

File No. 221194

Committee Item No. 7

Board Item No. 22

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date January 25, 2023

Board of Supervisors Meeting Date January 31, 2023

Cmte Board

<input type="checkbox"/>	<input type="checkbox"/>	Motion
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Resolution
<input type="checkbox"/>	<input type="checkbox"/>	Ordinance
<input type="checkbox"/>	<input type="checkbox"/>	Legislative Digest
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Budget and Legislative Analyst Report
<input type="checkbox"/>	<input type="checkbox"/>	Youth Commission Report
<input type="checkbox"/>	<input type="checkbox"/>	Introduction Form
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Department/Agency Cover Letter and/or Report
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<input type="checkbox"/>	<input type="checkbox"/>	Grant Information Form
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OTHER (Use back side if additional space is needed)

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>DPH Presentation 1/25/2023</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>DPH Statement on Retroactivity 1/27/2023</u>
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Completed by: Brent Jalipa Date January 19, 2023

Completed by: Brent Jalipa Date January 26, 2023

1 [Contract Agreement - Retroactive - San Francisco AIDS Foundation - Health Access Point
2 Services - Not to Exceed \$11,886,595]

3 **Resolution retroactively approving an original contract agreement between San**
4 **Francisco AIDS Foundation and the Department of Public Health, to provide Health**
5 **Access Point services in an amount not to exceed \$11,886,595 for a total initial contract**
6 **term of January 1, 2023, through June 30, 2026, and to authorize the Department of**
7 **Public Health to enter into amendments or modifications to the contract prior to its**
8 **final execution by all parties that do not materially increase the obligations or liabilities**
9 **to the City and are necessary to effectuate the purposes of the contract or this**
10 **Resolution.**

11
12 WHEREAS, The Department of Public Health (DPH), selected San Francisco AIDS
13 Foundation through a Request for Proposals (RFP) process, RFP 4-2019, issued on
14 September 12, 2019, to provide Health Access Point services and integrated HIV, HCV, and
15 STD prevention for affected communities under an agreement with a total initial term of three
16 and one half years, from January 1, 2023, through June 30, 2026, and not to exceed amount
17 of \$11,886,595; and

18 WHEREAS, A copy of the original agreement is on file with the Clerk of the Board of
19 Supervisors in File No. 221194, which is hereby declared to be a part of this Resolution as if
20 set forth fully herein; now, therefore, be it

21 RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public
22 Health and the Director of the Office of Contract Administration/Purchaser, on behalf of the
23 City and County of San Francisco, to retroactively execute a contract with San Francisco
24 AIDS Foundation to provide Health Access Point services and integrated HIV, HCV and STD
25

1 prevention for affected communities for a total initial term of January 1, 2023, through June
2 30, 2026, for a total contract amount not to exceed \$11,886,595; and, be it

3 FURTHER RESOLVED, That the Board of Supervisors authorizes the Department of
4 Public Health to enter into any amendments or modifications to the contract, prior to its final
5 execution by all parties, that the Department determines, in consultation with the City
6 Attorney, are in the best interests of the City, do not otherwise materially increase the
7 obligations or liabilities of the City, are necessary or advisable to effectuate the purposes of
8 the contract, and are in compliance with all applicable laws; and, be it

9 FURTHER RESOLVED, That within thirty (30) days of the contract being fully executed
10 by all parties, the Director of Health and/or the Director of the Office of Contract
11 Administration/Purchaser shall provide the final contracts to the Clerk of the Board for inclusion
12 into the official File No. 221194.

13
14 RECOMMENDED

15 /s/

16 Dr. Grant Colfax
17 Director of Health

Item 7 File 22-1194	Department: Public Health (DPH)
EXECUTIVE SUMMARY	
<p style="text-align: center;">Legislative Objectives</p> <ul style="list-style-type: none"> The proposed resolution would approve a new contract agreement between San Francisco AIDS Foundation and the Department of Public Health (DPH) to provide Health Access Point (HAP) services and integrated HIV, Hepatitis C (HCV), and sexually transmitted diseases (STD) prevention programs in an amount not to exceed \$11,886,595 for a total initial contract term of three- and one-half years from January 1, 2023, through June 30, 2026. The contract allows for seven one-year options to extend from July 1, 2026, through December 31, 2032. <p style="text-align: center;">Key Points</p> <ul style="list-style-type: none"> In response to findings from a planning process to improve programs and services, DPH developed a framework called a “Health Access Point” (HAP). A HAP integrates various services to address HIV, HCV, and STDs including testing, treatment for substance abuse and mental health conditions, counseling, support groups, housing and employment support, and prevention information and education. Through a Request for Proposals (RFP) process issued on September 12, 2019, the San Francisco AIDS Foundation was selected by DPH to provide HAP services for men who have sex with men (MSM), with a focus on gay men. The AIDS Foundation will also provide lab testing and capacity building for other HAPs. <p style="text-align: center;">Fiscal Impact</p> <ul style="list-style-type: none"> The annual program budget for all services is \$3.0 million, or \$10,613,031 over three and a half years. The budget is funded almost entirely by the General Fund, excluding \$5,000 of Centers for Disease Control and Prevention (CDC) funding allocated in year one of the agreement. <p style="text-align: center;">Recommendations</p> <ul style="list-style-type: none"> Amend the proposed resolution to state that approval of the contract is retroactive. Approve the proposed resolution, as amended. 	

MANDATE STATEMENT

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

BACKGROUND

In Fall 2017, the San Francisco Department of Public Health (DPH) initiated the “HIV/HCV/STD Roadmap,” a planning process to improve programs and services related to HIV, hepatitis C (HCV), and sexually transmitted diseases (STDs) in San Francisco. DPH gathered input from staff and community stakeholders to identify approaches for future care and prevention services. In January 2019, DPH published a report on the “Roadmap” suggesting a need for an increased focus on person-centered integrated services in the City to help the City achieve its goals of (a) getting to zero new HIV infections, (b) eliminating HCV, (c) reversing the trend of increasing STD rates, and (d) eliminating racial disparities in health outcomes.

In response to these findings, DPH developed a framework called a “Health Access Point” (HAP) which integrates various services to address HIV, HCV, and STDs including testing, treatment for substance abuse and mental health conditions, counseling, support groups, housing and employment support, and prevention information and education. DPH defines a HAP as a “population specific, one-stop shop or network of agencies/programs with a lead agency that provides equity-focused, stigma-free, and low barrier access to person-centered, standard of care services regardless of HIV, HCV, or STD status.”

Procurement

Through a Request for Proposals (RFP) process issued on September 12, 2019, the San Francisco AIDS Foundation was selected by DPH Community Health Equity and Promotion Branch (CHEP) Program to provide HAP services and integrated HIV, HCV, and STD prevention for affected communities. According to DPH, this RFP was a new service model that integrated services instead of creating service silos. Although the RFP was issued in September 2019, COVID delayed the implementation of this new program.

The RFP was divided into seven service categories: (1) HAP for Latinx; (2) HAP for Trans women; (3) HAP for people who use drugs, including injecting drugs; (4) HAP for men who have sex with men (MSM), with a focus on gay men; (5) HAP for Asians and Pacific Islanders; (6) HAP for young adults (ages 18 to 24); and (7) training and capacity building for a HAP for Black/African Americans.

According to DPH, the San Francisco AIDS Foundation was the only organization to submit a proposal in response to Service Category 4 of the RFP. Four evaluation panelists scored the proposal amongst four categories: Population of Focus (10 Points); Program Design and Effectiveness (67 Points); Data Collection, Evaluation, and Quality Assurance (8 Points); and

Organizational and Fiscal Capacity (15 Points). The San Francisco AIDS Foundation proposal received an average score of 88.75 out of 100 possible points and was awarded the contract for Service Category 4, HAP for men who have sex with men (MSM), with a focus on gay men, at an annual cost of \$1.2 million. The proposed agreement will fund the San Francisco AIDS Foundation to provide the MSM Health Access Point as a result of the RFP.

In addition, the contract includes services such as STD testing and capacity building for non-profit providers. To address both the impact to implementing a new HAP model of care, and the emerging system needs that became apparent during the pandemic, the Department received an ongoing \$3.0 million annual enhancement from the Mayor in the FY 2022-23 DPH budget. Of the \$3.0 million budget, an amount of \$1,830,866 was allocated to the SF AIDS Foundation agreement as a sole source, under Administrative Code, Chapter 21.42, which allows the Department of Public Health to designate non-profits providers as sole source. The Department advises that these funds will remain in the contract through the initial contract term, as the funding is for the successful implementation of the HAP model. If the funding is to be continued following June 30, 2026, the funding will be subject to a solicitation.

DETAILS OF PROPOSED LEGISLATION

The proposed resolution would approve a new contract agreement between San Francisco AIDS Foundation and the Department of Public Health (DPH) to provide Health Access Point (HAP) services and integrated HIV, HCV, and STD prevention programs in an amount not to exceed \$11,886,595 for a total initial contract term of three- and one-half years from January 1, 2023 through June 30, 2026. The contract allows for seven one-year options to extend from July 1, 2026 through December 31, 2032. The proposed resolution should be amended to state that approval of the contract is retroactive.

According to DPH staff, the proposed agreement is exempt from Chapter 14B of the Administrative Code and does not have a Local Business Entity (LBE) subcontracting participation requirement due to the budget's inclusion of federal funding.

Services Provided

The services provided through this contract are divided amongst five programs, described below. Service will take place at the San Francisco AIDS Foundation at 1035 Market Street.

- 1) Training Academy & Clinical Assistance Program: A workforce training program providing professional development services for community health workers from CHEP-funded community-based organizations, with a focus on staff directly supporting HAP network activities. In addition to the training listed below, this program also includes three months of start-up planning for both the training academy and the clinical assistant program.

Training Provided	Annual Number of Trainees
Training and/or Professional Development to HAP Network Members (9 Hour Training)	55 Trainees
Clinical Assistant Training/Field Experience (20 Hour Training + 80 Hour Field Experience)	10 Trainees
HIV Test Counselor Training (50 Hour Training)	20 Trainees

- 2) Capacity Building Activities: The Black Health Clinical Assistant Program: A workforce training program providing professional development services for Black and African American individuals impacted by sexual health disparities. The program connects graduates to Black and African American HAP employment opportunities. In addition to the training listed below, this program also includes three months of start-up planning for the training academy.

Training Provided	Annual Number of Trainees
Clinical Assistant Training or Field Experience (20 Hour Training + 80 Hour Field Experience)	24 Trainees

- 3) Clinical Services Sustainability: A program providing standard of care services including HIV, HCV, and STD testing and STD treatment medication. In addition to the services listed below, this program also intends to navigate¹ 580 clients to PrEP and PEP services annually. As a result of the HAP model, and the expansion of testing, the Department expects a significant rise in the number of tests to be processed that will exceed the ability of the DPH lab. To ensure that capacity is met, the Department allocated funding to the San Francisco AIDS Foundation's existing lab, which will support the testing needs of the HAP network.

Services Provided	Annual Service Units
HIV, HCV, STI, and MPX Testing	14,825 Tests
STI and MPX Treatment	500 Encounters

¹ Navigation services are defined as services guiding clients around healthcare barriers to ensure timely and appropriate care or treatment. These services usually span a few months in time (1-3 Months).

- 4) HAP: Gay/MSM: A Health Access Point providing standard of care services with a focus on high-risk² gay men and other men who have sex with (MSM). Services provided include HIV, HCV, and STD testing, STD treatment medication, case management, support groups, and navigation services. In addition to the services listed below, the program includes distribution of condoms; syringe distribution and disposal; quarterly community engagement events; and navigation for 790 clients annually to PrEP and PEP services.

Services Provided	Annual Service Units
HIV, HCV, STI, and MPX Testing*	27,120 Tests
STI and MPX Treatment	650 Encounters
	Annual Number of Clients
Case Management**	25 Clients
Support Groups**	50 Clients
Navigation Services**	40 Clients

*A portion of these services are subcontracted.

**These services are subcontracted.

- 5) The HAP Capacity Building Activities Program: HIV/STI/Hep C Infrastructure: A program providing technical assistance and capacity building support to the HAP Network, with an emphasis on the Black and African American HAP (Rafiki Coalition for Health and Wellness) and the Youth HAP (LYRIC). As part of the HAP model, each HAP must provide testing and services to address HIV, STI, and Hep C. This is a new capacity requirement for many vendors, but is integral to the success of the HAP, where an individual is able to do “one-stop shopping” for services. As a result, the AIDS Foundation will provide training to ensure that there is the same standard of care within each HAP. The initial six months of the program (Y1) will include start-up activities including assessing and responding to Black/AA and Youth HAP needs by establishing a scope of work and attending respective HAP meetings; participating in HAP Network convenings; engaging and establishing contracts with consultants required for Black/AA HAP implementation; and supporting communication between HAP leads and subcontractors. In the remaining years of the proposed agreement, Y2-Y4, the program will conduct “capacity building activities,” which may include creating policies and procedures for clinical operations; creating forms and intake/registration procedures and protocols; and supporting HAPs with the establishment of necessary licenses, certifications, and infrastructure required for the operation of clinical services.

Performance Monitoring

According to DPH staff, no previous program monitoring reports exist for the proposed agreement, since it is a new service model. CHEP requires service providers to measure and report on program-specific objectives and basic demographic, behavioral risk, and other

² “High-risk” in this context refers to a) unaware of their HIV serostatus; b) at risk for STI and/or HCV, regardless of HIV serostatus; c) aware that they are HIV-positive but are not engaged in care; and/or d) HIV-negative and not engaged or retained on PrEP.

information. CHEP publishes performance objectives annually for all service providers in a centralized document. According to the RFP, specific measures for these services include the percentage of clients linked to HIV care who initiated treatment, the percentage of clients provided navigation to PrEP services who initiated treatment, and other measures. According to the agreement, the San Francisco AIDS Foundation will submit quarterly data and narrative reports for all programs.

