscal year

The San Francisco Public Health Foundation target population is the subcontractors participating in the CHEP Community Health

Engagement Program. The San Francisco Public Health Foundation will provide Program Management, Capacity Building and Subcontractor Management

Services in support of the programs listed below serviced by the following contractors: Community Health Engagement, Violence Prevention, Vision Zero and Community and Home Injury Prevention Program for Seniors (CHIPPS).

**GF- HIV Prevention** 

ı		B-2	B-2a	B-2b	B-2c	B-2d	
1		FY19-20	FY20-21	FY21-22	FY22-23	FY23-24	
		\$10.417	\$25,000	\$25,000	\$25,000	\$25,000	
ı		2/1/2020-	7/1/2020-	7/1/2021-	7/1/2022-	7/1/2023-	
	1	6/30/2020	6/30/2021	6/30/2022	6/30/2023	6/30/2024	
ı		234	536	536	536	536	
1		n/a	n/a	n/a	n/a	n/a	
ı		a					
ł		Staff					
н	N. Carlotte and Ca	Hours	Staff Hours	Staff Hours	Staff Hours	Staff Hours	

The San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF project.

End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

A-2						
Grant CDC						
B-3	B-3a	B-3b	B-3c	B-3d		
FY19-20	FY20-21	FY21-22	FY22-23	FY23-24		
\$22,917	\$25,000	\$25,000	\$25,000	\$25,000		
2/1/2020-	1/1/2020-	1/1/2021-	1/1/2022-	1/1/2023-		
6/30/2020	12/31/2021	12/31/2022	12/31/2023	12/31/2024		
520	567	567	567	567		
N/A	N/A	N/A	N/A	N/A		
Statt						
Hours	Staff Hours	Staff Hours	Staff Hours	Staff Hours		

The San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF

End Hep CSF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

Administration

**Appendix Term:** 01/01/2020-06/30/2024

Appendix A-1

Funding Source: General Fund-Health Education

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102 415-504-6738 Fax: 415-520-0471 www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

2.	Nature	of Document:

X	Original	☐ Contract Amendment	☐ Revision to Program Budgets (RPB)
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#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Program Management, Capacity Building and Subcontractor Management Services in support of the programs listed below serviced by the following contractors:

**Community Health Engagement:** The goal of the SFDPH Community Health Engagement Project is to support and promote community-wide health and well-being as well as community capacity building efforts. Subcontractor: TBD

**Community and Home Injury Prevention Program for Seniors (CHIPPS):** The goal of the Community & Home Injury Prevention Program for Seniors (CHIPPS) is to prevent falls and injuries to seniors living in San Francisco by providing fall prevention education, home safety devices, minor home repairs, and minor home modifications so seniors can live safely at home. Subcontractor: Rebuilding Together SF

**Violence Prevention**: The goal of this contract is to support comprehensive services offered by CARECEN's Second Chance Youth Program. The peer support groups create safe environments at local high schools and community spaces to actively engage in critical thinking, life-skills development, and fun, culturally affirming group activities. Subcontractor: CARECEN

**Vision Zero:** The goal of the Vision Zero – Community Engagement Program is to reduce traffic-related fatalities and severe injuries, especially to children, seniors, and people with disabilities. Subcontractors: Raimi and Associates, Walk SF Foundation – 2 programs, Senior and Disability Action, Chinatown Community Development Center, Lighthouse for the Blind and Visually Impaired, Portola Family Center, Tenderloin Community Benefit District

Appendix A-1

**Appendix Term:** 01/01/2020-06/30/2024

**Funding Source: General Fund-Health Education** 

# 4. Priority Population:

# **Community Health Engagement:**

Priority populations in San Francisco that are impacted by the health disparities and adverse effects, including:

- Black, African American
- Asian, including Chinese
- Pacific Islander
- Latinx
- Youth and transitional-age youth
- Seniors
- Low-income populations
- Individuals experiencing health disparities
- Others as identified
  - o Subcontractor: TBD

# Community and Home Injury Prevention Program for Seniors (CHIPPS):

- Priority populations are all seniors over 65 years old who live in San Francisco.
  - Subcontractor: Rebuilding Together SF

#### Violence Prevention:

- "at/in risk" Latino youth between the ages of 14-18 years in the San Francisco Bay Area
  - Subcontractor: CARECEN

#### Vision Zero:

- Children
- Seniors
- People with disabilities
- Low-income populations
  - Subcontractors: Raimi and Associates, Walk SF Foundation 2 programs, Senior and Disability Action, Chinatown Community Development Center, Lighthouse for the Blind and Visually Impaired, Portola Family Center, Tenderloin Community Benefit District

## 5. Modality(s)/Intervention(s):

# 1 Unit = 1 subcontractor x number of months in the current fiscal year

Units of Service (UOS) Description 1/01/2020 to 6/30/2020	Units of Service (UOS)	Unduplicated Clients (UDC)
Community Health Engagement Program Administration		
Subcontractor: 18 Reasons	6	1
Total UOS Delivered	6	
Total UDC Served		1

Appendix A-1

**Appendix Term:** 01/01/2020-06/30/2024

**Funding Source: General Fund-Health Education** 

Units of Service (UOS) Description	Units of Service in	Unduplicated
7/01/2020 to 6/30/2021	months (UOS)	Clients (UDC)
Community Health Engagement Program Administration -	12	1
Subcontractors TBD (1)	12 .	1
Community & Home Injury Prevention Program for Seniors		
<b>Program Administration -</b> Subcontractor: Rebuilding Together	10	1
San Francisco	12	
Violence Prevention Program Administration - Subcontractor		1
CARECEN	12	1
Vision Zero Program Administration		
Subcontractors: (8)		
Raimi and Associates	12	
Walk SF Foundation – 2 programs	24	
Senior and Disability Action	12	7
Chinatown Community Development Center	12	
Lighthouse for the Blind and Visually Impaired	12	
Portola Family Center	12	
Tenderloin Community Benefit District	12 (96)	
Total UOS Delivered	132 UOS	
Total UDC Served		10

Units of Service (UOS) Description 7/01/2021 to 6/30/2022	Units of Service in months (UOS)	Unduplicated Clients (UDC)
<b>Community Health Engagement Program Administration</b> - 1 Subcontractors	12	1
Community & Home Injury Prevention Program for Seniors Program Administration - 1 Subcontractors	12	1
Violence Prevention Program Administration -1 Subcontractors	12	1
Vision Zero Program Administration - 8 Subcontractors	96	7
Total UOS Delivered	132 UOS	
Total UDC Served		10

Appendix A-1

**Appendix Term:** 01/01/2020-06/30/2024

Funding Source: General Fund-Health Education

Units of Service (UOS) Description 7/01/2022 to 6/30/2023	Units of Service in months (UOS)	Unduplicated Clients (UDC)
Community Health Engagement Administration - Subcontractors TBD	12	1
Community & Home Injury Prevention Program for Seniors Program Administration – 1 Subcontractors	12	1
Violence Prevention Program Administration – 1 Subcontractors	12	1
Vision Zero Program Administration – 8 Subcontractors	96	7
Total UOS Delivered	132 UOS	
Total UDC Served		10

Units of Service (UOS) Description 7/01/2023 to 6/30/2024	Units of Service in months (UOS)	Unduplicated Clients (UDC)
<b>Community Health Engagement Program Administration</b> Subcontractors TBD	12	1
Community & Home Injury Prevention Program for Seniors Program Administration - 1 Subcontractors	12	1
Violence Prevention Program Administration – 1 Subcontractors	12	1
Vision Zero Program Administration - 8 Subcontractors	96	7
Total UOS Delivered	132 UOS	
Total UDC Served	ME BROWN URSEAL	10

# 6. Methodology:

# **Program Administration of Subcontractors**

- 1. Manage and disburse funds as directed by the Department as it applies to the Community Health Engagement Program.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contractor;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities:
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations:
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements

**Appendix A-1 Appendix Term:** 01/01/2020-06/30/2024

Funding Source: General Fund-Health Education

## **Objectives and Measurements:**

SFPHF must submit an Annual Summary Report documenting achievement of all Objectives to System of Care Program Manager and the Business Office Contract Compliance (BOCC) within two months from the end of the contract year.

# A. Standardized Objectives:

"All objectives and descriptions of how objectives will be measured, are contained in the Fiscal Intermediary/Program Management document entitled: Fiscal Intermediary Performance Objectives FY19-20."

## FY 1920 (six (6) months)

By June 30, 2020, SFPHF program staff will complete subcontractor's agreements as requested by CHEP program staff.

## FY 2020-2021 (twelve (12) months)

By August 1, 2020, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

## FY 2021-2022 (twelve (12) months)

By August 1, 2020, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

## FY 2022-2023 (twelve (12) months)

By August 1, 2022, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### FY 2023-2024 (twelve (12) months)

By August 1, 2023, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### 7. Continuous Quality Improvement:

CHEP staff will work with the SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements.

To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

Appendix A-1

Appendix Term: 01/01/2020-06/30/2024

Funding Source: General Fund-Health Education

# 8. Required Language:

NA

# 9. Subcontractors & Consultants (for Fiscal Intermediary/Program Management ONLY):

- A. SFPHF is responsible for the performance of its subcontractors and consultants in this Agreement.
- B. SFPHF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFPHF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFPHF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Blood-borne Pathogen and Aerosol Transmissible Diseases. SFPHF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' Compensation laws and regulations.
- D. SFPHF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFPHF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFPH, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFPHF, and SFPHF acknowledges that it must comply with all requirements of the Agreements, regardless of whether they are listed again here in this Appendix.

**Appendix Term:** 01/01/2020-06/30/2024

Funding Source: General Fund-HIV Prevention/Grant CDC

Appendix A-2

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102 415-504-6738 Fax: 415-520-0471 www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

#### 2. Nature of Document:

☐ Contract Amendment ☐ Revision	on to Program Budgets (RPB)
---------------------------------	-----------------------------

#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Human Resources Management/Support in support of the End Hep C SF project and as part of the Community Health Engagement goals. End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

### 4. Priority Population:

Priority populations in San Francisco that are impacted by HIV and Hep C, including:

- Black, African American
- Asian, including Chinese
- Pacific Islander
- Latinx
- Youth and transitional-age youth
- Seniors
- Low-income populations
- Individuals experiencing health disparities
- Others as identified

## 5. Modality(s)/Intervention(s):

Units of Service (UOS) Description 1/01/2020 to 6/30/2020 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention	234	
Grant CDC	520	NA
Total UOS Delivered	754	
Total UDC Served		Kirk in a 141

**Appendix Term:** 01/01/2020-06/30/2024

Funding Source: General Fund-HIV Prevention/Grant CDC

Appendix A-2

Units of Service (UOS) Description 7/01/2020 to 6/30/2021 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention	536	
Grant CDC	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Units of Service (UOS) Description 7/01/2021 to 6/30/2022 1 UOS – 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention	536	
Grant CDC	567	NA
Total UOS Delivered	1105	
Total UDC Served		Marin Ne el el les

Units of Service (UOS) Description 7/01/2022 to 6/30/2023 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention	536	
Grant CDC	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Units of Service (UOS) Description 7/01/2023 to 6/30/2024 1 UOS = 1 Hour	Units of Service (UOS)	Unduplicated Clients (UDC)
Program Administration – hours		
General Fund HIV Prevention	536	
Grant CDC	567	NA
Total UOS Delivered	1105	
Total UDC Served		

Administration

Appendix A-2

Appendix Term: 01/01/2020-06/30/2024 Funding Source: General Fund-HIV

Prevention/Grant CDC

# 6. Methodology:

### **Program Administration**

- 1. Manage and disburse funds as directed by the Department as it applies to this project.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contract;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities:
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations;
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements.

## **Human Resources management**

Employ, supervise and evaluate performance of the End Hep C SF Program Coordinator. This position works from a remote office and supplies coordination to the End Hep C SF Coalition, including communication between partners, organizing meetings, creating communications on HIV and Hep C information to share with the public. The Program Coordinator works 40 hours per week and is supervised by the Executive Director of SFPHF.

## 7. Objectives and Measurements:

A. Standardized Objectives:

Not applicable.

#### 8. Continuous Quality Improvement:

The SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements. To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

## 9. Required Language:

NA

# 10. Subcontractors & Consultants (for Fiscal Intermediary/Program Management ONLY):

NA

# Appendix B Calculation of Charges

# 1. Method of Payment

A. Contractor shall submit monthly invoices in the format attached in Appendix F, by the fifteenth (15th) working day of each month for reimbursement of the actual costs for Services of the immediately 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.

# 2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Appendix B	<b>Budget Summary</b>
Appendix B-1, B-1a, B-1b, B-1c, B-1d	Program Administration for Community Health Engagement
Appendix B-2, B-2a, B-2b, B-2c, B-2d	<b>Program Administration for Community Health Engagement</b>
Appendix B-3, B-3a, B-3b, B-3c, B-3d	Program Administration for Community Health Engagement

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, \$328,064 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 executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. 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.

The Maximum dollar for each term and funding source shall be as follows:

	<u>Term</u>	<b>Funding Source</b>	<u>Amount</u>
Original Agreement	01/01/2020 - 06/30/2020	General Fund	\$39,000
Original Agreement	02/01/2020 - 06/30/2020	<b>General Fund</b>	\$10,417
Original Agreement	02/01/2020 - 12/31/2020	CDC	\$22,917
Original Agreement	07/01/2020 - 06/30/2021	General Fund	\$615,383
Original Agreement	07/01/2020 - 06/30/2021	<b>General Fund</b>	\$25,000

Original Agreement	01/01/2021 - 12/31/2021	CDC	25,000
Original Agreement	07/01/2021 - 06/30/2022	<b>General Fund</b>	\$615,383
Original Agreement	07/01/2021 - 06/30/2022	<b>General Fund</b>	\$25,000
Original Agreement	01/01/2022 - 12/31/2022	CDC	25,000
Original Agreement	07/01/2022 - 06/30/2023	General Fund	\$615,383
Original Agreement	07/01/2022 - 06/30/2023	<b>General Fund</b>	\$25,000
Original Agreement	01/01/2023 - 12/31/2023	CDC	25,000
Original Agreement	07/01/2023 - 06/30/2024	<b>General Fund</b>	\$615,383
Original Agreement	07/01/2023 - 06/30/2024	<b>General Fund</b>	\$25,000
Original Agreement	01/01/2024 - 12/31/2024	CDC	25,000
	<b></b>	. 4 . 4	00.000

Total Award Amount: \$2,733,686

Contingency 1/1/2020 – 12/31/2024: \$328,064

(This equals the total NTE) Total: \$3,061,930

- C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.
- D. A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date 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.
- 3. 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.

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Check one: [X] Original Agraement [ ] Amendment [ ] Reusion to Program Budgets         Agency/Contractor Name: San Francisco Public Health Foundation         Community Health Health Hea	Community Health   Community H	Munity Health Community Health Engagement A-2IB-3a A-2IB-1b  C221-12610221 (07010221 - 06200222  19,472 \$	Community Health   Engagement	community Hoalth C Engagement A-2/B-3b						A	4/11/11/01/24
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Contractor: Sa	an Francisc	co Public He	ealth Fou	ındation				A	opendix:	B-1
Program: Co	ommunity	Health Enga	gement					Append	ix Term:	01/01/2020-6/30/2020
Full Contract Term: 1/1			-					Funding	Source:	GF Health Education
		UOS COST	ALLOCA	ATION BY SE	RVICE	MODE		Ü		
Service	e Modes:	Community Engager Progr Administ	nent - am							
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Consultants/Subcontract	tor:									
18 Reasons		35,455	100%		0%		0%		0%	35,455
0			0%		0%		0%		0%	
Total Operating Expense	es	35,455	100%	-	0%	-	0%		0%	35,455
Total Direct Expenses		35,455	100%	-	0%	_	0%	-	0%	35,455
	10.00%	3,545	100%	-	0%	-	0%	-	0%	3,545
TOTAL EXPENSES		39,000	100%	-	0%	-	0%	-	0%	39,000
Unit of Serv	vice Type	Subconti	actor	0		0		0		
Number of UOS per Sen	vice Mode	6								6
Cost Per UOS by Sen	vice Mode	\$6,500.	.00	\$0.00		\$0.00	1	\$0.00		N/A
umber of UDC/NOC per Ser	rvice Mode	1								1
										Rev: 02/1

# **BUDGET JUSTIFICATION**

Contractor Name	San Francisco Public Health Foundat	ion Appendix:	B-1	
Program Name:	Community Health Engagement	Appendix Term:	01/01/2020-06/30/2020	
-			General Fund- Health	
		Funding Source:	Education	
2) OPERATING EXPENSES:				
Consultants/Subcontractors:	i e			
Consult/Subcontractor Name	Service Description	Rate/Formula	Cost	
18 Reasons	Capacity building for HEAL nonprofits.	203 hours X ~\$175	\$ 35,455	
		Total Consultants/Subcontractors:	\$ 35,455	
		TOTAL OPERATING EXPENSES:  TOTAL DIRECT COSTS:		
4) INDIRECT COSTS				
•	nd ledger expenses that are included in	your shared costs?		
	J		Amount	
Finance Manager, Accounting A	ssistant, rent, audit, supplies.		\$ 3,545	
		Indirect Rate:	40.000/	
		munect Nate.	10.00%	
		TOTAL INDIRECT COSTS:	10.00% \$ 3,545	

Contractor: San Francisco Public Health Foundation

Program: Community Health Engagement

Appendix:

B-1a

Appendix Term: 07/01/2020-06/30/2021

General Fund-Health

Funding Source: Education

# **UOS COST ALLOCATION BY SERVICE MODE**

Service Modes	Communit Engager Progr Administ	nent - am	Community Injury Preve Progra Administr	ention - im	Violen Preventi Progra Administi	ion - am	Vision Z Progra Administ	am	
Operating Expenses	Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total General Operating	1504	25%		25%	1503	25%	1503	25%	6,013
Consultants/Subcontractor:	i i								-
Subcontractors (13)	106700	19%	70,000	13%	39 460	7%	337,268	61%	553,428
Total Operating Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441
Total Direct Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441
Indirect Expenses 10.00%	10,820	19%	7,150	13%	4,096	7%	33,876	61%	55,942
TOTAL EXPENSES	119,024	19%	78,653	13%	45,059	7%	372,647	61%	615,383
Unit of Service Ty	e Subcontra	actors	Subcontra	ctors	Subcontra	ctors	Subcontra	actors	
Number of UOS per Service Mo	le 12	Ť	12		12		96		132
Cost Per UOS by Service Mo		.67	\$6,554.4	12	\$3,754.	92	\$3,881.	74	P. Lewis P. L.
lumber of UDC/NOC per Service Mo	de 1		1		1		7		10
									Rev: 02/18

# **BUDGET JUSTIFICATION**

Contractor Name San Francisco Public Health Foundation Appendix: B-1a

Program Name: Community Health Engagement Appendix Term: 07/01/2020-06/30/2021

General Fund-Health

Funding Source: Education

2) OPERATING EXPENSES:

**General Operating:** 

Expense Item	Brief Description	Rate/Formula	(	Cost
Community Capacity Building & Engagement	Website maintenance, trainings, data purchases, audio conferencing services, meeting room rentals, surveys and project management software license, and books, office, incentives/'swag', meeting supplies, presentation materials, printing, and other.		\$	6,013
	To	otal General Operating:	\$	6,013

Consultants/Subcontractors:

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
Community Engagement Consultants - TBD	Program, evaluation, fund development and other consultants: Hourly rate to be based on experience and duties. Work to support the development, implementation, monitoring and evaluation of various capacity building projects and services. Includes consultants for Chronic Disease Prevention, Healthy Retail SF, Ped Safety/Active Transportation and other work related towards healthier communities.  Consultants and rate to be determined as identified.		\$ 106,700
Raimi and Associates	Program evaluation services for Safe Routes to School and related services.		\$ 40,000
CARECEN Violence Prev Groups	To provide violence prevention support groups and related activities for girls and young women.		\$ 39,460
Rebuilding Together San Francisco	Supplies and labor costs associated with minor home repairs in seniors' and disabled persons' private residences as referred by DPH CHIPPS staff and associates.		\$ 70,000
Walk SF Foundation - Families for Safe Streets	Families for Safe Streets (FSS) organizes and assists a group of people who have lost loved ones or been victims in traffic collisions; these individuals support the implementation of Vision Zero in San Francisco to prevent future crashes from happening.		\$ 99,794
Walk SF Foundation - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880
Senior and Disability Action - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880
Chinatown Community Development Center - Safe Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 20,440

Curry Senior Center - Safe Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$	20,440
Lighthouse for the Blind and Visually Impaired - Safe Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$	20,440
Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$	20,440
Tenderloin Community Benefit District - Safe Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	\$	20,440
Walk SF Foundation - D5 Pedestrian Safety Outreach	Community-based subcontract for pedestrian safety outreach in District 5.	\$	13,514

Total Consultants/Subcontractors: \$ 553,428

TOTAL OPERATING EXPENSES: \$ 559,441

TOTAL DIRECT COSTS: \$ 559,441

# 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

Amount

Finance Manager, Accounting Assistant, Executive Director, Program Coordinator, rent, audit, supplies.	\$ 55,942

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: \$ 55,942

TOTAL EXPENSES: \$ 615,383

Contractor: San Francisco Public Health Foundation Appendix: B-1b

Program:Community Health EngagementAppendix Term:07/01/2021 - 06/30/2022

Funding Source: **GF- Health Education** 

## UOS COST ALLOCATION BY SERVICE MODE

Service Mo	odes:	Community Engagen Progra Administ	nent - am	Community Injury Prevo Progra Administr	ention - ım	Violer Prevent Progr Administ	tion - am	Vision 2 Progr Administ	am		
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals	
Total General Operating		1,504	25%	1,503	25%	1,503	25%	1,503	25%	6,0	,013
Consultants/Subcontractor:											
Subcontractors		106,700	19% 0%	70,000	13% 0%	39,460	7% 0%	337,268	61% 0%	553,4	428 -
Total Operating Expenses		108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,4	441
Total Direct Expenses		108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,4	441
Indirect Expenses 10.0	0%	10,820	19%	7,150	13%	4,096	7%	33,876	61%		942
TOTAL EXPENSES		119,024	19%	78,653	13%	45,059	7%	372,647	61%	615,3	383
Unit of Service	Туре	Subcontr	actor	Subcontra	actor	Subcontr	actor	Subcontr	actor		
Number of UOS per Service	Mode	12		12		12		96		132	
Cost Per UOS by Service	Mode	\$9,918.	67	\$6,554.4	12	\$3,754.	.92	\$3,881.	74	N/A	
umber of UDC/NOC per Service	Mode	1		1		1		7		10	
										Rev: (	02/18

