File No. 10	"	Э	Q	O
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Committee	ltem	
Board Item	No	<u>48</u>

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

	pervisors Meeting Date: January 4, 2011
Cmte Board	
	Motion
	Resolution
	Ordinance
ПП	Legislative Digest
H H	Budget Analyst Report
	Legislative Analyst Report
	Youth Commission Report
	· · · · · · · · · · · · · · · · · · ·
	Introduction Form (for hearings)
	Department/Agency Cover Letter and/or Report
	MOU
	Grant Information Form
	Grant Budget
	Subcontract Budget
	Contract/Agreement
	Award Letter
H. H	Application
<u></u>	• •
	Public Correspondence
OTHER *	(Use back side if additional space is needed)
Completed	by: <u>Annette Lonich</u> Date: <u>December 20, 2010</u>

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.

INTRODUCTION FORM

By a member of the Board of Supervisors or the Mayor

Time Stamp or Meeting Date

I hereby submit the following item for introduction:
1. For reference to Committee: An ordinance, resolution, motion, or charter amendment. X 2. Request for next printed agenda without reference to Committee 3. Request for Committee hearing on a subject matter. 4. Request for letter beginning "Supervisor inquires". 5. City Attorney request. 6. Call file from Committee. 7. Budget Analyst request (attach written motion). 8. Substitute Legislation File Nos. 9. Request for Closed Session 10. Board to Sit as A Committee of the Whole
Please check the appropriate boxes. The proposed legislation should be forwarded to the following:
□ Small Business Commission □Youth Commission
☐ Ethics Commission ☐ Planning Commission
☐ Building Inspection Commission
Note: For the Imperative Agenda (a resolution not on the printed agenda), use a different form.] Sponsor(s): Supervisor Carmen Chu
SUBJECT: Grant of \$13,001 from UCSF to Department of Public Health for I-Tech International AIDS Education and Training
The text is listed below or attached:
Signature of Sponsoring Supervisor:
For Clerk's Use Only:

Common/Supervisors Form

Revised 4/2/09

101566

[Accept and Expend Grant - Integrating I-Tech International AIDS Education & Training- \$13,001]

Resolution authorizing the Department of Public Health to accept and expend retroactively a grant in the amount of \$13,001 from the University of California San Francisco, to participate in a program entitled "Integrating I-Tech International AIDS Education and Training Center;" for the period of April 1, 2010, through March 31, 2011.

WHEREAS, UCSF is the recipient of a grant award from the University of Washington supporting the Integrating I-Tech International AIDS Education and Training Center; and,

WHEREAS, With a portion of these funds, UCSF has subcontracted with DPH in the amount of \$13,001 for the period of April 1, 2010 through March 31, 2011; and,

WHEREAS, As a condition of receiving the grant funds, UCSF requires the City to enter into an agreement (the "Agreement"), a copy of which is on file with the Clerk of the Board of Supervisors in File No. 101566; which is hereby declared to be a part of this resolution as if set forth fully herein; and,

WHEREAS, An ASO amendment is not required as the grant partially reimburses DPH for one existing position, one Senior Physician Specialist (Job Class #2232) at .05 FTE, during the period from April 1, 2010 through March 31, 2011; and,

WHEREAS, A request for retroactive approval is being sought because DPH did not receive the subcontract until November 9, 2010 for a project start date of April 1, 2010; and,

WHEREAS, The budget includes a provision for indirect costs in the amount of \$1,393; now, therefore, be it

RESOLVED, That DPH is hereby authorized to accept and expend a grant retroactively in the amount of \$13,001 from UCSF; and, be it

RESOLUTION NO.

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RESOLVED, That DPH is hereby authorized to accept and expend a grant retroactively in the amount of \$13,001 from UCSF; and, be it

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

FURTHER RESOLVED, That the Director of Health is authorized to enter into the agreement on behalf of the City; and, be it

FURTHER RESOLVED, That the Controller is directed to designate all positions funded under this agreement as "G" or grant-funded positions which would terminate when the agreement expires.

RECOMMENDED:

Mitchell Katz, M.D. Director of Health APPROVED:

Office of the Mayor

Office of the Controller

File Number: 101566 (Provided by Clerk of Board of Supervisors)

Grant Information Form

(Effective March 2005)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

- Grant Title: Integrating I-Tech International AIDS Education and Training Center
- Department: Department of Public Health
 AIDS Office
 HIV Epidemiology Section

3. Contact Person: Henry Fisher Raymond

Telephone: 554-9093

4. Grant Approval Status (check one):

[X] Approved by funding agency

[] Not yet approved

- 5. Amount of Grant Funding Approved or Applied for: \$13,001
- 6a. Matching Funds Required: \$0
- b. Source(s) of matching funds (if applicable):
- 7a. Grant Source Agency: University of Washington
- b. Grant Pass-Through Agency (if applicable): The Regents of the University of California
- 8. Proposed Grant Project Summary: THE HIV/AIDS Statistics and Epidemiology section of the AIDS office is responsible for monitoring the prevalence and incidence of HIV/AIDS and associated risk behaviors. The purpose of this grant is to conduct an intensive 1 week data analysis and writing workshop for CDC-GAP staff, followed by a 1 week mentorship which will result in working drafts of publishable papers utilizing Namibian data.
- 9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: 04/01/2010

End-Date: 03/31/2011

10a. Amount budgeted for contractual services: No

- b. Will contractual services be put out to bid? N/A
- c. If so, will contract services help to further the goals of the department's MBE/WBE requirements? N/A
- d. Is this likely to be a one-time or ongoing request for contracting out? N/A

11a. Does the budget include indirect costs?

[X]Yes

[] No

b1. If yes, how much?

\$1.393

c. If no, why are indirect costs not included? [] Not allowed by granting agency [] Other (please explain): [] To maximize use of grant funds on direct services
c2. If no indirect costs are included, what would have been the indirect costs?
12. Any other significant grant requirements or comments:
We respectfully request for approval to accept and expend these funds retroactive to April 1, 2010. The Department received the subcontract agreement November 09, 2010
Grant Code is: HCAO34/10
Disability Access Checklist*
13. This Grant is intended for activities at (check all that apply):
[] Existing Site(s) [] Existing Structure(s) [] Existing Program(s) or Service(s) [] Rehabilitated Site(s) [] Rehabilitated Structure(s) [] New Program(s) or Service(s) [] New Structure(s)
14. The Departmental ADA Coordinator and/or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section:
Comments:
Departmental or Mayor's Office of Disability Reviewer:
Date Reviewed: 12/1/10
Department Approval: Mitchell Katz, M.D. Director of Public Health

b2. How was the amount calculated? 12% of modified direct costs

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
AIDS Office - HIV Epidemiology Section
I-Tech International AIDS Education and Training Center
04/01/2010 - 03/31/2011

SAN FRANCIS
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HCHPDH/VS/VGR
HCAD34
1000

25:80% | Tech Applied | W. OE

Dept / Div.
Fund Group:
Index Code:
Grant Code:
Grant Detail:

AWARD	TOTAL BUDGET	 H. INDIRECT COST (12% of total modified direct costs) 	DIRECT COSTS	G. OTHER	F. CONTRACT / MOU	E. MATERIALS AND SUPPLIES	D. EQUIPMENT	C. TRAVEL	8. MANDATORY FRINGE	A. SALARIES		(C) AL DINECT COS	באסט בטמנים ויינים אינים היינים	00101 SALARIES 00103 FRNG BN SUB TOTAL	TOTAL SALARY/FRINGE	4. STEP increases 5%	3. COLA 4%	Sr. Physician Specialist 2232 7 W. McFarland	PERSONNEL HIV SEROEPIDEMIOLOGY	CATEGORY/LINE ITEM
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																				comments

SURPL/(DEFICIT)

San Francisco Department of Public Health (SFDPH) AIDS Office HIV Epidemiology Section

I-Tech International AIDS Education and Training Center

BUDGET JUSTIFICATION (April 1, 2010 – March 31, 2011)

A. B.	PERSONNEL MANDATORY FRINGE	
1.	0.05 2232 – Sr. Physician Specialist: Willi McFarland	
	Twelve Month Salary \$9,155 Mandatory Fringe Benefits (@ 26.80%) = \$2,453	\$11,608
	Dr. McFarland will conduct an intensive 1 week data analysis and writ for CDC-GAP staff, followed by a 1 week mentorship which will resu drafts of publishable papers utilizing Namibian data.	ting workshop lt in working
	Total Salaries	\$9,155
	Total Fringe	\$2,453
TOT	TAL PERSONNEL:	\$11,608
C.	TRAVEL	\$0
D.	EQUIPMENT	\$0
E.	SUPPLIES	\$0
F.	CONTRACTUAL	\$0
G.	OTHER	\$0
•	TOTAL DIRECT COSTS	\$11,608
H.	INDIRECT COSTS (12% of total modified direct costs)	\$1,393
,	TOTAL BUDGET:	\$13,001

Subaward 6374sc

between

The Regents of the University of California

City and County of San Francisco Department of Public Health

Prime Grant Number: UW 694958 DPA / Fund Numbers: 405801 / 83068 UCSF RAS Award ID: A105232

This Agreement ("Agreement") is executed by and between The Regents of the University of California, on behalf of its San Francisco campus, a corporation of the State of California ("University") and City and County of San

WHEREAS, University is the recipient of Prime Grant Number UW 694958 ("Award") from University of Washington ("Agency") for the conduct of a program titled "I-Tech International AIDS Education and Training Center" as detailed in

WHEREAS it is considered in the best interests of the Agency and University for Subcontractor to participate in this project;

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, University and Subcontractor agree to a cost-reimbursement agreement under this Award.

Article I - Scope of Work

The Subcontractor shall perform those tasks described in Attachment A, Scope of Work, attached hereto and incorporated by reference.

Article II - Principal Investigators

Dr. George Rutherford is the Principal Investigator designated for University. Any significant changes in the performance of this agreement as outlined in Subcontractor's proposal and Scope of Work require authorization by the University's Principal Investigator. Subcontractor has designated Dr. William McFarland as the Project Director who shall be responsible for the technical and administrative conduct of the project covered by this Agreement. In the event that a change in Subcontractor's Project Director is necessary, University must be notified in writing immediately and Article III - Term

The term of this Agreement shall begin on 4/1/2010 ("Commencement Date") and shall not extend beyond 3/31/2011 ("Termination Date") unless agreed to in writing by both parties. Subcontractor will submit a continuation application to University in the form and time designated by University if continuation is intended beyond the above referenced

Article IV- Compensation

For the performance of this Agreement University shall pay Subcontractor the cost thereof determined by University to be allowable in accordance with:

- (1) The Budget included herein as Attachment B and incorporated by reference. The total amount available to Subcontractor for the term reflected in Article III is \$13,001.00. This amount shall not be exceeded nor shall any portion be carried forward beyond X without the University Principal Investigator's written authorization and subsequent
- (2) The Agency's policies and the terms and conditions of Award are incorporated by reference and included as

(3) The terms of this Agreement.