No findings were reported in the FY 2021-22 Citywide Fiscal and Compliance Monitoring of the San Francisco AIDS Foundation.

FISCAL IMPACT

The proposed resolution would approve a total not-to-exceed amount of \$11,886,595 over the initial three- and one-half-year term. The program budget is \$10,613,031 with a 12 percent contingency of \$1,273,564. The budget is funded almost entirely by the General Fund, excluding \$5,000 of Centers for Disease Control and Prevention (CDC) funding allocated in year one of the agreement. DPH advised that the CDC funding may be continued in years two through four of the agreement, but the award letter for the additional years had not been received at the time of this writing. In the event the funding is added, DPH plans to utilize the 12 percent contingency to incorporate the additional CDC funds into the proposed agreement. Exhibit 1 below shows the fiscal impact of the proposed agreement by expenditures and revenues.

Exhibit 1: Fiscal Impact of Proposed San Francisco AIDS Foundation Agreement by Year

	Year 1	Year 2	Year 3	Year 4	All Years
	1/1/2023 - 6/30/2026	7/1/2023- 6/30/2024	7/1/2024- 6/30/2025	7/1/2025- 6/30/2026	1/1/2023- 6/30/2026
Expenditures					
Salaries & Benefits	\$1,046,626	\$2,093,254	\$2,093,254	\$2,093,254	\$7,326,388
Operating Expenses	\$275,490	\$542,282	\$542,282	\$542,282	\$1,902,336
Indirect Cost	\$198,317	\$395,330	\$395,330	\$395,330	\$1,384,307
Total Expenditures	\$1,520,433	\$3,030,866	\$3,030,866	\$3,030,866	\$10,613,031
Revenues					
General Fund	\$1,515,433	\$3,030,866	\$3,030,866	\$3,030,866	\$10,608,031
CDC Funding	\$5,000				\$5,000
Total DPH Revenues	\$1,520,433	\$3,030,866	\$3,030,866	\$3,030,866	\$10,613,031
Not-to-Exceed Contract Amount					
Agreement Funding Sources					\$10,613,031
Contingency (12%)					\$1,273,564
Total Not-to-Exceed Amount					\$ 11,886,595

Source: Appendix B of Proposed agreement

As shown below in Exhibit 2, the program with the highest annual expenditure is the HAP MSM at approximately \$1.2 million, representing 40 percent of total expenditures for all programs. The program with the second highest annual expenditure is the Clinical Services Sustainability Program at \$630,866, representing 21 percent of total expenditures for all programs. Both of these programs provide clinical services. Exhibit 2 below shows annual program expenditures and full-time equivalent positions (FTEs) by program.

Exhibit 2: Annual Fiscal Impact of Proposed Agreement by Program

Program	FY 2023-24 Expenditures	FTEs
Training Academy & Clinical Assistance	\$450,000	4.01
Clinical Services Sustainability	630,866	2.98
The Black Health Clinical Assistant Program	400,000	4.90
HIV/STI/Hep C Infrastructure	350,000	1.00
Health Access Point: Gay/MSM	1,200,000	7.10
Total	\$3,030,866	20.00

Source: Appendix B of Proposed agreement

Staffing

The proposed agreement funds 20 FTEs annually, including management, clinical, and other program staff as well as 5.23 FTE part-time cohort participants in workforce development programs. Expenditures on salaries and benefits across all years of the agreement total

\$7,326,388, or approximately 70 percent of the term budget. Approximately \$2.9 million is allocated towards salaries and benefits for the MSM HAP Program.

Subcontractors

Approximately \$392,000 of the annual budget is allocated for consultants and subcontractors. The MSM HAP budget allocates \$200,000 annually to the following subcontractors: San Francisco Community Health Center (\$50,000 annually for community engagement events); Shanti Project (\$50,000 annually for case management and support services); and GLIDE (\$100,000 annually for navigation services and a portion of the STD testing). The HIV/STI/Hep C Infrastructure Program budget allocates \$192,560 annually for 1,196 hours of consulting at a rate of \$161 per hour for an “Integrated Testing Consultant” on an as-needed basis to support integrated testing across the Health Access Point Network. This testing includes services for HIV testing, Hepatitis C testing, and Sexually Transmitted Infection (STI) testing.

RECOMMENDATIONS

1. Amend the proposed resolution to state that approval of the contract is retroactive.
2. Approve the proposed resolution, as amended.

**San Francisco Department of Public Health (DPH)
Population Health Division (PHD)
Community Health Equity and Promotion (CHEP) Branch**

San Francisco AIDS Foundation Health Access Point (HAP) Services

**SFBOS Budget and Finance Committee
January 25, 2023**

**Nikole Trainer, MPH, MCHES, CPT II
Budget, Contract and Communications Manager
CHEP Branch, PHD, DPH**



RFP #4-2019 Category 4 - Gay MSM HAP Services

Awardee: SF AIDS Foundation (SFAF)

Integrated HIV,
HCV, and STD
Testing

Linkage and
Navigation

Health Education
and Counseling

Overdose
Prevention

Syringe Access
and Disposal

Substance Use and Harm Reduction
Services for Opioids, Stimulants,
Alcohol, Tobacco, and Cannabis

Community
Engagement and
Mobilization

Condom
Distribution

Basic Needs

Primary Care

Mental Health
Services

Prevention and Treatment Medication:
PrEP and ART for HIV; HCV
Treatment; STD Treatment, Including
Medical Storage

Substance Use
Treatment

+ COVID-19 Testing, Vaccination, Care

SFAF Additional Services to Support HAP Implementation

Capacity Building Activities

Training Academy &
Clinical Assistance

Black Health Clinical
Assistant Program

HIV/STI/HEP C
Infrastructure

Clinical Services/Program Sustainability

STRUT Clinical Services Expansion &
Sustainability

Proposed Contract

- DPH agrees with BLA recommendations
 - Amend the proposed resolution to state that approval is retroactive.
- DPH requests approval of proposed resolution as amended



Thank You



From: [Altman, Claire \(DPH\)](#)
To: [BOS-Supervisors](#)
Cc: [BOS-Legislative Aides](#); [Somera, Alisa \(BOS\)](#); [Jalipa, Brent \(BOS\)](#); [Rocha, Maximilian \(DPH\)](#); [Trainor, Nikole \(DPH\)](#); [Wilson, Erin \(DPH - Contractor\)](#); [Dieterich, Cristy \(DPH\)](#); [Validzic, Ana \(DPH\)](#); [Wong, Greg \(DPH\)](#); [Ruggels, Michelle \(DPH\)](#); [Hiramoto, Kelly \(DPH\)](#)
Subject: 1/31 BOS: DPH Retroactive Items
Date: Friday, January 27, 2023 3:35:59 PM

Hello Honorable Members of the Board of Supervisors:

The Department of Public Health (DPH) will request approval for four (4) retroactive items at the January 31st Board of Supervisors meeting. We'd like to provide you with brief background information and reason for retroactivity prior to the meeting. Please see below for a description of the item and our DPH representatives who may be contacted should you have any questions.

Agenda item #21 – File no. 221185 – Contract Amendment – Retroactive – Progress Foundation – Behavioral Health Services – Not to Exceed \$221,847,999 – Resolution retroactively approving Amendment No. 2 to the Agreement between Progress Foundation and the Department of Public Health (DPH), for behavioral health services; to increase the Agreement by \$127,324,481 for an amount not to exceed \$221,847,999; to extend the term by five years, from December 31, 2022, for a total Agreement term of July 1, 2018, through December 31, 2027; and to authorize DPH to enter into amendments or modifications to the contract prior to its final execution by all parties that do not materially increase the obligations or liabilities to the City and are necessary to effectuate the purposes of the contract or this Resolution.

- **Description:** Under the contract, Progress Foundation provides the following services: (1) Acute Diversion Units; (2) Transitional Residential Treatment Programs; (3) Seniors Programs; (4) Supportive Living Programs; (5) Dore Urgent Care Clinic.
- **Reason for Retroactive Request:** The proposed resolution was submitted on November 17th for introduction on November 29th. Due to the holidays and winter recess, this item was not able to be presented before the end of the year, resulting in this item becoming retroactive. We respectfully request retroactive approval for this contract amendment.
- **DPH Representative:** Maximilian Rocha | Director of Systems of Care, Behavioral Health Services, Department of Public Health | email: Maximilian.Rocha@sfdph.org

Agenda item #22 – File no. 221194 - Contract Agreement - Retroactive - San Francisco AIDS Foundation - Health Access Point Services - Not to Exceed \$11,886,595

- Resolution retroactively approving an original contract agreement between the San Francisco AIDS Foundation and the Department of Public Health (DPH), to provide Health Access Point services in an amount not to exceed \$11,886,595 for a total initial contract term of January 1, 2023, through June 30, 2026, and to authorize DPH to enter into amendments or modifications to the contract prior to its final execution by all parties that do not materially increase the obligations or liabilities to the City and are necessary to effectuate the purposes of the contract or this Resolution.

- **Description:** Under this contract, SF AIDS Foundation would provide Health Access Point (HAP) services for men who have sex with men (MSM). HAP services include HIV, HCV and STD testing, STD treatment medication, case management, support groups, and navigation services. In addition, the AIDS Foundation will provide lab testing and capacity building for

other HAPs.

- **Reason for Retroactive Request:** The proposed resolution was submitted on November 22nd for introduction on December 6th. Due to the holidays and winter recess, this item was not able to be presented before the first of this year, resulting in this item becoming retroactive. We respectfully request retroactive approval for this contract.
- **DPH Representative:** Nikole Trainor | Budget, Contract and Communication Manager, Department of Public Health | email: Nikole.Trainor@sfdph.org

Agenda item #23 – File no. 221203 - Accept and Expend Grant - Retroactive - National Institutes of Health - Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic Among Persons Who Inject Drugs (PWID) - \$178,137 - Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$178,137 from the National Institutes of Health for participation in a program, entitled “Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the Human Immunodeficiency Virus (HIV) Epidemic among Persons Who Inject Drugs (PWID),” for the period of August 15, 2022, through July 31, 2023.

- **Description:** This grant from the National Institutes of Health (NIH) provides funding for a new epidemiological data system in Alameda and San Francisco counties called Brief Longitudinal Incident Sentinel Surveillance (BLISS) to End the HIV Epidemic among persons who inject drugs (PWID). BLISS data will help identify and avert outbreaks, micro-target interventions, prioritize those at highest risk, fill unmet care and prevention needs, and help end the HIV epidemic.
- **Reason for Retroactive Request:** DPH received the award on August 22nd, 2022, for a program start date of August 15th, 2022. The program start date was pre-determined by the grantor. Upon receiving the award agreement, DPH worked to prepare the budget and legislative packet. The accept and expend packet was sent to the Controller’s Office for review on September 29th. Once the review was completed, the legislation was forwarded to the Mayor’s Office on November 17th for introduction on November 29th. We respectfully request approval to retroactively accept and expend this grant.
- **DPH Representative:** Erin Wilson | Senior Research Scientist, Center for Public Health Research, Department of Public Health | email: Erin.Wilson@sfdph.org

Agenda item #24 – File no. 221248 - Accept and Expend Grant - Retroactive - Office of Refugee Health - Refugee Health Assessment Program (RHAP) - Federal Fiscal Year (FFY) 2022-23 Award Number 22-38-90899-00 - \$324,061 - Resolution retroactively authorizing the Department of Public Health to accept and expend a grant in the amount of \$324,061 from the Office of Refugee Health through the California Department of Public Health for participation in a program, entitled “Refugee Health Assessment Program (RHAP) - Federal Fiscal Year (FFY) 2022-23 Award Number 22-38-90899-00,” for the period of October 1, 2022, through September 30, 2023.

- **Description:** This grant from the Office of Refugee Health (ORH) through the California Department of Public Health (CDPH) provides funding for DPH to participate in the Refugee Health Assessment Program (RHAP). Funding is used to help ensure that arriving refugees, arriving asylees, special immigrant visa holders, Cuban/Haitian entrants, federal-certified victims of human trafficking, Afghan and Ukrainian humanitarian parolees, and other eligible entrants start the health assessment process. The health assessment process also includes

scheduled immunization and referrals to health care providers for identified health conditions.

- **Reason for Retroactive Request:** DPH received the award on October 1st, 2022, for a program start date of the same date. The program start date was pre-determined by the grantor. Upon receiving the award agreement, DPH worked to prepare the budget and legislative packet. DPH sent the packet for review by the Controller's Office on October 26th. Once the Controller's review was final, the legislation was sent to the Mayor's Office on November 22nd for introduction on December 6th, 2022. We respectfully request approval to retroactively accept and expend this grant.
- **DPH Representative:** Cristy Dieterich | Program Manager for Community Health Equity & Promotion (CHEP), Department of Public Health | email: Cristy.Dieterich@sfdph.org

Thank you for your time and consideration,

Claire Altman (Lindsay), MPH

Senior Health Planner | Office of Policy and Planning

San Francisco Department of Public Health

claire.altman@sfdph.org – updated email address

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

Agreement between the City and County of San Francisco and

SAN FRANCISCO AIDS FOUNDATION

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This Agreement is made this 1st day of **January, 2023**, in the City and County of San Francisco (“City”), State of California, by and between **San Francisco AIDS Foundation, 1035 Market Street, Suite 400, San Francisco, CA 94103** (“Contractor”) and City.