# **BUDGET JUSTIFICATION**

ontractor Name	San Francisco Public Health Foundation	Appendix:	B-1b
Program Name:	Community Health Engagement	Appendix Term:	07/01/2021-6/30/202

Funding Source: GF Health Education

# 2) OPERATING EXPENSES:

**General Operating:** 

Expense Item	Brief Description	Rate/Formula	Cost
Community Capacity Building & Engagement	Website maintenance, trainings, data purchases, audio conferencing services, meeting room rentals, surveys and project management software license, and books, office, incentives/'swag', meeting supplies, presentation materials, printing, and other.		\$ 6,013

Total General Operating: \$ 6,013

# Consultants/Subcontractors:

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
Community Engagement Consultants - TBD	Program, evaluation, fund development and other consultants: Hourly rate to be based on experience and duties. Work to support the development, implementation, monitoring and evaluation of various capacity building projects and services. Includes consultants for Chronic Disease Prevention, Healthy Retail SF, Ped Safety/Active Transportation and other work related towards healthier communities. Consultants and rate to be determined as identified.		\$ 106,700
Raimi and Associates	Program evaluation services for Safe Routes to School and related services.		\$ 40,000
CARECEN Violence Prev Groups	To provide violence prevention support groups and related activities for girls and young women.		\$ 39,460
Rebuilding Together San Francisco	Supplies and labor costs associated with minor home repairs in seniors' and disabled persons' private residences as referred by DPH CHIPPS staff and associates.		\$ 70,000
Walk SF Foundation - Families for Safe Streets	Families for Safe Streets (FSS) organizes and assists a group of people who have lost loved ones or been victims in traffic collisions; these individuals support the implementation of Vision Zero in San Francisco to prevent future crashes from happening.		\$ 99,794
Walk SF Foundation - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880
Senior and Disability Action - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880

Chinatown Community				
Chinatown Community Development Center - Safe	Neighborhood subcontract for work to support the	.		
Streets for Seniors	community based education of Vision Zero projects an		_	00.440
Streets for Serilors	services for senior and disabled communities.	\$	20,440	
	Neighborhood subcontract for work to support the	.		
Curry Senior Center - Safe	community based education of Vision Zero projects an	<b>3</b>	1	
Streets for Seniors	services for senior and disabled communities.		\$	20,440
Lighthouse for the Blind and	Neighborhood subcontract for work to support the			
Visually Impaired - Safe	community based education of Vision Zero projects an	d l		
Streets for Seniors	services for senior and disabled communities.		٠,	20,440
Otrects for Octilors	NI-:		\$	20,440
	Neighborhood subcontract for work to support the			
Portola Family Center - Safe	community based education of Vision Zero projects and			
Streets for Seniors	services for senior and disabled communities.		\$	20,440
Tenderloin Community	Neighborhood subcontract for work to support the		H	
Benefit District - Safe	community based education of Vision Zero projects and	1		
Streets for Seniors	services for senior and disabled communities.		\$	20,440
Walk SF Foundation - D5	Community-based subcontract for pedestrian safety outreac		۳	20,110
Pedestrian Safety Outreach	in District 5.		\$	13,514
Todootian odioty odirodon	iii District 5.	-	φ	13,314
	Total Cons	ultants/Subcontractors:	<u> </u>	553,428
		altants, oabcontractors.	Ψ	333,720
	TOTAL	PERATING EXPENSES:	\$	559,441
			_	555,111
		TOTAL DIRECT COSTS:	\$	559,441
4) INDIRECT COSTS				
,	nd ledger expenses that are included in your shared costs?			
	······································			Amount
Finance Manager, Accounting A	ssistant, Executive Director, Program Coordinator, rent, audit	supplies	\$	55,942
, mando managor, , todo anang 7	2.000.00.00 2.000.00.00.00.00.00.00.00.00.00.00.00.0	оприсо:	Ψ_	00,012
		Indirect Rate:		10.00%
	TC	TAL INDIRECT COSTS:	\$	55,942
	-	TOTAL EXPENSES:	\$	615,383
		I TOTAL EXILITORS	Ψ	010,000

Contractor: SF Public	Health Founda	ation					А	ppendix:	B-1c
Program: Communit	y Health Enga	gement					Append	lix Term:	7/1/2022-6/30/2023
	UOS COST	ALL OCA	ATION BY SE	RVICE M	IODE		Funding	Source:	GF- Health Education
Service Modes	Communit	y Health nent - am	11	y Home ention -	Violer Prevent Progr Administ	tion - am	Vision 2 Progr Administ	am	
Operating Expenses	Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total General Operating	1,504	25%	1,503	25%	1,503	25%	1,503	25%	6,013
Consultants/Subcontractor:									
Subcontractors (13)	106,700	19%	70,000	13%	39,460	7%	337,268	61%	553,428
Total Operating Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441
Total Direct Expenses	108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441
Indirect Expenses 10.00%	10,820	19%	7,150	13%	4,096	7%	33,876	61%	55,942
TOTAL EXPENSES	119,024	19%	78,653	13%	45,059	7%	372,647	61%	615,383
Unit of Service Typ	e Subcont	ractor	Subcontra	actor	Subcontr	ractor	Subconti	actor	
Number of UOS per Service Mod	e 12		12		12		96		132
Cost Per UOS by Service Mod	e \$9,918	.67	\$6,554.4	42	\$3,754.	.92	\$3,881.	.74	N/A
lumber of UDC/NOC per Service Mod	e 1		1		1		7		10
	*								Rev: 02/18

# **BUDGET JUSTIFICATION**

<b>Contractor Name</b>	SF Public Health Foundation	Appendix:	B-1c
Program Name:	Community Health Engagement	Appendix Term:	7/1/2022-6/30/2023

Funding Source: GF- Health Education

# 2) OPERATING EXPENSES:

**General Operating:** 

Expense Item	Brief Description	Rate/Formula	Cost
Community Capacity Building & Engagement	Website maintenance, trainings, data purchases, audio conferencing services, meeting room rentals, surveys and project management software license, and books, office, incentives/'swag', meeting supplies, presentation materials, printing, and other.		\$ 6,013
	To	otal General Operating:	\$ 6,013

# Consultants/Subcontractors:

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
Community Engagement Consultants - TBD	Program, evaluation, fund development and other consultants: Hourly rate to be based on experience and duties. Work to support the development, implementation, monitoring and evaluation of various capacity building projects and services. Includes consultants for Chronic Disease Prevention, Healthy Retail SF, Ped Safety/Active Transportation and other work related towards healthier communities.  Consultants and rate to be determined as identified.		\$ 106,700
Raimi and Associates	Program evaluation services for Safe Routes to School and related services.		\$ 40,000
CARECEN Violence Prev Groups	To provide violence prevention support groups and related activities for girls and young women.		\$ 39,460
Rebuilding Together San Francisco	Supplies and labor costs associated with minor home repairs in seniors' and disabled persons' private residences as referred by DPH CHIPPS staff and associates.		\$ 70,000
Walk SF Foundation - Families for Safe Streets	Families for Safe Streets (FSS) organizes and assists a group of people who have lost loved ones or been victims in traffic collisions; these individuals support the implementation of Vision Zero in San Francisco to prevent future crashes from happening.		\$ 99,794
Walk SF Foundation - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880

Citywide subcontract for work to support the community pased education of Vision Zero projects and services for senior and disabled communities.			
, ,			
or senior and disabled communities.			40.000
		\$	40,880
•			
services for senior and disabled communities.		\$	20,440
Neighborhood subcontract for work to support the			
community based education of Vision Zero projects and			
services for senior and disabled communities.			
		\$	20,440
Neighborhood subcontract for work to support the			
community based education of Vision Zero projects and			
ervices for senior and disabled communities.		\$	20,440
leighborhood subcontract for work to support the			
ervices for senior and disabled communities.		¢	20,440
		Ψ	20,440
- ''			
ervices for serilor and disabled communities.		\$	20,440
Annual to be and only a substitute of the substi			
i District 5.		\$	13,514
	eighborhood subcontract for work to support the ommunity based education of Vision Zero projects and ervices for senior and disabled communities.  eighborhood subcontract for work to support the ommunity based education of Vision Zero projects and ervices for senior and disabled communities.  eighborhood subcontract for work to support the ommunity based education of Vision Zero projects and	eighborhood subcontract for work to support the eighborhood subcontract for wo	semmunity based education of Vision Zero projects and ervices for senior and disabled communities.  leighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.  seighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.  seighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.  seighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.  seighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.  seighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.  seighborhood subcontract for work to support the formunity based education of Vision Zero projects and ervices for senior and disabled communities.

Total Consultants/Subcontractors: \$ 553,428

TOTAL OPERATING EXPENSES: \$ 559,441

TOTAL DIRECT COSTS: \$ 559,441

# 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	A	mount
Finance Manager, Accounting Assistant, Executive Director, Program Coordinator, rent, audit, supplies.	\$	55,942

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Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: \$ 55,942

TOTAL EXPENSES: \$ 615,383

Contractor: San Francisco Public Health Foundation

**Program: Community Health Engagement** 

Appendix:

B-1d

Appendix Term: 07/01/2023-06/30/2024

General Fund-Health

Funding Source: Education

# **UOS COST ALLOCATION BY SERVICE MODE**

Service Modes:		Engager Progr	Community Health Engagement - Program Administration		Community Home Injury Prevention - Program Administration		Violence Prevention - Program Administration		Zero - ram tration	
Personnel Expenses		-	0%	-	0%	-	0%	-	0%	-
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total General Operating		1,504	25%	1,503	25%	1,503	25%	1,503	25%	6,013
Consultants/Subcontractor	r:									,
Subcontractors (13)		106,700	19%	70,000	13%	39,460	7%	337,268	61%	553,428
Total Operating Expenses		108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441
Total Direct Expenses		108,204	19%	71,503	13%	40,963	7%	338,771	61%	559,441
Indirect Expenses 10	.00%	10,820	19%	7,150	13%	4,096	7%	33,876	61%	55,942
TOTAL EXPENSES		119,024	19%	78,653	13%	45,059	7%	372,647	61%	615,383
Unit of Servi	се Туре	Subcontr	actor	Subcontra	actor	Subcontr	actor	Subcontractor		
Number of UOS per Service	e Mode	12		12		12		96		132
Cost Per UOS by Service Mode		\$9,918.	.67	\$6,554.4	12	\$3,754.	92	\$3,881.74		N/A
umber of UDC/NOC per Service Mode		1		1		1		7		10
										Rev: 02/18

# **BUDGET JUSTIFICATION**

Contractor Name San Francisco Public Health Foundation Appendix: B-1d

Program Name: Community Health Engagement Appendix Term: 07/01/2023-06/30/2024

General Fund-Health

Funding Source: Education

2) OPERATING EXPENSES:

**General Operating:** 

Expense Item	Brief Description	Rate/Formula	Cost
Community Capacity Building & Engagement	Website maintenance, trainings, data purchases, audio conferencing services, meeting room rentals, surveys and project management software license, and books, office, incentives/'swag', meeting supplies, presentation materials, printing, and other.		\$ 6,013
	To	otal General Operating:	\$ 6,013

Consultants/Subcontractors:

Consult/Subcontractor Name	·	Rate/Formula	Cost
Community Engagement Consultants - TBD	Program, evaluation, fund development and other consultants: Hourly rate to be based on experience and duties. Work to support the development, implementation, monitoring and evaluation of various capacity building projects and services. Includes consultants for Chronic Disease Prevention, Healthy Retail SF, Ped Safety/Active Transportation and other work related towards healthier communities. Consultants and rate to be determined as identified.		\$ 106,700
Raimi and Associates	Program evaluation services for Safe Routes to School and related services.		\$ 40,000
CARECEN Violence Prev Groups	To provide violence prevention support groups and related activities for girls and young women.		\$ 39,460
Rebuilding Together San Francisco	Supplies and labor costs associated with minor home repairs in seniors' and disabled persons' private residences as referred by DPH CHIPPS staff and associates.		\$ 70,000
Walk SF Foundation - Families for Safe Streets	Families for Safe Streets (FSS) organizes and assists a group of people who have lost loved ones or been victims in traffic collisions; these individuals support the implementation of Vision Zero in San Francisco to prevent future crashes from happening.		\$ 99,794
Walk SF Foundation - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880
Senior and Disability Action - Safe Streets for Seniors	Citywide subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 40,880
Chinatown Community Development Center - Safe Streets for Seniors	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.		\$ 20,440

Curry Senior Center - Safe	Neighborhood subcontract for work to support the community based education of Vision Zero projects and		
Streets for Seniors	services for senior and disabled communities.	\$	20,440
Visually Impaired - Safe	Neighborhood subcontract for work to support the community based education of Vision Zero projects and		
Streets for Seniors	services for senior and disabled communities.	\$	20,440
Portola Family Center - Safe	Neighborhood subcontract for work to support the community based education of Vision Zero projects and services for senior and disabled communities.	Φ.	00.440
		\$	20,440
Benefit District - Safe	Neighborhood subcontract for work to support the community based education of Vision Zero projects and		
Streets for Seniors	services for senior and disabled communities.	\$	20,440
Walk SF Foundation - D5	Community-based subcontract for pedestrian safety outreach		
Pedestrian Safety Outreach	in District 5.	\$	13,514

Total Consultants/Subcontractors: \$ 553,428

TOTAL OPERATING EXPENSES: \$ 559,441

TOTAL DIRECT COSTS: \$ 559,441

# 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

# **Amount**

Finance Manager, Accounting Assistant, Executive Director, Program Coordinator, rent, audit, supplies.	\$ 55,942

Indirect Rate: 10.00%

TOTAL INDIRECT COSTS: \$ 55,942

TOTAL EXPENSES: \$ 615,383

Contractor: San Francisco Public Health Foundation Appendix: B-2

Program: Community Health Engagement Appendix Term: 2/1/2020-6/31/2020

General Fund-HIV

Funding Source: Prevention

#### **UOS COST ALLOCATION BY SERVICE MODE**

		003 0031	ALLUCA	ALION DI SE	ERVICE	WODE				
Sen	vice Modes:	Progr Adminis								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.41	8,033	100%		0%		0%		0%	8,033
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	0.41	8,033	100%	-	0%	-	0%	-	0%	8,033
Fringe Benefits	17.89%	1,437	100%	-	0%	-	0%	_	0%	1,437
Personnel Expenses		9,470	100%		0%	-	0%	-	0%	9,470
Total Direct Expenses		9,470	100%	-	0%	-	0%	-	0%	9,470
Indirect Expenses	10.00%	947	100%	-	0%	-	0%	-	0%	947
TOTAL EXPENSES		10,417	100%	-	0%	-	0%	-	0%	10,417
Unit of \$	Service Type	Hour	Hours		0		0			
Number of UOS per Service Mode		234					Ĭ			234
Cost Per UOS by S	Service Mode	\$44.5	2	\$0.00		\$0.00		\$0.00		N/A
umber of UDC/NOC per Service Mode		N/A								
										Rev: 02/18

## **BUDGET JUSTIFICATION**

Contractor Name	San Francisco Publi	c Health Foundati	ion	Appendix:	B-2	
Program Name:	Community Health E	ingagement		Appendix Term:	02/01/202	0-6/30/2020
				Funding Source:	General Fund-HIV Prevent	ion
1a) SALARIES						
	End Hep C SF Project					
Brief duties related to this program and clients served		, communications a	and events for and be	etween coalition members	S.	
Degree, license (if applicable), experience	Bachelors degree, two	years community	health education exp	erience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	To	otal
	71,400	0.2744	5	0.41	\$8,033	
	Total FTE, Base:	0.2744	Annualized:	0.41		
1b) EMPLOYEE FRINGE BENE	EFITS:			Total Salaries:	\$	8,033
			Component		Cost	
			Social Security	\$		614.52
			Retirement	\$		321.32
			Medical	\$		400.00
			Dental	\$		50.00
		Unem	nployment Insurance	\$		51.00
				Total Fringe Benefit:	\$	1,437
				Fringe Benefit %:		17.89%
	[	TOTAL SAI	LARIES & EMPLOY	EE FRINGE BENEFITS:	\$	9,470
			Т	OTAL DIRECT COSTS:	\$	9,470
4) INDIRECT COSTS						
Please list here the personnel an	d ledger expenses tha	it are included in yo	our shared costs?		Amo	ount
Finance Manager, Accounting As	ssistant, rent, audit, sur	pplies.			\$	947
				Indirect Rate:		10.00%
			T01	AL INDIRECT COSTS:	\$	947
			ı	TOTAL EXPENSES:	\$	10 417

Contractor: San Francisco Public Health Foundation

Appendix:

B-2a

Program: Community Health Engagement

Appendix Term: 07/01/2020-6/30/2021

Funding Source: General Fund-HIV Prev

# **UOS COST ALLOCATION BY SERVICE MODE**

Ser	vice Modes:	Progr Adminis								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
SF Project Coordinator	0.25	18,386	100%		0%	-	0%		0%	18,386
Total FTE & Salaries	0.25	18,386	100%	-	0%	-	0%	-	0%	18,386
Fringe Benefits	23.61%	4,341	100%	-	0%	-	0%	-	0%	4,341
Personnel Expenses		22,727	100%		0%		0%	-	0%	22,727
Total Direct Expenses	6	22,727	100%	-	0%	-	0%	_	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of	Service Type	Hour	s	0		0		0		
Number of UOS per										536
Cost Per UOS by	Service Mode			\$0.00		\$0.00		\$0.00		N/A
lumber of UDC/NOC per	Service Mode	N/A								

		BODGET JO	STIFICATION		
Contractor Name	San Francisco Public	Health Foundati	on	Appendix	: В-2а
Program Name:	Community Health En	gagement		Appendix Term	07/01/2020-6/30/2021
1a) SALARIES				Funding Source.	General Fund-HIV Prevention
0. KD III	I				
	End Hep C SF Project			190	
Brief duties related to this program and clients served	1	communications a	and events for and be	tween coalition members	·
Degree, license (if applicable), experience	Bachelors degree, two y	ears community	health education expe	erience.	
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	73,542	0.25	12	0.25	\$18,386
	Total FTE, Base:	0.25	Annualized:	0.25	
1b) EMPLOYEE FRINGE BENE				Total Salaries:	,
(Components provided below are	e samples only. The bud T	getea component	S should reflect the component		rs.) Cost
			Social Security		1,406.53
			Retirement		919.30
			Medical		1,457.00
			Dental		250.00
		Linem	nployment Insurance		308.00
		Official	Disability Insurance		300.00
			Paid Time Off		
				\$	
	I		Guier (opcony),	Total Fringe Benefit:	\$ 4,341
				Fringe Benefit %:	23.61%
	Γ	TOTAL SA	LARIES & EMPLOYI	E FRINGE BENEFITS:	\$ 22,727
2) OPERATING EXPENSES:			TOTAL OF	ERATING EXPENSES:	\$ -
					<u> </u>
			T	OTAL DIRECT COSTS:	\$ 22,727
) INDIRECT COSTS					
Please list here the personnel an	d ledger expenses that	are included in yo	our shared costs?		Amount
inance Manager, Accounting As	sistant, rent, audit, supp	lies.			\$ 2,273
				Indirect Rate:	10.00%
		[	тот	AL INDIRECT COSTS:	
nnendix R-2a			Γ	TOTAL EXPENSES:	\$ 25,000

Contractor:San Francisco Public Health FoundationAppendix:B-2bProgram:Community Health EngagementAppendix Term:7/1/2021-6/30/2022

Funding Source: GF HIV Prevention

### UOS COST ALLOCATION BY SERVICE MODE

Serv	vice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	18,386	100%		0%	-	0%		0%	18,386
Total FTE & Salaries	0.25	18,386	100%	-	0%	-	0%		0%	18,386
Fringe Benefits	23.61%	4,341	100%	-	0%	_	0%	-	0%	4,341
Personnel Expenses		22,727	100%	-	0%		0%		0%	22,727
Total Direct Expenses		22,727	100%	-	0%	-	0%	_	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	_	0%	2,273
TOTAL EXPENSES		25,000	100%		0%	-	0%		0%	25,000
Unit of S	Service Type	Hour	S	0		0		0		
Number of UOS per S	Service Mode	536					**			536
Cost Per UOS by Service Mode		\$46.6	5	\$0.00		\$0.00	)	\$0.00		N/A
umber of UDC/NOC per	Service Mode	N/A								
										Rev: 02/18

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		BUDGET JUSTII	FICATION			
Contractor Name	SF Public Health Fou	undation		Appendix:	B-2i	1
	Community Health E			50		1/2021-6/30/2022
				Funding Source:		
1a) SALARIES						
Staff Position 1	End Hep C SF Project	t Coordinator				
Brief duties related to this program and clients served		, communications a	and events for and be	etween coalition member	S.	
Degree, license (if applicable), experience	Bachelors degree, two	years community I	nealth education exp	perience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.25	12	0.25	\$	18,386
	Total FTE, Base:	0.25	Annualized:	0.25		
b) EMPLOYEE FRINGE BENE	FITS:			Total Salaries:	\$	18,386
Components provided below ar	e samples only. The bu	udgeted componen				
			Component	Cos	t	
			Social Security			1,406.53
			Retirement			919.30
			Medical	<u> </u>		1,457.00
			Dental			250.00
			oloyment Insurance			308.00
			Disability Insurance			-
			Paid Time Off			-
			Other (specify):			-
				Total Fringe Benefit:	\$	4,341
				Fringe Benefit %:		23.61%
	[	TOTAL SAL	ARIES & EMPLOYE	EE FRINGE BENEFITS:	\$	22,727
		Ĺ	T	OTAL DIRECT COSTS:	\$	22,727
) INDIRECT COSTS lease list here the personnel ar	nd ledger expenses that	at are included in yo	our shared costs?			
						Amount
inance Manager, Accounting A	ssistant, rent, audit, sur	oplies.			\$	2,273
				Indirect Rate:		10.00%

2

Appendix B-2b 01/01/2020

TOTAL INDIRECT COSTS: \$

2,273

Contractor:San Francisco Public Health FoundationAppendix:B-2cProgram:Community Health EngagementAppendix Term:07/01/2022-06/30/2023Funding Source:GF-HIV Prevention

### **UOS COST ALLOCATION BY SERVICE MODE**

Sen	vice Modes:	Progr Adminis									
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals	
End Hep C SF Project Coordir	0.25	18,386	100%		0%	-	0%		0%		18,386
Total FTE & Salaries	0.25	18,386	100%		0%		0%		0%		18,386
Fringe Benefits	23.61%	4,341	100%	-	0%	-	0%	-	0%		4,341
Total Personnel Expenses		22,727	100%		0%		0%		0%		22,727
Total Direct Expenses		22,727	100%	-	0%	-	0%	-	0%		22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%		2,273
TOTAL EXPENSES		25,000	100%	-	0%		. 0%		0%		25,000
Unit of S	Service Type	Hou	s	0		0		0			
Number of UOS per S	Service Mode	536								536	
Cost Per UOS by Service Mode		\$46.65		\$0.00		\$0.00		\$0.00		N/A	13
Number of UDC/NOC per	Service Mode	N/A									
										F	Rev: 02/1