Article V- Method of Payment, Financial Report Requirements

Subcontractor shall submit invoices on a monthly basis for the allowable costs incurred in the performance of the work hereunder to University. Subcontractor invoices shall be in the format shown in Attachment C, attached hereto and incorporated by reference. Subcontractor invoices will reference the Subward, DPA, and Fund numbers; the invoices will be submitted by mail or email to the attention of:

University of California Accounting Office - Accounts Payable Attn: Subcontracts Desk Box 0812 San Francisco, CA 94143-0812 subcontract@ucsf.edu

Substantiating documents such as travel receipts, purchase orders, time records, and so forth, shall be retained as provided in Article XVII and the Subcontractor is expected to keep an accurate accounting of all costs incurred in the performance of this Agreement. All costs incurred under this Agreement must be based on actual costs. Final payment will be made only upon receipt of a progress report and a report of expenditures for the budget period as provided in this Agreement.

The final invoice, clearly marked **final**, shall be submitted within forty five (45) days after the term indicated in Article III and shall include only those charges incurred during the referenced term. Funds not expended during this term will revert to University unless prior written approval has been obtained for carry forward. If the final invoice cannot be submitted within such 45-day period, Subcontractor shall notify University's Extramural Funds Section of the Accounting Office in writing within the 45-day period, indicating the reason for the delay; otherwise, funds will not be available to Subcontractor.

Article VI - Rebudgeting of Funds

Rebudgeting is allowable provided that it is in compliance with the terms of the Award and the Agency's guidelines or policies.

Article VII - Progress Reporting Requirements

Interim progress reports are required if continuation is intended beyond the Termination Date and shall be submitted to the University within thirty (30) days of the Termination Date of this Agreement. Terminal progress reports must be submitted to University within ninety (90) days after the Termination Date of this Agreement. The report should include a summary statement of progress toward the achievement of the originally stated aims, a list of the positive and negative results which are considered to be significant by the Project Director, and a list of publications resulting from the project with plans (if any) for further publication. All progress reports shall be submitted to University's Principal Investigator.

Article VIII - Publicity and Publication -

Neither party will use the name of the other party or its employees in any advertisement, press release, or other publicity without the prior written approval of the other party. Subcontractor understands that the California Education Code section 92000 provides that the name "University of California" is the property of the State of California and that no person shall use that name without permission of The Regents of the University of California. Such permission may be granted by the Chancellor or his designee. University has the right to acknowledge Subcontractor's participation in and support of the work performed under this Agreement in press releases, scientific publications, and other scientific communications.

Publication of project results shall acknowledge support from the Award made to University from Agency. Four reprints of publications resulting from work performed in whole or part under this Agreement shall be submitted to the University's Principal Investigator.

Article IX - Copyrights

Subcontractor understands that, except as otherwise provided in the conditions of the Award, when publications or similar materials are developed from work supported in whole or in part by this Agreement a copy of such materials and a royalty-free and other fee-free license to use them for educational and research purposes shall be provided to University. Any such copyrighted or copyrightable materials shall be subject to a royalty-free, nonexclusive, and irrevocable license to the University to reproduce, to publish, or otherwise to use them and to authorize others to do so.

Article X - Patents and Inventions

Subcontractor shall promptly and fully disclose in writing to the University any invention that is made with the financial support, in whole or in part, under this Agreement. Subcontractor shall include a transmittal letter report about the invention to University and shall include this Agreement Number along with the transmittal. Title to any such inventions shall be assigned in accordance with U.S. Patent Laws. In the case of patent rights that are jointly owned by the University and Subcontractor, the University and Subcontractor will enter into an interinstitutional agreement specifying which party will be responsible for managing the joint patent rights. No patent or patent application shall be abandoned by the responsible party without first notifying the joint owner and Agency in writing ninety (90) days in advance of abandoning the patent or patent application, and according the joint owner the opportunity to continue to prosecute and/or maintain the patent rights at its own expense. If the joint owner declines to prosecute and/or maintain the patent rights, it will notify the University in writing sixty (60) days in advance of abandoning the patent or patent application. Subcontractor agrees to abide by any agreements between the University and the Agency with respect to patent policy.

Article XI - Equipment Accountability

Subcontractor shall utilize sound purchasing and inventory procedures and maintain adequate records to account for the purchase, inventory and disposition of equipment acquired under this Agreement. Title to equipment shall reside with the Subcontractor.

Article XII - Independent Contractor

Subcontractor is deemed at all times to be an independent contractor and shall be wholly responsible for the manner in which it performs the services required of it by the terms of this Agreement. Nothing contained herein shall be construed as creating the relationship of employer and employee between University and Subcontractor or its officers, agents, and employees.

Article XIII - Indemnification

Subcontractor shall defend, indemnify, and hold University, its officers, employees, and agents harmless from and against any and all liability, loss, expense (including reasonable attorneys' fees), or claims for injury or damages arising out of the performance of this Agreement but only in proportion to and to the extent such liability, loss, expense, attorneys' fees, or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of Subcontractor, its officers, employees, or agents.

University shall defend, indemnify, and hold Subcontractor, its officers, employees, and agents harmless from and against any and all liability, loss, expense (including reasonable attorneys' fees), or claims for injury or damages arising out of the performance of this Agreement but only in proportion to and to the extent such liability, loss, expense, attorneys' fees, or claims for injury or damages are caused by or result from the negligent or intentional acts or omissions of University, its officers, employees, or agents.

Article XIV - Early Termination

Notwithstanding the provisions of Article III above, either party may terminate this Agreement upon thirty (30) days written notification to the other. In the event of such early termination, Subcontractor shall take all reasonable steps to minimize further costs, and shall be entitled to reimbursement for costs and noncancellable obligations incurred prior to the effective date of such early termination, except in no event shall such reimbursement exceed the amount set forth in Article IV. If the Agreement is terminated early, then Subcontractor shall deliver such information and items completed up to the early termination date to the University, including partially completed plans, drawings, data, documents, surveys, maps, reports and models.

Article XV - Protection of Human Subjects

If research involving human subjects is performed under this Agreement, Subcontractor shall comply with Department of Health and Human Services ("DHHS") policies and regulations on the Protection of Human Subjects (45 CFR 46 as amended). Subcontractor shall provide to University evidence of approval by Subcontractor's Institutional Review Board. Under governing regulations, federal funds administered by DHHS shall not be expended for, and individuals shall not be enrolled in, research involving human subjects, without prior approval by the Office for Human Research Protections ("OHRP") of an assurance to comply with the requirements of 45 CFR 46 to protect human research subjects. This restriction also applies to all performance sites without OHRP-approved assurances, whether domestic or foreign.

Subcontractor shall submit to the University an approved assurance, reviewed and approved by the appropriate Subcontractor Institutional Review Board, that the rights and welfare of any human subjects involved in this project are adequately protected in accordance with DHHS policies and regulations on the Protection of Human Subjects.

Article XVI - Care and Treatment of Laboratory Animals

If research involving animals is performed under this Agreement, Subcontractor shall comply with Public Health Service Policy on Humane Care and Use of Laboratory Animals (as mandated by Public Law 99-158 as amended) and shall follow the guidelines prescribed in the National Academy of Sciences Publication dated July 1996, (revised October 1996), Guide for the Care and Use of Laboratory Animals. Evidence of approval by Subcontractor's Institutional Animal Care and Use Committee shall be provided to University.

Article XVII - Audit and Records

- A. Financial records, supporting documents and other records pertinent to this Agreement shall be retained by Subcontractor for a period of four (4) years from the date of submission of the final expenditure report, except that records pertaining to audits, appeals, litigation or settlement of claims arising out of performance of this Agreement shall be retained until such audits, appeals, litigation or claims have been disposed of.
- B. All research records, including but not limited to original data and primary data-yielding materials, secondarily derived tables and figures; and statistical tabulations and other summaries, pertinent to this Agreement shall be made available to University upon its request and shall be retained by Subcontractor for a period of four (4) years from the termination date of this Agreement, except that records pertaining to any allegation of scientific misconduct or investigation, appeal, administrative proceeding or litigation relating to any charge arising out of the scientific performance of this Agreement shall be retained until three (3) years after the later of the conclusion of the allegation, investigation, appeal, administrative proceeding, litigation or acceptance by PHS of a final report pertaining thereto.
- C. Subcontractor acknowledges and agrees that, as part of University's implementation of OMB Circular A-133, University will monitor Subcontractor's performance under this Agreement and, in the event of incomplete performance, University may require Subcontractor to obtain, at Subcontractor's sole expense, an independent audit of costs claimed under this Agreement.
- D. If any audit report reflects major shortcomings in Subcontractor's internal control systems, University may impose more stringent prior approval requirements for certain types of expenditures and/or rebudgeting and may require detailed supporting documentation for all claims for reimbursement until University is satisfied that necessary corrective action has been, or will be taken.
- E. The Comptroller General of the United States, the U.S. Department of Health and Human Services, the University and any of their duly authorized representatives shall have access at any reasonable time after prior written notification to pertinent books, documents, papers and records of Subcontractor in order to make audits, examinations, excerpts and transcripts. In the event that any payment made to the Subcontractor is determined on the basis of such audits to be unallowable the Subcontractor shall promptly refund the unallowable amount to University upon demand.
- F. When and as requested by the University's Principal Investigator, copies or originals of financial records, supporting documentation, and other records pertinent to this Agreement, including original receipts for purchases made under this Agreement, shall be sent to the University's Principal Investigator.

Article XVIII - Civil Rights and Equal Employment Opportunity

Subcontractor agrees to comply with Title VI of the Civil Rights Act of 1964 and Executive Order 11246 and have on file with the DHHS an Assurance of Compliance with the Civil Rights Act of 1964 (Form HHS 441).

Article XIX - Agency Policies

Subcontractor agrees to follow the policies of the Agency as outlined in the terms and conditions of the Award, attached to this Agreement as Attachment D and incorporated by reference. If those policies are in conflict with the terms of this Agreement, the terms of this Agreement take precedence over those policies.