Recitals

WHEREAS, the Department of Public Health (“Department”) wishes to secure **Health Access Point Services through an Equity-Focused, Community-Centered, Whole Person Care Approach to Integrated HIV, HCV, and STD Prevention Programs for Affected Communities**; and

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

WHEREAS, this Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through **RFP 4-2019** a Request for Proposal (“RFP”) issued on **September 12, 2019**, in which City selected Contractor as the highest qualified scorer pursuant to the RFP; and

WHEREAS, this Contract is deemed exempt from Chapter 14B of the San Francisco Administrative Code and there is no Local Business Entity (“LBE”) subcontracting participation requirement for this Agreement; and

WHEREAS, approval for the Agreement was obtained on **June 29, 2016** from the Civil Service Commission under PSC number **2006 – 07/08** in the amount of **\$210,000,000** for the period commencing **07/01/2008** and ending **Continuous**; and

WHEREAS, the City’s Board of Supervisors approved this Agreement by _____ on _____.

Now, THEREFORE, the parties agree as follows:

Article 1 Definitions

The following definitions apply to this Agreement:

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

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

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

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

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

Portability and Accountability Act (45 CFR Part 160 and Subparts A, C, and E of part 164); and San Francisco Administrative Code Chapter 12M (Chapter 12M).

1.6 **“Contractor” or “Consultant”** means **San Francisco AIDS Foundation, 1035 Market Street, Suite 400, San Francisco, CA 94103.**

1.7 **“Deliverables”** means Contractor’s work product resulting from the Services provided by Contractor to City during the course of Contractor’s performance of the Agreement, including without limitation, the work product described in the “Scope of Services” attached as Appendix A.

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

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

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

Article 2 Term of the Agreement

2.1 **Term.** The term of this Agreement shall commence on **January 1st, 2023** and expire on **June 30th, 2026** unless earlier terminated as otherwise provided herein.

2.2 **Options to Extend.** The City has **7 (seven)** options to renew the Agreement for a period of listed time span. The City may extend this Agreement beyond the expiration date by exercising an option at the City’s sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, “Modification of this Agreement.”

Option 1: 07/01/2026 – 06/30/2027

Option 2: 07/01/2027 – 06/30/2028

Option 3: 07/01/2028 – 06/30/2029

Option 4: 07/01/2029 – 06/30/2030

Option 5: 07/01/2030 – 06/30/2031

Option 6: 07/01/2031 – 06/30/2032

Option 7: 07/01/2032 – 12/31/2032

Article 3 Financial Matters

3.1 **Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation.** This Agreement is subject to the budget and fiscal provisions of the City’s Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City’s obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has

no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor's assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

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

3.2 Guaranteed Maximum Costs. The City's payment obligation to Contractor cannot at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

3.3 Compensation.

3.3.1 Calculation of Charges. Contractor shall provide an invoice to the City on a monthly basis for goods delivered and/or Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for goods and/or Services identified in the invoice that the City, in his or her sole discretion, concludes has been satisfactorily performed. In no event shall the amount of this Agreement exceed **Eleven Million, Eight Hundred Eighty-Six Thousand, Five Hundred Ninety-Five Dollars (\$11,886,595)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges." A portion of payment may be withheld until conclusion of the Agreement if agreed to by both Parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments. City will not honor minimum service order charges for any services covered by this Agreement.

3.3.2 Payment Limited to Satisfactory Services and Delivery of Goods. Contractor is not entitled to any payments from City until City approves the goods and/or Services delivered pursuant to this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory delivery of goods and/or Services even if the unsatisfactory character may not have been apparent or detected at the time such payment was made. Goods and/or Services delivered pursuant to this Agreement that do not conform to the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

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

3.3.4 Invoice Format. Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City and include a unique invoice number and a specific invoice date. Payment shall be made by City as specified in Section 3.3.7, or in such alternate manner as the Parties have mutually agreed upon in writing. All invoices must show the PeopleSoft Purchase Order ID Number, PeopleSoft Supplier Name and ID, Item numbers (if applicable), complete description of goods delivered or Services performed, sales/use tax (if applicable), contract payment terms and contract price. Invoices that do not include all required information or contain inaccurate information will not be processed for payment.

3.3.5 Reserved. (LBE Payment and Utilization Tracking System)

3.3.6 Getting paid by the City for Goods and/or Services.

(a) The City and County of San Francisco utilizes the Paymode-X[®] service offered by Bank of America Merrill Lynch to pay City contractors. Contractor must sign up to receive electronic payments to be paid under this Agreement. To sign up for electronic payments, visit http://portal.paymode.com/city_countyofsanfrancisco.

(b) At the option of the City, Contractor may be required to submit invoices directly in the City's financial and procurement system (PeopleSoft) via eSettlement. Refer to <https://sfcitypartner.sfgov.org/pages/training.aspx> for more information on eSettlement. For access to PeopleSoft eSettlement, submit a request through sfemployeeportalsupport@sfgov.org.

3.3.7 Grant Funded Contracts.

(a) **Disallowance.** If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other agreement between Contractor and City.

(b) **Reserved. (Grant Terms)**

3.3.8 Payment Terms.

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

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

3.4 Audit and Inspection of Records.

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

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

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

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

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

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

3.6 (Reserved). Payment of Prevailing Wages

3.7 Contract Amendments; Budgeting Revisions.

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

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

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

Article 4 Services and Resources

4.1 Services Contractor Agrees to Perform. Contractor agrees to perform the Services stated in Appendix A, "Scope of Services." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for, Services beyond the Scope of Services listed in Appendix A, unless Appendix A is modified as provided in Section 11.5, "Modification of this Agreement."

4.2 Personnel

4.2.1 Qualified Personnel. Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. Contractor will comply with City's reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City's request, must be supervised by Contractor. Contractor shall commit adequate resources to allow timely completion within the project schedule specified in this Agreement.

4.2.2 Contractor Vaccination Policy.

(a) Contractor acknowledges that it has read the requirements of the 38th Supplement to Mayoral Proclamation Declaring the Existence of a Local Emergency ("Emergency Declaration"), dated February 25, 2020, and the Contractor Vaccination Policy for City Contractors issued by the City Administrator ("Contractor Vaccination Policy"), as those documents may be amended from time to time. A copy of the Contractor Vaccination Policy can be found at: <https://sf.gov/confirm-vaccine-status-your-employees-and-subcontractors>.

(b) A Contract subject to the Emergency Declaration is an agreement between the City and any other entity or individual and any subcontract under such agreement, where Covered Employees of the Contractor or Subcontractor work in-person with City employees in connection with the work or services performed under the agreement at a City owned, leased, or controlled facility. Such agreements include, but are not limited to, professional services contracts, general services contracts, public works contracts, and grants. Contract includes such agreements currently in place or entered into during the term of the Emergency Declaration. Contract does not include an agreement with a state or federal governmental entity or agreements that do not involve the City paying or receiving funds.

(c) In accordance with the Contractor Vaccination Policy, Contractor agrees that:

(i) Where applicable, Contractor shall ensure it complies with the requirements of the Contractor Vaccination Policy pertaining to Covered Employees, as they are defined under the Emergency Declaration and the Contractor Vaccination Policy, and insure such Covered Employees are either fully vaccinated for COVID-19 or obtain from Contractor an exemption based on medical or religious grounds; and

(ii) If Contractor grants Covered Employees an exemption based on medical or religious grounds, Contractor will promptly notify City by completing and submitting the Covered Employees Granted Exemptions Form ("Exemptions Form"), which can be found at <https://sf.gov/confirm-vaccine-status-your-employees-and-subcontractors> (navigate to "Exemptions" to download the form).

(d) The City reserves the right to impose a more stringent COVID-19 vaccination policy for the San Francisco Department of Public Health, acting in its sole discretion.

4.3 Subcontracting.

4.3.1 Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor is responsible for its subcontractors throughout the course of the work required to perform the Services. All Subcontracts must incorporate the terms of Article 10 "Additional Requirements Incorporated by Reference" of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void.

4.3.2 City's execution of this Agreement constitutes its approval of the subcontractors listed below.

- a. Subcontractors named in Appendices B

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

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

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

4.5 Assignment. The Services to be performed by Contractor are personal in character. Neither this Agreement, nor any duties or obligations hereunder, may be directly or indirectly assigned, novated, hypothecated, transferred, or delegated by Contractor, or, where the Contractor is a joint venture, a joint venture partner, (collectively referred to as an "Assignment") unless first approved by City by written instrument executed and approved in the same manner as this Agreement in accordance with the Administrative Code. The City's approval of any such Assignment is subject to the Contractor demonstrating to City's reasonable satisfaction that the proposed transferee is: (i) reputable and capable, financially and otherwise, of performing each of Contractor's obligations under this Agreement and any other documents to be assigned, (ii) not forbidden by applicable law from transacting business or entering into contracts with City; and (iii) subject to the jurisdiction of the courts of the State of California. A change of ownership or control of Contractor or a sale or transfer of substantially all of the assets of Contractor shall be deemed an Assignment for purposes of this Agreement. Contractor shall immediately notify City about any Assignment. Any purported Assignment made in violation of this provision shall be null and void.

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

Article 5 Insurance and Indemnity

5.1 Insurance.

5.1.1 Required Coverages. Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

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

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

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

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

(e) **Reserved. (Technology Errors and Omissions Liability Coverage)**

(f) Cyber and Privacy Insurance with limits of not less than \$5,000,000 per claim. Such insurance shall include coverage for liability arising from theft, dissemination, and/or use of confidential information, including but not limited to, bank and credit card account information or personal information, such as name, address, social security numbers, protected health information or other personally identifying information, stored or transmitted in any form.

(g) **Reserved. (Pollution Liability Insurance)**

5.1.2 Additional Insured Endorsements

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

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

(c) **Reserved. (Pollution Auto Liability Insurance Additional Insured Endorsement)**

5.1.3 Reserved. (Waiver of Subrogation Endorsements)

5.1.4 Primary Insurance Endorsements

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

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

(c) **Reserved. (Pollution Liability Insurance Primary Insurance Endorsement)**

5.1.5 Other Insurance Requirements

(a) Thirty (30) days' advance written notice shall be provided to the City of cancellation, intended non-renewal, or reduction in coverages, except for non-payment for which no less than ten (10) days' notice shall be provided to City. Notices shall be sent to the City email address: insurance-contractsr410@sfdph.org.

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

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

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

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

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

5.2 Indemnification.

5.2.1 Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personally identifiable information, health information, disability and labor laws or regulations; (iv) strict liability imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) – (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement. The foregoing indemnity shall include, without limitation, reasonable

fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.

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

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

Article 6 Liability of the Parties

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

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

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

Article 7 Payment of Taxes

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

7.2 **Possessory Interest Taxes.** Contractor acknowledges that this Agreement may create a "possessory interest" for property tax purposes. Generally, such a possessory interest is not created unless the Agreement entitles the Contractor to possession, occupancy, or use of City property for private gain. If such a possessory interest is created, then the following shall apply:

7.2.1 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that Contractor, and any permitted successors and assigns, may be subject to real property tax assessments on the possessory interest.

7.2.2 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that the creation, extension, renewal, or assignment of this Agreement may result in a “change in ownership” for purposes of real property taxes, and therefore may result in a revaluation of any possessory interest created by this Agreement. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report on behalf of the City to the County Assessor the information required by Revenue and Taxation Code Section 480.5, as amended from time to time, and any successor provision.

7.2.3 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that other events also may cause a change of ownership of the possessory interest and result in the revaluation of the possessory interest. (see, e.g., Rev. & Tax. Code Section 64, as amended from time to time). Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report any change in ownership to the County Assessor, the State Board of Equalization or other public agency as required by law.

7.2.4 Contractor further agrees to provide such other information as may be requested by the City to enable the City to comply with any reporting requirements for possessory interests that are imposed by applicable law.

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

Article 8 Termination and Default

8.1 Termination for Convenience

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

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

- (a) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.
- (b) Terminating all existing orders and subcontracts, and not placing any further orders or subcontracts for materials, Services, equipment or other items.
- (c) At City’s direction, assigning to City any or all of Contractor’s right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.
- (d) Subject to City’s approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.

(e) Completing performance of any Services that City designates to be completed prior to the date of termination specified by City.

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

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

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

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

(c) The reasonable cost to Contractor of handling material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.

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

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

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

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

8.2 Termination for Default; Remedies.

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

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

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

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

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

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

8.2.3 On and after any Event of Default, City shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement. In addition, in accordance with San Francisco Administrative Code Section 21.33 (Procedure Upon Contractor's Failure to Deliver) where applicable, City shall have the right (but no obligation) to cure (or cause to be cured) on behalf of Contractor any Event of Default; Contractor shall pay to City on demand all costs and expenses incurred by City in effecting such cure, with interest thereon from the date of incurrence at the maximum rate then permitted by law. Further, in accordance with San Francisco Administrative Code Section 10.27.1 (Controller may Offset), City shall have the right to offset from any amounts due to Contractor under this Agreement or any other agreement between City and Contractor: (i) all damages, losses, costs or expenses incurred by City as a result of an Event of Default; and (ii) any liquidated damages levied upon Contractor pursuant to the terms of this Agreement; and (iii), any damages imposed by any ordinance or statute that is incorporated into this Agreement by reference, or into any other agreement with the City. This Section 8.2.3 shall survive termination of this Agreement.