		BUDGET JUSTI	FICATION			
Contractor Name	SF Public Health Fou	Indation		Appendix	: B-2	С
Program Name:	Community Health E	ngagement			_	1/2022-06/30/202
				Funding Source:	-	
1a) SALARIES						
Staff Position 1	End Hep C SF Projec	t Coordinator				
Brief duties related to this program and clients served		communications a	and events for and b	etween coalition member	S.	
Degree, license (if applicable),	Bachelors degree, two	vears community	health education ovr	oorionco		
охрененое	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.25	12	0.25	\$	18,386
		VV		0120		10,000
	Total FTE, Base:	0.25	Annualized:	0.25		
1b) EMPLOYEE FRINGE BENE	ELITO.			Total Salaries:	¢	10 200
Components provided below a		idaeted componen	ts should reflect the			18,386
Components provided below an	C dampies only. The bu	agetea componen	Component			
			Social Security			1,406.53
			Retirement			919.30
			Medical			1,457.00
			Dental	<u> </u>		250.00
		Unem	ployment Insurance			308.00
			Disability Insurance			-
			Paid Time Off			_
			Other (specify):			-
			(1 //	Total Fringe Benefit:	\$	4,341
				Fringe Benefit %:		23.61%
		TOTAL SAL	ARIES & EMPLOY!	EE FRINGE BENEFITS:	\$	22,727
		Ī	T	OTAL DIRECT COSTS:	\$	22,727
) INDIRECT COSTS		-				
Please list here the personnel ar	nd ledger expenses tha	t are included in ye	our shared costs?			Amount
inance Manager, Accounting A	ssistant. rent. audit. sup	pplies.			\$	2,273
3 - 1, 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	, ,	1			-	
				Indirect Rate:		10.00%
		Γ	ТОТ	AL INDIRECT COSTS:	\$	2,273

2

TOTAL EXPENSES: \$

25,000

Contractor: San Francisco Public Health Foundation

**Program: Community Health Engagement** 

Appendix:

B-2d

Appendix Term: 07/01/2023-6/30/2024

Funding Source: GF-HIV Prevention

### **UOS COST ALLOCATION BY SERVICE MODE**

Ser	vice Modes:	Progr Adminis								
Desition Titles	Annualized FTE	Calarias	0/ 575	Calasias	0/ 575	Calarias	0/ 575	0-1	0, ETE	Totala
Position Titles	FIE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	18,386	100%		0%	-	0%		0%	18,386
Total FTE & Salaries	0.25	18,386	100%		0%		0%		0%	18,386
Fringe Benefits	23.61%	4,341	100%	-	0%	-	0%	-	0%	4,341
Personnel Expenses		22,727	100%		0%		0%		0%	22,727
Total Divert Evenence		22 727	1000/		00/		00/		00/	00.707
Total Direct Expenses		22,727	100%	_	0%		0%	-	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%		0%	-	0%	25,000
Unit of	Service Type	Hour	s	0		0		0		
Number of UOS per	Service Mode	536							Ï	536
Cost Per UOS by	Service Mode	<b>\$</b> 46.6	5	\$0.00		\$0.00	)	\$0.0	0	N/A
lumber of UDC/NOC per	Service Mode	N/A								

### **BUDGET JUSTIFICATION**

		<u> </u>	<u> </u>			
Contractor Name	San Francisco Public	Health Foundation	on	Appendix:	B-2d	
Program Name:	Community Health En	gagement		Appendix Term:	07/	/01/2023-6/30/2024
1a) SALABIES				Funding Source:	Genera	al Fund-HIV Preventior
1a) SALARIES						
	End Hep C SF Project					
Brief duties related to this program and clients served		communications a	ind events for and be	etween coalition members	i.	
Degree, license (if applicable), experience	Bachelors degree, two y	ears community l	nealth education exp	erience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.25	12	0.25	\$	18,386
	Total FTE, Base:	0.25	Annualized:	0.25		
1b) EMPLOYEE FRINGE BENE (Components provided below ar		geted component	e should reflect the	Total Salaries:	•	18,386
Components provided below at	e samples only. The bud	geted component	Component		Cost	
			Social Security		7001	1,406.53
			Retirement			919.30
			Medical	\$		1,457.00
			Dental	\$		250.00
		Unem	ployment Insurance	\$		308.00
			Disability Insurance			-
			Paid Time Off			
			Other (specify):		_	
				Total Fringe Benefit:	\$	4,341
				Fringe Benefit %:		23.61%
		TOTAL SAL	ARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
		[	Т	OTAL DIRECT COSTS:	\$	22,727
I) INDIRECT COSTS Please list here the personnel ar	nd ledger expenses that	are included in yo	our shared costs?			Amount
Finance Manager, Accounting As	ssistant rent audit sunr	lies		T	\$	Amount 2,273
manager, Accounting A	solution, rom, addit, supp				Ψ	2,213
				Indian of Bar		40.0004
		r	TO	Indirect Rate:  FAL INDIRECT COSTS:	•	10.00% 2,273
			101	THE INDIRECT COSTS.	Ψ	2,213

25,000

TOTAL EXPENSES: \$

Contractor: San Francisco Public Health Foundation Appendix: B-3

Program: Community Health Engagement Appendix Term: 2/1/2020-12/31/2020

Funding Source: Grant - CDC

### **UOS COST ALLOCATION BY SERVICE MODE**

Serv	ice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.25	17,850	100%		0%	-	0%		0%	17,850
Total FTE & Salaries	0.25	17,850	100%		0%	-	0%	-	0%	17,850
Fringe Benefits	16.71%	2,983	100%		0%	-	0%	-	0%	2,983
Personnel Expenses		20,833	100%		0%		0%	-	0%	20,833
Total Direct Expenses		20,833	100%	-	0%	-	0%	-	0%	20,833
Indirect Expenses	10.00%	2,084	100%	-	0%	-	0%	-	0%	2,084
TOTAL EXPENSES		22,917	100%	-	0%	-	0%	-	0%	22,917
Unit of S	ervice Type	Hour	s	0		0		0		
Number of UOS per S	Service Mode	520					Î			520
Cost Per UOS by Service Mode		\$44.0	\$44.08		\$0.00		)	\$0.00		N/A
umber of UDC/NOC per s	Service Mode	N/A								
										Rev: 02/18

### **BUDGET JUSTIFICATION**

Contractor Name | San Francisco Public Health Foundation | Appendix | B-3 |
Program Name: | Community Health Engagement | Appendix Term: | 02/01/2020-12/31/2020 |
Funding Source: | Grant CDC

### 1a) SALARIES

Staff Position 1	End Hep C SF Project	t Coordinator				
Brief duties related to this program and clients served		, communications a	and events for and be	etween coalition members	S.	
Degree, license (if applicable),	•					
experience	Bachelors degree, two	years community	health education exp	erience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	71,400	0.60	5	0.25	\$	17,850

Total FTE, Base: 0.60 Annualized: 0.25

### 1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost
Social Security	\$ 1,365.53
Retirement	\$ 856.80
Medical	\$ 511.00
Dental	\$ 100.00
Unemployment Insurance	\$ 150.00

Total Fringe Benefit: \$ 2,983

Total Salaries: \$

Fringe Benefit %: 16.71%

17,850

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: \$ 20,833

TOTAL OPERATING EXPENSES: \$ -

TOTAL DIRECT COSTS: \$ 20,833

### 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

	Amount	
Finance Manager, Accounting Assistant, rent, audit, supplies.	\$ 2,0	)84

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: \$ 2,084

TOTAL EXPENSES: \$ 22,917

Amount

Contractor: SF Public Health Foundation

Program: Community Health Engagement

Appendix:

B-3a

Appendix Term: 01/01/2021-12/31/2021

Funding Source:

01/2021-12/31/20 Grant - CDC

### **UOS COST ALLOCATION BY SERVICE MODE**

Serv	rice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.26477	19,472	100%		0%	-	0%		0%	19,472
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	0.26477	19,472	100%		0%		0%		0%	19,472
Fringe Benefits	16.72%	3,255	100%	-	0%	-	0%	-	0%	3,255
Personnel Expenses		22,727	100%	-	0%		0%		0%	22,727
Total Direct Expenses	s	22,727	100%	-	0%	-	0%	_	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of S	ervice Type	Hour	s	0		0		0		1
Number of UOS per S	Service Mode	567							Ï	567
Cost Per UOS by S	Service Mode	\$44.1	0	\$0.00	)	\$0.00	0	\$0.00	0	N/A
umber of UDC/NOC per	Service Mode	N/A								

		RODGET JUSTI	FICATION			
Contractor Name	SF Public Health For	undation		Appendix	B-3	a
Program Name:	Community Health E	ingagement		Appendix Term:		/01/2021-12/31/2021
- 1				Funding Source:		
1a) SALARIES				ŭ		
Staff Position 1	End Hep C SF Project					
Brief duties related to this program and clients served		, communications	and events for and b	etween coalition member	S.	
Degree, license (if applicable), experience	Bachelors degree, two	years community	health education exp	perience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.26477	12	0.26477	\$	19,472
	Total FTE, Base:	0.26477	Annualized:	0.26477		
1b) EMPLOYEE FRINGE BENE	FITS:			Total Salaries:	\$	19,472
(Components provided below ar	e samples only. The bu	udgeted componer	nts should reflect the	contractor's ledger accou	ints.)	•
			Component	Cost		
			Social Security	\$		1,490.00
			Retirement	\$		934.66
			Medical	\$		557.43
			Dental	\$		109.09
		Unem	ployment Insurance	\$		163.63
			Disability Insurance	\$		-
			Paid Time Off	\$		-
			Other (specify):	\$		-
				Total Fringe Benefit:	\$	3,255
				Fringe Benefit %:		16.72%
	Į.	TOTAL SAI	LARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
			T	OTAL DIRECT COSTS:	\$	22,727
I) INDIRECT COSTS		·				
Please list here the personnel ar	id ledger expenses tha	at are included in y	our shared costs?			Amount
Finance Manager, Accounting As		oplies.			\$	2,273
<u> </u>		- 1			_	2,210
		02		Indirect Rate:		10.00%
			TOT	TAL INDIRECT COSTS:	\$	2,273

Appendix B-3a 01/01/2020

25,000

TOTAL EXPENSES: \$

Contractor: SF Public Health Foundation Appendix: B-3b

Program: Community Health Engagement Appendix Term: 1/1/2022-12/31/2022

Funding Source: Grant - CDC

### UOS COST ALLOCATION BY SERVICE MODE

Serv	ice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.26477	19,472	100%		0%	-	0%		0%	19,472
0	0.00		0%		0%		0%		0%	
Total FTE & Salaries	0.26477	19,472	100%	_	0%	-	0%	-	0%	19,472
Fringe Benefits	16.72%	3,255	100%	_	0%	-	0%	-	0%	3,255
Personnel Expenses		22,727	100%	•	0%		0%	-	0%	22,727
Total Direct Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Indirect Expenses	10.00%	2,273	100%	-	0%	_	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,000
Unit of S	ervice Type	Hour	s	0		0		0		
Number of UOS per S	ervice Mode	567			Ĭ					567
Cost Per UOS by S	ervice Mode	\$44.1	0	\$0.00	)	\$0.00	0	\$0.00	)	N/A
mber of UDC/NOC per S	Service Mode	N/A								

1

		BUDGET JUSTIFI	CATION			
Contractor Name	SF Public Health Fou	ındation		Appendix	. B-3	lh
	Community Health E			- Appendix Term		
				Funding Source	_	
1a) SALARIES				<b>J</b>		
Staff Position 1	End Hep C SF Project	t Coordinator				
Brief duties related to this program and clients served	_	, communications a	nd events for and be	etween coalition member	S.	
Degree, license (if applicable), experience	Bachelors degree, two	years community h	ealth education exp	erience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.26477	12	0.26477	\$	19,472
	Total FTE, Base:	0.26477	Annualized:	0.26477		
<b>1b) EMPLOYEE FRINGE BENE</b> (Components provided below ar		idgeted components				19,472
			Component			
			Social Security			1,490.00
			Retirement			934.66
			Medical			557.43
			Dental			109.09
			oloyment Insurance			163.63
			Disability Insurance			-
			Paid Time Off			-
			Other (specify):	\$ Total Fringe Benefit:	\$	3,255
				_	Ψ	
	_			Fringe Benefit %:		16.72%
		TOTAL SAL	ARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
		_		OTAL DIDECT COCTO.		00.707
I) INDIRECT COSTS		L	I	OTAL DIRECT COSTS:	<del>-</del>	22,727
Please list here the personnel an	nd ledger expenses tha	at are included in vo	ur shared costs?			
	g-: -:.p-::					Amount
inance Manager, Accounting As	ssistant, rent, audit, sup	pplies.			\$	2,273

TOTAL EXPENSES: \$ 25,000

Contractor: SF Public Health Foundation

Program: Community Health Engagement

Appendix: B-3c

Appendix Term: 1/1/2023-12/31/2023

Funding Source: Grant -CDC

UOS COST ALLOCATION BY SERVICE MODE

Sen	vice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.26477	19,472	100%		0%	-	0%		0%	19,472
0	0.00		0%		0%		0%		0%	-
Total FTE & Salaries	0.26477	19,472	100%	_	0%	-	0%	-	0%	19,472
Fringe Benefits	16.72%	3,255	100%	-	0%	-	0%	-	0%	3,255
Personnel Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Total Direct Expenses		22,727	100%	-	0%	-	0%	-	0%	22,727
Indirect Expenses	10.00%	2,273	100%	_	0%	-	0%	-	0%	2,273
TOTAL EXPENSES		25,000	100%		0%	-	0%		0%	25,000
Unit of S	Service Type	Hour	s	0		0		0		
Number of UOS per S	Service Mode	567								567
Cost Per UOS by S	Service Mode	\$44.1	0	\$0.00		\$0.00	)	\$0.0	0	N/A
umber of UDC/NOC per	Service Mode	N/A								
										Rev: 02/18

		<b>BUDGET JUST</b>	IFICATION			
Contractor Name	SF Public Health For	undation		Appendix	B-3	dc.
	Community Health E			-		1/2023-12/31/202
<b> </b>		9.9		Funding Source:		
1a) SALARIES				. unung course	-0.0	
Staff Position 1	End Hep C SF Project	ct Coordinator				
Brief duties related to this program and clients served		, communications	and events for and bo	etween coalition member	S.	
Degree, license (if applicable), experience	Bachelors degree, two	years community	health education exp	perience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.26477	12	0.26477	\$	19,472
	Total FTE, Base:	0.26477	Annualized:	0.26477		
1b) EMPLOYEE FRINGE BENE	FITS:			Total Salaries:	\$	19,472
(Components provided below ar	e samples only. The b	udgeted componer	nts should reflect the	contractor's ledger accou	nts.)	
			Component	Cos	t	
			Social Security	\$		1,490.00
			Retirement	\$		934.66
			Medical	\$		557.43
			Dental	\$		109.09
		Unen	nployment Insurance	\$		163.63
			Disability Insurance	\$		-
			Paid Time Off	\$		-
			Other (specify):	\$		-
				Total Fringe Benefit:	\$	3,255
				Fringe Benefit %:		16.72%
		TOTAL SA	LARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
			Ī	OTAL DIRECT COSTS:	\$	22,727
INDIRECT COSTS  Please list here the personnel an	d ledger expenses tha	at are included in y	our shared costs?			Amount
Finance Manager, Accounting As	ssistant, rent, audit, su	pplies.			\$	2,273
				Indirect Rate:		10.00%
			TO	TAL INDIRECT COSTS:	\$	2,273

2

Appendix B-3c 01/01/2020

Contractor: San Francisco Public Health Foundation

Program: Community Health Engagement

Appendix: B-3d

Appendix Term: 1/1/2024-12/31/2024

Funding Source: Grant - CDC

UOS COST ALLOCATION BY SERVICE MODE

Serv	ice Modes:	Progr Administ								
Position Titles	Annualized FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
End Hep C SF Project	0.26477	19,472	100%		0%	-	0%		0%	19,4
0	0.00		0%		0%		0%		0%	
Total FTE & Salaries	0.26477	19,472	100%	-	0%	-	0%		0%	19,4
Fringe Benefits	16.72%	3,255	100%	-	0%	-	0%	-	0%	3,2
Personnel Expenses		22,727	100%	-	0%		0%		0%	22,7
Total Direct Expenses		22,727	100%	-	0%	-	0%	-	0%	22,7
Indirect Expenses	10.00%	2,273	100%		0%		0%		0%	2,2
TOTAL EXPENSES		25,000	100%	-	0%	-	0%	-	0%	25,0
Unit of S	ervice Type	Hour	s	0		0		0		
Number of UOS per S	ervice Mode	567								567
Cost Per UOS by Se	ervice Mode	\$44.1	0	\$0.00		\$0.00	0	\$0.00		N/A

		BUDGET JUSTII	FICATION			
Contractor Name	SF Public Health Fou	ındation		Appendix	· B-3	1
Program Name:			- 1/2024-12/31/202			
				Funding Source		
1a) SALARIES				r anding course	Oral	1-000
Staff Position 1	End Hep C SF Projec	t Coordinator				
Brief duties related to this program			nd events for and be	etween coalition member	 S.	
and clients served						
Degree, license (if applicable), experience	Bachelors degree, two	years community h	nealth education exp	erience.		
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo		Total
	73,542	0.26477	12	0.26477	\$	19,472
	Total FTE, Base:	0.26477	Annualized:	0.26477		
1b) EMPLOYEE FRINGE BENE	FITS:			Total Salaries:	\$	19,472
(Components provided below ar	e samples only. The bu	dgeted component	s should reflect the	contractor's ledger accou	nts.)	
			Component			
			Social Security	\$		1,490.00
			Retirement	\$		934.66
			Medical	\$		557.43
			Dental	\$		109.09
		Unem	oloyment Insurance	\$		163.63
			Disability Insurance			-
			Paid Time Off	\$		-
			Other (specify):	\$		-
				Total Fringe Benefit:	\$	3,255
	_			Fringe Benefit %:		16.72%
	L	TOTAL SAL	ARIES & EMPLOY	EE FRINGE BENEFITS:	\$	22,727
		1	Ţ	OTAL DIRECT COSTS:	\$	22,727
) INDIRECT COSTS						
Please list here the personnel an	d ledger expenses tha	t are included in yo	ur shared costs?			Amount
inance Manager, Accounting As	ssistant, rent, audit, sup	plies.			\$	2,273
		F30.			*	2,210
				Indirect Rate:		10.00%
		Γ	TOT	AL INDIRECT COSTS:	\$	2,273

2

Appendix B-3d 01/01/2020

25,000

### Appendix C Insurance Waiver Reserved

### Appendix D Grant Terms Reserved



### 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).
- 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").
- 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.
- Ε. 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:



### San Francisco Department of Public Health

### **Business Associate Agreement**

### 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 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



### San Francisco Department of Public Health Business Associate Agreement

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.
- 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



### San Francisco Department of Public Health Business Associate Agreement

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 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

4 | Page



### San Francisco Department of Public Health Business Associate Agreement

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 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



### San Francisco Department of Public Health Business Associate Agreement

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 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



### San Francisco Department of Public Health Business Associate Agreement

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 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





### San Francisco Department of Public Health

### **Business Associate Agreement**

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 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.
- **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



### San Francisco Department of Public Health Business Associate Agreement

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 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

Office of Compliance and Privacy Affairs
San Francisco Department of Public Health
101 Grove Street, Room 330, San Francisco, CA 94102

Email: <a href="mailto:compliance.privacy@sfdph.org">compliance.privacy@sfdph.org</a> Hotline (Toll-Free): 1-855-729-6040

	Contractor City Vendor ID
CTO Name:	Contractor

## PRIVACY ATTESTATION

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 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 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	Vac	*
A	Have formal Privacy Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?	3	2
В			
	If Name & Phone #		
U	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.]		
	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.]		
ш	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SEDPH's		
	health information?		
ч	Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisorial authorization to do so		
	AND that health information is only transferred or created on encrypted devices approved by SFDPH Information Security staff?		

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

If Applicable: DOFS YOUR ORGANIZATION

	II Applicable: DOES TOOK ORGANIZATION	Yes	*cZ	
9	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	3		
	SFDPH health information record systems within 2 business days for regular terminations and within 24 hours for terminations due to cause?			
I	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 SEDPH)			
_	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?			,
_	Document each disclosure of a patient's/client's health information for purposes other than 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.

	***************************************
	Signature
er Name:	on (print)
ATTESTED by Privacy Officer	or designated persor

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 he review

ers must be reviewed and approved by OCPA below.		Signature
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INCOME TO BE TO THE PROPERTY OF THE PROPERTY O	OVED Name	by OCPA (print)
	EXCEPTION(S) APPROVED Name	by (

	je:		Contractor
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# DATA SECURITY ATTESTATION

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 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 to do so by SFDPH.

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.

## 1. All Contractors.

ָ :	- All Collidations			
2	DOES YOUR ORGANIZATION	Vec	*	_
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]	2	2	
В	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	1		
	Assessment/Audit and/or authored the final report:			
O	Have a formal Data Security Awareness Program?			
۵	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)?			
ш	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?			T
	If Name & Phone #	1		
ш	Require Data Security Training upon hire and annually thereafter for all employees who have access to health information? (Retain documentation of			T
	trainings for a period of 7 years.] [SFDPH data security training materials are available for use; contact OCPA at 1-855-729-6040.]			
ŋ	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.]			Ī
I	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit or acress SEDBH's			I
	health information?			
_	Have (or will have if/when applicable) a diagram of how SFDPH data flows between your organization and subcontractors or vendors (including named			I
	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.