Article XX - Notices

Notices required or permitted under this Agreement shall be effective only if given in writing and delivered by personal service or by registered mail and addressed as follows:

To University:

The Regents of the University of California

Office of Sponsored Research

Attention: Contracts and Grants Officer University of California, San Francisco 3333 California Street, Suite 315 San Francisco, CA 94143-0962

To Subcontractor:

City and County of San Francisco Department of Public Health

Attention: Sajid Shaikh 1380 Howard Street, 4th Floor San Francisco, CA 94103

Article XXI - Governing Law

This Agreement is governed by the laws of the State of California.

Article XXII - Entire Agreement

This Agreement states the entire contract between the parties with respect to the subject matter of this Agreement and supersedes any previous or contemporaneous written or oral representations, statements, negotiations or agreements. Subcontractor acknowledges that it has not been induced to enter into this Agreement by any oral or written statements or representations not expressly provided in this Agreement.

Article XXIII - Signatory

Subcontractor warrants that the signatory has the authority to execute this Agreement on behalf of Subcontractor.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the month, day and year specified below.

The Re	egents of the University of California	Public		y or San Francisco Department or
ву 🗳	1) J L Fudham.	Ву	A	
- D	John Radkowski	-	Name:	Barbara Garcia
	Contracts and Grants Officer Office of Sponsored Research		Title:	Director of Community Pgrs
Date	1//09/10	Date		

Scope of Work

San Francisco Department of Public Health: The HIV/AIDS Statistics and Epidemiology section of the AIDS office is responsible for monitoring the prevalence and incidence of HIV, AIDS, and associated risk behaviors. This is done through collecting reports of persons with HIV and AIDS and conducting studies of HIV incidence and prevalence, and risk behaviors. This section is directed by Willi McFarland M.D., Ph.D. who holds an appointment in the Epidemiology and Biostatistics department of the University of California San Francisco and who works collaboratively with investigators at UCSF/CAPS. The section also has nine epidemiologists who analyze and present surveillance and research data to scientific and community audiences. In addition to its annual surveillance report, the section publishes numerous articles in scientific publications. SFDPH has been a long-time partner of IGH and a subcontractor on our UTAP grant since 2003.

PERSONNEL

Willi McFarland, MD, PhD, Co-Investigator, Dr. McFarland is the director of HIV sero-surveillance for the San Francisco Department of Public Health, an associate adjunct professor of epidemiology at UCSF, and regional coordinator for Africa for the CAPS International Program. Dr. McFarland will be the technical lead for . Dr. McFarland will facilitate the intensive scientific writing workshop for CDC-GAP and/or select MOH staff in Namibia. Dr. McFarland will travel to Namibia to conduct an intensive 1 week data analysis and writing workshop for CDC-GAP staff, followed by a 1-week mentorship which will result in working drafts of publishable papers utilizing Namibian data. We are requesting 5% salary support for Dr. McFarland.

San Francisco Department of Public Health Subcontract Budget Period: 04/01/2010-03/31/2011 Budget Name: ITECH Namibla

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Total Direct Costs				
Overhead at 12%				
Grand Total		,		

\$11,608.03 \$1,392.96 \$13,001.00

\$11,608.03

The Regents of the University of California Controller's Office, Box 9812 San Francisco, CA 94143-0812 Attn: Accounts Payable/Subcontracts Desk Tel. Nos: 415-476-7997; 415-476-8461; FAX #415-476-6168

Sub Contractor's Name Sub Contractor's Address			Wire Information: (if to be p	vaid by Wire)
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certify that all expenditures reported				rivolce form is available in Excel
re for appropriate purposes and in accord	dance			k can be requested by E-mail to:
with the terms and conditions of the contra	rct.			suzara@accounting.ucsf.edu
	,			alloway@accounting.ucst.edu
				•
Pale Signature &	Title			
-				
ROGRAM INCOME IS ENTERED AS AC	CREDIT TO OFFSET TOTAL	COST	•	Revised 04/07
•		•	•	

ATTACHMENT D

UNIVERSITY OF WASHINGTON SEATTLE WASHINGTON 98193

This Agreement (hereinafter "Subcontract") made this 22nd day of June, 2010 by and between the University of Washington, Seattle, Washington 98195, an agency of the State of Washington (hereinafter "University") and the Regents of the University of California, UCSF, Office of Research Administration, 3333 California Street, Suite 315, San Francisco, CA 94143-0962 (hereinafter "Contractor") Witnesseth:

Whereas the University has been awarded HRSA Cooperative Agreement No. 5 U91 HA06801-05, CFDA No 93.145, therefore, in consideration of the mutual premises hereinafter contained, the parties agree that this Subcontract will be performed in accordance with the following conditions:

GENERAL CONDITIONS

SCOPE OF WORK

Accomplishment of the work entitled "I-TECH UCSF International AETC" is described in Exhibit A attached hereto and by reference incorporated herein.

II. PERFORMANCE PERIOD

The performance period of the Subcontract will extend from the effective date April 1, 2010, through March 31, 2011 unless amended by written mutual agreement. No expenses will be reimbursed which are incurred prior to the effective date or subsequent to the termination date.

III. ESTIMATED COST AND EXPENDITURE LIMITATION

The University will reimburse the Contractor for actual expenses incurred under the Subcontract but not to exceed \$1,099,774 unless amended by written mutual agreement.

IV. ALLOWABLE COST AND PAYMENT

- A. The University will reimburse the Contractor for direct costs and indirect costs (if applicable) incurred in the performance of this Subcontract, provided that:
 - 1. The total of such costs does not exceed the estimated cost as provided in Article III herein;
 - 2. Such costs were allowable by terms of this Subcontract;

- 3. Such costs are incurred in accordance with Contractor's established policy and procedure; and
- 4. The applicable cost principles were followed given the type of organization as follows: (a) OMB Circular A-21, Educational Institutions, (b) OMB Circular A-122 Nonprofit Organizations, (c) Subpart 31.2 of the FAR, Commercial Firms and Nonprofit Organizations exempt from A-122, (d) OMB Circular A-87, State and Local Governments, and (e) 45 CFR 74, Appendix E, Hospitals.
- B. Reimbursement for indirect costs (if applicable) will be at the rate shown in the budget attachment (Exhibit B hereto) and in no event will be greater than the Contractor's approved Federal indirect cost rate.
- C. The Contractor will submit vouchers to the University for reimbursement at least quarterly, but not more often than monthly, in triplicate to the following address:

Payables Administration 3917 University Way N.E. Seattle, WA 98105-1130

In order for the Contractor to receive payment, these vouchers must be in sufficient detail to indicate clearly the nature of all expenses in the format of the budget attachment (Exhibit B hereto), and reference the Subcontract number. Co-mingling of budgets is strictly prohibited unless advance, written University approval is provided by University's Subcontract Manager. The final voucher is due no later than 60 days following termination.

If this Subcontract is from Federal pass through sources, including all amendments thereto, then the final voucher must be <u>signed</u> and marked "Final" by the Contractor with the following statement:

"The Contractor assures to the University that all expenditures were incurred in full compliance with OMB Circular A-133 or its own applicable audit regulations. Disallowed costs if found during the retention period of this Subcontract will be promptly refunded to University."

If, during the retention period of this Subcontract (see Article XIII. Records), a finding or questioned cost is found related directly to this Subcontract, then the Contractor will promptly notify University in order to proceed with resolution of such matter, as may be required by University's prime sponsor or applicable Federal regulations.

V. <u>BUDGET</u>

- A. Unless otherwise provided in Special Conditions (Exhibit C attached hereto), the following types of expenditures require prior approval of the University's Subcontract Manager, Office of Sponsored Programs, or designee:
 - A 25% reduction in time devoted to the project by the Principal Investigator or Project Director.
 - 2. Transfer of funds allotted for training allowances (direct payment to trainees) to other categories of expense.
 - 3. Items of general purpose equipment, e.g., office equipment and furnishings, air conditioning, reproduction equipment, automatic data processing equipment, etc.
 - 4. Individual items of equipment costing \$5,000 or more. All such items identified in the budget attachment are automatically approved for acquisition. Title to all equipment acquired by the Contractor shall vest in Contractor upon acquisition subject to the right of the University to recall equipment with an acquisition cost of \$5,000 or more up to 120 calendar days after the expiration of the Subcontract.
 - 5. The subaward, transfer or contracting out of any work except for routine purchase of supplies, materials, equipment or general support services.
- B. In addition to Article V(A), the Contractor may not deviate significantly from the major line items of the budget attachment (Exhibit B hereto) unless specifically approved in advance by the University's Subcontract Manager, Office of Sponsored Programs, or designee.

VI. UNIVERSITY'S PROGRAM DIRECTOR

The University's Program Director is Dr. King Holmes. The Program Director is not authorized to amend or alter this Subcontract. Any such alterations or amendments must be approved by the written mutual agreement of the parties hereto.

VII. CONTRACTOR'S PRINCIPAL INVESTIGATOR

The Contractor's Principal Investigator responsible for conduct of the work contemplated hereunder is Dr. Michael Reyes. No change of Principal Investigator may be made without the prior written approval of the University's Executive Director, Office of Sponsored Programs, or designee.

VIII. TECHNICAL REPORTS

The Contractor must provide to the University's Program Director any interim technical reports concerning the progress of the work that may be requested and a final technical report due within 30 days after the end of the Performance Period.

IX. SAVE HARMLESS

Each party shall be responsible for its negligent acts or omissions and those of its officers, employees, agents, or students (if applicable), howsoever caused.

X. TERMINATION

If either the University or Contractor determine that termination is in its best interests because of lack of sufficient funds, or other substantial reason, either party may terminate this Subcontract upon 30 calendar days written notice to the other party. In the event of termination, University shall pay Contractor for all reasonable, allocable and allowable costs incurred up to the effective date of termination, not to exceed the total amount of this Subcontract. Upon receipt of formal written notice from one party to the other, the Contractor shall take reasonable and immediate steps to reduce all costs and outstanding obligations under this Subcontract, and shall maintain such documentation for subsequent review by University if requested.

XI. NONDISCRIMINATION

By acceptance of this Subcontract, Contractor agrees that it will comply with Title VI of the Civil Rights Act of 1964, as amended, Title IX of the Education Amendments of 1972, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, Age Discrimination Act of 1975, as amended, and the Americans with Disabilities Act of 1990.