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

8.2.5 Any notice of default must be sent by registered mail to the address set forth in Article 11.

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

8.4 Rights and Duties upon Termination or Expiration.

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

3.3.2	Payment Limited to Satisfactory Services	9.1	Ownership of Results
3.3.7(a)	Grant Funded Contracts – Disallowance	9.2	Works for Hire
3.4	Audit and Inspection of Records	11.6	Dispute Resolution Procedure
3.5	Submitting False Claims	11.7	Agreement Made in California; Venue
Article 5	Insurance and Indemnity	11.8	Construction
6.1	Liability of City	11.9	Entire Agreement
6.3	Liability for Incidental and Consequential Damages	11.10	Compliance with Laws
Article 7	Payment of Taxes	11.11	Severability
8.1.6	Payment Obligation	Article 13	Data and Security
		Appendix E	Business Associate Agreement

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

Article 9 Rights In Deliverables

9.1 Ownership of Results. Any interest of Contractor or its subcontractors, in the Deliverables, including any drawings, plans, specifications, blueprints, studies, reports, memoranda, computation sheets, computer files and media or other documents prepared by Contractor or its subcontractors for the purposes of this Agreement, shall become the property of and will be transmitted to City. However, unless expressly prohibited elsewhere in this Agreement, Contractor may retain and use copies for reference and as documentation of its experience and capabilities.

9.2 Works for Hire. If, in connection with Services, Contractor or its subcontractors creates Deliverables including, without limitation, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, blueprints, source codes, or any other original works of authorship, whether in digital or any other format, such works of authorship shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in such works shall be the property of the City. If any Deliverables created by Contractor or its subcontractor(s) under this Agreement are ever determined not to be works for hire under U.S. law, Contractor hereby assigns all Contractor's copyrights to such Deliverables to the City, agrees to provide any material and execute any documents necessary to effectuate such assignment, and agrees to include a clause in every subcontract

imposing the same duties upon subcontractor(s). With City's prior written approval, Contractor and its subcontractor(s) may retain and use copies of such works for reference and as documentation of their respective experience and capabilities.

Article 10 Additional Requirements Incorporated by Reference

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

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

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

10.4 Consideration of Salary History. Contractor shall comply with San Francisco Administrative Code Chapter 12K, the Consideration of Salary History Ordinance or "Pay Parity Act." Contractor is prohibited from considering current or past salary of an applicant in determining whether to hire the applicant or what salary to offer the applicant to the extent that such applicant is applying for employment to be performed on this Agreement or in furtherance of this Agreement, and whose application, in whole or part, will be solicited, received, processed or considered, whether or not through an interview, in the City or on City property. The ordinance also prohibits employers from (1) asking such applicants about their current or past salary or (2) disclosing a current or former employee's salary history without that employee's authorization unless the salary history is publicly available. Contractor is subject to the enforcement and penalty provisions in Chapter 12K. Information about and the text of Chapter 12K is available on the web at <https://sfgov.org/olse/consideration-salary-history>. Contractor is required to comply with all of the applicable provisions of 12K, irrespective of the listing of obligations in this Section.

10.5 Nondiscrimination Requirements.

10.5.1 Nondiscrimination in Contracts. Contractor shall comply with the provisions of Chapters 12B and 12C of the San Francisco Administrative Code. Contractor shall incorporate by reference in all subcontracts the provisions of Sections 12B.2(a), 12B.2(c)-(k), and 12C.3 of the San Francisco Administrative Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Chapters 12B and 12C.

10.5.2 Nondiscrimination in the Provision of Employee Benefits. San Francisco Administrative Code 12B.2. Contractor does not as of the date of this Agreement, and will not during the term of this Agreement, in any of its operations in San Francisco, on real property owned by San Francisco, or where work is being performed for the City elsewhere in the United States, discriminate in the provision of employee benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees, subject to the conditions set forth in San Francisco Administrative Code Section 12B.2.

10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance.

Contractor shall comply with all applicable provisions of Chapter 14B ("LBE Ordinance"). Contractor is subject to the enforcement and penalty provisions in Chapter 14B.

10.7 Minimum Compensation Ordinance. If Administrative Code Chapter 12P applies to this contract, Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Administrative Code Chapter 12P, including a minimum hourly gross compensation, compensated time off, and uncompensated time off. Contractor is subject to the enforcement and penalty provisions in Chapter 12P. Information about and the text of the Chapter 12P is available on the web at <http://sfgov.org/olse/mco>. Contractor is required to comply with all of the applicable provisions of 12P, irrespective of the listing of obligations in this Section. By signing and executing this Agreement, Contractor certifies that it complies with Chapter 12P.

10.8 Health Care Accountability Ordinance. If Administrative Code Chapter 12Q applies to this contract, Contractor shall comply with the requirements of Chapter 12Q. For each Covered Employee, Contractor shall provide the appropriate health benefit set forth in Section 12Q.3 of the HCAO. If Contractor chooses to offer the health plan option, such health plan shall meet the minimum standards set forth by the San Francisco Health Commission. Information about and the text of the Chapter 12Q, as well as the Health Commission's minimum standards, is available on the web at <http://sfgov.org/olse/hcao>. Contractor is subject to the enforcement and penalty provisions in Chapter 12Q. Any Subcontract entered into by Contractor shall require any Subcontractor with 20 or more employees to comply with the requirements of the HCAO and shall contain contractual obligations substantially the same as those set forth in this Section.

10.9 First Source Hiring Program. Contractor must comply with all of the provisions of the First Source Hiring Program, Chapter 83 of the San Francisco Administrative Code, that apply to this Agreement, and Contractor is subject to the enforcement and penalty provisions in Chapter 83.

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

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

10.11 Limitations on Contributions. By executing this Agreement, Contractor acknowledges its obligations under Section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with, or is seeking a contract with, any department of the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, for a grant, loan or loan guarantee, or for a development agreement, from making any campaign contribution to (i) a City elected official if the contract must be approved by that

official, a board on which that official serves, or the board of a state agency on which an appointee of that official serves, (ii) a candidate for that City elective office, or (iii) a committee controlled by such elected official or a candidate for that office, at any time from the submission of a proposal for the contract until the later of either the termination of negotiations for such contract or twelve months after the date the City approves the contract. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 10% in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor certifies that it has informed each such person of the limitation on contributions imposed by Section 1.126 by the time it submitted a proposal for the contract, and has provided the names of the persons required to be informed to the City department with whom it is contracting.

10.12 Reserved. (Slavery Era Disclosure)

10.13 Working with Minors. In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to the City involving the supervision or discipline of minors or where Contractor, or any subcontractor, will be working with minors in an unaccompanied setting on more than an incidental or occasional basis, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for such positions and/or prohibiting employment of certain persons including but not limited to California Penal Code Section 290.95. In the event of a conflict between this Section and Section 10.14, "Consideration of Criminal History in Hiring and Employment Decisions," of this Agreement, this Section shall control.

10.14 Consideration of Criminal History in Hiring and Employment Decisions.

10.14.1 Contractor agrees to comply fully with and be bound by all of the provisions of Chapter 12T, "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code ("Chapter 12T"), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at <http://sfgov.org/olse/fco>. Contractor is required to comply with all of the applicable provisions of 12T, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12T.

10.14.2 The requirements of Chapter 12T shall only apply to a Contractor's or Subcontractor's operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, and shall apply when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco. Chapter 12T shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.

10.15 Public Access to Nonprofit Records and Meetings. If Contractor receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds and is a non-profit organization as defined in Chapter 12L of the San Francisco Administrative Code, Contractor must

comply with the City's Public Access to Nonprofit Records and Meetings requirements, as set forth in Chapter 12L of the San Francisco Administrative Code, including the remedies provided therein.

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

10.17 Distribution of Beverages and Water.

10.17.1 Sugar-Sweetened Beverage Prohibition. Contractor agrees that it shall not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.17.2 Packaged Water Prohibition. Contractor agrees that it shall not sell, provide, or otherwise distribute Packaged Water, as defined by San Francisco Environment Code Chapter 24, as part of its performance of this Agreement.

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

10.18.1 Contractor shall comply with San Francisco Environment Code Chapter 8, which provides that except as expressly permitted by the application of Sections 802(b) and 803(b) of the San Francisco Environment Code, Contractor shall not provide any items to the City in performance of this contract which are tropical hardwoods, tropical hardwood wood products, virgin redwood or virgin redwood wood products. Contractor is subject to the penalty and enforcement provisions of Chapter 8.

10.19 Preservative Treated Wood Products. Contractor shall comply with the provisions of San Francisco Environment Code Chapter 13, which requires that each Contractor purchasing preservative-treated wood products on behalf of the City, shall only purchase such products from the list of alternatives adopted by the Department of the Environment pursuant to Section 1302 of Chapter 13, unless otherwise granted an exemption by the terms of that Chapter.

Article 11 General Provisions

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

To CITY:	Office of Contract Management and Compliance Department of Public Health 101 Grove Street, Room 410 San Francisco, California 94102	e-mail: Nora.macias@sfdph.org
And:	Patricia Erwin CHEP 25 VAN NESS STREET, SUITE 500 SAN FRANCISCO, CA 94102	e-mail: Patricia.erwin@sfdph.org
To CONTRACTOR:	SAN FRANCISCO AIDS FOUNDATION 1035 MARKET STREET, SUITE 400 SAN FRANCISCO, CA 94103	e-mail: ttermeer@sfaf.org

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

11.2 Compliance with Americans with Disabilities Act. Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including but not limited to Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.

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

11.4 Sunshine Ordinance. Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the California Public Records Act, (California Government Code §6250 et. seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state or local law.

11.5 Modification of this Agreement. This Agreement may not be modified, nor may compliance with any of its terms be waived, except as noted in Section 11.1, "Notices to Parties," regarding change in personnel or place, and except by written instrument executed and approved in the same manner as this Agreement.

11.6 Dispute Resolution Procedure.

11.6.1 Negotiation; Alternative Dispute Resolution. The Parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement. If the Parties are unable to resolve the dispute, then, pursuant to San Francisco Administrative Code Section 21.36, Contractor may submit to the Contracting Officer a written request for administrative review and documentation of the Contractor's claim(s). Upon such request, the Contracting Officer shall promptly issue an administrative decision in writing, stating the reasons for the action taken and informing the Contractor of its right to judicial review. If agreed by both Parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. If the Parties do not mutually agree to an alternative dispute resolution process or such efforts do not resolve the dispute, then either Party may pursue any remedy available under California law. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of the City. Neither Party will be entitled to legal fees or costs for matters resolved under this Section.

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

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

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

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

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

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

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

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

11.13 Order of Precedence. Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, implementing task orders, the RFP, and Contractor's proposal dated November 25, 2019. The RFP and Contractor's proposal are incorporated by reference as though fully set forth herein. Should there be a conflict of terms or conditions, this Agreement and any implementing task orders shall control over the RFP and the Contractor's proposal. If the Appendices to this Agreement include any standard printed terms from the Contractor, Contractor agrees that in the event of discrepancy, inconsistency, gap, ambiguity, or conflicting language between the City's terms and Contractor's printed terms attached, the City's terms shall take precedence, followed by the procurement issued by the department, Contractor's proposal, and Contractor's printed terms, respectively.

11.14 Notification of Legal Requests. Contractor shall immediately notify City upon receipt of any subpoenas, service of process, litigation holds, discovery requests and other legal requests ("Legal Requests") related to all data given to Contractor by City in the performance of this Agreement ("City Data" or "Data"), or which in any way might reasonably require access to City's Data, and in no event later than 24 hours after it receives the request. Contractor shall not respond to Legal Requests related to City without first notifying City other than to notify the requestor that the information sought is potentially covered under a non-disclosure agreement. Contractor shall retain and preserve City Data in accordance with the City's instruction and requests, including, without limitation, any retention schedules and/or litigation hold orders provided by the City to Contractor, independent of where the City Data is stored.

Article 12 Department Specific Terms

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

12.2 Exclusion Lists and Employee Verification. Upon hire and monthly thereafter, Contractor will check the exclusion lists published by the Office of the Inspector General (OIG), General

Services Administration (GSA), and the California Department of Health Care Services (DHCS) to ensure that any employee, temporary employee, volunteer, consultant, or governing body member responsible for oversight, administering or delivering state or federally-funded services who is on any of these lists is excluded from (may not work in) your program or agency. Proof of checking these lists must be retained for seven years.

12.3 Certification Regarding Lobbying.

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

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

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

12.3.4 This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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

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

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

Article 13 Data and Security

13.1 Nondisclosure of Private, Proprietary or Confidential Information.

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

13.1.2 Confidential Information. In the performance of Services, Contractor may have access to, or collect on City's behalf, City's proprietary or Confidential Information, the disclosure of which to third parties may damage City. If City discloses proprietary or Confidential Information to Contractor, or Contractor collects such information on City's behalf, such information must be held by Contractor in confidence and used only in performing the Agreement. Contractor shall exercise the same standard of care to protect such information as a reasonably prudent contractor would use to protect its own proprietary or Confidential Information.