		Signature	
ALIEDIED by Data Security	Officer or designated person (print)		

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 (print) Signature
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APPENDIX F-1 01/01/2020 - 06/30/2020 PAGE A

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General Oper	ating-(e.g., Insurance, Staff					_	_				
	ent Rental/Maintenance)										
Staff Travel -	(e.g., Local & Out of Town)										
Consultant/S	ubcontractor	\$35,4	55							\$35,45	55.00
		4001								Ψ00,10	0.00
	Audit, Transportation Reimb,										
Stipends, Facilitat	ors)										
Total Operatin	g Expenses	\$35,4	-55		_		-		-	\$35,45	5.00
Capital Expen		22011								900,40	
TOTAL DIRECT		\$35,4								\$35,45	5.00
Indirect Expen		\$3,54								\$3,54	
TOTAL EXPENS		\$39,0	00			NOTE:				\$39,00	0.00
	ayment Recovery nents (Enter as negative, if appropri	rioto			_	NOTES:					
REIMBURSEME		late	- 1								
accordance with the t	nation provided above is, to the best oudget approved for the contract cite ms are maintained in our office at the Signature:	ed for service e address ind	es provided dicated.	under the	provision				n and back		
									5		
1:	FDPH Fiscal / Invoice Processir 380 Howard Street, 4th Floor, S	•									
	an Francisco, CA 94103 ttn: Contract Payments		By: _	DPH Aut	norized	Signatory)			Date:_		-

APPENDIX F-1 01/01/2020 - 06/30/2020 PAGE B

							PAGE
						Inve	oice Number
	San Francisco			ation		Α	-1JAN20
Address:	1 Hallidie Plaza	•		•			
	San Francisco	, CA 9	4102	Contract	Purchase Order No:		
Telephone:	415-504-6738				Fund Source:	Ge	neral Fund
Fax:							
				Departn	nent ID-Authority ID:		
Program Name:	Community He	aith Er	igagement	р	roject ID-Activity ID:		
ACE Control #:				7 -	roject ib-Activity ib:		
					Invoice Period:	01/1/2	20 - 01/31/20
					FINAL Invoice		(check if Yes)
DETAIL PERSON	NEI EYDENDI	TUDE	c				
DETAIL PERSON	NEL EXPEND	IUKE	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL		FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
		-					
		_					
		$\rightarrow$					
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TOTAL SALARIES		$\rightarrow$					
I certify that the information							
accordance with the budget					of that contract. Full justi	fication and b	packup
records for those claims are	e maintained in our of	rice at the	e adoress indicated.	•			
Certified By:				Date:			
Title:_							

APPENDIX F-1a 07/01/2020 - 06/30/2021 PAGE A

Contractor: San Francisco Public Healt Address: 1 Hallidie Plaza, Suite 808	h Found		act ID # 016941					Ir	voice Nun A-1JUL2	
San Francisco, CA 94102				Co	ntract Pui	rchase (	Order No:			
Telephone: 415-504-6738		1				Funding	Source:	G	eneral F	und
Fax:		CH	EP	n	epartmen				enerari	unu
Program Name: Community Health Engager	ment									
ACE Control #:					Proje	ect ID-A	ctivity ID:			
						Invoic	e Period:	07/1	/20 - 07/	31/20
						FINA	L Invoice		(check if	f Yes)
DELIVERABLES		TAL RACTED NOC	DELIVI THIS PI UOS		DELIV TO D UOS			OF TAL NOC		AINING RABLES NOC
Community Health Engagement - Program Admi	12	1			I				12	1
Community Home Injury Prevention - Program A	12	1							12	1
Violence Prevention - Program Administration Vision Zero - Program Administration	12 96	7			-				12	1
vision zero - Program Administration	90	-		_	1				96	7
Number of Clinia for Association		NOC	-	NOC		NOC		NOC		NOC
Number of Clients for Appendix		10		_				_	L	10
EXPENDITURES	BUE	GET	EXPEN THIS PE		EXPEI TO D			OF GET		AINING ANCE
Total Salaries (See Page B)										
Fringe Benefits										
Total Personnel Expenses Operating Expenses:				_						
Occupancy-(e.g., Rental of Property, Utilities,				_	1			_		-
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
Conord Operating to the second Staff	- CC (	142				_			00.04	
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$6,0	713			-				\$6,01	3.00
rraining, Equipment Rental/Maintenance)					-					
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$553	,428							\$553,4	28.00
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses	\$559	,441							\$559,4	41.00
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$559, \$55,9								\$559,4	
Indirect Expenses TOTAL EXPENSES	\$615,					_			\$55,94 \$615,3	
LESS: Initial Payment Recovery		,,,,,,			NOTES:				Ψ010,0	00.00
Other Adjustments (Enter as negative, if appropri	iate)				12/9/2001 (S-12/17)					
REIMBURSEMENT										
certify that the information provided above is, to the best	of my lead	uladaa aar-	nlete and -	Ournts.	the amaiiri	FOO! IO - 1 -	d for solve!	umana a a d	o in	
accordance with the budget approved for the contract cites										
ecords for those claims are maintained in our office at the	address ir	ndicated.	p			1 40	,		-4h	
Signature: _								Date:		
Title:										
Send to: SFDPH Fiscal / Invoice Processin	na									
1380 Howard Street, 4th Floor, St	-									- 1
San Francisco, CA 94103		Ву:						Date:		
Attn: Contract Payments			DPH Auth	orized	Signatory)					

APPENDIX F-1a 07/01/2020 - 06/30/2021 PAGE B

Contractor: 5						Invo	oice Number
	San Francisco F			tion	]		-1JUL20
	1 Hallidie Plaza, San Francisco,			Contract I	ourchase Order No:		
		07. 04	102	oominati i			
Telephone: 4 Fax:	115-504-6738				Fund Source:	Ger	neral Fund
		=		Departm	ent ID-Authority ID:		
Program Name: C	Jommunity Hea	ilth En	gagement	Pr	oject ID-Activity ID:		
ACE Control #:				]		07/4/0	0 07/04/00
					Invoice Period:	07/1/2	0 - 07/31/20
					FINAL Invoice		(check if Yes)
DETAIL PERSONN	EL EXPENDIT	URES		EVDENDED	EVENERO	- N 05	
PERSONNEL		FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
		-					
		-					
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		-					
		-					
		=					
						-	
TOTAL SALARIES			1	omplete and accurate; th			

APPENDIX F-1b 07/01/2021 - 06/30/2022 PAGE A

			act ID#			_	ln	voice Nun	ber
Contractor: San Francisco Public Healt Address: 1 Hallidie Plaza, Suite 808	th Found	a 10000	016941	J				A-1JUL2	:1
San Francisco, CA 94102				Coi	ntract Purchase (	Order No:			
				10		-			
Telephone: 415-504-6738 Fax:		CH	IEP		Funding	Source:	G	eneral Fi	und
				De	partment ID-Auti	hority ID:			
Program Name: Community Health Engage	ment				Project ID-Ad	tivity ID:			
ACE Control #:					•	_			
					Invoice	e Period:	07/1	/21 - 07/	31/21
					FINAL	L Invoice		(check if	Yes)
		TAL		ERED	DELIVERED	% OF			INING
DELIVERABLES	UOS	RACTED NOC	THIS P UOS	NOC	TO DATE UOS NOC	TOTA UOS	NOC	UOS	RABLES NOC
Community Health Engagement - Program Admi	12	1						12	1
Community Home Injury Prevention - Program A	12	1						12	1
Violence Prevention - Program Administration	12	1						12	1
Vision Zero - Program Administration	96	7						96	7
		-							
		NOC		NOC	NOC		NOC		NOC
Number of Clients for Appendix		10							10
EXPENDITURES	BUE	OGET	EXPE THIS P		EXPENSES TO DATE	% OF BUDGE		REMA BALA	
Total Salaries (See Page B)									
Fringe Benefits									
Total Personnel Expenses									
Operating Expenses:									
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)									
building Maintenance Supplies and Repairs)									
Materials and Supplies-(e.g., Office,							-		
Postage, Printing and Repro., Program Supplies)									
General Operating-(e.g., Insurance, Staff	\$6,0	013						\$6,01	3.00
Training, Equipment Rental/Maintenance)									
Staff Travel - (e.g., Local & Out of Town)									
	_								
Consultant/Subcontractor	\$553	,428						\$553,4	28.00
Other - (Meals, Audit, Transportation Reimb,				-			-		
Stipends, Facilitators)									
Total Operating Expenses	\$559	.441		-			$\dashv$	\$559,4	41.00
Capital Expenditures									
TOTAL DIRECT EXPENSES	\$559	,						\$559,4	
Indirect Expenses	\$55,							\$55,94	
TOTAL EXPENSES	\$615	,383			NOTES:			\$615,3	83.00
LESS: Initial Payment Recovery  Other Adjustments (Enter as negative, if appropriate to the content of the cont	rioto			_	NOTES.				
REIMBURSEMENT	ialej								
Locatify that the information provided chave is to the beautify	مماريم					d for a size by		- !-	
I certify that the information provided above is, to the best accordance with the budget approved for the contract cite									
records for those claims are maintained in our office at the			andor ano	proviolon	or mat contact. Tal	i jastinoation e	and baci	·up	
Signature:						,	Date:		
Title: _									
Send to: SFDPH Fiscal / Invoice Processin	20								
Send to: SFDPH Fiscal / Invoice Processii 1380 Howard Street, 4th Floor, S	-								
San Francisco, CA 94103	-110 <del>-1</del> 00	Ву:					Date:		
Attn: Contract Payments			(DPH Aut	horized :	Signatory)				

APPENDIX F-1b 07/01/2021 - 06/30/2022 PAGE B

							PAGE
						Inve	oice Number
	San Francisco Pu			tion	1	Α	-1JUL21
Address:	1 Hallidie Plaza, S San Francisco, CA			Contract	Purchase Order No:		
	San Francisco, C/	4 94	102	Contract	Furchase Order No:		
Telephone:	415-504-6738				Fund Source:	Ge	neral Fund
Fax:							
Program Name:	Community Health	. Fn	asaement	Departm	ent ID-Authority ID:		
r rogium ramic.	Community fleatu		gagement	Pr	oject ID-Activity ID:		
ACE Control #:				ľ			
					Invoice Period:	07/1/2	21 - 07/31/21
					FINAL Invoice		(check if Yes)
					<b>-</b>		1(
DETAIL PERSON	NEL EXPENDITU	RES		EVDENICEO	EVENIOED	0/ 05	l ==
PERSONNEL	FT	Έ	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
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		4					
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		1					
		+					
		1					
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		4					
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		4					
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		4					
		+			_		
TOTAL SALARIES		1					
I certify that the information accordance with the budget	approvided above is, to the	pest ct cite	or my knowledge, co d for services provid	ed under the provision of	re amount requested for of that contract. Full justin	reimburseme fication and h	ent is in packun
records for those claims are							
Certified By: _				Date:			
						_	
ride.							

APPENDIX F-1c 07/01/2022 - 06/30/2023 PAGE A

										PAGE
		Contr	act ID#	4				Ir	voice Num	ber
Contractor: San Francisco Public Healtl	h Found	la 10000	016941						A-1JUL2	2
Address: 1 Hallidie Plaza, Suite 808		1.50		70.						
San Francisco, CA 94102				Co	ntract Pu	rchase (	Order No:			
T. I. / 445 TO / 0500		_		1			_			
Telephone: 415-504-6738 Fax:		CH	EP			Funding	Source:	G	eneral Fu	und
r ax.		CIT		D	epartmen	t ID-Aut	hority ID:			
Program Name: Community Health Engagen	nent			18						
<u> </u>					Proje	ect ID-A	ctivity ID:			
ACE Control #:							a			
						Invoic	e Period:	07/1	/22 - 07/	31/22
						FINA	L Invoice		(check if	Yes)
	TC	TAL	DELIV	ERED	DELIV	ERED	0/	OF	REMA	UNING
		RACTED		ERIOD		ATE		TAL		RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Community Health Engagement - Program Admi	12	1							12	1
Community Home Injury Prevention - Program A	12	1			-				12	1
Violence Prevention - Program Administration	12	1 1			-				12	1
Vision Zero - Program Administration	96	7			-				96	7
					-		-			
JI.							-		1	
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		10								10
EXPENDITURE\$			EXPE	NSES	EXPE	NSES	%	OF	REMA	INING
T. 10.1. 10.5	BUD	GET	THIS P	ERIOD	TOD	ATE	BUD	GET	BALA	NCE
Total Salaries (See Page B)										
Fringe Benefits										
Total Personnel Expenses Operating Expenses:							_			
Occupancy-(e.g., Rental of Property, Utilities,					1					_
Building Maintenance Supplies and Repairs)								_		
soliding statistics deppined and respairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$6,0	013							\$6,01	3.00
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$553	128							\$553,4	28 00
Consultanti Subconti actor	Ψυυυ	,420							<b>\$333,4</b>	20.00
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses	\$559	,441							\$559,44	41.00
Capital Expenditures	8888									
TOTAL DIRECT EXPENSES	\$559	·							\$559,4	
Indirect Expenses	\$55,		-						\$55,94	
TOTAL EXPENSES  LESS: Initial Payment Recovery	\$615	,303			NOTES:				\$615,38	33.00
Other Adjustments (Enter as negative, if appropri	ato)				NOTES.					
REIMBURSEMENT	ater	-								
certify that the information provided above is, to the best	of my knov	wledge, com	plete and a	ccurate;	the amount	requeste	d for reimbi	ursement	is in	
accordance with the budget approved for the contract cited	for servic	es provided	under the	provision	of that con	tract. Ful	l justification	n and bac	kup	
ecords for those claims are maintained in our office at the										
Signature:								Date:		
Title:										
CERRUE: 111 . B			_	_						
Send to: SFDPH Fiscal / Invoice Processin	•									
1380 Howard Street, 4th Floor, Su San Francisco, CA 94103	III.E 4U3	D.c.						Doto:		
Attn: Contract Payments		By:	(DPH Ant	horized	Signatory)	<u> </u>		Date:		
run, ovintati Fayinents			L-III MUL	114112CU	Ungridudly,					

APPENDIX F-1c 07/01/2022 - 06/30/2023 PAGE B

•	0	D L.V.		4V =			oice Number
	1 Hallidie Plaza		: Health Founda e 808	tion		A	-1JUL22
	San Francisco,	•		Contract F	Purchase Order No:		
Tolonhonou	44E E04 6720				Fund Source:	0-	
Fax:	415-504-6738				rund Source:	Ger	neral Fund
				Departme	ent ID-Authority ID:		
Program Name:	Community He	alth Ei	ngagement	Dr.	oject ID-Activity ID:		
ACE Control #:				]	oject ib-Activity ib.		
				-/1	Invoice Period:	07/1/2	2 - 07/31/22
					FINAL Invoice		(check if Yes)
							(check if 1 cs)
DETAIL PERSON	NEL EXPENDI	TURE	S BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL		FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
		_				-	
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		_					
		_					
		-					
TOTAL SALARIES		-					
certify that the information							
accordance with the budget					of that contract. Full just	ification and b	ackup
records for those claims are	mamamed in our or	iice at tr	ie address indicated.				
Certified By:				Date:			

APPENDIX F-1d 07/01/2023 - 06/30/2024 PAGE A

										FAGL
Control on Proposes Bublic Healt	h Causa		act ID # 016941	î				In	voice Nun	
Contractor: San Francisco Public Healt Address: 1 Hallidie Plaza, Suite 808	n Found	IA 10000	710541	1					A-1JUL2	23
San Francisco, CA 94102				Co	ntract Pu	rchase (	Order No:			
Telephone: 415-504-6738				]		Funding	Source:	G	eneral F	und
Fax:		CH	EP	<sub>D</sub>	epartmen	t ID-Aut	hority ID:			
Program Name: Community Health Engager	nent				-					
ACE Control #:					Proje	ect ID-A	ctivity ID:			
						Invoic	e Period:	07/1	/23 - 07/	31/23
						FINA	L Invoice		(check if	Yes)
		TAL		ERED		ERED	%			AINING RABLES
DELIVERABLES	UOS	RACTED NOC	UOS	ERIOD	UOS	NOC	UOS	TAL NOC	UOS	NOC
Community Health Engagement - Program Admi	12	1 1			T				12	1
Community Home Injury Prevention - Program A	12	1							12	1
Violence Prevention - Program Administration	12	1							12	1
Vision Zero - Program Administration	96	7							96	7
									-	^
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		10								10
EXPENDITURES	BUI	OGET	EXPE THIS P		EXPE TO D		% ( BUD			AINING
Total Salaries (See Page B)					T T					
Fringe Benefits										
Total Personnel Expenses					$\vdash$					
Operating Expenses:					i					
Occupancy-(e.g., Rental of Property, Utilities,					1					
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$6,0	013							\$6,01	3.00
Training, Equipment Rental/Maintenance)	+0,	-							Ψ0,01	0.00
Training, Equipment (tenta), maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$553	,428							\$553,4	28.00
Other (Marie Audit Transportation Daimb						_				
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)					-	-				
Total Operation Evenness	\$559	444							SEEO A	44.00
Total Operating Expenses Capital Expenditures	9009	,441							\$559,4	41.00
TOTAL DIRECT EXPENSES	\$559	741							\$559,4	44 DO
Indirect Expenses	\$55,				-	-				_
	\$615		_		-				\$55,94	
TOTAL EXPENSES  LESS: Initial Payment Recovery	ψU 13	,000			NOTES:				\$615,3	03.00
	. 0				NOTES.					
Other Adjustments (Enter as negative, if appropr REIMBURSEMENT	late)	-			ľ					
certify that the information provided above is, to the best accordance with the budget approved for the contract cite records for those claims are maintained in our office at the Signature:	d for service address i	ces provided ndicated.	under the	provision	of that con	tract. Ful		n and bac		
Send to: SFDPH Fiscal / Invoice Processir 1380 Howard Street, 4th Floor, St	-									
San Francisco, CA 94103		By:						Date:		
Attn: Contract Payments		-7.	/DPH Aut	horized	Signatory)	_				

APPENDIX F-1d 07/01/2023 - 06/30/2024 PAGE B

Address:	1 Hallidie Plaz	a, Suite			1		ice Number -1JUL23
:	San Francisco	o, CA 9	4102	Contract F	Purchase Order No:		
Telephone: 4	415-504-6738				Fund Source:	Ger	eral Fund
				Departm	ent ID-Authority ID:		
Program Name: (	Community He	ealth Ei	ngagement	Pr	oject ID-Activity ID:		
ACE Control #:					-		
					Involce Period:	07/1/2	3 - 07/31/23
					FINAL Invoice		(check if Yes)
DETAIL PERSONN	IEL EXPEND	ITURE	S BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL		FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
TOTAL SALARIES certify that the information p	rovided above is, t	to the bes	t of my knowledge, cor	mplete and accurate; th	le amount requested for	reimburseme	nt is in
ccordance with the budget a ecords for those claims are r	approved for the co	ontract cit	ed for services provide				
Certified By:				Date:			
Title:							

APPENDIX F-2 02/01/2020 - 06/30/2020 PAGE A

		Contra	ict ID#					In	voice Num	ber
Contractor: San Francisco Public Healt	h Founda	10000	16941						A-2FEB2	0
Address: 1 Hallidie Plaza, Suite 808				_			1			
San Francisco, CA 94102				Co	ntract Pur	chase (	order No:			
Telephone: 415-504-6738					i	Funding	Source:	G	eneral Fu	ınd
Fax:		∣ CH	EP							
Program Name: Community Health Engager	ment			D	epartmen	i ID-Auti	hority ID:			
riogram vame. Community Health Engager	ileiit.				Proje	ct ID-A	tivity ID:			
ACE Control #:										
						IUAOIC	e Period:	02/1	/20 - 02/2	29/20
						FINA	L Invoice		(check if	Yes)
	TO1		DELIV		DELIV		% (			INING
DELIVERABLES	CONTR. UOS	ACTED NOC	THIS P	ERIOD NOC	TO D UOS	ATE NOC	TO1 UOS	TAL NOC	UOS	RABLES NOC
Program Administration	234	N/A							234	N/A
Number of Cliente for Annuality		NOC		NOC	17 7	NOC		NOC		NOC
Number of Clients for Appendix		N/A								N/A
EXPENDITURES	BUDO	GET	EXPE THIS P		EXPE TO D		% ( BUD		REMA BALA	
Total Salaries (See Page B)	\$8,0	33							\$8,03	3.00
Fringe Benefits	\$1,4	37							\$1,43	
Total Personnel Expenses	\$9,4	70							\$9,47	0.00
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,				_						
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff						_				
Training, Equipment Rental/Maintenance)						_		_		
training, Equipment (tental/Maintenance)						-				
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
- In a second se										
Total Operating Expenses										
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$9,4								\$9,470	
Indirect Expenses	\$94								\$947	
TOTAL EXPENSES	\$10,4	17			TTO OTHER				\$10,41	7.00
LESS: Initial Payment Recovery					NOTES					
Other Adjustments (Enter as negative, if appropri	iate)	-			1					
REIMBURSEMENT  I certify that the information provided above is, to the best accordance with the budget approved for the contract cite records for those claims are maintained in our office at the Signature:	of my know d for service address in	es provided dicated.	under the	provision	of that cont			and back		]
T*#										
Litle:						_				
050505			_	_		_	_			
Send to: SFDPH Fiscal / Invoice Processin 1380 Howard Street, 4th Floor, St		_								
San Francisco, CA 94103		By:	DDU A4		Signator/			Date:		

APPENDIX F-2 02/01/2020 - 06/30/2020 PAGE R

							PAGE
					,	Invo	ice Number
			Health Foundati	on	I	A	-2FEB20
	1 Hallidie Plaza San Francisco,			Contract I	Purchase Order No:		
Telephone: 4	115-504-6738				Fund Source:	Gei	neral Fund
Fax:						001	scrair una
Program Name: (	Community Hea	ith En	gagement	Departm	ent ID-Authority ID:		
			3090	Pr	oject ID-Activity ID:		
ACE Control #:					Invoice Period:	02/1/2	0 - 02/29/20
					FINAL Invoice		(check if Yes)
					=	-	(chock if Tes)
DETAIL PERSONN	EL EXPENDI	TURE:	8				
PERSONNEL		FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
End Hep C SF Project	Coordinator	0.41	\$8,033				\$8,033.00
		-					
		-					
		-					
		-					
		-					
		-					
TOTAL SALARIES		0.41	\$8,033				\$8,033.00
I certify that the information p		the best	of my knowledge, cor				ent is in
accordance with the budget a records for those claims are r				d under the provision (	of that contract. Full justi	fication and b	ackup
Certified By:				Date:			