XII. CERTIFICATION AND COMPLIANCE

By execution of this Subcontract, Contractor certifies to the University that it is not delinquent on any Federal debt pursuant to OMB Circular A-129, and that it or its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal agency pursuant to government-wide regulations (E.O.s 12549 and 12689). In addition, by execution of this Subcontract, Contractor will comply with the Clean Air Act (42 USC 7401 et seq.) and the Federal Water Pollution Control Act (33 USC 1251 et seq.), as amended, when the estimated cost of the Subcontract exceeds \$100,000. Violations will be reported to University, the Federal prime awarding agency, and the Regional Office of EPA.

XIII. RECORDS

The Contractor shall maintain acceptable financial management systems during the term of this Subcontract. Such systems shall provide:

- 1. accurate, current and complete disclosure of the financial activity of this Subcontract;
- records that identify the source and application of the University's funds;
- 3. effective control over and accountability for all funds, property and other assets;
- 4. comparison of actual outlays with budgeted Subcontract amounts;
- 5. consistency with the applicable federal administrative requirements and cost principles; and
- accounting records supported by source documentation.

The Contractor's records shall be available to the Federal awarding agency, the Comptroller General of the US, or any of their duly authorized representatives, for the purpose of making audits, examinations, excerpts and transcriptions, if applicable.

In the event this Subcontract is \$500,000 or more using pass through Federal sources, and the Contractor is an organization subject to the uniform administrative requirements of OMB Circulars A-110 or A-102 and arranges for audits that comply with OMB Circular A-133 or equivalent guidelines, the Contractor shall provide one of the following: its most recently completed audit report, its data collection form and reporting package, or a certification statement that there are no findings or questioned costs within the last two fiscal years related to University pass through Federal sources, within 30 days following execution of this Subcontract. Transmittal of this OMB Circular A-133 audit related information should be addressed to the Subcontract Administrator, Office of Sponsored Programs, University of Washington, Box 359472, Seattle, WA 98195-9472.

Other Contractors, such as commercial or for profit entities, may be required to provide University with their most recent audit report or statement on compliance and on internal control prepared by an independent accountant or firm in order for University to meet its requirements to comply with OMB Circular A-133. This audit related information will be due 30 days following execution of the Subcontract. In other certain cases, the Contractor may be required to arrange for a limited scope audit on compliance with the requirements for this Subcontract only. Such an audit prepared by its independent accountant or firm will be due 90 days following termination of the Subcontract. The University will notify these Contractors prior to issuance of the Subcontract if certain audit requirements will be applicable.

In instances of noncompliance with Federal laws and regulations, Contractor shall provide to University within six months of receipt of its audit report or limited scope audit, its plan for corrective action and shall cooperate with University in resolving questions University may have. All such records and reports or statements prepared in accordance with the requirements of OMB Circular A-133 or equivalent guidelines, as appropriate, shall be available for inspection by representatives of University or the government during normal business hours.

Failure to comply with the terms of this paragraph may lead to Subcontract termination in accordance with Article X or other sanctions as noted in OMB Circular A-133.

The financial records of this Subcontract will be retained for a period of three (3) years, with the following qualifications:

- (a) Records related to any audit initiated prior to the expiration of the three-year period shall be retained until the audit findings involving the records have been resolved.
- (b) The retention period starts from the date of the submission of the Contractor's final voucher.

XIV. FEDERAL, STATE AND LOCAL TAXES

Except as may be otherwise provided in this Subcontract, the Subcontract price includes all applicable Federal, State and local taxes and duties.

XIV. DISPUTES

Except as otherwise provided for in this Subcontract, any dispute not disposed of fully and by mutual consent shall be decided by judicial choice of law rules and procedures jointly agreed upon by University and Contractor.

SPECIAL CONDITIONS.

The Special Conditions, if any, attached hereto as Exhibit C and by reference incorporated herein, apply to this Subcontract, and in case of any conflict between the General Conditions and the Special Conditions, the latter will prevail.

Approved and Agreed:

Michael J Blackwell

UNIVERSITY OF WASHINGTON

(name)

Subcontract Manager, OSP (title)

By:

John Radkowski

CONTRACTOR

(name)

Contracts & Grants Office

(title)

EXHIBIT A SCOPE OF WORK

(See Article I)

1. UW I-TECH Senior Director

- A. To carry out its abligations pursuant to HRSA Cooperative Agreement No. 5 U91 HA00801-05, CDFA No. 93.145, University of Washington (UW) has an operational unit known as the international Training & Education Center for Health (I-TECH). UW foculty member and employee, Dr. Ann Downer, EdD, is the fixecurive Director of UW I-TECH. Pursuant to this Subcontract, University of California, San Francisco (UCSF) will provide to UW the services of UCSF faculty member and employee. Dr. Michael Reyes, MD, MPH, as the Senior Director for UW I-TECH.
- II. UCSF shall direct Dr. Royes, as a term and condition of his UCSF employment, that he is obligated in his capacity as UW I-TECH Senior Director:
 - (1) to report to UW faculty member and employee, King K. Holmes;
 - (2) to follow all relevant instructions, directions, rules, regulations, laws, or policies applicable to UW employee; and
 - (3) to keep confidential and not disclose information he generates or receives in his capacity as UW 1-TECH Senior Director unless such disclosure is permitted by UW, including but not limited to communications covered by the attorney-client privilege.
- C. UW promises to UCSF that it will provide Dr. Reyes a written description of his obligations as UW 1-TECH Senior Director which shall include (1) participation in the authorization of 1-TECH decisions and actions that authoriticate the methodology, substance, and direction of the UW 1-TECH program; (2) country visits to UW 1-TECH programs for assessment, implementation, consultation, or monitoring purposes; (3) representing UW 1-TECH as key global meetings, and (4) identifying and screening consultants and potential employees to be hired by the UW for UW 1-TECH work.
- D. UW promises to UCSF that it will provide Dr. Reyes:
- (1) training and access to appropriate resources so that he can understand and comply with relevant instructions, directions, rules, regulations, laws, or policies applicable to HW employees; and
- (2) while physically located at UW-owned or UW-controlled locations, space and office supply resources necessary to perform as UW I-TECH Senior Director.

- F. Dr. Reyes shall at all times remain an employee of UCSI and shall not be considered an employee of UW. In this regard:
- (1) Without regard to any other provision herein, UW shall not require Dr. Royes to do anything in his capacity as UW I-TECH Senior Director that is inconsistent with the terms and conditions of his employment with UCSF. If Dr. Royes believes that he has been asked to undertake such activity, he shall bring his concerns to the appropriate UCSF officials who shall, to the extent they deem warranted, discuss and attempt to resolve the matter with UW;
- (2) Dr. Reyes will not be entitled from UW to any salary, benefit, protection or processes provided to any UW employee; and
- (3). UCSF shall be solely responsible for evaluating Dr. Reyes' job performance, provided UW shall provide UCSF evaluations of Dr. Reyes' job performance, upon request.
- G. UW and UCSF agree that an independent contractor relationship is created by this Subcontract. UCSF shall not hold itself out to be an employed, partner, agent or joint venture partner of UW. UW shall not hold itself out to be an employed, partner, agent or joint venture partner of UCSF. UCSF will instruct Dr. Reyes that he should hold himself or UCSF out to be an employed, partner, agent or joint venture partner of UW.

University of California, San Francisco (UCSF) through the I-TECH Senior Director Dr. Michael Reyes, MD, MPH (.70 FTE) is responsible for the co-management of the International Training and Education Center on HIV (I-TECH), in partnership with Dr. Ann Downer, EdD, I-TECH Executive Director based at the University of Washington.

Dr. Michael Reyes, as I-TECH Senior Director will participate in the authorization of decisions and actions that authenticate methodology, substance and direction of the 1-TECH program. This role may include participation in country visits for assessment, implementation, or monitoring purposes and representing I-TECH at key global meetings, and identifying and screening consultants for country work.

Tom Foster, I-TECH Program Manager will be responsible for overall management and direction of the UCSP office, reporting and subcontracted activities, and supervising administrative staff.

UCSF contributions to I-TECH include direction for the management of work provided by the collaboration between the US training and care provider organizations and the International AETC. In this capacity, i-TECH/UCSF acts as the lisison. This includes management of collaborations with the ABTC National Evaluation Center, Center for HIV Information, National Clinicians' Consultation Center, Francis I. Curry National TB Center, Positive Health Program/ASPIRE, Institute for Global Health (IGH), and other . collaborating partners at UCSF.

By March 31, 2011, the 1-TECH/UCSF team will be responsible for the following deliverables:

National Ciluicians' Consultation Center (NCCC)

THE NCCC is responsible for:

- Providing PEP-LINE consultation to 1-TECH training and tour for the 1-TECH Clinical Summit.
- As requested, NCCC will also provide an on-site orientation/tours to the warmline and other NCCC programs to I-TECH domestic and international visitors to UCSF.
- Reports on progress will be made to 1-TECH Management Tosm as requested and data will be provided for progress reports to funder.

Nursing Expertise:

Dr. Carmon Portillo will:

- Represent I-TECH at global nursing meetings
- Serve as a resource on nursing issues to 1-TECH country program and field managers.
- Serve as a liaison to UCSF's global nursing portfolio of activities
- Serve as linison to ANAC (The Association of Nurses in AIDS Care)
- Work with CPMs to integrate funded nursing activities into the 2010 Country Operations Plans where icasible.
- Participate in the monthly I-TECH Clinical Steering Committee team and meetings
- Review clinical content of training curriculums as requested by the Clinical Steering Committee learn
- Revisit the 1-TECH Nursing Director position

UCSF Cruter for HIV Information (CHI) for t-TECH Website: www.gollieshate

I. Website maistemance:

The UCSF Center for HIV information will continue to host, maintain, and update the I-TECH public website. The growth of the website has mirrored that of the I-TECH project, and the past year has seen a notable increase in original program content. We anticipate that this level of activity will continue or grow in the next project year, and this proposed scope will allow us to be flexible to respond to emerging needs while remaining moderate in size

Content Updates: This includes toutine and annual updates of site content, including:

- Static informational pages will be updated pending review by I-TECH program staff (at least once a
 work)
- Other pages, such as news, publications, homepage, and employment announcements are updated as
 required. Estimated frequency and scope of updates is based on prior years and planning discussions, as
 follows (per month):
 - I updated country description,
 - -- 1-2 program highlight features,
 - 5 resource database items,
 - .. I home page image and text refresh,
 - 2-8 job postings, site statistics reports, narrative reports.