13.2 Reserved. (Payment Card Industry ("PCI") Requirements)

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

The parties acknowledge that CONTRACTOR will:

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

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

- a. **Appendix E SFDPH Business Associate Agreement (BAA) (v8/3/2022)**
 1. SFDPH Attestation 1 PRIVACY (06-07-2017)

2. SFDPH Attestation 2 DATA SECURITY (06-07-2017)

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

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

13.4 Management of City Data and Confidential Information.

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

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

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

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

Article 14 MacBride And Signature

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

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

CITY

Recommended by:

Grant Colfax, MD
Director of Health
Department of Public Health

Approved as to Form:

David Chiu
City Attorney

By: _____
Deputy City Attorney

Approved:

Sailaja Kurella
Director of the Office of Contract Administration and
Purchaser

By: _____

CONTRACTOR

SAN FRANCISCO AIDS FOUNDATION

DocuSigned by:

Tyler A. Termeer

5470C9F60A3734EE

11/17/2022 | 1:10:46 PST

Tyler Termeer
Chief Executive Office
1035 Market Street, Suite 400
San Francisco, CA 94103

Supplier ID: **0000011638**

Appendices

- | | |
|---|----------------------------------|
| A: Scope of Services | F: Invoice |
| B: Calculation of Charges | G: Dispute Resolution |
| C: Insurance Waiver Reserved | H: COVID Reserved |
| D: FEMA Emergency & Exigency Contracts
Requirements Reserved | I: COVID Invoice(s) Reserved |
| E: HIPAA Business Associate Agreement | J: Grant Terms Reserved |
| | K: Data Access and Sharing Terms |

Appendix A

Scope of Services

1. Terms

A. Contract Administrator:

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

B. Reports:

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

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

C. Evaluation:

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

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

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

D. Possession of Licenses/Permits:

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

E. Adequate Resources:

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

F. Admission Policy:

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

G. Grievance Procedure:

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

H. Infection Control, Health and Safety:

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

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

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

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

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

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

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

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

I. Aerosol Transmissible Disease Program, Health and Safety:

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

protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

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

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

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

J. Acknowledgment of Funding:

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

K. Client Fees and Third Party Revenue:

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

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

L. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

M. Under-Utilization Reports:

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

N. Quality Assurance:

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

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

O. Compliance With Grant Award Notices:

Contractor recognizes that funding for this Agreement is provided to the City through federal, state or private foundation awards. Contractor agrees to comply with the provisions of the City's

agreements with said funding sources, which agreements are incorporated by reference as though fully set forth.

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

2. Description of Services

Contractor agrees to perform the following Services:

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

Detailed description of services are listed below and are attached hereto:

Appendix A-1	Training Academy & Clinical Assistance Program
Appendix A-2	Clinical Services Sustainability
Appendix A-3	Capacity Building Activities: The Black Health Clinical Assistant Program
Appendix A-4	HAP Capacity Building Activities Program
Appendix A-5	Health Access Point Gay/MSM

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

**San Francisco AIDS Foundation
Health Access Point HAP (Health Access Point for MSM)**

**Appendix A-1
01/01/23 – 06/30/26
General Fund**

1. IDENTIFIER:

PROGRAM NAME: San Francisco AIDS Foundation - **Training Academy & Clinical Assistant Program**

ADDRESS: 1035 Market, Suite 400; San Francisco, CA 94103

PROGRAM PRIMARY CONTACT: LB Honey-Brooks, lbrooks@sfaf.org

Jenny Hsieh, jhsieh@sfaf.org

Michelle Lee, mlee@sfaf.org

NATURE OF DOCUMENT: New Contract/Original ☒ Contract Amendment ☐ Internal Contract Revision: ☐

2. GOAL STATEMENT:

The Training Academy & Clinical Assistant Program's goal is to create a workforce development pipeline that can support the Health Access Point (HAP) network with ongoing professional development, paid internship opportunities, and a trained applicant pool with experience in roles that can support HAP activities.

3. TARGET POPULATION:

San Francisco AIDS Foundation serve all ethnicities and populations, with a focused expertise to address the unique needs of this program's priority communities. The Training Academy & Clinical Assistant Program will engage individuals from the Health Access Point's (HAP) priority communities:

1. Latinx communities
2. Gay, bisexual, and queer (GBQ) men & MSM communities
3. Trans and nonbinary communities
4. Asian and Pacific Islander (API) communities
5. Black and African American communities
6. People who use drugs
7. Young people

4. MODALITIES and INTERVENTIONS:

Service Description:

SFAF's Training Academy & Clinical Assistant Program is a structural intervention that aims to engage priority communities impacted by HIV, HCV, and STI health disparities in community health-focused employment opportunities.

The Training Academy & Clinical Assistant Program follows the citywide goals:

- Get to zero new HIV infections, zero HIV-related deaths, and zero stigma and discrimination
- Eliminate HCV
- Reverse increasing STI rates
- Eliminate racial disparities in access to services and health outcomes

San Francisco AIDS Foundation
Health Access Point HAP (Health Access Point for MSM)

Appendix A-1
01/01/23 – 06/30/26
General Fund

Capacity Building Modalities:

Year One, B-1: January 1, 2023-June 30, 2023 (6 months)

Capacity Building Start-Up Activities:			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-1, B-1	<u>Training Academy:</u> 1 UOS = 1 month of start-up planning activities; 3 months = 3 UOS	3	NA
	<u>Clinical Assistant Program:</u> 1 UOS = 1 month of start-up planning activities for the Clinical Assistant Program; 1 month = 3 UOS	3	NA
Total UOS and UDC		6	N/A
Capacity Building Implementation Activities:			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-1, B-1	<u>Training Academy:</u> 1 UOS = 1 hour of training and/or professional development provided to HAP network members and/or CHEP funded; 1 UDC = 1 unduplicated participant CBOs; 30 unduplicated individuals x 1.5 hours x 6 trainings = 270 UOS	270	30
	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant; 5 assistants x (20 hours of training + 80 hours of field experience) = 500 UOS	500	5
Total UOS and UDC		770	35

Year Two, B-1a: July 1, 2023-June 30, 2024

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 General Fund / App A-1, B-1a	<u>Training Academy:</u> 1 UOS = 1 hour of training and/or professional development provided to HAP network members and/or CHEP funded; 1 UDC = 1 unduplicated participant CBOs; 55 unduplicated individuals x 1.5 hours x 6 trainings = 495 UOS	495	55
	<u>Training Academy:</u> 1 UOS = 1 hour of HIV test counselor training; 2 trainings x 25 hours of training x 10 participants/trainings = 500 UOS	500	20
	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant; 10 assistants x (20 hours of training + 80 hours of field experience) = 1,000 UOS	1,000	10
Total UOS and UDC		1,995	85

**San Francisco AIDS Foundation
Health Access Point HAP (Health Access Point for MSM)**

**Appendix A-1
01/01/23 – 06/30/26
General Fund**

Year Three, B-1b: July 1, 2024-June 30, 2025

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 – 6/30/25 General Fund / App A-1, B-1b	<u>Training Academy:</u> 1 UOS = 1 hour of training and/or professional development provided to HAP network members and/or CHEP funded; 1 UDC = 1 unduplicated participant CBOs; 55 unduplicated individuals x 1.5 hours x 6 trainings = 495 UOS	495	55
	<u>Training Academy:</u> 1 UOS = 1 hour of HIV test counselor training; 2 trainings x 25 hours of training x 10 participants/trainings = 500 UOS	500	20
	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant; 10 assistants x (20 hours of training + 80 hours of field experience) = 1,000 UOS	1,000	10
Total UOS and UDC		1,995	85

Year Four, B-1b: July 1, 2025-June 30, 2026

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 General Fund / App A-1, B-1c	<u>Training Academy:</u> 1 UOS = 1 hour of training and/or professional development provided to HAP network members and/or CHEP funded; 1 UDC = 1 unduplicated participant CBOs; 55 unduplicated individuals x 1.5 hours x 6 trainings = 495 UOS	495	55
	<u>Training Academy:</u> 1 UOS = 1 hour of HIV test counselor training; 2 trainings x 25 hours of training x 10 participants/trainings = 500 UOS	500	20
	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant; 10 assistants x (20 hours of training + 80 hours of field experience) = 1,000 UOS	1,000	10
Total UOS and UDC		1,995	85

5. METHODOLOGY/Service Delivery Description:

January 1, 2023-June 30, 2023

**San Francisco AIDS Foundation
Health Access Point HAP (Health Access Point for MSM)**

**Appendix A-1
01/01/23 – 06/30/26
General Fund**

Proposed activities require different start-up and implementation needs.

Capacity Building Start Up Activities:

- The Community Health Worker Training Academy will sustain existing activities (see below) as well as initiate 3 months of start planning activities (3 UOS) related to HAP implementation efforts. This includes:
 - Conducting an assessment of HAP learning needs, goals, and priorities
 - Establishing contact lists of all HAP-participating organizations
 - Establishing an MOU with CHLI for future partnership activities
 - Convening HAP-participating organizations for an overview of and introduction to the Community Health Worker Training Academy
- The Clinical Assistant Program requires 3 months of start-up planning activities (3 UOS). This includes:
 - Hiring a project manager to launch the program
 - Developing program curriculum and training materials
 - Recruiting 5 clinical assistants for the first cohort

Capacity Building Activities:

- Community Health Worker Training Academy: Between January 1, 2023 and June 30, 2023, the Community Health Worker Training Academy (CHW-TA) will conduct training and professional development services for community health workers from CHEP-funded community-based organizations, with a focus on staff directly supporting Health Access Point Network activities. During this time, 30 unduplicated participants will engage in CHW-TA training. All combined, these 30 participants will complete more than 270 hours of training. In addition to “live” meeting spaces, training and professional development includes an asynchronous learning experience with access to 12 self-paced training modules on an SFAF-hosted learning management platform.
- HIV Test Counselor Trainings: Between January 1, 2023 and June 30, 2023, the CHW-TA will conduct two HIV Test Counselor Trainings to certify individuals in HIV, HCV, and STI testing and counseling.
- The Clinical Assistant Program will begin implementation activities in April 2023. This includes:
 - Onboarding and training the inaugural clinical assistant cohort (5 interns will be hired and begin in Spring 2023)
 - Assigning clinical assistants to 80+ hours of rotating field experience within SFAF’s various programs (with a focus on clinical services)
 - Graduating the inaugural cohort and assisting them to identify and secure community health employment opportunities, with a focus on opportunities within the HAP Network
 - Beginning recruitment and promotion efforts for the Summer 2023 cohort
 - Cohort evaluation and feedback

6. OBJECTIVES and MEASUREMENTS:

All objectives and descriptions of how objectives will be measured are contained in the CHEP document entitled “CHEP Performance Objectives FY22-23.”

7. SUBCONTRACTORS & CONSULTANTS:

- a. SFAF is responsible for the performance of its subcontractors and consultants in this Agreement.

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

8. CONTINUOUS QUALITY IMPROVEMENT:

The Training Academy and Clinical Assistant Program uses a continuous quality improvement approach.

This includes obtaining and analyzing feedback from:

- Participant evaluations
- Clinical Assistant Intern feedback
- Shifts in local public health landscape (e.g., adding MPX curriculum to the test counselor trainings)
- HAP Network (specifically, understanding employer needs)

Feedback is then incorporated into future trainings and learning spaces. It is also used to improve the Clinical Assistant experience.

9. DATA COLLECTION AND REPORTING REQUIREMENTS:

SFAF complies with all CHEP requirements regarding data collection and submission, and program required elements which will include working with CHEP to measure and report on program-specific objectives and collecting/reporting basic demographic, behavioral risk, and other essential information. Systems/processes used to collect and submit data will include:

- CHEP Internal Data Manager (Quarterly Submission/Upload)

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- Quarterly narrative report
- Other systems/processes as requested

Assigned CHEP Program Liaison will provide technical assistance & training on all above data collection systems.

10. REQUIRED LANGUAGE:

REQUIRED TRAINING

- a. HIV, HCV, and STD Skills Certification
- b. Harm Reduction
- c. Overdose Response/Naloxone Administration (DOPE Project or internal)
 - i. How to use Fentanyl Test Strips
- d. Syringe Access and Disposal (TBD)
- e. Trauma Informed Systems
- f. Clear Impact Score Card
- g. Other skills building trainings as required

ADDITIONAL CONTRACT REQUIREMENTS

- h. Required Participation in Network Referral 30-Minute Huddles (assigned agency staff).
- i. Required participation in HAP Network Monthly Meetings (TBD by SOC).
- j. Implementation of Harm Reduction/Substance use policy
- k. Required to follow all SFDPH and CHEP SOC HIV/STI Testing policies and standard of care procedures.

**San Francisco AIDS Foundation
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1. IDENTIFIER:

PROGRAM NAME: San Francisco AIDS Foundation - **Clinical Services Sustainability Program**

ADDRESS: 1035 Market, Suite 400; San Francisco, CA 94103

PROGRAM PRIMARY CONTACT: LB Honey-Brooks, lbrooks@sfaf.org

Jenny Hsieh, jhsieh@sfaf.org
Michelle Lee, mlee@sfaf.org

NATURE OF DOCUMENT: New Contract/Original ☒ Contract Amendment ☐ Internal Contract Revision: ☐

2. GOAL STATEMENT:

The Clinical Services Sustainability program's goal is to sustain current clinical services provided at San Francisco AIDS Foundation.

3. TARGET POPULATION:

San Francisco AIDS Foundation serve all ethnicities and populations, with a focused expertise to address the unique needs of this program's priority communities. Services focus on all priority communities experiencing sexual health disparities in San Francisco who are: a) unaware of their HIV serostatus; b) at risk for STI and/or HCV, regardless of HIV serostatus; c) aware that they are HIV-positive but are not engaged in care; and/or d) HIV-negative and not engaged or retained on PrEP.