APPENDIX F-2a 07/01/2020 - 06/30/2021 PAGE A

										PAGE .
			act ID #	7				ir	voice Nun	ber
Contractor: San Francisco Public Healt	th Found	a 10000	16941	]					A-2JUL2	20
Address: 1 HallIdie Plaza, Suite 808 San Francisco, CA 94102				Co	ntract Pu	rchasa (	Order No:			
· ·				1						
Telephone: 415-504-6738 Fax:		СН	ΕP			Funding	Source:	L G	eneral Fi	und
Program Name: Community Health Engage	ment			ם	epartmen	t ID-Aut	hority ID:			
	El.				Proje	ect ID-A	ctivity ID:			
ACE Control #:						Invoic	e Period:	07/1	/20 - 07/	31/20
						FINA	L Invoice		(check if	Yes)
	TO.	TAL	DELI\	ERED	DELIV	'ERED	%	OF	REMA	AINING
	CONTR	RACTED	THIS F	ERIOD	TO E	DATE	TO	TAL	DELIVE	RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	uos	NOC
Program Administration	536	N/A							536	N/A
		-								
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A			1					N/A
EXPENDITURES	BUD	GET	EXPE	NSES	EXPE TO D		% BUD	OF GET		INING ANCE
Total Salaries (See Page B)	\$18,		111101	LINIOD	10 1	/ATC	000	GLI		
Fringe Benefits	\$4,3				-				\$18,3	
Total Personnel Expenses	\$22,								\$4,34	
	φΖΖ,	121	_		-	_			\$22,7	27.00
Operating Expenses:					-	_				
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,					-	_			_	
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)										
Training, Equipment (Containment Charles)		-								
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses										
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$22,7	727							\$22,72	7.00
Indirect Expenses	\$2,2	73							\$2,27	3.00
TOTAL EXPENSES	\$25,0	000							\$25,00	00.00
LESS: Initial Payment Recovery					NOTES.					
Other Adjustments (Enter as negative, if appropring REIMBURSEMENT	riate)									
certify that the information provided above is, to the best accordance with the budget approved for the contract cite ecords for those claims are maintained in our office at the Signature:	ed for servici e address in	es provided idicated.	under the	provision	of that con			n and bac		
Send to: SFDPH Fiscal / Invoice Processi	ng									
1380 Howard Street, 4th Floor, S	uite 403									
San Francisco, CA 94103		By:						Date:		
Attn: Contract Payments		1 2	DPH Au	horizod	Signatory	0				

APPENDIX F-2a 07/01/2020 - 06/30/2021 PAGE B

General Fund  1/20 - 07/31/20  (check if Yes)  REMAINING BALANCE \$18,386.00
1/20 - 07/31/20  (check if Yes)  REMAINING BALANCE
(check if Yes)  REMAINING BALANCE
(check if Yes)  REMAINING BALANCE
(check if Yes)  REMAINING BALANCE
(check if Yes)  REMAINING BALANCE
REMAINING T BALANCE
REMAINING T BALANCE
\$16,366.00
640,000,00
\$18,386.00 ment is in

APPENDIX F-2b 07/01/2021 - 06/30/2022 PAGE A

ing Source: General Fund  Authority ID:  -Activity ID:  Dice Period: 07/1/21 - 07/31/2  NAL Invoice (check if Yes)  NAL Invoice UOS NOC UOS NO
ing Source: General Fund  Authority ID:  -Activity ID:  Dice Period: 07/1/21 - 07/31/2*  NAL Invoice (check if Yes)  O % OF REMAINING TOTAL DELIVERABL C UOS NOC UOS NO  C NOC NOC  % OF REMAINING NOC NOC NOC  NOC NOC NOC  % OF REMAINING REMAINING
ing Source: General Fund  Authority ID:  -Activity ID:  Dice Period: 07/1/21 - 07/31/2*  NAL Invoice (check if Yes)  O % OF REMAINING TOTAL DELIVERABL C UOS NOC UOS NO  C NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NO
Authority ID:  -Activity ID:  Dice Period: 07/1/21 - 07/31/2*  NAL Invoice (check if Yes)  O % OF REMAINING TOTAL DELIVERABL C UOS NOC UOS NO  C NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC NOC  N
-Activity ID:    Dice Period:
Dice Period: 07/1/21 - 07/31/2*  NAL Invoice (check if Yes)  O % OF REMAINING DELIVERABL  C UOS NOC UOS NOC  C NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC
NAL Invoice (check if Yes)  O % OF REMAINING TOTAL DELIVERABL UOS NOC UOS NO  C NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC
NAL Invoice (check if Yes)  O % OF REMAINING TOTAL DELIVERABL UOS NOC UOS NO  C NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC
C NOC NCC  NOC NOC NCC  C NOC NCC  C NOC NCC  NO
TOTAL DELIVERABL UOS NOC UOS NO  536 No  C NOC NOC NOC  NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC  NOC NOC NOC NOC  NOC NOC NOC NOC NOC NOC NOC NOC  NOC NOC NOC NOC NOC NOC  NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC
C NOC NC NO NO NO NO NO NO NO NO NO NO NO NO NO
C NOC NC NC NC NC NC NC NC NC NC NC NC NC NC
% OF REMAINING
\$18,386.00
\$4,341.00
\$22,727.00
\$22,727.00
\$2,273.00
\$2,273.00 \$25,000.00

APPENDIX F-2b 07/01/2021 - 06/30/2022 PAGE B

Contractor: San Francisc Address: 1 Hallidie Pla	za, Suite	808		[		oice Number -2JUL21
San Francisc	o, CA 9	4102	Contract I	Purchase Order No:		
Telephone: 415-504-6738 Fax:	<b>;</b>		_	Fund Source:	Ge	neral Fund
Program Name: Community F	lealth En	gagement	Departm	ent ID-Authority ID:		
ACE Control #:			Pr	oject ID-Activity ID:		
AGE CONTOUR.		14	U:	Invoice Period:	07/1/2	1 - 07/31/21
				FINAL Invoice		(check if Yes)
DETAIL PERSONNEL EXPENI	DITURE	S BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
End Hep C SF Project Coordinator	0.25	\$18,386				\$18,386.00
	1					
	-					
	+					
	$\vdash$					
	$\vdash$					
	+-+			-		
TOTAL SALARIES  I certify that the information provided above is	0.25	\$18,386				\$18,386.00
accordance with the budget approved for the	, to the besi contract cite	of my knowledge, co ed for services provid	omplete and accurate; the discourate of the contract of the co	ne amount requested for of that contract. Full justi	reimburseme fication and b	ent is in nacklin
records for those claims are maintained in our			od dridor trio providiori t	or mat dominant. I am justi	neation and t	Jackap
Certified By:			Date:			
Title:						

APPENDIX F-2c 07/01/2022 - 06/30/2023 PAGE A

Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102  Telephone: 415-504-6738 Fax:  Program Name: Community Health Engagem  ACE Control #:  DELIVERABLES  Program Administration  Number of Clients for Appendix  EXPENDITURES  Total Salaries (See Page B) Fringe Benefits  Total Personnel Expenses  Operating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	ent	СН	ED	Co	ntract Pur	chase C	rder No:			
Program Name: Community Health Engagem  ACE Control #:  DELIVERABLES  Program Administration  Number of Clients for Appendix  EXPENDITURES  Total Personnel Expenses  Decrating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	ent	СН	ED							
ACE Control #:  DELIVERABLES Program Administration  Number of Clients for Appendix  EXPENDITURES  Total Personnel Expenses Decrating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	ent	•			Į.	unding	Source:	G	eneral Fu	ınd
Program Administration  Aumber of Clients for Appendix  EXPENDITURES  Otal Salaries (See Page B)  ringe Benefits  Total Personnel Expenses  Deparating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,				D	epartmen	: ID-Autl	ority ID:			
Program Administration  Aumber of Clients for Appendix  EXPENDITURES  Otal Salaries (See Page B)  ringe Benefits  Total Personnel Expenses  Deparating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,					Proje	ct ID-Ac	tivity ID:			
Program Administration  Jumber of Clients for Appendix  EXPENDITURES  Otal Salaries (See Page B)  Tringe Benefits  Total Personnel Expenses  Derating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,						Invoice	Period:	07/1	/22 - 07/3	31/22
Program Administration  Jumber of Clients for Appendix  EXPENDITURES  Otal Salaries (See Page B)  Tringe Benefits  Total Personnel Expenses  Derating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,						FINAL	. Invoice		(check if	Yes)
Administration  Jumber of Clients for Appendix  EXPENDITURES  Otal Salaries (See Page B)  ringe Benefits  Total Personnel Expenses  Derating Expenses:  Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	TOT CONTR UOS		DELIVE THIS PE UOS		DELIV TO D UOS		TO UOS			INING RABLES NOC
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	536	N/A		1100		1100	000	1400	536	N/A
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,										
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,					-					
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,										
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,										
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Departing Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,		NOO				NOO				
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,		NOC N/A		NOC		NOC		NOC		NOC N/A
ringe Benefits  Total Personnel Expenses  Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	BUD		EXPEN		EXPE		% (		REMA	INING
ringe Benefits  Total Personnel Expenses  Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	\$18,		THIS PE	KIOD	TO D	AIE	BUD	351	BALA \$18,38	
Departing Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	\$4,3								\$4,34	1.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,	\$22,	727							\$22,72	27.00
Building Maintenance Supplies and Repairs)  Materials and Supplies-(e.g., Office,					-					
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff										_
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses								_		_
Capital Expenditures										
OTAL DIRECT EXPENSES	\$22,7								\$22,72	
Indirect Expenses	\$2,2								\$2,273	
OTAL EXPENSES LESS: Initial Payment Recovery	\$25,0	100			NOTES:				\$25,00	0.00
Other Adjustments (Enter as negative, if appropria	ite)				NO ILO.					
REIMBURSEMENT  certify that the information provided above is, to the best o coordance with the budget approved for the contract cited ecords for those claims are maintained in our office at the a Signature:	f my know for service address in	es provided dicated.	under the p	rovision	of that cont	ract. Full		and back		
						_				
end to: SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Sui San Francisco, CA 94103										

APPENDIX F-2c 07/01/2022 - 06/30/2023 PAGE B

					Inv	oice Number
Address: 1	ın Francisco Publ		tion	[		N-2JUL22
	Hallidie Plaza, Sui In Francisco, CA		Contract	Purchase Order No:		
Telephone: 41	5-504-6738			Fund Source:	Ge	neral Fund
Fax:			Danasta.	_		
Program Name: Co	mmunity Health E	Engagement		nent ID-Authority ID:		
ACE Control #:			Pı 1	roject ID-Activity ID:		
_			410	Invoice Period:	07/1/2	22 - 07/31/22
				FINAL Invoice	-	(check if Yes)
DETAIL PERSONNE	L EXPENDITUR	ES BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
End Hep C SF Project Co	oordinator 0.25	\$18,386				\$18,386.00
TOTAL SALARIES						

APPENDIX F-2d 07/01/2023 - 06/30/2024 PAGE A

Contractor: San Francisco Public Heal Address: 1 Hallidie Plaza, Suite 808	th Found		act ID # 016941					In	A-2JUL2	
San Francisco, CA 94102				Cor	ntract Pur	chase C	order No:			
Telephone: 415-504-6738 Fax:		СН	IEP				Source:	G	eneral Fu	und
Program Name: Community Health Engage	ement			De	epartment		- 8			
ACE Control #:	]				Proje	ct ID-Ac	tivity ID:			
						Invoic	e Period:	07/1	/23 - 07/3	31/23
						FINA	Invoice		(check if	Yes)
DELIVERABLES		TAL RACTED NOC	DELIVI THIS PE UOS		DELIV TO D UOS		% TO UOS	OF TAL NOC		INING RABLES NOC
Program Administration	536	N/A						1100	536	N/A
		_								
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A						1100		N/A
EXPENDITURES	BUD	GET	EXPEN THIS PE		EXPEI TO D		% ( BUD		REMA BALA	
Total Salaries (See Page B)	\$18,								\$18,38	
Fringe Benefits	\$4,3								\$4,34	
Total Personnel Expenses Operating Expenses:	\$22,	121		=					\$22,72	27.00
Occupancy-(e.g., Rental of Property, Utilities,								_		
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)			-	-						
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)										
Superius, Facilitators)										
Total Operating Expenses										
Capital Expenditures	600 '	707							800 70	7.00
TOTAL DIRECT EXPENSES Indirect Expenses	\$22,7 \$2,2								\$22,72 \$2,273	
TOTAL EXPENSES	\$25,0			$\dashv$					\$25,00	
LESS: Initial Payment Recovery					NOTES:				+===	0.00
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)									
I certify that the information provided above is, to the bes accordance with the budget approved for the contract cit records for those claims are maintained in our office at th Signature:	ed for servic ne address in	es provided adicated.	under the p	rovision	of that cont			n and bacl		
Send to: SFDPH Fiscal / Invoice Processi	ing									
1380 Howard Street, 4th Floor, 5 San Francisco, CA 94103	-	Ву:						Dato		
Attn: Contract Payments		ъу.	(DPH Auth	orized S	Signatory)			Date.		

APPENDIX F-2d 07/01/2023 - 06/30/2024 PAGE B

					-	invo	ice Number
			Health Founda	tion		A	-2JUL23
Address:	1 Hallidie Plaz San Francisco	-		Contract	Purchase Order No:		
· · · · · · · · · · · · · · · · · · ·	415-504-6738				Fund Source:	Ger	neral Fund
Fax:				Departr	ment ID-Authority ID:		
Program Name:	Community H	ealth En	gagement		roject ID-Activity ID:		
ACE Control #:				]	roject ib-Activity ib:		
					Invoice Period:	07/1/2	3 - 07/31/23
					FINAL Invoice		(check if Yes)
DETAIL PERSON	NEL EXPEND	ITURES	5		3		
PERSONNEL		FTE	BUDGETED	EXPENSES THIS BEDIOD	EXPENSES	% OF	REMAINING
End Hep C SF Project	t Coordinator	0.25	\$18,386	THIS PERIOD	TO DATE	BUDGET	\$18,386.00
2114 716 6 61 1 1 1 1 1 1 1	e oooramato.	0.20	\$ 10,000				ψ 10,000.00
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		_					
		-+					
OTAL SALARIES		0.25	\$18,386				\$18,386.00
certify that the information	provided above is,	to the best	of my knowledge, c	omplete and accurate;	the amount requested for	reimburseme	
I certify that the information accordance with the budgel records for those claims are	approved for the co	to the best ontract cite	of my knowledge, c d for services provid	ded under the provision	· ·		nt is in
				Date			
Title: _							

APPENDIX F-3 02/01/2020 - 12/31/2020 PAGE A

CHE	Co EP D	epartment ID-Ai Project ID- Invo	ng Source:[ uthority ID:[		CDC	
ED NOC	DELIVERED	epartment ID-Ai Project ID- Invo	uthority ID:	02/1/		
ED NOC	DELIVERED	epartment ID-Ai Project ID- Invo	uthority ID:	02/1/		
NOC	DELIVERED	Project ID-	Activity ID:	02/1/	/20 - 02/2!	
NOC		Invo	ice Period:	02/1/	/20 - 02/2!	
NOC			-	02/1	/20 - 02/2	
NOC		FIN	Al Invoice			9/20
NOC			voice		(check if Y	(es)
	THIS PERIOD UOS NOC	DELIVERED TO DATE UOS NOC	% C TOT, UOS		REMAII DELIVER UOS	
N/A					520	N/A
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	NOC	NOC	<del></del>	NOC		NOC
N/A						N/A
	EXPENSES THIS PERIOD	EXPENSES TO DATE				
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			-			
			-	-		
<del>-</del> -		-	-	_	\$20 833	00
				$\overline{}$		
		NOTES:				
1		EXPENSES THIS PERIOD	EXPENSES THIS PERIOD TO DATE	EXPENSES EXPENSES % O BUDG	EXPENSES EXPENSES % OF BUDGET  TO DATE BUDGET	EXPENSES

APPENDIX F-3 02/01/2020 - 12/31/2020 PAGE R

						PAGE I
					Invo	pice Number
Contractor: San Francisc			ion		A	-2FEB20
Address: 1 Hallidie Pla San Francisc			Contract I	Purchase Order No:		
	-					
Telephone: 415-504-6738 Fax:				Fund Source:		CDC
			Departm	ent ID-Authority ID:		
Program Name: Community H	lealth Eng	gagement	D-	-14 ID A-45-56- ID-		
ACE Control #:			Pr	oject ID-Activity ID:		
				Invoice Period:	02/1/2	20 - 02/29/20
				FINAL Invoice		(check if Yes)
DETAIL PERSONNEL EXPEN	DITURES	6				
PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
End Hep C SF Project Coordinator	0.25	\$17,850	THIS TERROR	TOBATE	BODGET	\$17,850.00
	-					
	+ +					
					-	
	+					
	$\vdash$					
				-		
	$\vdash$					
TOTAL SALARIES	0.25	\$17,850				\$17,850.00
I certify that the information provided above is, accordance with the budget approved for the c records for those claims are maintained in our	contract cited	d for services provide				
Certified By:			Date:			

APPENDIX F-3a 01/01/2021 - 12/31/2021 PAGE A

Contractor: San Francisco Public Heal	h Found		act ID #	Ī					voice Num	
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102	iii i ouiiu	10000	710041	Į. Co	ntract Pur	chase (	Order No:		A-2JAN2	
				i					000	
Telephone: 415-504-6738 Fax:		СН	EP	_	ا epartment	_	Source:		CDC	
Program Name: Community Health Engage	ment			J			- 10			
ACE Control #:					Proje		tivity ID:			
						Invoice	e Period:	01/1	<u>/21 - 01/3</u> -	31/21
						FINA	_ Invoice		(check if	Yes)
DELIVERABLES		TAL RACTED NOC	DELIV THIS P UOS		DELIV TO D UOS		% TO TO TO TO TO TO TO TO TO TO TO TO TO			INING RABLES NOC
Program Administration	567	N/A	000	NOC	1 003	1400	003	NOC	567	N/A
1 Togram Naminonation	007	100							301	INA
Number of Charte for Large de		NOC	_	NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A								N/A
EXPENDITURES	BUD	GET	EXPE THIS P		EXPEI TO D		% ( BUD		REMA BALA	
Total Salaries (See Page B)	\$19,						1		\$19,47	
Fringe Benefits	\$3,2								\$3,25	
Total Personnel Expenses	\$22,								\$22,72	
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses										
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$22,								\$22,72	
Indirect Expenses	\$2,2								\$2,273	
TOTAL EXPENSES	\$25,0	000							\$25,00	0.00
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Other Adjustments (Enter as negative, if appropriate propriate propriate propriate provided above is, to the best accordance with the budget approved for the contract cite records for those claims are maintained in our office at the Signature:	of my knoved for service address in	es provided adicated.	under the	provision	of that con	ract. Ful		n and bac		
Title: _										
Send to: SFDPH Fiscal / Invoice Processii 1380 Howard Street, 4th Floor, S	-									
San Francisco, CA 94103		Ву:_						Date:		
Attn: Contract Payments		Ly.	IDDH Aut	horizod	Signatory)	-		Jule		_

APPENDIX F-3a 01/01/2021 - 12/31/2021 PAGE B

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0 - 1 - 1	C F	. B. LE. 11.	alde E lace		Ī		oice Number
	1 Hallidie Plaz		alth Foundation		Į.	A	-2JAN21
Address.	San Francisco	•		Contract	Purchase Order No:		
		,					
	415-504-6738				Fund Source:		CDC
Fax:				Denartm	ent ID-Authority ID:		
Program Name:	Community H	ealth Engag	gement	- opartii	ione is Additioney is.		
	_			Pi	roject ID-Activity ID:		
ACE Control #:					Invoice Period:	04/4/6	04.04/04
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					FINAL Invoice		(check if Yes)
DETAIL DEDOOM	NEL EVEEND	TUBEO					
DETAIL PERSON	NEL EXPEND	HURES	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL		FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
End Hep C SF Project	t Coordinator	0.26477	\$19,472				\$19,472.00
							-
		- +					-
TOTAL SALARIES		0.26477	\$19,472				\$19,472.00
certify that the information	provided above is,		ny knowledge, comple	ele and accurate; the ar	nount requested for reimb	oursement is	in
accordance with the budget records for those claims are				nder the provision of tha	nt contract. Full justification	on and backu	ıp
0-46-45				<b>5</b> ·			
Certified By: _				Date:			

APPENDIX F-3b 01/01/2022 - 12/31/2022 PAGE A

		epartment	ID-Auti ct ID-Ac Involce FINAL	Source: nority ID: ctivity ID: Period:	01/1 OF	CDC  /22 - 01/3  [check if REMAIDELIVER UOS	2 :1/22 Yes)
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		complete and accurate; ided under the provision	ided under the provision of that conti	complete and accurate; the amount requested ided under the provision of that contract. Full	complete and accurate; the amount requested for reimbuilded under the provision of that contract. Full justification	complete and accurate; the amount requested for reimbursement ided under the provision of that contract. Full justification and back	\$3,255 \$22,72 \$22,72 \$22,72 \$2,727 \$2,273 \$2,273 \$25,000  NOTES:

APPENDIX F-3b 01/01/2022 - 12/31/2022 PAGE B

						PAGE I
					Inve	oice Number
Contractor: San Francisc	o Public Hea	alth Foundation				-2JAN22
Address: 1 Hallidie Pla	aza, Suite 80	В				
San Francisc	co, CA 94102	2	Contract I	Purchase Order No:		
Telephone: 415-504-6738	<b>&gt;</b>			Fund Source:		CDC
Fax:	,			runa Source.		CDC
			Departm	ent ID-Authority ID:		
Program Name: Community I	Health Engag	jement		10		
			Pr	oject ID-Activity ID:		
ACE Control #:				laureten Bertent	04/4/6	04 04 00
				Invoice Period:	01/1/2	22 - 01/31/22
				FINAL Invoice	-	(check if Yes)
						1(,
DETAIL PERSONNEL EXPEN	DITURES					
PERSONNEL		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
End Hep C SF Project Coordinator	0.26477	\$ALARY \$19,472	THIS PERIOD	TO DATE	BUDGET	\$19,472.00
and thep of oil troject ocordinator	0.20477	\$15,472				\$15,472.00
		-				
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OTAL SALARIES	0.26477	\$19,472				
			te and accurate; the an			\$19,472.00