Time-sensitive postings, such as job listings or news releases will be completed within 2 working days of receipt. Routine postings will take between 1 and 2 weeks, depending on scope and other work factors, with a time estimate sent within 2 day of receipt.

Technical: Update/patch software and hardware as required for 99.9% uptime. Test templates and output pages for compliance with Web usebility standards. Maintain atreaming media Web server. Maintain mirror development system and backups. Upgrade/amand source code as needed.

Reporting/communications: CHI will submit a brief quarterly report including a narrative description of updates and a summary of website usage. A CHI representative will travel to Seattle 1-2 times/year for planning and working meetings.

E Michael Rajes	P		3/23/10	
F. Michael Reves, MD. Senior Director		•	Date	

Project Objective:
To provide technical support and guidance to enhance in-country TB/HtV joint collaborative programming in the Caribbean.

Long term outcomes will include

- Increused and earlier identification of HIV/I'B co-morbidities
- Increased access to TB and HIV services
- Increased quality of care for both TB and HIV
- Enhanced laboratory capacity and timely laboratory diagnosis for TB
- Enhanced prevention strategies for both diseases

Outcomes/Expected Results

- Caribbean TB guidelines (CTBG) are completed and made available throughout the
- Rovised customized curriculum, facilitator's guide, and job aides to operationalize the CTBG in the target countries
- Medical consultation service made available for clinicians in the region to advise on diagnosis, treatment, and management of TB infected and infectious patients as well as assist NTPs in the event of TB outbreaks. Capacity building and network surengthening for Caribbean consultants
- TB nurses network is established in the Caribbean for TB education and sharing of strategies to address program challenges

Outputs

- CTBG content finalized and electronic document made available for distribution in print and electronic format
 - Coordinated efforts to meet the needs of PAHO
- Sixteen training modules based on the CTBG revised and managing drug supply module developed
 - Facilitator Guide
- Thirteen job alds and algorithms revised
- TB medical consultation services provided
 - Quarterly calls or webinars to present cases and have ongoing education
- Convene and facilitate the TB nurses network quarterly conference calls, 1 call per quarter

Activities

- Offer medical consultation regarding diagnosis, treatment, and management of TB
 infected and infectious patients, and advise NTPs in the event of TB outbreaks via
 CNTC Warmline
- Continue strengthening the TB nurses network in the Caribbean by convening quarterly calls to discuss TB education and program issues and facilitate case presentations
- Pending PAHO and key partner approval, finalize the CTBG
- Revise curriculum, which will then be reviewed and finalized by stakeholders
- Post the revised curriculum online (in its entirety and sections) to accommodate ongoing revisions

I-TECH Contacts

This subcontract results from an award to the University of Washington, Department of Global Health for the I-TECH, for which King Holmes, MD, PhD, serves as Principal Investigator. Ann Downer, EdD, serves as I-TECH Executive Director and will serve as the primary contact person on beliaff of the University of Washington in regard to programmatic and policy issues. Shelia St. Thomas, (Caribbean Regional Program Manager, I-TECH/UW, sheliad us edu) will be the primary contact for programmatic, subcontract and fiscal issues. She will be responsible for monitoring the activities contained within the scope of work.

UCSF/Curry Contacts

Michael Reyes, MD, MPH will be the primary UCSF contact and will be responsible for monitoring the activities within the scope of work. Tom Foster, Unit Manager, will be responsible for managing subcontract technical requirements and the reporting requirements. Phillip Hopewell, MD, and Thomas Stuebner, Project Lead, will be the primary contacts for the Francis J. Curry National Tuberculosis Center for programmatic oversight.

Amendment to the Scope of Work

This scope of work may be amended by June 30th, 2010 with written consent of both parties.

Reporting Requirements.

We understand that the following guidelines will be followed regarding reporting requirements:

- The project lead from the Francis J. Curry Tuberculosis Center and the I-TECH
 Caribbean Regional Program Manager will have monthly informal phone calls to
 communicate progress on deliverables, as well as any challenges and/or needs for
 support or assistance from I-TECH.
- A final activity report is due to the Caribbean Regional Program Manager no later than June 30, 2010. These reports will be shared with HRSA.

Emichael Rages

Michael Reyes, MD, MPH
1-TECH Senior Director
University of California, San Francisco
50 Beale Street, Suite 1300
San Francisco, California 94105-0661

Research Questions

The proposed study will address three questions:

(1) Unit costs. What does it cost to deliver case management (CM) services to vulnerable patients receiving ART in Ethiopia? What is the cost per unit of service delivered such as person-month of case management services?

(2) Cost-effectiveness using intermediate outcomes. What is the cost-effectiveness of these services? Because we cannot directly observe potential changes in clinical status within the scope of this study, we will adopt an appropriate intermediate outcome variable such as patients returned to normal functional status or schieving good adherence.

(3) Cost-effectiveness using health nutcomes. In an exploratory analysis, we will sock a literature-based method for converting intermediate outcomes to savings in health costs, to slowed disease progression-improved health status, or both.¹

We believe that the findings will be of value to 1-TECH program managers as they consider future funding of the case management project in Ethiopia versus other uses of these funds. In addition, understanding the cost structure of this program will support budgeting activities and may identify opportunities for improved efficiency. Through publication in the scientific literature and dissemination by 1-TECH through reports or the web, we sim to contribute to the broader base of knowledge on the relative cost and cost effectiveness of HIV treatment and prevention activities. The exploratory analyses reflected in research question 3 will yield insights about the likely range of cost-effectiveness and will form the basis for possible future cost-effectiveness analyses.

Overview of Analytic Approach

Site selection and analytic period

We plan to analyze cost and services from 16 CM sites, the original six sites where CM was initiated in 2007 and the additional six sites added during 2008. Data will be gathered for the 12 month period. October 1, 2008 – September 30, 2009. As needed, we will obtain staff training and the start-up costs that were incurred before this period.

Analytic Perapective

Unit costs will be evaluated from the perspective of the case management program. The exploratory cost-effectiveness analysis will be conducted from the point of view of the broader health care system.

Costs and unit costs. Cost data will be derived from existing expenditure records. They will be compiled and classified according to the following categories:

- * Training (appropriately amortized)
- · Case manager compensation (wages and all benefits)
- Outreach worker compensation (wages and all benefits)
- Administrative and supervisory costs (Share of administrative staff time including I-TECH CM project management and any personnel time contributed by MoH personnel

- Recurring supplies (Probably minimal)
- Capital costs including vahicle (Probably minimal)
- Costs entified by the Pstiers Support Initiative

Via tables and pie charts, these expenditure data will be presented by site and in aggregate, thus providing a detailed portrayal of program cost structure. We will combine these expenditure data with program services and caseload data derived from the existing services data base (eg. "CM totals.xls" for the study period) to build estimates of unit costs (ic, cost per patient successfully served and per patient-month of service.

Effectiveness

Estimating changes in intermediate outcomes. The effectiveness estimates will be derived from a study entitled Evaluation of the Pilot Case Management Program: A Matched Comparison of Sites. This analysis provides both pre-post and control - program comparisons for outcomes of interests much as functional status and adherence, and thus affords a potentially excellent source of effectiveness estimates. We will seek to supplement with other pre-post data that may be available at some of the sites.

Estimating changes in health status and medical care costs (exploratory). (1) Relative reduction in disability of patients who experience better clinical results than they otherwise would have. We can use nublished estimates of disability levels for HIV versus AIDS, but we can also derive more refined gradations of disability or utility estimates if such distinctions would matter in this context (they probably do). We can estimate this by looking at CD4/VL levels in patients at different adherence levels and correlating these with clinical status. It's an open question to me how much we want to model results into the future beyond our empirical data. (2) Reduction in medical care utilization. This analysis would apply literature-based estimates on the relationship between adherence and medical care utilization. We can then estimate averted medical care costs by applying standardized costs to outpatient visits and hospital days from the AFRO - B region as offered by WHO-Choice. (http://www.who.inv/choice/en/).

Qualitative information

If there are no IRB obstacles, we propose to administer a structured, open-ended interview guide on the barriers and enablers of efficiency. This would be administered to the CM managers at each of the 16 study sites.

Model development

Cost, output and effectiveness data will be portrayed in a deterministic Excel-based cost and costeffectiveness model. The model will include tabular and graphical representations of primary results
and sensitivity analyses.

Sensitivity analyses

Results will be subject to extensive univariate and multivariate sensitivity analyses to determine which variables have the greatest effect on unit cost and cost-effectiveness outcomes, and the likely range of unit cost and cost-effectiveness outcomes. Among the variables to be analyzed

Staff costs. After September, 2009, the CM program was integrated with Ministry of Health (MoH) activities. Salaries were reduced to Molf norms. Since CM costs are expected largely to consist of personnel expenditures, this probably means reduced unit

costs and, assuming that staff productivity was unaffected by this shift, more favorable cost-offectiveness.

Scale. By separating fixed from variable costs, we can explore the potential effect on unit costs of expanding services. We may vary our implicit assumption that CM staff are working at full capacity and explore scenarios in which caseloads can increase without proportionate increases in variable personnel costs.

Effectiveness. There are a number of limitations of the program effectiveness data available for this study. Effectiveness estimates will therefore be varied across a range delimited by the interquartile range of effectiveness estimates we derive from the sires or other appropriate ranges.

Relationship between effectiveness, cost ravings and health status. Our exploratory, literature-based estimates of medical cost savings or health status changes can be varied according to the confidence intervals reponed in the literature.

Manuscript development

The primary product of this effort will be a manuscript for submission to an appropriate peer reviewed journal.

Summary of Tasks and Timeline

Daims	Activity	
Completed	Site visit - Seattle	TASK 1
Mørch - April	Develop study protocols including structured interview guides and instruments for cost and output data compilation	TASK 2
May	Ethiopia site visit; Data assessment-collection	YASK 3
Mey - Juna	Cost and output data cleaning and verification including communications with i-itech, Ethiopia	TASK 4
April - June	Construct mathematical model	TASK S
lune	Extract findings from qualitative interview data on program efficiency	TASK 6
July '	Prepare draft manuscript including methods and findings	TASK 7
July	Phone or in-person meeting with i-Tech staff in Seattle to raviow lindings	TASK 8
August - September	Finalize manuscript	TASK 9
November.	Post submission revisions	ASK 10

E michael Rajes

Michael Reyes, MD, MPH I-TECH Senior Director University of California, San Francisco

Fosilion Pursons

The Nyanza-based Technical Program Manager (TPM) provides expertise and leadership in support of I-TECH Kenya's work on the implementation of health mensigement information system (HMIS) activities in western Kenya, in collaboration with colleagues in Seattle and Natrobi.