This includes:

1. Latinx communities
2. Gay, bisexual, and queer (GBQ) men & MSM communities
3. Trans and nonbinary communities
4. Asian and Pacific Islander (API) communities
5. Black and African American communities
6. People who use drugs
7. Young people

4. MODALITIES and INTERVENTIONS:

Service Description:

SFAF will meet the needs of communities experiencing sexual health disparities. Services provide an equity-focused, stigma-free, and low barrier access to person-centered, standard of care services regardless of HIV, HCV, or STI status. The program follows the citywide goals:

- Get to zero new HIV infections, zero HIV-related deaths, and zero stigma and discrimination
- Eliminate HCV
- Reverse increasing STI rates
- Eliminate racial disparities in access to services and health outcomes

Program Standard of Care Service Modalities:

Year One, B-2: January 1, 2023-June 30, 2023 (6 months)

A. Integrated HIV, HCV, and STD testing*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-2, B-2	HIV testing - encounter 1 HIV testing encounter per 1 UOS; testing encounters = 2,000 UOS	2,000	N/A
	HCV testing - tests administered 1 HCV test administered per 1 UOS; 400 HCV tests administered = 400 UOS	400	N/A
	STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 3,500 screenings administered = 3,500 UOS	3,500	N/A
	STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 3,000 screenings administered = 3,000 UOS	3,000	N/A
	Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 25 screenings administered = 25 UOS	25	N/A
Total UOS and UDC		8,925	N/A
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-2, B-2	PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 275 clients engaged during 6-month period = 275 UDC	In-Kind	275
	PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 15 PEP clients = 15 UDC	In-Kind	15
Total UOS and UDC		N/A	290
C. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-2, B-2	Treatment - Encounters 1 treatment encounter = 1 UOS; 250 STI treatment encounter (Chlamydia, Gonorrhea, Syphilis, MPX) = 250 UOS	250	N/A
Total UOS and UDC		250	N/A

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Year Two, B-2a: July 1, 2023-June 30, 2024

A. Integrated HIV, HCV, and STD testing*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 General Fund / App A-2, B-2a	HIV testing - encounter 1 HIV testing encounter per 1 UOS; 4,000 testing encounters = 4,000 UOS	4,000	N/A
	HCV testing - tests administered 1 HCV test administered per 1 UOS; 800 HCV tests administered = 800 UOS	800	N/A
	STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 7,000 screenings administered = 7,000 UOS	7,000	N/A
	STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 3,000 screenings administered = 3,000 UOS	3,000	N/A
	Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 25 screenings administered = 25 UOS	25	N/A
	Total UOS and UDC	14,825	N/A
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 General Fund / App A-2, B-2a	PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 550 clients engaged during 12-month period = 550 UDC	N/A	550
	PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 30 PEP clients = 30 UDC	N/A	30
Total UOS and UDC		N/A	580
C. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 General Fund / App A-2, B-2a	Treatment - Encounters 1 treatment encounter = 1 UOS; 500 STI treatment encounter (Chlamydia, Gonorrhea, Syphilis, MPX) = 500 UOS	500	N/A
Total UOS and UDC		500	N/A

Year Three, B-2b: July 1, 2024-June 30, 2025

A. Integrated HIV, HCV, and STD testing*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 – 6/30/25	HIV testing - encounter 1 HIV testing encounter per 1 UOS; 4,000 testing encounters = 4,000 UOS	4,000	N/A

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General Fund / App A-2, B-2b	HCV testing - tests administered 1 HCV test administered per 1 UOS; 800 HCV tests administered = 800 UOS	800	N/A
	STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 7,000 screenings administered = 7,000 UOS	7,000	N/A
	STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 3,000 screenings administered = 3,000 UOS	3,000	N/A
	Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 25 screenings administered = 25 UOS	25	N/A
Total UOS and UDC		14,825	N/A
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services*			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 – 6/30/25 General Fund / App A-2, B-2b	PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 550 clients engaged during 12-month period = 550 UDC	N/A	550
	PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 30 PEP clients = 30 UDC	N/A	30
Total UOS and UDC			580
C. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 – 6/30/25 General Fund / App A-2, B-2b	Treatment - Encounters 1 treatment encounter = 1 UOS; 500 STI treatment encounter (Chlamydia, Gonorrhea, Syphilis, MPX) = 500 UOS	500	N/A
Total UOS and UDC		500	N/A

Year Four, B-2c: July 1, 2025-June 30, 2026

A. Integrated HIV, HCV, and STD testing*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 General Fund / App A-2, B-2c	HIV testing - encounter 1 HIV testing encounter per 1 UOS; 4,000 testing encounters = 4,000 UOS	4,000	N/A
	HCV testing - tests administered 1 HCV test administered per 1 UOS; 800 HCV tests administered = 800 UOS	800	N/A
	STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 7,000 screenings administered = 7,000 UOS	7,000	N/A

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	STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 3,000 screenings administered = 3,000 UOS	3,000	N/A
	Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 25 screenings administered = 25 UOS	25	N/A
Total UOS and UDC		14,825	N/A
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services*			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 General Fund / App A-2, B-2c	PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 550 clients engaged during 12-month period = 550 UDC	N/A	550
	PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 30 PEP clients = 30 UDC	N/A	30
Total UOS and UDC			580
C. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 General Fund / App A-2, B-2c	Treatment - Encounters 1 treatment encounter = 1 UOS; 500 STI treatment encounter (Chlamydia, Gonorrhea, Syphilis, MPX) = 500 UOS	500	N/A
	Total UOS and UDC	500	N/A

Definitions:

Linkage: Linkage services are defined as a warm hand-off to a service, typically a one-time occurrence with minimal complexity. Linkage services differ from a referral in that the service is followed-up on to ensure successful linkage to services. The purpose of linkage services is to ensure that a client is successfully linked to care.

Warm hand-off: is defined as a face-to-face interaction, where the service providers have an open line of communication.

Navigation: Navigation services guide clients through and around barriers in complex health care systems and ensure timely and appropriate care or treatment. Navigation services should help clients address barriers in their own lives that are preventing them from accessing care. Additionally, navigation services are tailored to each individual client to ensure client needs are being met, including mobile services and after hour services. Navigation services usually span a few months in time (1-3 months).

Case Management: Case management services are similar to navigation services; except they span a longer period of time (4-12 months).

5. METHODOLOGY/Service Delivery Description:

A. Integrated HIV, HCV, and STD testing

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The standard of care for the MSM Health Access Point will be the provision of integrated HIV, HCV, and STI testing provided on an opt-out basis. This standard will apply at all SFAF testing sites, including Glide, and at least 80% of all testing experiences across both organizations will involve a comprehensive, integrated testing regimen that includes all relevant HIV, STI, and HCV tests. In some cases, clients will wish to receive only one or two tests based on specific symptoms or because of contact with an STI-positive partner, while other clients may have a preference to avoid a blood draw for syphilis.

SFAF offers integrated HIV, HCV, and STI testing and treatment; linkage to HIV care; PEP; daily and event-driven PrEP; gender affirming services; anal health services; hepatitis A and B vaccinations and flu shots; and more. A multi-racial, bilingual, and SFDPH-certified counseling and testing team is available at all SFAF testing locations to provide supportive, client-centered, and trauma-informed testing, treatment, and referral and navigation services that focus on creating a safe, welcoming, and comfortable environment for all clients.

In Year 1 (January 1, 2023-June 30, 2024):

- 2000 HIV testing encounters
- 400 HCV tests
- 3,500 Chlamydia/Gonorrhea screenings
- 3,000 syphilis screenings
- 25 Monkey Pox (MPX) screenings

In Year 2 and beyond:

- 4000 HIV testing encounters
- 800 HCV tests
- 7,000 Chlamydia/Gonorrhea screenings
- 3,000 syphilis screenings
- 25 Monkey Pox (MPX) screenings

All eligible clients accessing testing and treatment services will be referred to navigation services, including PrEP benefits navigation, HCV treatment, and HIV care.

B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services

SFAF will minimize barriers to needed treatment, retention, benefits enrollment, and support for clients through comprehensive access to HIV, STI and HCV treatment, PrEP and PEP, HIV care and ongoing retention in care support across all SFAF sites.

In Year 1 (January 1, 2023-June 30, 2023):

- Link HIV-Negative Clients to PrEP: SFAF will engage individuals in PrEP services. This includes sustaining existing participants as well as enrolling new ones. SFAF will provide education and counseling regarding PrEP and PEP to all HIV-negative clients, including working to leverage the confirmation of a positive STI or HCV test result as a moment when clients may be more willing to consider PrEP initiation. PrEP is available at all SFAF locations, and SFAF testing clients who are interested in PrEP will be linked to a Benefits Navigator who will assess any potential barriers to PrEP enrollment or adherence and provide referral and linkage support to any services that may be required prior to PrEP enrollment; the navigator will make every effort

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to complete the enrollment during that visit or will set them up with an enrollment appointment if needed. Navigators will also continually identify and provide additional levels of support for clients who are most likely to miss appointments, providing personal outreach, support, and appointment reminders to help secure retention.

- Link newly diagnosed individuals to HIV care: SFAF will link all newly diagnosed individuals to HIV care, including options to start HIV treatment immediately. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. **[In-Kind]**
- Link previously diagnosed individuals who are out of care to HIV care: SFAF will link those who are out of care to interim HIV care while a longer-term solution is identified for ongoing HIV treatment and care. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. **[In-Kind]**
- Linkage to HCV treatment: SFAF will link all those living with HCV to in-house treatment and care options. Individuals enrolled in the HCV care program may also access onsite storage for their medications. **[In-Kind]**
- Link Eligible HIV-negative Clients to PEP: **SFAF will provide PEP to clients.**
- STI treatment: All individuals accessing SFAF testing service will be eligible for on-site STI diagnosis and treatment. Individuals who test positive for an STI and were not presumptively treated at the initial appointment will be contacted by a nurse and scheduled for a treatment visit.
- Primary care: SFAF will link individuals living with HIV and HCV to a primary care provider. For those who are at-risk of disengaging from care, this may also include “tandem” coordination of medical care between the MSM HAP and a primary care provider. **[In-Kind]**

In Year 2 and beyond:

- Link HIV-Negative Clients to PrEP: SFAF will engage individuals in PrEP services. This includes sustaining existing participants as well as enrolling new ones. SFAF will provide education and counseling regarding PrEP and PEP to all HIV-negative clients, including working to leverage the confirmation of a positive STI or HCV test result as a moment when clients may be more willing to consider PrEP initiation. PrEP is available at all SFAF locations, and SFAF testing clients who are interested in PrEP will be linked to a Benefits Navigator who will assess any potential barriers to PrEP enrollment or adherence and provide referral and linkage support to any services that may be required prior to PrEP enrollment; the navigator will make every effort to complete the enrollment during that visit or will set them up with an enrollment appointment if needed. Navigators will also continually identify and provide additional levels of support for clients who are most likely to miss appointments, providing personal outreach, support, and appointment reminders to help secure retention.
- Link newly diagnosed individuals to HIV care: SFAF will link all newly diagnosed individuals to HIV care, including options to start HIV treatment immediately. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. **[In-Kind]**
- Link previously diagnosed individuals who are out of care to HIV care: SFAF will link those who are out of care to interim HIV care while a longer-term solution is identified for ongoing HIV

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treatment and care. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. *[In-Kind]*

- Linkage to HCV treatment: SFAF will link all those living with HCV to in-house treatment and care options. Individuals enrolled in the HCV care program may also access onsite storage for their medications. [In-Kind]
- Link Eligible HIV-negative Clients to PEP: **SFAF will provide PEP to clients.**
- STI treatment: All individuals accessing SFAF testing service will be eligible for on-site STI diagnosis and treatment. Individuals who test positive for an STI and were not presumptively treated at the initial appointment will be contacted by a nurse and scheduled for a treatment visit.
- Primary care: The MSM HAP will link individuals living with HIV and HCV to a primary care provider. For those who are at-risk of disengaging from care, this may also include “tandem” coordination of medical care between the MSM HAP and a primary care provider. *[In-Kind]*

C. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage

SFAF provides access to PrEP and ART; HCV treatment; STI treatment; and medication storage options. The MSM HAP will conduct STI treatment encounters (1 UOS = 1 STI treatment encounter).

SFAF benefits navigation staffing will provide linkage to same-day PREP and connect individuals newly diagnosed with HIV to same-day ART. Benefits navigators also engage individuals living with HIV but who are out of care into services, including Interim ART. Clinicians conduct PrEP assessments, provide STI treatments, and administer rapid and interim ART for individuals living with HIV, and support clients through HCV treatment. Services provided by nurses and nurse practitioners in consultation with SFAF’s medical director.

6. OBJECTIVES and MEASUREMENTS:

N/A

Program Evaluation will be measured by HIV/STI/HEP C surveillance data submission and population level indicators.

7. SUBCONTRACTORS & CONSULTANTS:

- a. SFAF is responsible for the performance of its subcontractors and consultants in this Agreement.
- b. SFAF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFAF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- c. SFAF assumes all liability for all work-related injuries/illness, including but not limited to infectious exposures such as Bloodborne Pathogen and Aerosol Transmissible Diseases.

SFAF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' compensation laws and regulations.

- d. SFAF acknowledges that it will provide to the City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- e. SFAF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- f. Any such subcontract agreements will be kept on file with SFAF, with a copy sent to the Department of Public Health's Program Director associated with this engagement.
- g. This list of requirements is provided to highlight for SFAF, and SFAF acknowledges that it must comply with all requirements of the Agreements, regardless of whether they are listed again here in this Appendix.

8. CONTINUOUS QUALITY IMPROVEMENT:

Each program at SFAF reviews data at least every six months and based on the available data refines practices and develops a set of action items to improve program quality. Reviewing both process and outcome data leads on-the-ground changes to ensure that the deliverables are being met and that the most successful strategies are enhanced.

SFAF adheres to the following:

- Current HIV Prevention Section, HIV Testing Policies and Procedures which include CDC and State Guidelines,
- Any relevant guidelines in the San Francisco HIV Prevention Plan,
- All guidelines developed by the HIV Prevention Section required to implement services to meet the objectives in San Francisco's new System of Prevention.

SFAF complies with all Health Commission, Local, State, Federal, and/or Funding Source policies and requirements, including those pertaining to Harm Reduction, the Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction.