APPENDIX F-3c 01/01/2023 - 12/31/2023 PAGE A

			Contra	act ID#	_				In	voice Nun	ber
Contractor: San F	rancisco Public Healt	h Founda	10000	16941	]					A-2JAN2	23
	lidie Plaza, Suite 808										
San F	rancisco, CA 94102				Co	ntract Pu	rchase (	Order No:			
Telephone: 415-5	04-6738				1		Eundine	Source:		CDC	
Fax:	54-07.50		CH	EP			r unum	oource.		CDC	
			011		D	epartmen	t ID-Aut	hority ID:			
Program Name: Comn	nunity Health Engage	ment			4.5						
						Proj	ect ID-A	ctivity ID:			
ACE Control #:							Laure Co.	أسام	0.4.4	100 011	0.100
							Invoic	e Period:	01/1	/23 - 01/	31/23
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DELIVERABLES		uos	NOC	UOS	NOC	uos	NOC	uos	NOC	uos	NOC
Program Administration		567	N/A			-				567	N/A
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			NOC		NOC		NOC		NOC		NOC
Number of Clients for App	endix		N/A								N/A
EVERIBIEUDEA			,						•		
EXPENDITURES		BUDG	CET	EXPE			NSES DATE	% BUD	OF CET		INING INCE
Total Salaries (See Pa	ge B)	\$19,4		111101	LINIOD	101	AIL	500	GET	\$19,4	
Fringe Benefits		\$3,2								\$3,25	
Total Personnel Ex	penses	\$22,7	727							\$22,72	27.00
Operating Expenses: Occupancy-(e.g., Re	ntal of Property Utilities					-	-				
Building Maintenance Su										_	
Materials and Supp											
Postage, Printing and Re	pro., Program Supplies)								-		
General Operating-	(e.g., Insurance, Staff										
Training, Equipment Ren	tal/Maintenance)										
Staff Travel - (e.g., L	cool & Out of Tourn)										
Stall Havel - (e.g., L	ocal & Out of Town)										
Consultant/Subcor	ntractor										
041 (14 1 4 11 11											
Other - (Meals, Audit, T Stipends, Facilitators)	ransportation Reimb,						$\rightarrow$				
_ aponto, admittory											
Total Operating Exp											
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Indirect Expenses	NOES	\$2,7								\$22,72 \$2,27	
TOTAL EXPENSES		\$25,0								\$25,00	
LESS: Initial Payme						NOTES:					
Other Adjustments ( REIMBURSEMENT	Enter as negative, if appropr	iate)			-	1					
I certify that the information p accordance with the budget a records for those claims are r	approved for the contract cite	d for service address in	es provided dicated.	under the	provision	of that con			n and back		
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	Fiscal / Invoice Processing ward Street, 4th Floor, St	~									
	ncisco, CA 94103		Ву:			Signatory			Date:		
Attn: C	ontract Payments		- 7	DPH Aut	orizod	Signator			_		

APPENDIX F-3c 01/01/2023 - 12/31/2023 PAGE B

						PAGE B
				r		oice Number
Contractor: San Franci Address: 1 Hallidie I				L	A	-2JAN23
	isco, CA 94102		Contract I	Purchase Order No:		
Telephone: 415-504-67 Fax:	'38			Fund Source:		CDC
D N C			Departm	ent ID-Authority ID:		
Program Name: Community	y Health Engag	jement	Pr	oject ID-Activity ID:		
ACE Control #:				Invoice Period:	04/4/	23 - 01/31/23
						40
				FINAL Invoice		(check if Yes)
DETAIL PERSONNEL EXPE	NDITURES	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
End Hep C SF Project Coordinate	or 0.26477	\$19,472				\$19,472.00
		-				
	+ +					
TOTAL SALARIES	0.26477	\$19,472				\$19,472.00
I certify that the information provided above		y knowledge, comple				in
accordance with the budget approved for the			nder the provision of tha	t contract. Full justification	on and backu	dr.
records for those claims are maintained in	our office at the add	ress indicated.				
Certified By:			Date:			
Title:						

APPENDIX F-3d 01/01/2024 - 12/31/2024 PAGE A

		Contra	act ID#					ln	voice Num	ber
Contractor: San Francisco Public Heal	th Found	a 10000	16941						A-2JAN2	
Address: 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102				Co	ntract Pui	chase (	Order No:			
		_		r.						
Telephone: 415-504-6738 Fax:		СН	EP			Funding	Source:		CDC	
Program Name: Community Health Engage	ment			D	epartmen	t ID-Aut	hority ID:			
ACE Control #:	1				Proje	ct ID-A	ctivity ID:			
ACE CONTROL #.	1					Invoic	e Period:	01/1	/24 - 01/:	31/24
						FINA	L Invoice		(check if	Yes)
	TO'	TAL	DELIV	ERED	DELIV	FRED	%	OF	REMA	INING
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Program Administration	567	N/A							567	N/A
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Number of Clients for Appendix		N/A								N/A
EXPENDITURES	BUD	GET	EXPEI THIS PI		EXPE		% · BUD	OF GET	REMA BALA	
Total Salaries (See Page B)	\$19,								\$19,4	
ringe Benefits	\$3,2	255							\$3,25	
Total Personnel Expenses	\$22,	727							\$22,72	27.00
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses										
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$22,7	727							\$22,72	7.00
Indirect Expenses	\$2,2	73							\$2,273	3.00
OTAL EXPENSES	\$25,0	000							\$25,00	0.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)									
certify that the information provided above is, to the bes coordance with the budget approved for the contract cite acords for those claims are maintained in our office at the	ed for service e address in	es provided dicated.	under the p	rovision	of that con			n and back	kup	
Signature: _ Title: _								Date.		
iend to: SFDPH Fiscal / Invoice Processi 1380 Howard Street, 4th Floor, S										
San Francisco, CA 94103		By:	DDII A4		Signaton			Date:_		

APPENDIX F-3d 01/01/2024 - 12/31/2024 PAGE B

							PAGE
Contractor:	San Francisco	o Public Hea	alth Foundation		Γ		ice Number 2JAN24
Address:	1 Hallidie Plaz San Francisco	-		Contract	Purchase Order No:		
<b>T</b> alantana		J, CA 94102	•	Contract	-		
l elephone: Fax:	415-504-6738				Fund Source:		CDC
Program Name:	Community H	ealth Engag	jement	Departm	ent ID-Authority ID:		
ACE Control #:			1	Pr	oject ID-Activity ID:		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Invoice Period:	01/1/2	4 - 01/31/24
					FINAL Invoice		(check if Yes)
DETAIL PERSON	NEL EXPEND	ITURES					
PERSONNEL		FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
nd Hep C SF Projec	t Coordinator	0.26477	\$19,472				\$19,472.00
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#### 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 <a href="http://www.sfgov.org/site/npcontractingtf">http://www.sfgov.org/site/npcontractingtf</a> 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 for 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.

#### Appendix G

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 <a href="http://www.sfgov.org/site/npcontractingtf">http://www.sfgov.org/site/npcontractingtf</a> 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.



PRODUCER

### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/04/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

CONTACT Katherine Berkman

Calender-Robinson Company, Inc.					PHONE (AIC, No, Ext): (415) 978-3800 (AIC, No): (415) 978-3825						
0267063					E-MAIL ADDRESS: kberkman@calrob.com						
233 Sansome St. Ste 508					Abontas.					******	
San Francisco CA 94104					INSURER(s) AFFORDING COVERAGE INSURER A: Nonprofits' Insurance Alliance of CA (NIAC)					NAIC #	
INSURED					INSURER B : Hartford Fire Insurance Co.					***************************************	
San Francisco Public Health Foundation					INSURER C: Axis Insurrance Compmany					(10)	
1 Hallidje Plaza #80B					Madren o .						
				INSURER D:							
San Francisco CA 94102				CA 94103	INSURER E:						
					INSURER F:						
			TOTAL COLOR	REVISION NUMBER: ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD				100			
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS.											
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
INSR LTR		INSD	SUBR WVD	POLICY NUMBER	POLICY (MM/DD/	YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$ 1,000	0,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,0	200	
	GEN'LAGGREGATE LIMIT APPLIES PER:  POLICY PRO- POLICY PRO- LOC			2020-01142-NPO		02/04/2020	02/04/2021	MED EXP (Any one person)	\$ 20,00	00	
Α					02/04/			PERSONAL & ADVINJURY	s 1,000	000,0	
								GENERAL AGGREGATE	\$ 3,000	0,000	
								PRODUCTS - COMP/OP AGG	\$ 3,000	0,000	
	OTHER:							***************************************	\$	······································	
Α	AUTOMOBILE LIABILITY						~~~~	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	0,000	
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY			2020-01142-NPO	02/04/	02/04/2020	02/04/2021	BODILY INJURY (Per accident)	\$	***************************************	
								PROPERTY DAMAGE (Per accident)	\$	······································	
							Tr ei additierti	5			
А	➤ UMBRELLA LIAB ➤ OCCUR	1						EACH OCCURRENCE	s 1,000	000,0	
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	DED X RETENTION \$ 10,000								5		
	WORKERS COMPENSATION							➤ PER OTH-			
_	AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE   Y / N							E.L. EACH ACCIDENT	s 1,000	0,000	
В	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		57WECAF3VEB	04/19/	04/19/2020	04/19/2021	E.L. DISEASE - EA EMPLOYEE	1.000.000		
	if yes, describe under DESCRIPTION OF OPERATIONS below				***************************************			E.L. DISEASE - POLICY LIMIT	s 1,000	0,000	
								Each claim		000,000	
С	Cyber Liability Policy			P-001-000153129-01	06/01/	2019	06/01/2020	Aggregate	\$ 1,0	00,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
City & County of San Francisco and the Dept. of Public Health and all respective officers, agents & employees are included as additional insured as per the											
attached endorsement											
CERTIFICATE HOLDER CANCELLATION											
CERTIFICATE HOLDER CANCELLATION											
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE											
THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.											
City & County of San Francisco					ACCURDANCE YITH THE FULICT PROYISIONS.						
Dept. of Public Health						AUTHORIZED REPRESENTATIVE					
101 Grove Street # 402											
San Francisco CA 94102					Kahum Berlin						

Named Insured: San Francisco Public Health Foundation

Policy: 2020-01142-NPO

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

### ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### SCHEDULE

Name of Person or Organization:

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy, and for which a certificate of insurance naming such person or organization as additional insured has been issued, but only with respect to their liability arising out of their requirements for certain performance placed upon you, as a non-profit organization, in consideration for funding or financial contributions you receive from them. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for

"bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your on-going operations; or
- B. In connection with your premises owned by or rented to you

THE INSURANCE provided under this endorsement is primary & non-contributory to any other valid & collectible insurance carried by the additional insured entity and this insurance will apply separately to each insured against whom a claim is made or a suit is brought.

CG 2026 (07/04)

POLICY NUMBER:

2020-01142-NPO

COMMERCIAL AUTO LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies the insurance provided under the following:

### COMMERCIAL AUTOMOBILE LIABILITY COVERAGE PART

#### **SCHEDULE**

Name of Person or Organization:

All entities named in the attached certificate of insurance

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of automobiles owned, leased, hired or borrowed by or on behalf of the Contractor.

### WORKERS' COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

WC 04 03 06 (Ed. 4-84)

### WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT - CALIFORNIA

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the schedule (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be \_\_\_\_\_so \_\_\_ of the California workers' compensation premium of the workers' compensation premium of the California workers' compensation of the California worker

#### SCHEDULE

#### Person or Organization

550

5 52

1:

01

IN FAVOR OF: City of San Francisco, Its Officers, Agents & Employees Dept of Public Health 101 Grove St San Francisco, CA 94102

#### Job Description

Job: Grant funding Class code: CA 8742 Length: Policy term

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective: 04/19/2019

Policy No: WC 57-10-295-02

Endorsement No:

Insured: San Francisco Public Health Foundation 375 Laguna Honda Blyd Ste B303

Insurance Company: American Guarantee and Liability Insurance Co.

Countersigned by

WC 04 03 06

Copyright 1983 National Council on Compensation Insurance

Wangle & for

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

#### **First Amendment**

THIS AMENDMENT (this "Amendment") is made as of **November 1<sup>st</sup>, 2020** in San Francisco, California, by and between **SAN FRANCISCO PUBLIC HEALTH FOUNDATION** ("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 increase the contract amount and update standard contractual clauses; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through **RFQ 36-2017 issued on October 3, 2019** and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number 46237 – 14/15 on December 3, 2018;

NOW, THEREFORE, Contractor and the City 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 **January** 1<sup>st</sup>, 2020, (Contract ID# 1000016941), between Contractor and City.
- 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 the Agreement

The Agreement is hereby modified as follows:

2.1 **Article 3.3.1 Payment** of the **Original Agreement** currently reads as follows:

#### **Article 3** Financial Matters

#### 3.3 Compensation.

3.3.1 **Payment**. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the **Director of Health**, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Three Million Sixty-One Thousand Nine Hundred Thirty DOLLARS (\$3,061,930)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

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

#### **Article 3** Financial Matters

#### 3.3 Compensation.

3.3.1 **Payment**. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the **Director of Health**, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Nine Million Three Hundred Fifty-Nine Thousand Three Hundred Five DOLLARS (\$9,359,305)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

2.2 Add **Article 3.7 Contract Amendments; Budget Revisions**, to this Agreement as Amended to reads as follows:

#### **Article 3** Financial Matters

- 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 Program Budget Revision.
- 3.7.3 **City Program Scope Reduction.** Given the local emergency, the pandemic, and the City's resulting budgetary position, and 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.

2.3 **Article 4.5 Assignment**, is hereby amended in its entirety to read as follows:

#### **Article 4** Services and Resources

#### 4.5 **Assignment.**

The Services to be performed by Contractor are personal in character. Neither this Agreement, nor any duties or obligations hereunder, may be directly or indirectly assigned, novated, hypothecated, transferred, or delegated by Contractor, or, where the Contractor is a joint venture, a joint venture partner, (collectively referred to as an "Assignment") unless first approved by

City by written instrument executed and approved in the same manner as this Agreement in accordance with the Administrative Code. The City's approval of any such Assignment is subject to the Contractor demonstrating to City's reasonable satisfaction that the proposed transferee is: (i) reputable and capable, financially and otherwise, of performing each of Contractor's obligations under this Agreement and any other documents to be assigned, (ii) not forbidden by applicable law from transacting business or entering into contracts with City; and (iii) subject to the jurisdiction of the courts of the State of California. A change of ownership or control of Contractor or a sale or transfer of substantially all of the assets of Contractor shall be deemed an Assignment for purposes of this Agreement. Contractor shall immediately notify City about any Assignment. Any purported Assignment made in violation of this provision shall be null and void.

2.4 **Article 5.1.1g Cyber Insurance**, is hereby amended in its entirety to read as follows:

#### **Article 5 Insurance and Indemnity**

#### 5.1 Insurance.

- 5.1.1 **Required Coverages.** Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. 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:
- (g) Contractor shall maintain in force during the full life of the agreement Cyber and Privacy Insurance with limits of not less than \$5,000,000 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.

### 2.5 Add **Article 7.3 Withholding**, to this Agreement as Amended to reads as follows:

#### **Article 7 Payment of Taxes**

### 7.3 Withholding.

Contractor agrees that it is obligated to pay all amounts due to the 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 the 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.

## 2.6 Add Article 15 Official Actions Relating to the Emergency; FEMA Assistance, to this Agreement as Amended to reads as follows:

#### Article 15 Official Actions Relating to the Emergency; FEMA Assistance.

#### 15.1 Orders of Local, State or Federal Officials.

City and Contractor mutually acknowledge that local, state, or federal authorities may issue official orders related to the COVID-19 epidemic, or take other official actions, subsequent to the execution of this Agreement that Parties to this Agreement cannot presently predict. City and Contractor mutually acknowledge and agree that this Agreement shall be subject to the provisions of any such official action or order ("Official Actions"), as they may be revised and updated. If the provisions of any such Official Actions materially impact the terms of this Agreement, the provisions of those Official Actions shall govern. Contractor shall stay updated on the status of the City Health Officer orders by checking the Department of Public Health website (sfdph.org) regularly.

#### 15.2 FEMA Assistance.

This is an acknowledgement that FEMA financial assistance will be requested by City and if provided will be used to fund all or a portion of this Agreement. Contractor shall comply with all applicable Federal law, regulations, executive orders, FEMA policies, procedures, and directives, including the FEMA Contract Requirements attached hereto as Appendix D and incorporated herein by reference.

The Appendices listed below are Amended as follows:

- 2.7 Delete Appendix A, and replace in its entirety with Appendix A to Agreement as amended. Dated: 11/01/2020.
  - 2.8 Add Appendix A-4 to Agreement as amended. Dated: 11/01/2020.
- 2.9 Delete Appendix B, and replace in its entirety with Appendix B to Agreement as amended. Dated: 11/01/2020.
  - 2.10 Add Appendix B-4a to Agreement as amended. Dated:11/01/2020.
  - 2.11 Add Appendix B-4a.1 to Agreement as amended. Dated:11/01/2020.
- 2.12 Delete Appendix D, and replace in its entirety with Appendix D to Agreement as amended. Dated: 11/01/2020.
  - 2.13 Add Appendix F-4a to Agreement as amended. Dated:11/01/2020.
  - 2.14 Add Appendix F-4a.1 to Agreement as amended. Dated:11/01/2020.
  - 2.15 Add Appendix G to Agreement as amended. Dated:11/01/2020.
  - 2.16 Add Appendix H to Agreement as amended. Dated:11/01/2020.

#### **Article 3 Effective Date**

Each of the modifications set forth in Section 2 shall be effective on and after **the date of this Amendment**.

### Article 4 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.

P-650 (5-19; DPH 4-18) Amendment: 11/01/2020

IN WITNESS WHEREOF, Contractor and City have executed this Amendment as of the date first referenced above.

CITY

Recommended by:

CONTRACTOR

SAN FRANCISCO PUBLIC HEALTH **FOUNDATION** 

Greg Wagner

Grant Colfax, MD Director of Health

Department of Public Health

Penny Eardley

**Executive Director** 1 Hallidie Plaza, Suite 808 San Francisco, CA 94102

Supplier ID number: 0000011526

Approved as to Form:

Dennis J. Herrera City Attorney

owise Simpson -BD54168A4C3B452 Deputy City Attorney

Approved:

DocuSigned by:

taraneli Moayed

Sailaja Kurella

Acting Director, Office of Contract Administration, and Purchaser

#### Appendix A Scope of Services

#### 1. Terms

#### A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Tomás Aragón, MD** / **Patricia Erwin**, 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. <u>Evaluation</u>:

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 Zuckerberg 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. <u>Adequate Resources</u>:

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.

Appendix A 1 of 5 Contract ID# 1000016941

#### F. <u>Infection Control, Health and Safety:</u>

- (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.

#### G. 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.

Appendix A 2 of 5 Contract ID# 1000016941

- (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 staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

#### H. <u>Acknowledgment of Funding</u>:

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."

#### I. <u>Compliance With Grant Award Notices:</u>

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	Program Administration for Community Health Engagement
Appendix A-2	Program Administration for Community Health Engagement
Appendix A-4	Program Administration for Community Health Engagement - COVID-19

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.

Appendix A 3 of 5 Contract ID# 1000016941

Contractor/Vendor: San Francisco Public Health Foundation Program: Community Health Engagement

FY: 19/20 thru 24/25

#### **CONTRACT SUMMARY**

A-1/B-1

FY19-20

\$39,000

01/01/2020

06/30/2020

6

Contractor/Vendor: Service Provider:

San Francisco Public Health Foundation

Total Contract Amount:

\$8,233,866

Funding Source: Program Name: Grant CDC, GF HIV Prevention, GF Health Education Community Health Engagement including COVID 19 Services

System of Care: CHE Program Code: N/A

Provider Address: Provider Phone: 1 Hallidie Plaza, Suite 808 415-504-6738 ext.101

Contact Person: Penny Eardley

RFP# and Term: RFQ 36-2017 [1/1/2020 to 12/31/2024]

Appendix A#: Funding Source Appendix B:

Year:

Funding Amount:

Funding Term: Number of UOS:

Number of UOS: Number of UDC/NOC:

Definition of UOS:

Target Population:

The San Francisco Public Health Foundation target population is the subcontractors participating in the CHEP Community Health Engagement Program.

A-1

**GF-Health Education** 

B-1b

\$615,383

7/1/2021-

6/30/22

132

10

Number of Subcontractors x months in fiscal year

B-1c

\$615,383

7/1/2022-

6/30/23

132

10

B-1d

\$615,383

7/1/2023-

6/30/24

132

10

B-1a

FY20-21

\$615,383

7/1/2020-

6/30/21

132

10

**Description of Services:** 

The San Francisco Public Health Foundation will provide Program Management, Capacity Building and Subcontractor Management Services in support of the programs listed below serviced by the following contractors: Community Health Engagement, Violence Prevention, Vision Zero and Community and Home Injury Prevention Program for Seniors (CHIPPS).

Appendix A#: Funding Source Appendix B:

Year:

Funding Amount:

Funding Term:

Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

A-2
<b>GF- HIV Prevention</b>

B-2	B-2a	B-2b	B-2c	B-2d
FY19-20	FY20-21	FY21-22	FY22-23	FY23-24
\$10.417	\$25,000	\$25,000	\$25,000	\$25,000
2/1/2020-	7/1/2020-	7/1/2021-	7/1/2022-	7/1/2023-
6/30/2020	6/30/2021	6/30/2022	6/30/2023	6/30/2024
234	536	536	536	536
n/a	n/a	n/a	n/a	n/a
11/4	11/4	11/4	11/4	11/4
Staff Hours	Staff Hours	Staff Hours	Staff Hours	

**Target Population:** 

The San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF project.

**Description of Services:** 

End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

Appendix A#: Funding Source Appendix B:

Year:

**Funding Amount:** 

Funding Term:

Number of UOS: Number of UDC/NOC:

**Definition of UOS:** 

		A-2		
	G	irant CDC		
B-3	B-3a	B-3b	B-3c	B-3d
FY19-20	FY20-21	FY21-22	FY22-23	FY23-24
\$22,917	\$25,000	\$25,000	\$25,000	\$25,000
2/1/2020-	1/1/2020-	1/1/2021-	1/1/2022-	1/1/2023-
6/30/2020	12/31/2021	12/31/2022	12/31/2023	12/31/2024
520	567	567	567	567
N/A	N/A	N/A	N/A	N/A
Staff Hours	Staff Hours	Staff Hours	Staff Hours	Staff Hours

Target Population:

The San Francisco Public Health Foundation will provide Human Resources Management/Support in support of the End Hep C SF project.

4 of 5

**Description of Services:** 

End Hep C SF supports all San Franciscans living with or at risk of contracting Hep C through prevention, education, and connections to testing and treatment.

Contractor/Vendor: San Francisco Public Health Foundation Program: Community Health Engagement FY: 19/20 thru 24/25

Appendix A#: Funding Source Appendix B: Year:

Funding Amount:

Funding Term: Number of UOS:

Number of UDC/NOC:

Definition of UOS:

A-4 General Fund - FEMA & State - HUB&CI

B-4a B-4a.1 FY20-21 FY20-21 \$4,500,000 \$1,000,000 8/1/2020 - 9/1/2020 - 06/30/2021 59 14 8 2

x months in fiscal year

**Target Population:** 

The San Francisco Public Health Foundation target population are the subcontractors participating in the services provided to San Franciscans that are disproportionately impated by COVID 19.