This position has responsibilities for bridging communication between Seattle, Nairobt, and stakeholders within western Kenya about the goals, specifications, and implementation requirements for HMIS. The position will play a critical role in assuring that the systems achieve optimal functionality for users in Kenya. The position will provide technical assistance to local counterparts.

- Maintain regular communication with partners including CDC-Klaten, provincial ministries of health, AMPATH, FACES, and other stactronic medical record (EMR)-users in western Kentin.
 - In addition, as directed, the TPM may be responsible for activities such as:
 - Ensure adoption and use of new OpenMRS reporting functionally at FACES.
 - Work with AMPATH to identify OpenMRS functionally needed and graps in custom system.
 - Provide technical assistance as needed to ensure adaptation and use of new OpenMRS reporting functionality at AMPATH.
 - Design, document, analyze, devolop and test OpenARS software projects as identified by I-TECH in collaboration with Seattle and Netrobi offices.
 - Support Implementation of new EMR at Stays District Hospital and/or other sites, including installation, configuration, data entry, data quality procedures and data use to ensure smooth uptake of EMR at site in collaboration with CDC and EMR
 - Work with CDC in Nyanza to design and implement software projects rolated to the CDC demographic surveillance system (DSS)
 - Participate in developing and delivering training content on programming, in collaboration with Seattle-based colleagues
 - o Other duties as essigned

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Supervisory Ausensiahilas	•
· N/A	e, criticals v pepulgeologicol
Position Complexities	
This position is based in Kisumu, Kenya with travel within Kenya.	machine picture March 1944-194-194-194-194-194-194-194-194-194
APPROVED:	
Emphael Rayer	•
	11/3/09
E. Michael Reyes, MD Senior Director	Date

This Scope of Work millines UCSF Mirambique Positive Prevention activities related to the pass-through funds being administered by I-TECH. "Currently this program is or the scale up phase to provide healthcare workers at the facility-based sites and PLWHA and courselors at the community-based sites with competencies, comfort, and skills to discuss risk behavior, risk reduction toolangues and prevention needs, thareby decreasing HIV transmission, and encourage HIV enting (including parmer testing). During FY10, in collaboration with MOFI, Provincial Health Directorate, and other stakeholders, CDC and UCSF staff identified additional sites to expand the interventions to two provinces with high prevolence, Sofals and Zamberra."

UCSF Positive Prevention Profess

As outlined in the MOZ COP, the UCSF Positive Prevention Team, consisting of Carol Dawson Rose (Pl and Director), Kelly Johnson, Torriko Conner, and Sarah Gutin will be responsible for:

In FY16, as a continuation of activities, additional PP activities will include

- 1. disserminations of the PP curriculum.
- 2. brown master trainers.
- conduct Positive Prevention trainings for facility based care and treatment program managers and staff
 including the provision of PP toolkits to staff and participating organizations (at new project sites in Sofais,
 Zamberia and possible Gaza province training based on MOB request)
- b) 1-2 ToT for USO clinical partners and affiliated NGOs unal CBOs
 - . | Training for staff from Clinical Care & Treatment partners
 - I Training for staff from HBC/community care partners (for example, ANEMO, MOH, and staff from bigger international Home Based Carp Partners);
- an exchange study tour for PP implementers in-country to visit other PP sites to establish close collaboration among all sites.
- partners will continue to support existing PLWHA groups through either small sub-grants and/or procurement
 of items needed by the group (e.g. seeds, Tshirts, transport funds for treatment follow up, etc)."

UCSF PP Project will continue the "collaboration and supporting opportunities with the Mozambican treatment literacy organization (MATRAM) to incorporate PP messages into their activities at the community level."

Permership opportunities with "the international organization, "Women Organized to Respond to Life-Threatening Diseases" (WORLD) and a TBD Mozambican Women Association to create prevention projects targeting women and women empowerment opportunities" will be continued.

"Measurable project outcomes consist in tracking behavior changes in PLWHA and direct service providers and implementing and managing M&E systems and tools to monitor outcomes. It is anticipated that 195 individuals (both service providers and individuals) will receive prevention with positives training."

For the purposes of administrative and training support for the UCSF PP Project Mozambique-based activines, ITECH will retain funding for the I-TECH Mozambique office, including:

- . 1.0 (100%) Salary and benefit support for Dennis Terres for training assistance
- 05 (5%) Salary and benefits for ITECH MOZ program support for Maria Smith, Chris Bachman, and Nicole Archison
- Rental of office space from ITECH MOZ

APPROVED: Emichael Rayes

E. Michael Reyes, MD Senior Director

11/3/09

Date

I-TECH Namebia Chrimcal Mentor will work in close collaboration with the Namibian Ministry of Health and Social Services (MOHSS), the National and Regional Health Training Centers (NHTC & RITTC), the US Health Resources & Services Administration (HRSA), the US Centers for Disease Control & Prevention - Global Aids Program (CTXC/GAP), the US Department of Defents (DOD), and the University of Namibia (UNAM).

The objectives of the Clinical Mentur position are to support decentralized delivery of HIV care, ART, and prevention, and continuous improvement of patient outcomes at all ART delivery sites; promote the application of classroom learning to clinical settings; improve the quality of clinical care and patient outcomes; and build the capacity of primary care providers to provide comprehensive and integrated care using un-site clinical collaboration, consultation and directed support.

For FY 10, the Clinical Mentor will:

- Frovide on-site clinical training primarily to medical officers on the management of MV-infected patients
 according to the Namibian national guidelines, including adult and pediatric ART, PMTCT including early
 infant diagnosis, and the treatment of tuberculosis, STIs and other opportunistic conditions.
- Provide training through clinical consultation, assisting local physicians to problem-solve and beiping them with direct patient care as meded.
- Assist in the development of standard operating procedures for the provision of MV clinical care at the
 ART clinics in collaboration with other relevant departments in the hospital. This way include, for
 example, wouble-shooting problems with patient flow within the clinics, tracking defaulters, or clarifying
 referral pathways by developing appropriate algorithms.
- . Promote, encourage, and assist mentees to do INV-related operational research.
- Artend and host DVC and face-to-face Clinical Mentor meetings as applicable.
- Submit a monthly report on mentoring and technical assistance activities including findings, lossons
 learned, best practices, and stories with recommendations for strengthening services in the clinics in
 compliance with the national treatment guidelines.
- Provide diductic HIV-related training sessions to health professionals, both in the state and private sector, as needed, according to established curricula and using various methodologies (including distance learning).
- Assist as requested with updating and revision of HIV-related training materials and national guidelines.
- Participate as a member of the MOHSS Regional Support visit team for the Region(a) in which the clinical
 mentor is posted and/or for other Regions as requested.

Michael Reyes, MD, MPH I-TECH Senior Director

University of California, San Francisco

E Muchael Rayes

10 Heste Street, Street 1300

San Francisco, California 94105-0661

<u>Background</u> Proposed Activities Travel Support for Data Triangulation #2 in Namibia

These funds will provide support for travel for UCSF faculty and staff to Namibia to conduct the first triangulation activity in Namibia

The three goals of this serivity are a) to easily a single source does from routinely collected data from HIV/AIDS surveillence and intervention programs, b) to conduct the country driven data triangulation process to answer key questions prioritized by the country team, and c) to build in-country capacity (individual and institutional) to synthesize, interpret, disseminate, and use data for program improvement including evidence-based policy-change decisions. This country-driven approach will enhance ownership and promote sustainability.

This scrivity will synthesize data from many sources in Nambia, including: a) routinely collected data from HIV/AIDS intervention programs such as PMTCT, CT, TB/HIV, and blood donor services; b) surveillance data, including. ANC surveys and AIDS case surveillance; c) population-based surveys such as the Demographic Health Survey; and d) special surveys and impact assessments.

There will be five major ectivities as follows: a) formation of a country task force to guide the identification of existing data sources and to formulate key questions that can be answered by synthesizing these data and facilitation of stakeholder meetings to identify key questions and data sources; b) cooduct data compilation, abstraction and satalysis c) conduct task force meeting(s) to review findings and organize the data (s) for presentation at the stakeholder workshop; d) conduct stakeholder workshop to fittalize data interpretation e) work with in-country task force to finalize report.

Plarmed funds will cover travel costs for a 14 day trip for Hitary Spindler to identify and collect data, as well as funds for a team of S faculty and staff from UCSF in lead the final-triangulation workshop.

2. Technical Writing Capacity Building Workshop

Using data from existing research audies and/or surveys UCSF/IOH will conduct an intrusive scientific writing workshop for CDC-GAP Namibia staff and other in-country partners (including MOH), to analyze said disseminate these results. UCSF faculty (W. McFarland, G. Ruilszford) will travel to Namibia to conduct a one-to-two-week writing workshop, followed tw-going mentouship and e-mail support for production of working drafts of publishable papers and reports unliking Namibian data.

Prior to the workshop, an UCSF/IGH data analysistanentnian (H. Spindler) will travel to Namibia prior to assist workshop participants in preparing data for use during the workshop. She will also be available to provide analytical support during the workshop used.

CDC-GAP Namibia staff and MOH participants will be paired with UCSP faculty and staff for on-going mentorship with the sum to complete the drafts and produce scientific papers ready for publication. The goal for each workshop will be to complete draft scientific manuscripts for the majority of participants and provide detailed timelines and noxt steps for participants who have not completed manuscripts by the end of the workshop.

HUMAN SUBJECTS REVIEW For all activities, CDC protocol for burners subjects review will be followed. In most cases the data that will be analyzed will be unlinked from identifiers. Each dataset will be looked at individually and

assessed. Non research determination (or human subjects review, where appropriate) will be sought from UCSF and CIXC prior to activities

PROPOSED WORKFLAN AND TIMELINE	
Triangulation # I final workshop	July 2009
	Annual Manageria, 1984, See 1270 C. C. S. Stransministration of the Confession of th
Writing Workshop	May, 2010 7
	<u> </u>

APPROVED: & Michael Rayes

P. Michael Reyes, MD Senior Director

The University of California San Francisco (UCSF) is one of soveral U.S. Universities selected to provide training and technical essistance to HIV/AIDS programs domestically and internationally. Using this University fechnical Assistance Program (UTAP), PEPFAR countries are afforded a direct mechanism to support the transfer of HIV/AIDS expertise across continents and countries. UCSF faculty and staff are available to assist with the development of innovative models to address specific program area project activities; to contribute to the implementation of key initiatives to inform national policy; and, to provide training opportunities both locally and internationally, for service providers and program managers on inventive strategies for care and treatment services. To enhance these efforts, we propose to support CDC- Headquarters and CDC-Vietnam in improving the quality of epidemiology training in Vietnam. Phase 1 will consist of a needs assessment to determine the areas of weakness in the current system; Phase 2 will consist of course development and piloting. As funding permits, additional funding will be requested to expand the scope of the course.