- SFAF collects, tracks, and reports by request on demographics on all participants.
- SFAF has developed a retention protocol with DPH for clients who initiate PrEP that includes at minimum follow-up contact and adherence activities.
- SFAF has developed a system to report on the following:
 - PrEP initiations and time from decision to PrEP initiation,
 - Participants who initiate, stop and if applicable, re-initiate PrEP and their reasons,
 - Barriers for clients to access PrEP, and,
 - Barriers to maintaining the PrEP regimen.
- SFAF assesses, analyzes, and addresses HIV-related stigma in the prioritized population. Such processes include but not be limited to:
 - Client satisfaction,

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- Regular client input into programming, and,
- Maintaining staff reflective of the prioritized population.

9. DATA COLLECTION AND REPORTING REQUIREMENTS:

SFAF complies with all CHEP requirements regarding data collection and submission, and program required elements which will include working with CHEP to measure and report on program-specific objectives and collecting/reporting basic demographic, behavioral risk, and other essential information. Systems/processes used to collect and submit data will include:

- CHEP Internal Data Manager (Quarterly Submission/Upload)
- Quarterly narrative report
- Other systems/processes as requested

Assigned CHEP Program Liaison will provide technical assistance & training on all above data collection systems.

10. REQUIRED LANGUAGE:

REQUIRED TRAINING

- a. HIV, HCV, and STD Skills Certification
- b. Harm Reduction
- c. Overdose Response/Naloxone Administration (DOPE Project or internal)
 - i. How to use Fentanyl Test Strips
- d. Syringe Access and Disposal (TBD)
- e. Trauma Informed Systems
- f. Clear Impact Score Card
- g. Other skills building trainings as required

ADDITIONAL CONTRACT REQUIREMENTS

- h. Required Participation in Network Referral 30-Minute Huddles (assigned agency staff).
- i. Required participation in HAP Network Monthly Meetings (TBD by SOC).
- j. Implementation of Harm Reduction/Substance use policy
- k. Required to follow all SFDPH and CHEP SOC HIV/STI Testing policies and standard of care procedures.

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1. IDENTIFIER:

PROGRAM NAME: San Francisco AIDS Foundation – **Capacity Building Activities: The Black Health Clinical Assistant Program**
ADDRESS: 1035 Market, Suite 400; San Francisco, CA 94103
PROGRAM PRIMARY CONTACT: LB Honey-Brooks, lbrooks@sfaf.org
 Jenny Hsieh, jhsieh@sfaf.org
 Michelle Lee, mlee@sfaf.org

NATURE OF DOCUMENT: New Contract/Original ☒ Contract Amendment ☐ Internal Contract Revision: ☐

2. GOAL STATEMENT:

The Black Health Clinical Assistant Program's goal is to create a workforce development pipeline that can support the Black & African American Health Access Point (HAP) with ongoing professional development, paid internship opportunities, and a trained applicant pool with experience which can support Black & African American HAP activities.

3. TARGET POPULATION:

San Francisco AIDS Foundation serve all ethnicities and populations, with a focused expertise to address the unique cultural needs of this program's priority communities. The Black Health Clinical Assistant Program centers and prioritizes Black and African American individuals who experience sexual health disparities. All qualified individuals are eligible to apply and participate in the Black Health Clinical Assistant Program.

4. MODALITIES and INTERVENTIONS:

Service Description:

The Black Health Clinical Assistant Program is a structural intervention that engages Black and African American individuals impacted by sexual health disparities in community health-focused employment opportunities. The program connects graduates to Black and African American HAP employment opportunities.

The program follows citywide goals:

- Get to zero new HIV infections, zero HIV-related deaths, and zero stigma and discrimination
- Eliminate HCV
- Reverse increasing STI rates
- Eliminate racial disparities in access to services and health outcomes

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Capacity Building Modalities:
Year One, B-3: January 1, 2023-June 30, 2023 (6 months)

Capacity Building Start-Up Activities:			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-3, B-3	<u>Black Health Clinical Assistant Program:</u> 1 UOS = 1 month of start-up planning activities for the Black Health Clinical Assistant Program. 1 month = 3 UOS	3	NA
Total UOS and UDC		3	NA
Capacity Building Implementation Activities:			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund / App A-3/ B-3	<u>Black Health Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant x 12 assistants x (20 hours of training + 80 hours of field experience) = 1,200 UOS	1,200	12
Total UOS and UDC		1,200	12

Year Two, B-3a: July 1, 2023-June 30, 2024

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 General Fund / App A-3, B-3a	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant x 24 assistants x (20 hours of training + 80 hours of field experience) = 2,400 UOS	2,400	24
Total UOS and UDC		2,400	24

Year Three, B-3b: July 1, 2024-June 30, 2025

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 – 6/30/25 General Fund / App A-3, B-3b	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant x 24 assistants x (20 hours of training + 80 hours of field experience) = 2,400 UOS	2,400	24
Total UOS and UDC		2,400	24

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Year Four, B-3c: July 1, 2025-June 30, 2026

Capacity Building Implementation Activities <i>San Francisco AIDS Foundation</i>			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 General Fund / App A-3, B-3c	<u>Clinical Assistant Program:</u> 1 UOS = 1 hour of training or field experience completed by a clinical assistant; 1 UDC = 1 clinical assistant x 24 assistants x (20 hours of training + 80 hours of field experience) = 2,400 UOS	2,400	24
Total UOS and UDC		2,400	24

5. METHODOLOGY/Service Delivery Description:

January 1, 2023-June 30, 2023

Proposed activities require different start up and implementation needs.

Capacity Building Start Up Activities:

The Black Health Clinical Assistant Program requires 3 months of start-up planning activities (3 UOS). This includes:

- Hiring a project manager to launch the program
- Developing program curriculum and training materials
- Recruiting 4 clinical assistants for the first cohort
- Participating in Black and African American HAP planning activities (e.g., planning meetings)

Capacity Building Activities:

The Black Health Clinical Assistant Program will begin implementation activities in April 2023. This includes:

- Identifying and recruiting eligible clinical interns (Eligibility criteria will be established in partnership with the Black/AA Health Access Point)
- Onboarding and training the inaugural clinical assistant cohort (**12** interns in Spring 2023)
- Assigning clinical assistants to 80+ hours of rotating field experience within SFAF's various programs (with a focus on clinical services)
- Graduating the inaugural cohort and assisting them to identify and secure community health employment opportunities, with a focus on opportunities within the Black & African American HAP, specifically Rafiki Coalition
- Beginning recruitment and promotion efforts for the Summer 2023 cohort
- Cohort evaluation and feedback

6. OBJECTIVES and MEASUREMENTS:

All objectives and descriptions of how objectives will be measured are contained in the CHEP document entitled "CHEP Performance Objectives FY22-23".

January 1, 2023-June 30, 2023

- Clinical Assistant Program:

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- The program will hire and onboard 12 clinical interns before June 30, 2023.
- 9 of the 12 clinical interns will enter paid community health opportunities within 4 months of completing the program with a prioritization of placement at Rafiki Coalition.
- At least one intern initiates phlebotomy training to become a fully certified lab technician.

July 1, 2023-June 30, 2024

- Clinical Assistant Program:
 - Hire and onboard 24 clinical interns through three distinct cohorts.
 - 18 of the 24 clinical interns will enter paid community health opportunities within 4 months of completing the program with a prioritization of placement at Rafiki Coalition.
 - At least 3 interns initiate phlebotomy training and 2 become fully certified lab technicians within 12 months.

7. SUBCONTRACTORS & CONSULTANTS:

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

8. CONTINUOUS QUALITY IMPROVEMENT:

The Black Health Clinical Assistant Program will use a continuous quality improvement approach.

This includes obtaining and analyzing feedback from:

- Participant evaluations
- Clinical Assistant Intern feedback
- Shifts in local public health landscape
- Black & African American HAP leaders

These data are incorporated into future trainings and is used to improve the Clinical Assistant experience.

9. DATA COLLECTION AND REPORTING REQUIREMENTS:

SFAF complies with all CHEP requirements regarding data collection and submission, and program required elements which will include working with CHEP to measure and report on program-specific objectives and collecting/reporting basic demographic, behavioral risk, and other essential information. Systems/processes used to collect and submit data will include:

- CHEP Internal Data Manager (Quarterly Submission/Upload)
- Quarterly narrative report
- Other systems/processes as requested

Assigned CHEP Program Liaison will provide technical assistance & training on all above data collection systems.

10. REQUIRED LANGUAGE:

REQUIRED TRAINING

- a. HIV, HCV, and STD Skills Certification
- b. Harm Reduction
- c. Overdose Response/Naloxone Administration (DOPE Project or internal)
 - i. How to use Fentanyl Test Strips
- d. Syringe Access and Disposal (TBD)
- e. Trauma Informed Systems
- f. Clear Impact Score Card
- g. Other skills building trainings as required

ADDITIONAL CONTRACT REQUIREMENTS

- h. Required Participation in Network Referral 30-Minute Huddles (assigned agency staff).
- i. Required participation in HAP Network Monthly Meetings (TBD by SOC).
- j. Implementation of Harm Reduction/Substance use policy
- k. Required to follow all SFDPH and CHEP SOC HIV/STI Testing policies and standard of care procedures.

San Francisco AIDS Foundation
Health Access Point HAP (Health Access Point for MSM)

Appendix A-4
01/01/23 – 06/30/26
General Fund

1. IDENTIFIER:

PROGRAM NAME: San Francisco AIDS Foundation - **The HAP Capacity Building Activities (HIV/STI/HEP C Infrastructure) Program**

ADDRESS: 1035 Market, Suite 400; San Francisco, CA 94103

PROGRAM PRIMARY CONTACT: LB Honey-Brooks, lbrooks@sfaf.org

Jenny Hsieh, jhsieh@sfaf.org

Michelle Lee, mlee@sfaf.org

NATURE OF DOCUMENT: New Contract/Original ☒ Contract Amendment ☐ Internal Contract Revision: ☐

2. GOAL STATEMENT:

The Health Access Point (HAP) Network Capacity Building Activities program's goal is to provide technical assistance and capacity building support to the HAP Network, with an emphasis on the Black & African American HAP (Rafiki Coalition for Health and Wellness) and the Youth HAP (LYRIC).

3. TARGET POPULATION:

San Francisco AIDS Foundation serve all ethnicities and populations, with a focused expertise to address the unique needs of this program's priority communities. The Health Access Point (HAP) Capacity Building Activities program supports HAPs designed to serve the following priority communities:

1. Latinx communities
2. Gay, bisexual, and queer (GBQ) men & MSM communities
3. Trans and nonbinary communities
4. Asian and Pacific Islander (API) communities
5. Black and African American communities
6. People who use drugs
7. Young people

4. MODALITIES and INTERVENTIONS:

Service Description:

The Health Access Point (HAP) Network Capacity Building Activities program will increase the impact of the seven (7) HAPs, with a focus on the Black & African American HAP (Rafiki Coalition for Health and Wellness) and the Youth HAP (LYRIC).

The program follows the citywide goals:

- Get to zero new HIV infections, zero HIV-related deaths, and zero stigma and discrimination
- Eliminate HCV
- Reverse increasing STI rates
- Eliminate racial disparities in access to services and health outcomes

Capacity Building Modalities:

Year One, B-4: January 1, 2023-June 30, 2023 (6 months)

Capacity Building Start-Up Activities:			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 General Fund/App A-4/ B-4	1 month = 1 UOS of Capacity Building Start-Up and/or Implementation Activities; 6 months = 6 UOS	6	NA
Total UOS and UDC		6	NA

Year Two, B-4a: July 1, 2023-June 30, 2024

Capacity Building Implementation Activities:			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 General Fund/App A-4/ B-4a	1 month = 1 UOS of Capacity Building Implementation Activities; 12 months = 12 UOS	12	NA
Total UOS and UDC		12	NA

Year Three, B-4b: July 1, 2024-June 30, 2025

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 – 6/30/25 General Fund/App A-4/ B-4b	1 month = 1 UOS of Capacity Building Implementation Activities; 12 months = 12 UOS	12	NA
Total UOS and UDC		12	NA

Year Four B-4c: July 1, 2025-June 30, 2026

Capacity Building Implementation Activities			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 - 6/30/26 General Fund/App A-4/ B-4c	1 month = 1 UOS of Capacity Building Implementation Activities; 12 months = 12 UOS	12	NA
Total UOS and UDC		12	NA

5. METHODOLOGY/Service Delivery Description

Year 1: January 1, 2023-June 30, 2023

Capacity Building Start-Up Activities:

- Assess and respond to the Black & African American HAP needs by:
 - Establishing scope of work and capacity building needs
 - Participating in ongoing meetings with the Rafiki Coalition for Health and Wellness and Black/AA HAP partners
- Assess and respond to Youth HAP needs by:
 - Establishing scope of work and capacity building needs
 - Participating in ongoing meetings with LYRIC and Youth HAP partners
- Participate in HAP Network convenings to assess and respond to broader HAP needs (e.g., conduct research, provide resources, provide technical assistance or link to the appropriate technical assistance, etc.).
- Engage and establish contracts with consultants required for Black/AA HAP implementation
 - Manage consultancy activities and ensure timely completion
- Support communication, coordination, and collaboration between HAP leads and subcontractors

Year 2 and beyond: July 1, 2023-June 30, 2026

Capacity Building Activities:

- Implement activities outlined in the developed Scope of Work starting July 1, 2023.
 - Activities will be determined as the HAP needs emerge and may include:
 - Creating policies and procedures for clinical operations
 - Creating forms and intake/registration procedures and protocols
 - Creating service delivery “flows”
 - Supporting LYRIC, Rafiki Coalition for Health and Wellness, and other HAPs with the establishment of necessary licenses and certifications required for operation of clinical services
 - Supporting LYRIC, Rafiki Coalition for Health and Wellness, and other HAPs with the establishment of a compliance infrastructure required for operation of clinical services
 - Creating a short-term plan for service documentation and identify long-term solutions (including scoping out cost, implementation time, etc. for an electronic health records system)
 - Working with LYRIC, Rafiki Coalition for Health and Wellness, and other HAPs to establish short and long-term sites for service delivery
 - Supporting communication, coordination, and collaboration between HAP leads and subcontractors
 - Adapting the Scope of Work to address emerging needs and HAP implementation goals
- Participate in HAP Network convenings to assess and respond to broader HAP needs (e.g., conduct research, provide resources, provide technical assistance or link to the appropriate technical assistance, etc.).
- Establish Scope of Work for Year 3 and beyond
- Manage consultancy activities and ensure timely completion

- Support communication, coordination, and collaboration between HAP leads and subcontractors

6. OBJECTIVES and MEASUREMENTS:

All objectives and descriptions of how objectives will be measured are contained in the CHEP document entitled “CHEP Performance Objectives FY22-23.”