Description of Services:

The San Francisco Public Health Foundation will provide Program Management, Capacity Building and Subcontractor Management Services to subcontractors who will respond to an application seeking COVID-19 community prevention, mitigation, and wellness programs that include focused outreach and mobile test site support, case investigation and contact tracing (CI/CT), community care for COVID-19 positive individuals, and a community partner CI/CT training center for vulnerable populations and the neighborhoods they live in.

5 of 5

Contractor Name: San Francisco Public Health Foundation Program Name: COVID 19 Community Outreach Services –

**Program Administration** 

Appendix A-4

**Appendix Term:** 08/01/2020-06/30/2021

Funding Source: General Fund-FEMA and State-HUB&CI

#### 1. Identifiers:

San Francisco Public Health Foundation (SFPHF) 1 Hallidie Plaza, Suite 808, San Francisco, CA 94102

415-504-6738 Fax: 415-520-0471

www.sfphf.org

Executive Director/Program Director: Penny Eardley

Telephone: 415-504-6738 ext. 101 Email Address: peardley@sfphf.org

#### 2. Nature of Document:

Original     Contract Amendment     Revision to Program Budgets (1		Original	Contract Amendment	Revision to Program Budgets (RP	B)
--	--	----------	--------------------	---------------------------------	----

#### 3. Goal Statement:

In collaboration with the San Francisco Department of Public Health, and following General Accepted Accounting Principles, the San Francisco Public Health Foundation will provide Program Administration through Subcontractor Management Services in support of the programs listed below serviced by subcontractors TBD by scored application. Subcontractors will respond to an application seeking COVID-19 community prevention, mitigation, and wellness programs that include focused outreach and mobile test site support, case investigation and contact tracing (CI/CT), community care for COVID-19 positive individuals, and a community partner CI/CT training center for vulnerable populations and the neighborhoods they live in.

#### 4. Priority Population:

Priority populations in San Francisco that are disproportionately impacted by COVID 19 and adverse effects, including:

- Black/African American
- Asian
- Native Hawaiian/Pacific Islander

- Latino/a/x
- Native American/Indigenous community

Grant awards will be delineated by zip code targeting these neighborhoods:

- 94124 (Bayview-Hunter's Point)
- 94110 (Mission, Bernal Heights)
- 94134 (Visitacion Valley, Sunnydale, Portola)
- 94102 (Tenderloin)

- 94112 (Excelsior, Outer Mission, Crocker Amazon)
- 94115 (Western Addition)
- 94107 (Potrero Hill)
- 94127, 94132 (OMI/Lakeview)
- 94108 (Chinatown)

Contractor Name: San Francisco Public Health Foundation Program Name: COVID 19 Community Outreach Services – Program Administration

**Appendix Term:** 08/01/2020-06/30/2021

Appendix A-4

Funding Source: General Fund-FEMA and State-HUB&CI

#### **Modality(s)/Intervention(s):**

#### 1 Unit = 1 subcontractor x number of months of service provision in the current fiscal year

Units of Service (UOS) Description	Units of Service (UOS)	Unduplicated Clients (UDC)
COVID 19 Community Outreach Services Program	3	n/a
Administration - Start-up Months which include the RFP		
Process		
08/01/2020 - 06/30/2021 - B-4a		
COVID 19 Community Outreach Services Program		
Administration - 7 Subcontractors will provide services to a		
selected neighborhood. $(7x7 \text{ months} = 49)$		
08/01/2020 - 06/30/2021 - B-4a	49	7
COVID 19 Community Outreach Services Program		
Administration - 1 subcontractor will provide training services		
for CT/CI candidates. (1x7months=7)		
08/01/2020 - 06/30/2021 - B-4a	7	1
COVID 19 Community Outreach Services Program		
Administration - 2 Subcontractors will provide services to a		
selected neighborhood. (2x7 months = 14)		
09/01/2020 - 06/30/2021 - B-4a.1	14	2
Total UOS Delivered	73	
Total UDC Served		10

#### 5. Methodology:

#### **Program Administration of Subcontractors**

- 1. Manage and disburse funds as directed by the Department as it applies to the COVID 19 Community Outreach Services Program.
- 2. Ensure that agency be fiscally responsible and have "Generally Accepted Accounting Principles (GAAP)" in place.
- 3. Use Generally Accepted Accounting Principles (GAAP) and SFPHF's own Accounting Policies and Procedures to:
  - a. Protect the assets of the organization and of the contractor;
  - b. Ensure the maintenance of accurate records of SFPHF's financial activities;
  - c. Provide a framework for SFPHF's financial decision making;
  - d. Establish and enforce operating standards and behavioral expectations;
  - e. Serve as a training resource for financial staff; and
  - f. Ensure compliance with federal, state, local, and DPH legal, contractual, and reporting requirements

Contractor Name: San Francisco Public Health Foundation Program Name: COVID 19 Community Outreach Services –

**Program Administration** 

**Appendix Term:** 08/01/2020-06/30/2021

Funding Source: General Fund-FEMA and State-

**HUB&CI** 

Appendix A-4

#### **Objectives and Measurements:**

SFPHF must submit an Annual Summary Report documenting achievement of all Objectives to System of Care Program Manager and the Business Office Contract Compliance (BOCC) within two months from the end of the contract year.

#### A. Standardized Objectives:

"All objectives and descriptions of how objectives will be measured, are contained in the Fiscal Intermediary/Program Management document entitled: Fiscal Intermediary Performance Objectives FY20-21."

#### FY 2020-2021

By December 1, 2020, SFPHF program staff will initiate subcontract management and program administration support of subcontractors.

#### 6. Continuous Quality Improvement:

CHEP staff will work with the SFPHF Executive Director to monitor contract compliance through the Business Office of Contract Compliance (BOCC), ensuring compliance with Health Commission policies, and all contractor requirements including, but not limited to, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), non-discrimination and cultural competency requirements.

To ensure the highest quality possible, the CHEP staff will collectively monitor the quality, timeliness, and accuracy of the SFPHF contract deliverables and the methodology of this contract through regularly scheduled meetings, the review of submission of deliverables and quarterly summary reports.

#### 7. Required Language:

NA

#### 8. Subcontractors & Consultants:

- A. SFPHF is responsible for the performance of its subcontractors and consultants in this Agreement.
- B. SFPHF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFPHF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFPHF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Blood-borne Pathogen and Aerosol Transmissible Diseases.

Appendix A-4 3 of 4 Contract ID# 1000016941

Contractor Name: San Francisco Public Health Foundation Program Name: COVID 19 Community Outreach Services – Program Administration

**Appendix Term:** 08/01/2020-06/30/2021

Appendix A-4

Funding Source: General Fund-FEMA and State-HUB&CI

SFPHF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' Compensation laws and regulations.

- D. SFPHF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFPHF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFPH, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFPHF, and SFPHF acknowledges that it must comply with all requirements of the Agreements, regardless of whether they are listed again here in this Appendix.

Appendix A-4 4 of 4 Contract ID# 1000016941

# Appendix B Calculation of Charges

#### 1. Method of Payment

A. Contractor shall submit monthly invoices in the format attached in Appendix F, by the fifteenth (15th) working day of each month for reimbursement of the actual costs for Services of the immediately 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.

#### 2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Appendix B	Budget Summary
Appendix B-1, B-1a, B-1b, B-1c, B-1d	Program Administration for Community Health Engagement
Appendix B-2, B-2a, B-2b, B-2c, B-2d	Program Administration for Community Health Engagement
Appendix B-3, B-3a, B-3b, B-3c, B-3d	Program Administration for Community Health Engagement
Appendix B-4a, B-4a.1	Program Administration for Community Health Engagement - COVID-19

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, \$995,033 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 executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. 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.

The maximum dollar for each term and funding source shall be as follows:

Appendix B

Amendment: 11/01/2020 1 of 3 Contract ID# 10000016941

	<u>Term</u>	<b>Funding Source</b>	<u>Amount</u>
Original Agreement	01/01/2020 - 06/30/2020	General Fund	\$39,000
Original Agreement	02/01/2020 - 06/30/2020	General Fund	\$10,417
Original Agreement	02/01/2020 - 12/31/2020	CDC	\$22,917
Original Agreement	07/01/2020 - 06/30/2021	General Fund	\$615,383
Original Agreement	07/01/2020 - 06/30/2021	General Fund	\$25,000
Original Agreement	01/01/2021 - 12/31/2021	CDC	\$25,000
Original Agreement	07/01/2021 - 06/30/2022	General Fund	\$615,383
Original Agreement	07/01/2021 - 06/30/2022	General Fund	\$25,000
Original Agreement	01/01/2022 - 12/31/2022	CDC	\$25,000
Original Agreement	07/01/2022 - 06/30/2023	General Fund	\$615,383
Original Agreement	07/01/2022 - 06/30/2023	General Fund	\$25,000
Original Agreement	01/01/2023 - 12/31/2023	CDC	\$25,000
Original Agreement	07/01/2023 - 06/30/2024	General Fund	\$615,383
Original Agreement	07/01/2023 - 06/30/2024	General Fund	\$25,000
Original Agreement	01/01/2024 - 12/31/2024	CDC	\$25,000
Amendment #1	08/01/2020 - 06/30/2021	GF – FEMA	\$2,250,000
Amendment #1	08/01/2020 - 06/30/2021	GF – FEMA	\$2,000,000
Amendment #1	08/01/2020 - 06/30/2021	GF – FEMA	\$250,000
Amendment #1	09/01/2020 - 06/30/2021	State	\$1,000,000
Amendment #1	07/01/2020 - 12/31/2024	TBD	\$130,406
	-	Total Award Amount:	\$8,364,272

Contingency 7/1/2020 – 12/31/2024: \$995,033 (This equals the total NTE) Total: \$9,359,305

- C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.
- D. A final closing invoice, clearly marked "FINAL," shall be submitted no later than fortyfive (45) calendar days following the closing date 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.
- 3. 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.

Appendix B

CID#:	1000016941																Appendix:	В
DPH Section: C	HEP - Commun	DPH Section: CHEP - Community Health Equity and Promotion	and Promotion														1/1/2020 to Contract Term: 12/31/2024	1/1/2020 to 12/31/2024
Check one: [] Original Agreement [ X] Amendment [ ] Revision to Program Budgets Agenoy/Contractor Name: San Francisco Public Health Foundation	ent []Revisi	on to Program Bu blic Health Founc	idgets tation													Current Fundin	Current Funding Notification Date: _	10/28/20
	Community	Community	Community	Community	Community	Community	COVID 19	COVID 19 Community	Community	Community	Community	Community	Community	Community	Community	Community	Community Health	
Program/Provider Name:	Engagement	Engagement	Engagement	Engagement	Engagement	Engagement	Outreach	Outreach	Engagement	Engagement	Engagement	Engagement	Engagement	Engagement	Engagement	Engagement	Engagement	
Appendix Number:	A-1/B-1	A-2/B-2	A-2/B-3	A-1/B-1a	A-2/B-2a	A-2/B-3a	A-4/B4a	A-4/B-4a.1	A-2/B-1b	A-2/B-2b	A-2/B-3b	A-2/B-1c	A-2/B-2c	A-2/B-3c	A-2/B-1d	A-2/B-2d	A-2/B-3d	TOTALS
Appendix Term:	1/01/2020-06/30/2020	02/01/2020-06/30/2020	TODER SPORTED LODGE TO CONTROL OF CONTROL OT CONTROL OF	07/01/2020-06/30/2021	12020-08/30/2021	91/01/2021-12/31/2021	08/01/20 20-06/30/2021	19/01/2020-06/30/2021	1220.050 - (2221.00) (222.052 - (2221.00) (222.050 - (2221.00) (222.050 - (2221.00) (222.050 - (2221.00) (222.050 - (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.00) (222.050 - (222.050	01/2021-06/30/2022	101/2022-12/31/2022 0/	101/2022 - 06/30/2023 0	101/2022 - 06/30/2023	71/01/2023-12/31/2023	07/01/2023 - 06.80/2024	97/01/2023 - 06/30/2024	01/01/2024-12/31/2024	
EXPENSES																		
Salaries		\$ 8,033 \$	17,850		\$ 18,386	\$ 19,472				\$ 18,386 \$	19,472	-	\$ 18,386	\$ 19,472	s	\$ 18,386	\$ 19,472	\$ 177,315
Employee Benefits \$		\$ 1,437 \$	\$ 2,983	. \$	\$ 4,341	\$ 3,255			\$	\$ 4,341	3,255		\$ 4,341	\$ 3,255		\$ 4,341	\$ 3,255	\$ 34,804
Total Personnel Expenses \$		\$ 9,470 \$	\$ 20,833 \$		\$ 22,727	\$ 22,727				\$ 22,727 \$	\$ 22,727 \$		\$ 22,727	\$ 22,727	. \$	\$ 22,727	\$ 22,727	\$ 212,119
Employee Fringe Benefit Rate	%0:0	17.9%	16.7%	%0'0	23.6%	16.7%	%0.0		%0:0	23.6%	16.7%	%0.0	23.6%	16.7%	%0:0	23.6%	16.7%	
S Operating Expense	\$ 35,455			\$ 559,441			\$ 4,250,000	\$ 1,000,000	\$ 559,441	-		\$ 559,441			\$ 559,441			\$ 7,523,219
Subtotal Direct Costs \$	\$ 35,455 \$	\$ 9,470	\$ 20,833	\$ 559,441	\$ 22,727	\$ 22,727	\$ 4,250,000	\$ 1,000,000	\$ 559,441	\$ 727,22 \$	\$ 22,727	\$ 559,441	\$ 22,727	\$ 22,727	\$ 559,441	\$ 22,727	\$ 22,727	\$ 7,735,338
Indirect Cost Amount \$	\$ 3,545	\$ 947	\$ 2,084	\$ 55,942	\$ 2,273	\$ 2,273	\$ 250,000		\$ 55,942	\$ 2,273 \$	\$ 2,273	\$ 55,942	\$ 2,273	\$ 2,273	55,942	\$ 2,273	\$ 2,273	\$ 498,528
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	2.9%	%0:0	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	
Total Expenses   \$	39,000	\$ 10,417	\$ 22,917	\$ 615,383	\$ 25,000	\$ 25,000	\$ 4,500,000	\$ 1,000,000	\$ 615,383 \$	\$ 25,000 \$	\$ 25,000 \$	\$ 615,383	\$ 25,000	\$ 25,000	\$ 615,383	\$ 25,000	\$ 25,000	\$ 8,233,866
REVENUES & FUNDING SOURCES																		
DPH Funding Sources (select from drop-down list)	ist)																	
General Fund - Health Education	39,000			615,383					615,383			615,383			615,383			2,500,532
General Fund - HIV Prevention		10,417			25,000					25,000			25,000			25,000		110,417
Generan Fund - FEMA							2,250,000											
Generan Fund - FEMA							2,000,000											
State-HUB&CI								1,000,000										
Generan Fund - FEMA							250,000											
Grant - CDC			22,917			25,000					25,000			25,000			25,000	122,917
Total DPH Revenues	\$ 39,000	\$ 10,417	\$ 22,917	\$ 615,383	\$ 25,000	\$ 25,000	\$ 4,500,000	\$ 1,000,000	\$ 615,383 \$	\$ 25,000 \$	\$ 25,000 \$	\$ 615,383	\$ 25,000	\$ 25,000	\$ 615,383	\$ 25,000	\$ 25,000	8,233,866
Total Revenues (DPH and Non-DPH) \$	\$ 39,000	\$ 10,417	\$ 22,917 \$	\$ 615,383	\$ 25,000	\$ 25,000	\$ 4,500,000	\$ 1,000,000	\$ 615,383	\$ 25,000 \$	25,000	\$ 615,383	\$ 25,000	\$ 25,000	\$ 615,383	\$ 25,000	\$ 25,000	\$ 8,233,866
Cost Reimbursement (CR) or Fee-For-Service (FFS)	(CR)	(CB)	(CR)	(CB)	(CR)	(CB)	(CB)	(CB)	(CB)	(CR)	(80)	(B)	(CR)	(CR)	(CR)	(CB)	(aC)	

Contract ID# 1000016941

Contractor: San Franc	isco Public H	ealth Fo	oundation				Ap	pendix:	B-4a
Program: COVID 19	Community C	utreac	h Services				Append	ix Term:	08/01/2020-06/30/2021
Full Contract Term: 1/1/2020 to	12/31/2024						Funding	Source:	General Fund- FEMA
	UOS COST	ALLO	CATION BY S	SERVIC	E MODE				
Service Modes	COVID Commu Outrea Service Progra Administr	nity ich es- am							
Operating Expenses	Expense	%	Expense	%	Expense	%	Expense	%	Totals
Consultants/Subcontractor:	1		·						
TBD	3,800,000	100%		0%		0%		0%	3,800,000
TBD	450,000	100%		0%		0%		0%	450,000
Total Operating Expenses	4,250,000	100%	-	0%	-	0%	-	0%	4,250,000
Total Direct Expenses	4,250,000	100%	_	0%	<u> </u>	0%		0%	4,250,000
Indirect Expenses 5.88%	250,000	100%	-	0%	-	0%	-	0%	250,000
TOTAL EXPENSES	4,500,000	100%	-	0%	-	0%	-	0%	4,500,000
Unit of Service Ty	e Subcontr	actor	0		0		0		
Number of UOS per Service Mo	<del>- i</del>								59
Cost Per UOS by Service Mo		.19	\$0.00		\$0.00	)	\$0.00	)	N/A
umber of UDC/NOC per Service Mo									8
	•				!		!		Rev: 02/18

#### **BUDGET JUSTIFICATION**

Contractor NameSan Francisco Public Health FoundationAppendix:B-4aProgram Name:COVID 19 Community Outreach ServicesAppendix Term:08/01/2020-06/30/2021Funding Source:General Fund- FEMA

#### 2) OPERATING EXPENSES:

#### **Consultants/Subcontractors:**

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
TBD	Seven (7) subcontractors selected through an application process with a technical review panel to deliver COVID 19 services to priority populations disproportiionately affected by the pandemic. Services to include navigation to testing, support for families in isolation, contact investigation and contact tracing.		\$ 3,800,000
TBD	One (1) Subcontractor for training of culturally appropriate Contact Investigators/Contact racers for the priority populations identified in the funding application. Subcontractor to be identified through technical review of application.		\$ 450,000

Total Consultants/Subcontractors: \$ 4,250,000

TOTAL OPERATING EXPENSES: \$ 4,250,000

TOTAL DIRECT COSTS: \$ 4,250,000

#### 4) INDIRECT COSTS

Please list here the personnel and ledger expenses that are included in your shared costs?

#### Amount

Executive Director, Program Coordinator, Finance Manager, Accounting Assistant, rent, audit, supplies.	\$ 250,000

Indirect Rate: 5.88%
TOTAL INDIRECT COSTS: \$ 250,000

TOTAL EXPENSES: \$ 4,500,000

Contractor: San Francisc	Appendix			B-4a.1						
Program: COVID 19 Co	Program: COVID 19 Community Outreach Services								09/01/2020-06/30/2021	
Full Contract Term: 1/1/2020 to 1	2/31/2024						Funding	Source:	State-HUB&CI	
	UOS COST A	ALLOCA	TION BY SER	VICE N	IODE					
Service Modes:	COVID Commu Outreach Se Progra Administr	nity ervices- im								
Operating Expenses	Expense	%	Expense	%	Expense	%	Expense	%	Totals	
Consultants/Subcontractor:										
TBD	1,000,000	100%		0%		0%		0%	1,000,000	
Total Operating Expenses	1,000,000	100%	-	0%	-	0%	-	0%	1,000,000	
Total Direct Expenses	1,000,000	100%	-	0%	_	0%	_	0%	1,000,000	
Indirect Expenses	, ,									
TOTAL EXPENSES	1,000,000	100%	-	0%	-	0%	-	0%	1,000,000	
Unit of Service Type	Subcontr	actor	0		0		0			
Number of UOS per Service Mode	14								14	
Cost Per UOS by Service Mode	\$71,428	.58	\$0.00		\$0.00		\$0.00		N/A	
umber of UDC/NOC per Service Mode	2								2	
	•						•		Rev: 02/18	

#### **BUDGET JUSTIFICATION**

Contractor Name San Francisco Public Health Foundation	Appendix:	B-4a.1
Program Name: COVID 19 Community Outreach Services	Appendix Term:	09/01/2020-06/30/2021
	Funding Source:	State-HUB&CI

### 2) OPERATING EXPENSES:

#### Consultants/Subcontractors:

Consult/Subcontractor Name	Service Description	Rate/Formula	Cost
TBD	Two (2) subcontractors selected through an application process with a technical review panel to deliver COVID 19 services to priority populations disproportiionately affected by the pandemic. Services to include navigation to testing, support for families in isolation, contact investigation and contact tracing.		\$ 1,000,000

Total Consultants/Subcontractors: \$ 1,000,000

TOTAL OPERATING EXPENSES: \$ 1,000,000

TOTAL DIRECT COSTS: \$ 1,000,000

TOTAL EXPENSES: \$ 1,000,000

### APPENDIX D FEMA CONTRACT REQUIREMENTS

- 1. Contract Requirements. This contract may be eligible for FEMA funding. FEMA requires inclusion of the following contract provisions for procurement under exigent or emergency circumstances. The Parties must comply with these provisions as a minimum. In the event of a conflict with other provisions in this contract that address the same or a similar requirement, the provisions that are stricter and impose the greater duties upon Contractor shall apply.
- 2. Remedies for Breach. In addition to all other remedies included in this contract, Contractor shall, at a minimum, be liable to the City for all foreseeable damages it incurs as a result of Contractor violation or breach of the terms of this contract. This includes without limitation any costs incurred to remediate defects in Contractor's services and/or the additional expenses to complete Contractor's services beyond the amounts agreed to in this contract, after Contractor has had a reasonable opportunity to remediate and/or complete its services as otherwise set for in this contract. All remedies provided for in this contract 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.
- **3. Termination for Convenience**. City shall have the option, in its sole discretion, to terminate this Contract, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination. The notice shall specify the date on which termination shall become effective. In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs reasonably necessary to effectuate demobilization from the work.
- 4. Termination for Cause. 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 contract for cause or to seek specific performance of all or any part of this contract. In addition, 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. City shall have the right to offset from any amounts due to Contractor under this contract or any other contract between City and Contractor all damages, losses, costs or expenses incurred by City as a result of such event of default and any liquidated damages due from Contractor pursuant to the terms of this contract or any other contract.
- **5. Work Hours and Safety Standards.** If this contract is for a price in excess of \$100,000, and involves the employment of mechanics or laborers, Contractor agrees as follows:
- A. Overtime requirements. No contractor or subcontractor contracting for any part of the contract work which may require or involve the employment of laborers or mechanics shall require or permit any such laborer or mechanic in any workweek in which he or she is employed on such work to work in excess of forty hours in such workweek unless such laborer or mechanic

Appendix D 1 of 6 Contract ID# 1000016941

receives compensation at a rate not less than one and one-half times the basic rate of pay for all hours worked in excess of forty hours in such workweek.