Project Description

SYNOPSIS:

Between April 1, 2010 and March 31, 2011, UCSF will begin the implementation of an epidemiology course at the Hanol School of Public Health (SPH) in Vietnam. Epidemiology is the study of the distribution of disease in a population. The purpose of the training is to improve the knowledge of epidemiology among public health professionals and scientists in Vietnam. The overarching goal is to improve the quality of epidemiological research and surveillance in Vietnam and to increase the number of epidemiological research studies conducted by or in close partnership with Vietnamese nationals in Vietnam. The exact nature of the course will depend on an initial needs usersineat.

Background:

The quality of epidemiology training at the schools of public health in Vietnam is currently quite low. The few well-trained epidemiologists and public health workers in Vietnam have received training at institutions outside of Vietnam; yet little of that knowledge trickles down to public health students. At the same time, the demand for epidemiologists and public health workers with at least a basic knowledge of spidemiology is increasing due to the influx of funding to combat HIV/AIDS and other health conditions.

PROJECT DESCRIPTION

UCSF will develop a curriculum, and implement a pilot course, in collaboration with the Hanni SPH. UCSF, in consultation with CDC-Victnam staff, will conduct an assessment of the needs regarding spidemiology training by interviewing faculty and department heads at the Hanoi SPH as well as stakeholders at other institutions (such as the National Institute of Hygicae and Epidemiology - NIHE), and reviewing existing course curricula. The needs assessment will also include determining what other institutions in Vietnam should be included in the pilot phase and/or what institutions will implement the course. With committation from CDC HQ and country staff as well as other appropriate stakeholders, UCSF will then develop an appropriate curriculum for a course or courses to be faught at the Hanoi SPH. The exact content of the course(a) will depend on the needs assessment but will likely be drawn from the following topics:

Basic epidemiology

- Designing Clinical Research including development of a study protocol
- Outbreak investigation
- Advanced epidemiology
- Basic biostatistics
- Respondent-driven sampling

- Survey design and questionnaire development
- · Software for epidemiological research. EpiData, EpiInfo, Stata, SAS
- Data management
- Advanced hipstatistics

After the curriculum has been draigned, UCSF will teach the course to a core group of Hanot SPH faculty a other key stakeholders identified during the needs assessment. The pilot course will be evaluated and revise At the same time, a selected group of Hanot SPH faculty and other key stakeholders will be invited to UCs and UC Berkeley to attend and/or observe advanced epidemiology courses. For example, they may learn abo advanced epidemiology methods that would be particularly useful in Viennam, such as respondent-driving for hard-to-reach populations. Finally, UCSF will mentor SPH faculty as they leach the course to the students.

Specific activities include:

- Conducting a needs assessment
- . Developing a curriculum for one or more epidemiology courses
- Conducting a pilot of the course, taught to Hanoi SPH faculty
- Evaluating the pilot course and revising the curriculum
- Inviting selected Hanor SPH faculty and other key stakeholders to San Francisco/Berkeley to observe an attend advanced epidemiology courses
- Mentoring Hanoi SPH faculty as they teach the epidemiology course to SPH students

PROPOSED WORK PLAN AND TIMELINE

Noods assessment visit to Vietnam	UCSF with CDC	October 2009
Curriculum development	UCSF	March 2010
Pilot course and evaluation	UCSF	August 2010
Curriculum revision	UCSF	October 2019
SPH faculty visit to San Prancisco	UCSF	November 2010
Mentoring of SPH faculty through course	UCSF	March 2011

APPROVED:		
E michael Royes	•	•
	3/17	.,
E. Michael Royes, MD Senior Director	Date	2

Year 07 UGSF-CORE

EXHIBIT B BUDGET (See Anieles IV & Y)

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EXHIBIT C SPECIAL CONDITIONS

(See Article V and Special Conditions)

SC-1 PATENT RIGHTS

Whenever any invention which is or may be patentable, is conceived or first actually reduced to practice in the course of this Subcontract, the Contractor shall furnish the University with complete information thereon, in order that the University may carry out the conditions of the prime award with the DHHS with regard to the filing of patent applications and disposition of patent rights under 37 CFR 401.14 or FAR 32.227-11, as appropriate.

SC-2 COPYRIGHTS

Contractor shall own rights to copyrightable materials it solely first develops and delivers under this Subcontract but hereby grants to University an irrevocable, royalty-free, non-transferable, non-exclusive right and license to use, reproduce, make derivative works, display, and perform publicly any copyrights or copyrighted material (including any computer software and its documentation and/or databases) solely for the purpose of education and research and to the extent required to meet University's obligations to HRSA under its prime cooperative agreement.

SC-3 DATA RIGHTS

Contractor shall own rights to data it solely first creates and delivers under this Subcontract but hereby grants to University the right to use data solely for the purpose of education and research and to the extent required to meet University's obligations to HRSA under its cooperative agreement.

SC-4 PUBLICATION

Any publication by the Contractor resulting from work under this Subcontract will carry a footnote acknowledging assistance from the DHHS award held by the University and indicating that findings and conclusions do not necessarily represent views of the DHHS or the University.

SC-5 REVIEW OF HUMAN SUBJECTS IN RESEARCH PROJECTS

The Contractor assures that adequate safeguards shall be taken whenever using human subjects in research and an institutional review committee composed of sufficient members with varying backgrounds to assure complete and adequate review of projects involving the use of human subjects has reviewed and approved the projects. Informed consent, where appropriate, shall be obtained by methods consistent with Title 45 Code

of Federal Regulations, Part 46, Subpart A, "Protection of Human Subjects," and specifically Section 46, 107, "Special Assurances."

SC-6 CARE AND TREATMENT OF LABORATORY ANIMALS

The Contractor assures that whenever warm-blooded animals are used in research, the Contractor shall comply with the applicable portions of the Animal Welfare Act (P.L. 89-544 as amended) and shall follow the guidelines prescribed in DHHS Publication No. 86-23 (NIH), "Guide for the Care and Use of Laboratory Animals."

SC-7 EQUAL EMPLOYMENT OPPORTUNITY

The Contractor assures compliance with paragraph (1) through (7), Section 202, Executive Order 11246, a copy of which is attached on the last page and made a part of this subcontract.

SC-8 GRANT-RELATED INCOME

The Contractor shall immediately report to the University any income received or anticipated which is generated by activities performed under the Subcontract. The University may then authorize the disposition of such income in accordance with options designated by DHHS.

SC-9 OTHER SPECIAL CONDITIONS

The Contractor agrees to administer this Subcontract in accordance with HHS Grants Policy Statement dated January 1, 2007, including all amendments thereto. This Special Condition supersedes Article V. Budget of this Subcontract in its entirety.

SC-10 OTHER ASSURANCES

The Contractor agrees to fulfill the requirements of any other assurances as may be required by DHHS for the work undertaken by the Contractor. The University further agrees to exercise its best efforts in keeping the Contractor informed of the assurances required.

SC-11 DEBT AND DEBARMENT

By execution of this Subcontract, Contractor assures to the University that it is not delinquent on any Federal debt pursuant to OMB Circular A-129, and that it or its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal agency pursuant to government-wide regulations.

SC-12 MISCONDUCT IN SCIENCE

The Contractor assures that it maintains an administrative review process for dealing with and reporting possible misconduct in science and that it subject to the requirements found in 42 CFR Part 93 ("Public Health Service Policies on Research Misconduct"), or, if not, it agrees to be subject to the policies of the University of Washington for dealing with and reporting possible misconduct in science with respect to research supported through this Subcontract.

SC-13 LOBBYING RESTRICTIONS

The Contractor assures that it is in compliance with 45 CFR Part 93. If this Subcontract exceeds \$100,000 a certification, and a disclosure form, if required, shall be filed with the University in accordance with the Federal regulations.

SC-14 AMERICAN-MADE ITEMS

To the greatest extent practicable, when purchasing equipment or products under this Subcontract, the Contractor should purchase only American-made items.

SC-15 FINANCIAL CONFLICT OF INTEREST

The Contractor assures compliance with the requirements of 42 CFR Part 50, Subpart F, "Responsibility of Applicants for Promoting Objectivity in Research for Which PHS Funding is Sought."

SC-16 HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

The Contractor shall not use protected health information created or shared under this Subcontract in any manner that would constitute a violation of HIPAA Act of 1996 and any regulations enacted pursuant to its provisions.

SC-17 TRAFFICTING VICTIMS PROTECTION

This Contractor is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104), by reference incorporated herein.

EQUAL EMPLOYMENT OPPORTUNITY

(Section 202, Executive Order 11246, September 24, 1965, 30 FR 11269) During the performance of this Subcontract, the Contractor agrees as follows:

- (1) The Contractor will not discriminate against any employee or applicant for employment because of race, creed, color, or national origin. The Contractor will take affirmative action to ansure that applicants are employed, and that employees are treated during employment, without regard to their race, creed, color, or national origin. Such action shall include, but not be limited to the following: layoff or termination; rates of pay or other forms of compensation: and selection for training, including apprenticeship. The Contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of this nondiscrimination clause.
- (2) The Contractor will, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, state that all qualified applicants will receive consideration for employment without regard to race creed, color, or national origin.
- (3) The Contractor will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer, advising the labor union of workers' representative of the Contractor's commitments under Section 202 of Executive Order No. 11246 of September 24, 1965, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- (4) The Contractor will comply with all provisions of Executive Order No. 11246 of September 24, 1965, and of the rules, regulations, and relevant orders of the Secretary of Labor.
- (5) The Contractor will furnish all information and reports required by Executive Order 11246 of September 24, 1965, and by the rules, regulations; and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records, and accounts by the contracting agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations, and orders.
- (6) In the event of the Contractor's noncompliance with the nondiscrimination clauses of this contract or with any of such rules, regulations, or orders, this contract may be canceled, terminated or suspended in whole or in part and the Contractor may be declared ineligible for further Government contracts in accordance with procedures authorized in Executive Order No. 11246 of September 24, 1965, and such other sanctions may be imposed and remedies involved as provided in Executive Order No. 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided by law.
- (7) The Contractor will include the provisions of Paragraph (1) through (7) in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to Section 204 of Executive Order No. 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The Contractor will take such actions with respect to any subcontract or purchase order as the contracting agency may direct as a means of enforcing such provisions including sanctions for noncompliance. Provided, however, that in the event the Contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the contracting agency, the Contractor may request the United States to enter into such litigation to protect the interests of the United States. New 144

UNIVERSITY OF WASHINGTON SUBCONTRACT NO. 694958

MODIFICATION NO. 1

The University and Contractor Mutually Agree as Follows:

GENERAL CONDITIONS

ARTICLE 1. SCOPE OF WORK - is hereby amended to add to the existing Exhibit A, Scope of Work, the attached Exhibit A, Scope of Work.