- B. Violation; liability for unpaid wages; liquidated damages. In the event of any violation of the clause set forth in paragraph (A) of this section the Contractor and any subcontractor responsible therefor shall be liable for the unpaid wages. In addition, Contractor and subcontractor(s) shall be liable to the United States for liquidated damages. Such liquidated damages shall be computed with respect to each individual laborer or mechanic, including watchmen and guards, employed in violation of the clause set forth in paragraph (A) of this section, in the sum of \$26 for each calendar day on which such individual was required or permitted to work in excess of the standard workweek of forty hours without payment of the overtime wages required by the clause set forth in paragraph (A) of this section.
- C. Withholding for unpaid wages and liquidated damages. The City shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld, from any moneys payable on account of work performed by the Contractor or subcontractor under any such contract or any other Federal contract with the same prime contractor, or any other federally-assisted contract subject to the Contract Work Hours and Safety Standards Act, which is held by the same prime contractor, such sums as may be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for unpaid wages and liquidated damages as provided in the clause set forth in paragraph (B) of this section.
- D. Subcontracts. The Contractor or subcontractor shall insert in any subcontracts the clauses set forth in paragraphs (A) through (D) of this section and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The Contractor shall be responsible for compliance by any subcontractor or lower tier subcontractor with the clauses set forth in paragraphs (A) through (D) of this section.
- E. This Section 5 does not apply to the purchase of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence.
- **6. Rights to Inventions.** If FEMA's funding for this contract meets the definition of "funding agreement," and if this contract constitutes a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment, or performance of experimental, developmental, or research work, the City agrees to comply with the requirements of 37 C.F.R. Part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements, and any implementing regulations issued by FEMA.
- **7. Clean Air Act.** If this contract is for a price in excess of \$150,000, Contractor agrees as follows:
- A. The Contractor agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. § 7401 et seq.

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- B. The Contractor agrees to report each violation to the City and understands and agrees that the City will, in turn, report each violation as required to assure notification to the Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- C. The Contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.
- **8. Federal Water Pollution Act**. If this contract is for a price in excess of \$150,000, Contractor agrees as follows:
- A. The Contractor agrees to comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. 1251 et seq.
- B. The Contractor agrees to report each violation to the City and understands and agrees that the City will, in turn, report each violation as required to assure notification to the Federal Emergency Management Agency, and the appropriate Environmental Protection Agency Regional Office.
- C. The Contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance provided by FEMA.
- **9. Debarment and Suspension**. If this contract is for a price in excess of \$25,000, Contractor agrees as follows:
- A. This contract is a covered transaction for purposes of 2 C.F.R. pt. 180 and 2 C.F.R. pt. 3000. As such, the Contractor is required to verify that none of the Contractor's principals (defined at 2 C.F.R. § 180.995) or its affiliates (defined at 2 C.F.R. § 180.905) are excluded (defined at 2 C.F.R. § 180.940) or disqualified (defined at 2 C.F.R. § 180.935).
- B. The Contractor must comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, and must include a requirement to comply with these regulations in any lower tier covered transaction it enters into.
- C. This certification is a material representation of fact relied upon by the City. If it is later determined that the Contractor did not comply with 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C, in addition to remedies available to the City, the Federal Government may pursue available remedies, including but not limited to suspension and/or debarment.
- D. The Contractor agrees to comply with the requirements of 2 C.F.R. pt. 180, subpart C and 2 C.F.R. pt. 3000, subpart C while this offer is valid and throughout the period of any contract that may arise from this offer. The Contractor further agrees to include a provision requiring such compliance in its lower tier covered transactions.

Appendix D 3 of 6 Contract ID# 1000016941

#### 10. Procurement of Recovered Materials

- A. In the performance of this contract, the Contractor shall make maximum use of products containing recovered materials that are EPA-designated items unless the product cannot be acquired:
  - i. Competitively within a timeframe providing for compliance with the contract performance schedule;
  - ii. Meeting contract performance requirements; or
  - iii. At a reasonable price.
- B. Information about this requirement, along with the list of EPA-designated items, is available at EPA's Comprehensive Procurement Guidelines web site, https://www.epa.gov/smm/comprehensive- procurement-guideline-cpg-program.
- C. The Contractor also agrees to comply with all other applicable requirements of Section 6002 of the Solid Waste Disposal Act."
- 11. Time and Material Contracts. To the extent this contract includes work that is paid on a time and material basis, such work must have a guaranteed maximum price (GMP). The GMP is set forth in the body of this contract. The GMP constitutes a ceiling price that Contractor exceeds at its own risk.
- **12. MBE/WBE Outreach.** Contractor must, at a minimum, take the following affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used as Subcontractors on this Project:
- A. Place qualified small and minority businesses and women's business enterprises on Contractor's solicitation list for this Project;
- B. Assure that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources for this Project;
- C. Divide the subcontracts, when feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
- D. Establish delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises; and
- E. Use the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.
- **13.** Access to Records. The following access to records requirements apply to this contract:
- A. The Contractor agrees to provide City, the FEMA Administrator, the Comptroller General of the United States, or any of their authorized representatives access to any books,

Appendix D 4 of 6 Contract ID# 1000016941

documents, papers, and records of the Contractor which are directly pertinent to this contract for the purposes of making audits, examinations, excerpts, and transcriptions.

- B. The Contractor agrees to permit any of the foregoing parties to reproduce by any means whatsoever or to copy excerpts and transcriptions as reasonably needed.
- C. The Contractor agrees to provide the FEMA Administrator or his authorized representatives access to construction or other work sites pertaining to the work being completed under the contract.
- D. In compliance with the Disaster Recovery Act of 2018, the City and the Contractor acknowledge and agree that no language in this contract is intended to prohibit audits or internal reviews by the FEMA Administrator or the Comptroller General of the United States.
- 14. Department of Homeland Security Seal, Logo, and Flags. The Contractor shall not use the DHS seal(s), logos, crests, or reproductions of flags or likenesses of DHS agency officials without specific FEMA pre-approval.
- 15. Compliance with Federal Law, Regulations, and Executive Orders. This is an acknowledgement that FEMA financial assistance will be used to fund all or a portion of the contract. The Contractor will comply with all applicable Federal law, regulations, executive orders, FEMA policies, procedures, and directives.
- 16. No Obligation by Federal Government. The Federal Government is not a party to this contract and is not subject to any obligations or liabilities to the non-Federal entity, Contractor, or any other party pertaining to any matter resulting from the contract.
- 17. Program Fraud and False or Fraudulent Statements or Related Acts. The Contractor acknowledges that 31 U.S.C. Chap. 38 (Administrative Remedies for False Claims and Statements) applies to the Contractor's actions pertaining to this contract.

#### 18. Byrd Anti-Lobbying Certification.

- A. Contractors who apply or bid for an award of \$100,000 or more shall file the required certification pursuant to the Byrd Anti-Lobbying Amendment, 31 U.S.C. §1352, as amended. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, officer or employee of Congress, or an employee of a Member of Congress in connection with obtaining any Federal contract, grant, or any other award covered by 31 U.S.C. § 1352. Each tier shall also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the recipient who in turn will forward the certification(s) to the awarding agency.
- B. If this contract is for a price of \$100,000 or more, Contractor, and its lower tiers, must sign and submit to the City the following certification:

Appendix D 5 of 6 Contract ID# 1000016941 Amendment: 11/01/2020

#### APPENDIX A, 44 C.F.R. PART 18 – CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person 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 the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or 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 this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that 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 cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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.

The Contractor, San Francisco Public Health Foundation certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. Chap. 38, Administrative Remedies for False Claims and Statements, apply to this certification and disclosure, if any.

Penny Eardley Signature of Contractor's Authorized Official

Penny Eardley, Executive Director Name and Title of Contractor's Authorized Official 11/19/2020 | 3:43:00 MST

Date

Appendix D 6 of 6 Contract ID# 1000016941 Amendment: 11/01/2020

APPENDIX F-4a 08/01/2020 - 06/30/2021 PAGE A

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San Francisco, CA 94103		By:						Date:	:	
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APPENDIX F-4a 08/01/2020 - 06/30/2021 PAGE B

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APPENDIX F-4a.1 09/01/2020 - 06/30/2021 PAGE A

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APPENDIX F-4a.1 09/01/2020 - 06/30/2021 PAGE B

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Appendix F-4a.1 Amendment: 11/01/2020

# OFFICE OF THE MAYOR SAN FRANCISCO



#### LONDON N. BREED MAYOR

# PROCLAMATION BY THE MAYOR DECLARING THE EXISTENCE OF A LOCAL EMERGENCY

WHEREAS, California Government Code Sections 8550 et seq., San Francisco Charter Section 3.100(13) and Chapter 7 of the San Francisco Administrative Code empower the Mayor to proclaim the existence of a local emergency, subject to concurrence by the Board of Supervisors as provided in the Charter, in the case of an emergency threatening the lives, property or welfare of the City and County or its citizens; and

WHEREAS, The United States has confirmed cases of individuals who have a severe acute respiratory illness caused by a novel (new) coronavirus ("COVID-19" or "the virus") first detected in Wuhan, Hubei Province, People's Republic of China ("China"). The virus was first reported in China on December 31, 2019. As of February 24, 2020, the World Health Organization ("WHO") has reported approximately 77,262 confirmed cases of COVID-19 in China, more than the number of confirmed cases of Severe Acute Respiratory Syndrome (SARS) during its 2003 outbreak. An additional 2,069 cases have been confirmed across 29 other countries; in many of these cases, the infected individuals had not visited China. More than 2,500 people have died from the virus, including 23 outside of China. The number of confirmed cases has continued to escalate dramatically over a short period of time; and

WHEREAS, WHO officials now report that sustained human-to-human transmission of the virus is occurring. Transmission from an asymptomatic individual has been documented. Although the majority of individuals infected with COVID-19 recover from the disease without special treatment, approximately 1 in 6 may become seriously ill. Manifestations of severe disease have included severe pneumonia, acute respiratory distress syndrome, septic shock, and multi-organ failure. Approximately 2% of the people confirmed infected with COVID-19 have died; and

WHEREAS, On January 30, 2020, WHO declared the COVID-19 outbreak a public health emergency of international concern, and on January 31, 2020, the U.S. Department of Health and Human Services declared a Public Health Emergency for the United States; and

WHEREAS, The Centers for Disease Control and Prevention ("CDC") has determined that the virus presents a serious public health threat, requiring coordination among state

# OFFICE OF THE MAYOR SAN FRANCISCO



#### LONDON N. BREED MAYOR

and local health departments to ensure readiness for potential health threats associated with the virus; and

WHEREAS, The CDC has issued guidance to local and State health departments, including San Francisco's Department of Public Health ("DPH"), concerning risk assessment and public health management of persons with potential exposure to COVID-19. These guidelines require DPH to make extraordinary efforts to monitor ongoing communicable disease threats and prepare for management of individuals who may have been exposed to COVID-19; and

WHEREAS, DPH, the Department of Emergency Management, and other City partners have been working successfully and diligently to implement CDC guidelines, but now require additional tools and resources to protect the public health given the current state of the epidemic and the need for a sustained response; and

WHEREAS, The City's Director of Public Health has determined that DPH cannot comply with the CDC's guidance without immediate action beyond the City's ordinary response capabilities, including directing personnel and resources from other City departments to assist with the ongoing and developing threat of COVID-19; and

WHEREAS, Conditions of extreme peril to the safety of persons and property have arisen; and

WHEREAS, The Mayor does hereby proclaim that the aforesaid conditions of extreme peril warrant and necessitate the proclamation of the existence of a local emergency,

### NOW, THEREFORE,

I, London N. Breed, Mayor of the City and County of San Francisco, proclaim the existence, effective immediately on February 25, 2020, of an emergency within the City and County threatening the lives, property or welfare of the City and County and its citizens;

#### It is further ordered that:

(1) All City and County officers and employees take all steps requested by the Director of Public Health to prevent the spread of COVID-19 and to prevent or alleviate illness or death due to the virus; and

## OFFICE OF THE MAYOR SAN FRANCISCO



#### LONDON N. BREED MAYOR

(2) All City and County officers and employees take all steps requested by the Director of Public Health to qualify the City for reimbursement from the Federal Emergency Management Agency and for other state and federal relief as may be available to reimburse the City for the expenses it incurs in addressing this emergency; and

### I further proclaim and order that:

By the terms of this emergency declaration the government of the City and County of San Francisco is organized under the provisions of the Incident Command System (ICS), which system forms an essential part of the City's Emergency Operations Plan. The head of each City department and agency shall observe his or her proper relationship in the command structure outlined by the system and shall respond to the orders and requests of the Lead Department designated to exercise supervision over his or her department during the course of this emergency;

Because of the extreme peril to its residents and visitors, the Governor of the State of California is hereby requested to include the area of the City and County of San Francisco in any emergency declaration by the State, and is further requested to ensure that the City and County is included in any emergency declaration that may be issued by the President of the United States.

### And I further proclaim and order that:

This declaration of a local emergency shall continue to exist until it is terminated by the Mayor or the Board of Supervisors. All departments of the City and County of San Francisco are strictly ordered to cooperate with the requests for material and personnel resources that may emanate from the Incident Command Staff of the City and County which is located in the Emergency Command Center of the City and County of San Francisco.

DATED: 2/25/2020

London N. Breed

Mayor of San Francisco

# **Invoice for Emergency Services Addendum**

Contractor Name: San Francisco Public Health Foundation For Contractor Contract ID/PO ID: 1000016941 213 **RR**#: 0001974 Invoice Billing Period: Invoice No./ Invoice Amt: For Service Hours invoices submission, contractor must complete the 214s Details tab and 214s Summary table will be updated automatically. 214s Summary Name **Position** No. of Hours Rate Subtotal \$ \$ \$ \$ \$ \$ Total 214s \$ Please fill out the Operating Expenses Detail tab and the summary table below will be updated. **Operating Expenses Summary Materials and Supplies** \$ \$ **General Operating** Staff Travel \$ Other Expenses **Total Operating** Please fill out the second and third rows, indicate the Percentages Only. **Total 214s & Operating Exppenses:** Fringe Benefits Percentage/Total Fringe Benefits: 0% \$ **Indirect Cost Percentage / Total Indirect Cost:** 0% Invoice Total: I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature: Date: For Name&Title: **Reviewed and Approved for Payment:** Signature: Date: For Name & Title:

 Applendix H

 Amendment: 11/01/2020
 Contract ID# 1000016941

#### CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH MODIFIED ACTIVITY LOG (ICS 214)

1. Incident Name:			2. Operational Period (Saturda	ay to Friday)		
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6. Activated Employees Information:			DSW#:	,		
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#### CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH MODIFIED ACTIVITY LOG (ICS 214)

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### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/04/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED

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	CLAIMS-MADE			2020-01142-UMB-NPO		02/04/2020	02/04/2021	AGGREGATE	\$ 1,000	0,000
	DED RETENTION \$ 10,000 WORKERS COMPENSATION				·			S 2 050   10TU	s	
	AND EMPLOYERS' LIABILITY  ANY PROPRIETOR/PARTNER/EXECUTIVE  Y / N							➤ PER STATUTE OTH-		
В	OFFICER/MEMBER EXCLUDED?	NIA		57WECAF3VEB		04/19/2020	04/19/2021	E.L. EACH ACCIDENT	1 200	0.000
	If yes, describe under							E.L. DISEASE - EA EMPLOYE		0,000
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT		
С	Cyber Liability Policy			P-001-000153129-02		06/01/2020	06/01/2021	Each claim Aggregate		000,000
City	RIPTION OF OPERATIONS / LOCATIONS / VEHICLE & County of San Francisco and the Dept. of the dendorsement							additional insured as per	the	
CER	ERTIFICATE HOLDER CANCELLATION									
	City & County of San Francisco Dept. of Public Health 101 Grove Street # 402 San Francisco		***************************************	CA 94102	SHO THE ACC		ATE THEREOF H THE POLICY TATIVE	SCRIBED POLICIES BE CA , NOTICE WILL BE DELIVE PROVISIONS.		BEFORE
	1			WAY WHIVE			740	Armendam Comp.C. Strateman		l

Named Insured: San Francisco Public Health Foundation

Policy: 2020-01142-NPO

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

#### ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### SCHEDULE

Name of Person or Organization:

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy, and for which a certificate of insurance naming such person or organization as additional insured has been issued, but only with respect to their liability arising out of their requirements for certain performance placed upon you, as a non-profit organization, in consideration for funding or financial contributions you receive from them. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for

"bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your on-going operations; or
- B. In connection with your premises owned by or rented to you

THE INSURANCE provided under this endorsement is primary & non-contributory to any other valid & collectible insurance carried by the additional insured entity and this insurance will apply separately to each insured against whom a claim is made or a suit is brought.

CG 2026 (07/04)

POLICY NUMBER:

2020-01142-NPO

COMMERCIAL AUTO LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies the insurance provided under the following:

### COMMERCIAL AUTOMOBILE LIABILITY COVERAGE PART

#### **SCHEDULE**

Name of Person or Organization:

All entities named in the attached certificate of insurance

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of automobiles owned, leased, hired or borrowed by or on behalf of the Contractor.



## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

### WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT - CALIFORNIA

Policy Number: 57 WEC AF3VEB

**Endorsement Number: 1** 

Effective Date: 04/19/20

Effective hour is the same as stated on the information Page of the policy.

Named Insured and Address: San Francisco Public Health Foundation

1 HALLIDIE PLZ STE 808 SAN FRANCISCO CA 94102

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be 5 % of the California workers' compensation premium otherwise due on such remuneration.

#### SCHEDULE

#### Person or Organization

Job Description

City & County of San Francisco Department of Public Health 101 Grove St Ste A02 San Francisco, CA 94102

001

Authorized Representative

Form WC 04 03 06

(1) Printed in U.S.A.

Process Date: 04/24/20

Policy Expiration Date: 04/19/21



#### 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 #: 211164

Bid/RFP #:

1

### **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: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers/contract-approval-city-officers</a>

1. FILING INFORMATION	7
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	
	$Q_{\lambda}$

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Arlene Lee		(415) 255-3492
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
DPH	Department of Public Health	arlene.lee@sfdph.org

5. CONTRACTOR			
NAME OF CONTRACTOR		TELEPHONE N	IUMBER
		(445) 50	4 6720
San Francisco Public Health Foundation	(415) 504-6738		
STREET ADDRESS (including City, State and Zip Code)		EMAIL	<u> </u>
1 Hallidie Plaza, Suite 808, SF, CA 94102			
0			
6. CONTRACT			
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)

1	Hallidle Plaza, Sufte 808, SF	, CA 94102			
			<u>'</u>		
6. C	ONTRACT				
	E CONTRACT WAS APPROVED BY THE CITY I	LECTIVE OFFICER(S)	ORIGINAL BID/F	RFP NUMBER	FILE NUMBER (If applicable)
		$\Delta$			211164
		100			
DESC	CRIPTION OF AMOUNT OF CONTRACT				
\$2	0,027,567	<b>YOY</b> .			
+	· , · - · , · · · ·				
NAT	URE OF THE CONTRACT (Please describe)	340			
As se	-needed project based support rvices, for a total agreement	services - Cat term of Januar	y 1, 2020, t	gram admin	cember 31, 2024.
				3	
				X	
				5	
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7. C	OMMENTS				
0.6					
	ONTRACT APPROVAL contract was approved by:				
11113	THE CITY ELECTIVE OFFICER(S) IDENTIFIED	ON THIS FORM			
	THE CITY ELECTIVE OF THE MAJOR INC.				
	A BOARD ON WHICH THE CITY ELECTIVE C	FFICER(S) SERVES			
	A BOARD ON WHICH THE CITY ELECTIVE C	FFICER(S) SERVES			
	A BOARD ON WHICH THE CITY ELECTIVE O	FFICER(S) SERVES			
	Board of Supervisors				
			THE CITY ELECTIV	E OFFICER(S) II	DENTIFIED ON THIS FORM SITS
	Board of Supervisors		THE CITY ELECTIV	E OFFICER(S) II	DENTIFIED 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.

cont	contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ		
1	Bennett	Ayanna	Board of Directors		
2	Falk	Nicole	Board of Directors		
3	Longstreth	Elizabeth	Board of Directors		
4	Morewitz	Mark	Board of Directors		
5	Lau	Gina	Board of Directors		
6	Lyles	Courtney	Board of Directors		
7	Moore	Melissa	Board of Directors		
8	Oxford	Nick	Board of Directors		
9	Sharma	Adam	Board of Directors		
10	Villagomez	Alice	Board of Directors		
11	Eardley	Penny	CEO		
12	CARECEN SF		Subcontractor		
13	Chinatown Comm Dev Ctr		Subcontractor		
14	Curry Senior Center		Subcontractor		
15	Family Connections Center		Subcontractor		
16	Rebuilding Together SF		Subcontractor		
17	Senior Disability Action		Subcontractor		
18	Tenderloin Comm Ben Dist		Subcontractor		
19	walk SF		Subcontractor		

3

#### 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	ТҮРЕ
20	Booker T Washington		Subcontractor
21	Chinese Hospital	<b>&gt;</b>	Subcontractor
22	Family & Child Emp Svs SF		Subcontractor
23	Mission Language Voc Schoo	<b>'</b> Q',	Subcontractor
24	Mission Nghbrhood Hlth Ctr	30	Subcontractor
25	Rafiki Coalition	S.	Subcontractor
26	SF AIDS Foundation	9,	Subcontractor
27	SF Community Health Center	9	Subcontractor
28	Southwest Community Corp		Subcontractor
29	YMCA Urban Services		Subcontractor
30	Collective Impact		Subcontractor
31			
32			
33			
34			
35			
36			
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38			

# 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 41 42 43 44 45 46 47 48 49 50 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		
CLERK			
BOS Clerk of the Board			

### San Francisco Department of Public Health



Dr. Grant Colfax Director of Health

November 1, 2021

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 San Francisco Public Health Foundation-Community Engagement, in the amount of \$20,027,567.

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 2;
- Amendment 1;
- Original Agreement;
- Form SFEC-126 for the Board of Supervisors;
- Amended Form SFEC-126 for the Board of Supervisors.

For questions on this matter, please contact Arlene Lee, <u>Arlene.Lee@SFDPH.org</u>.

Thank you for your time and consideration.

Sincerely,

Arlene Lee

Arlene Lee

Office of Contracts Management and Compliance

**DPH Business Office** 

cc: Dr. Grant Colfax, Director of Health Greg Wagner, Chief Operating Officer Michelle Ruggels, Director, DPH Business Office