Exhibit A. Scope of Work, is attached and hereby appended to this Subcontract.

ARTICLE III. ESTIMATED COST AND EXPENDITURE LIMITATION - is hereby amended to increase the Subcontract by \$190,287.

The cumulative total of "\$1,099,774" should be changed to "\$1,290,061."

Exhibit B, Budget is attached and hereby appended to this Subcontract.

ARTICLE V. <u>ALLOWABLE COST AND PAYMENT</u> – is hereby amended to substitute the third paragraph as follows:

C. The Contractor will submit vouchers to the University for reimbursement at least quarterly, but not more often than monthly, to the following address:

UW Center for AIDS Research Box 359931 University of Washington Seattle, WA 98195

All other terms and conditions remain unchanged.

Approved and Agreed on this 9th day of August, 2010 by signatures of authorized officials affixed below:

UNIXERSITY OF WASHINGTON	CONTRACTOR
By:	De Rodhan
Michael J. Blackwell (Name)	JOHN RADKOWSKI (Name)TRACTS & GRANTS OFFICER
Subcontract Manager	
(Title)	(Title)

EXHIBIT B BUDGET

(Sec Articles IV and V)

Caribbean

Salaries		\$89,198
Emplayee Benefits		25,304
Consultants		11,143
Equipment		0
Supplies		936
Travel		43,500
Other Direct Costs		6,463
Total Direct Costs		\$176,544
Indirect Cost 8% of MTDC*		13,743
•		\$190,287
GRAND TOTAL		$x \in \mathcal{F}(x)$

^{*} Not to exceed this rate per HRSA limitation..

Base = \$171,791.

EXHIBIT A SCOPE OF WORK (See Article 1)

Caribbean

Project Objective:

To provide technical support and guidance to enhance in-country TB/HIV joint collaborative programming in the Caribbean.

Long term outcomes will include:

- Increased and carlier identification of HIV/I'B co-morbidities
- Increased access to TB and HIV services
- > Increased quality of care for both TB and HIV
- Enhanced laboratory capacity and timely laboratory diagnosis for TB
- > Enhanced prevention strategies for both diseases

Outcomes/Expected Results

- Revised customized curriculum, facilitator's guide, and job aides to operationalize the CTBG in the target countries
- Technical Assistance made available to 4 target countries for improvement in country specific TB control and prevention via implementation of Caribbean TB Guidelines (CTBG)
- Medical consultation service made available for clinicians in the region to advise on diagnosis, treatment, and management of TB infected and infectious patients as well as assist NTPs in the event of TB outbreaks. Capacity building and network strengthening for Caribbean consultants
- TB nurses network is established in the Caribbean for TB education and sharing of strategies to address program challenges
- Improved shared knowledge and cooperation among Caribbean TB clinicians, nurses, and laboratory personnel
- TB and TB/HIV program activities in the Caribbean highlighted and promoted through sharing of materials at international conferences

Outputs

- Sixteen training modules based on the CTBG revised and managing drug supply module developed
 - Facilitator Guide (in conjunction with I-TECH's Training Development Lead)
- Documented Technical Assistance to 4 target countries in areas of implementation of CTBG, finalizing national plans, individual country organizational analyses, education/training assistance to support capacity building and/or country specific operational guidelines
- TB medical consultation services provided

EXHIBIT A SCOPE OF WORK (See Article I) continued

Caribbean

- · Quarterly calls or webiners to present cuses and have ongoing education
- Convene and facilitate the TB nurses network quarterly conference calls, 1 call per quarter
- Convene a 2-day meeting and TB Training of Trainers (TOT) Refresher for clinicians, nurses, and laboratory personnel
- Abstracts and/or posters highlighting TB and TB/HIV Caribbean program developed for submission to international conferences

Activities

- · Revise curriculum, which will then be reviewed and finalized by stakeholders
- Post the revised curriculum online (in its entirety and sections) to accommodate ongoing revisions
- Offer Technical Assistance to 4 target countries (approximately 3 trips per country) for country specific needs in CTBG implementation, national plans, organizational analyses, education/training, and/or operational guidelines
- Offer medical consultation regarding diagnosis, treatment, and management of TB infected and infectious patients, and advise NTPs in the event of TB outbreaks via CNTC Warmline
- Continue strengthening the TB nurses network in the Caribbean by convening quarterly calls to discuss TB education and program issues and facilitate case presentations
- Plan, develop, organize, implement and evaluate a 2-day meeting and TB TOT in the Caribbean in Q3
- Provide TB content and writing/graphics expertise for abstracts and posters to be submitted for international conferences as requested

I-TECH Contacts

This subcontract results from an award to the University of Washington, School of Medicine for the International Training and Education Center for Health (I-TECH), for which King Holmes, MD, PhD, serves as Principal Investigator. Ann Downer, EdD, serves as I-TECH Director and will serve as the primary contact person on behalf of the University of Washington as regards policy issues. Shelia St. Thomas, I-TECH/UW Caribbean Regional Program Manager (shelia@uw.edu), will be the primary contact for programmatic and fiscal issues and will be responsible for monitoring the activities contained within this scope of work. Ann Van Alt, I-TECH/UW Contracts Manager (annster@uw.edu), will be the primary contact for subcontracting and invoicing issues.

UCSF/Curry Contacts

Michael Reyes, MD, MPH will be the primary UCSF contact and will be responsible for monitoring the activities within the scope of work. Tom Foster, Unit Manager, will be responsible for managing subcontract technical requirements and the reporting requirements. Phillip Hopewell, MD, and Thomas Stuebner, Project Lead, will be the primary contacts for the Francis J. Curry National Tuberculosis Center for programmatic oversight.

Page 2 of 3

EXHIBIT A SCOPE OF WORK (See Article I) continued

Caribbean

Amendment to the Scope of Work

This scope of work may be amended with written consent of both parties.

Reporting Requirements

We understand that the following guidelines will be followed regarding reporting requirements:

- Representatives from the Curry TB Center, CHART RCU, and ITECH/UW will
 meet regularly via conference call to plan, report and evaluate project activities.
- The project lead from the Curry TB Center and the I-TECH Caribbean Regional Program Manager will have monthly informal phone calls to communicate progress on deliverables, as well as any challenges and/or needs for support or assistance from I-TECH.
- Quarterly reports and a final activity report to be submitted to the Caribbean Regional Program Manager no later than the 10th day following the end of the prior quarter (final report due April 10, 2011). These reports will be shared with HRSA and the CHART Regional Coordinating Unit.

Wu, Linda

OR CG Award Team; Wu, Linda :01 Wednesday, September 22, 2010 10:08 AM Sent: Occena, Lourdes From:

Award Completion Request; A105232; University of Washington; Pt. Edward Michael Reyes Foster, Thomas

:sinemiosijA

Michael Reyes; 694958m1-holmes_20100810_13224926.pdf; Supplement package to CG 081610.pdf; Caribbean Curry Q2-4 Budget Supplement reved by LO.XLS Follow up - Award Completion Request; A105232; University of Washington; Pt. Edward

High importance:

¿npiect:

:00

modification. Attached is our computation in Excel format. please refer to UW's reply to our request that they change the budget in contract: Hi Linda,

Please advise if you need anything else from us to have the contract signed.

ronuqes Rest regards,

----OsessaM LentginO-----

From: Ann Van Alt [mailto:annster@u.washington.edu]

Sent: Wednesday, September 22, 2010 9:08 AM

Io: Foster, Thomas; Ochena, Lourdes

Subject: FW: Revision requested by UCSF for mod 1 subcontract 694958

Hi Tom and Lourdes,

return it to the UW. know if UCSF needs any additional information in order to sign the modification document and UCSF to redirect/rebudget the funds to Indirect Costs without formal UW approval. Let me than 25% of the total budget, a new budget does not need to be issued. It is allowable for Caribbean subconfract. They said that since the amount being moved to Indirect Costs is less I talked with the UW Office of Sponsored Programs about the budget revision requested for the

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----Obiginal Message----

From: Iru Ambrose

Sent: Tuesday, September 21, 2010 2:17 PM

2nplecf: RE: Revision requested by UCSF for mod i subcontract 694958 To: Ann Van Alt

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This rebudget does not require formal OSP approval.

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----Original Message----

Sent: Friday, September 17, 2016 4:19 PM From: Ann Van Alt

To: Iru Ambrose

Subject: Revision requested by UCSF for mod 1 subcontract 694958

Hi Tru,

UCSF would like the budget for the enclosed modification revised before signing. Could you change the budget and re-send?

Change requested:

Reallocate budget to these categories:
Salaries \$89,198
Employee Benefits \$25,304
Consultants \$11,143
Supplies \$584
Travel \$43,500
Other Direct Costs \$6,463

Total Direct Costs \$176,192
Indirect Costs 8% of MTDC* \$14,095

GRAND TOTAL \$190,287

Let me know if you need any other information.

Thanks,

Ann

----Original Message----

From: UW Outgoing Subs [mailto:outgosub@uw.edu]

Sent: Tuesday, August 10, 2010 1:29 PM

To: CGAwardTeam@ucsf.edu

Cc: Ann Van Alt

Subject: Subcontract for mod #1 for Dr. Michael Reyes

Dear Sir or Madam,

Please open the attachment and process this request for your organization.

Sincerely,

Adelina C. Caberto
Program Coordinator
Office of Sponsored Programs
University of Washington, Seattle
(206) 543-5753 Telephone
(206) 685-1732 Fax
Box 359472