7. SUBCONTRACTORS & CONSULTANTS:

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

8. CONTINUOUS QUALITY IMPROVEMENT:

Capacity building support will be evaluated in an ongoing manner to ensure that agreed upon activities are completed to the satisfaction of SFAF and our HAP Network partners. The Chief Program Officer and Sr. Director of Community Partnerships & Engagement will solicit ongoing feedback and guidance from the HAP Leads to ensure that capacity building efforts meet HAP needs, goals, and priorities. As a part of SFAF’s commitment to continuous quality improvement, existing scopes of work and consultant contracts will be reviewed and evaluated monthly. Due to the dynamic nature of this work, scopes of work and contracts will be adjusted accordingly.

9. DATA COLLECTION AND REPORTING REQUIREMENTS

SFAF complies with all CHEP requirements regarding data collection and submission, and program required elements which will include working with CHEP to measure and report on program-specific objectives and collecting/reporting basic demographic, behavioral risk, and other essential information. Systems/processes used to collect and submit data will include:

- CHEP Internal Data Manager (Quarterly Submission/Upload)
- Quarterly narrative report
- Other systems/processes as requested

Assigned CHEP Program Liaison will provide technical assistance & training on all above data collection systems.

10. REQUIRED LANGUAGE:

REQUIRED TRAINING

- a. HIV, HCV, and STD Skills Certification
- b. Harm Reduction
- c. Overdose Response/Naloxone Administration (DOPE Project or internal)
 - i. How to use Fentanyl Test Strips
- d. Syringe Access and Disposal (TBD)
- e. Trauma Informed Systems
- f. Clear Impact Score Card
- g. Other skills building trainings as required

ADDITIONAL CONTRACT REQUIREMENTS

- h. Required Participation in Network Referral 30-Minute Huddles (assigned agency staff).
- i. Required participation in HAP Network Monthly Meetings (TBD by SOC).
- j. Implementation of Harm Reduction/Substance use policy
- k. Required to follow all SFDPH and CHEP SOC HIV/STI Testing policies and standard of care procedures.

**San Francisco AIDS Foundation
Health Access Point HAP (Health Access Point for MSM)**

**Appendix A-5
01/01/23 – 06/30/26
General Fund**

1. IDENTIFIER:

PROGRAM NAME: San Francisco AIDS Foundation - **Health Access Point Program: Gay/MSM**
ADDRESS: 1035 Market, Suite 400; San Francisco, CA 94103
PROGRAM PRIMARY CONTACT: LB Honey-Brooks, lbhoney@sfaf.org
 Jenny Hsieh, jhsieh@sfaf.org
 Michelle Lee, mlee@sfaf.org
NATURE OF DOCUMENT: New Contract/Original ☒ Contract Amendment ☐ Internal Contract Revision: ☐

2. GOAL STATEMENT:

The MSM Health Access Point program will offer population-specific, “one-stop-shop” services using an equity-focused, stigma-free, and low barrier service model.

3. TARGET POPULATION:

San Francisco AIDS Foundation serve all ethnicities and populations, with a focused expertise to address the unique needs of this program’s priority communities. The MSM Health Access Point (HAP) will serve high-risk gay men and other men who have sex with men (MSM) and will also welcome and serve all who are eligible to receive services, including all trans and nonbinary individuals.

San Francisco AIDS Foundation (SFAF) will implement an equity-focused, community-centered, low-barrier, and whole person Health Access Point (HAP) specifically designed to reduce rates of HIV, STI, and HEP C (HCV) infection among high-risk gay men and other men who have sex with men (MSM). The MSM HAP program will operate as a collaborative partnership involving several San Francisco agencies that have extensive experience and success in supporting and serving MSM and trans communities: Glide, Shanti Project, and the San Francisco Community Health Center (SFCHC).

The program focuses on MSM (including a focus on trans and nonbinary individuals) in San Francisco who are: a) unaware of their HIV serostatus; b) at risk for STI and/or HCV, regardless of HIV serostatus; c) aware that they are HIV-positive but are not engaged in care; and/or d) HIV-negative and not engaged or retained on PrEP.

4. MODALITIES and INTERVENTIONS:

Service Description:

This program is a network of agencies/programs with SFAF serving as the lead agency. The HAP provides an equity-focused, stigma-free, and low barrier access to person-centered, standard of care services regardless of HIV, HCV, or STI status. The HAP follows the citywide goals:

- Get to zero new HIV infections, zero HIV-related deaths, and zero stigma and discrimination
- Eliminate HCV
- Reverse increasing STI rates
- Eliminate racial disparities in access to services and health outcomes

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Program Standard of Care Service Modalities

Service totals are projections and may adjust as service needs and program capacity become clearer. The funding source for all services is General Fund (unless otherwise noted).

Year One, B-5: January 1, 2023-June 30, 2023 (6 months) & B-5.1, January 1, 2023 – July 31, 2023 (7 months)

A. Integrated HIV, HCV, and STD testing			
Lead: San Francisco AIDS Foundation			
Subcontractor: Glide			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	San Francisco AIDS Foundation HIV testing - encounter 1 HIV testing encounter per 1 UOS; 3,320 testing encounters = 3,320 UOS 1 unduplicated client = 1 UDC; 1,500 UDC	3,320	1,500
	San Francisco AIDS Foundation HCV testing - tests administered 1 HCV test administered per 1 UOS; 625 HCV tests administered = 625 UOS 1 unduplicated client = 1 UDC; 500 UDC	625	500
	San Francisco AIDS Foundation STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 5,000 screenings administered = 5,000 UOS 1 unduplicated client = 1 UDC; 1,500 UDC	5,000	1,500
	San Francisco AIDS Foundation STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 4,250 screenings administered = 4,250 UOS 1 unduplicated client = 1 UDC; 1,500 UDC	4,250	1,500
	San Francisco AIDS Foundation Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 25 screenings administered = 25 UOS 1 unduplicated client = 1 UDC; 20 UDC	25	20
	Glide STI (gonorrhea/chlamydia) testing - screening administered 1 gonorrhea/chlamydia screening administered per 1 UOS; 1.0 FTE x 13% Level of Effort x 10 screenings per month x 6 months = 60 UOS 1 unduplicated client = 1 UDC; 30 UDC	60	30
	Glide STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 1.0 FTE x 13% Level of Efforts x 16-17 screenings per month x 6 months = 100 UOS 1 unduplicated client = 1 UDC; 50 UDC	100	50

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Total UOS and UDC		13,380	5,100
Term: 1/1/23 – 7/31/23 App A-5, B-5.1	San Francisco AIDS Foundation HIV testing - encounter 1 HIV testing encounter per 1 UOS; 180 testing encounters = 180 UOS	180	N/A
Total UOS and UDC		180	N/A
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services			
Lead: San Francisco AIDS Foundation Subcontractors: Shanti, Glide			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	San Francisco AIDS Foundation PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 375 clients engaged during 6-month period = 375 UDC	N/A	375
	San Francisco AIDS Foundation PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 20 PEP clients = 20 UDC	N/A	20
	Shanti Case Management - Hours 1 hour of Individual Health Sessions = 1 UOS; 38 ½ hours of individual health sessions per month x 6 months = 230 UOS 1 client engaged in case management = 1 UDC; 13 clients enrolled in case management across 6 months = 13 UDC	230	13
	Shanti Support Groups - Hours 1 hour of support group sessions = 1 UOS; 1.5-hour meeting x 2/week x 22 = 66 UOS 1 client participating in the group = 1 UDC; 25 clients will participate = 25 UDC	66	25
	Glide Navigation - Hours 1 hour of navigation services = 1 UOS; 250 hours of navigation services = 250 UOS 1 client engaged in navigation services = 1 UDC; 20 clients will engage in navigation services = 20 UDC	250	20
Total UOS and UDC		546	453
C. Harm reduction services for substance use (including for opioids, stimulants, alcohol, tobacco, cannabis)			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	NA; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
D. Overdose prevention (including naloxone distribution)*			

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San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	NA; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
E. Syringe access and disposal*			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	NA; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
F. Condom distribution*			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	<u>San Francisco AIDS Foundation</u> Condom Distribution - Monthly 1 month of condom distribution = 1 UOS; 6 months x 1 month of condom distribution = 6 UOS	6	N/A
Total UOS and UDC		6	N/A
G. Community engagement and mobilization (physical and online, social media)			
Subcontractor: San Francisco Community Health Center			
Period / Funds / App	Mode of Service/Intervention Description	UOS	NOC
Term: 1/1/23 – 6/30/23 App A-5, B-5	<u>San Francisco Community Health Center</u> Events - Hours\$ 1 Event/quarter x 4 hour/event x 2 quarters = 8 UOS 15 clients/quarter x 2 quarters = 30 NOC\$	8	30
	<u>San Francisco Community Health Center:</u> Groups - Hours\$ 3 groups/month x 3 hour/group x 6 months = 54 UOS 3 groups/month x 6 months x 6 participants/group = 108 NOC \$	54	108
Total UOS and UDC		62	138
H. HIV, HCV, STD health education and prevention counseling (integrated into all of the above services, not stand alone)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
I. Basic needs services (examples: food, housing, and employment)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
J. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
San Francisco AIDS Foundation			

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Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	<u>San Francisco AIDS Foundation:</u> Treatment - Encounters 1 treatment encounter = 1 UOS; 325 STI treatment encounter (Chlamydia, Gonorrhea, Syphilis, MPX) = 325 UOS	325	N/A
Total UOS and UDC		325	N/A
K. Mental health services			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
L. Primary care			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
M. Substance use treatment			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 1/1/23 – 6/30/23 App A-5, B-5	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A

Year Two, B-5a: July 1, 2023-June 30, 2024

A. Integrated HIV, HCV, and STD testing			
Lead: San Francisco AIDS Foundation			
Subcontractors: Glide			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	<u>San Francisco AIDS Foundation</u> HIV testing - encounter 1 HIV testing encounter per 1 UOS; 7,000 testing encounters = 7,000 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	7,000	3,000
	<u>San Francisco AIDS Foundation</u> HCV testing - tests administered 1 HCV test administered per 1 UOS; 1250 tests administered = 1250 UOS 1 unduplicated client = 1 UDC; 1,000 UDC	1,250	1,000
	<u>San Francisco AIDS Foundation</u> STI (gonorrhea/chlamydia) testing - screening administered	10,000	3,000

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	1 chlamydia/gonorrhea screening administered per 1 UOS; 10,000 screenings administered = 10,000 UOS 1 unduplicated client = 1 UDC; 3,000 UDC		
	San Francisco AIDS Foundation STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 8,5000 screenings administered = 8,500 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	8,500	3,000
	San Francisco AIDS Foundation Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 50 screenings administered = 50 UOS 1 unduplicated client = 1 UDC; 40 UDC	50	40
	Glide STI (gonorrhea/chlamydia) testing - screening administered 1 gonorrhea/chlamydia screening administered per 1 UOS; 1.0 FTE x 13% Level of Effort x 10 screenings per month x 12 months = 120 UOS 1 unduplicated client = 1 UDC; 60 UDC	120	60
	Glide STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 1.0 FTE x 13% Level of Efforts x 16-17 screenings per month x 12 months = 200 UOS 1 unduplicated client = 1 UDC; 100 UDC	200	100
Total UOS and UDC		27,120	10,200
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services			
Lead: San Francisco AIDS Foundation			
Subcontractor: Shanti			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	San Francisco AIDS Foundation PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 750 clients engaged during 12-month period = 750 UDC	N/A	750
	San Francisco AIDS Foundation PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 40 PEP clients = 40 UDC	N/A	40
	Shanti Case Management - Hours 1 hour of Individual Health Sessions = 1 UOS; 38 ½ hours of individual health sessions per month x 12 months = 460 UOS 1 client engaged in case management = 1 UDC; 25 clients enrolled in case management across 12 months = 25 UDC	460	25
	Shanti Support Groups - Hours	132	50

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	1 hour of support group sessions = 1 UOS; 1.5-hour meeting x 2/week x 44 = 132 UOS		
	1 client participating in the group = 1 UDC; 50 clients will participate = 50 UDC		
	Glide Navigation - Hours 1 hour of navigation services = 1 UOS; 500 hours of navigation services = 500 UOS		
	1 client engaged in navigation services = 1 UDC; 40 clients will engage in navigation services = 40 UDC	500	40
Total UOS and UDC		1,092	905
C. Harm reduction services for substance use (including for opioids, stimulants, alcohol, tobacco, cannabis)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
D. Overdose prevention (including naloxone distribution)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
E. Syringe access and disposal			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
F. Condom distribution			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	<u>San Francisco AIDS Foundation</u> Condom Distribution - Monthly 1 month of condom distribution = 1 UOS; 12 months x 1 month of condom distribution = 12 UOS	12	N/A
Total UOS and UDC		12	N/A
G. Community engagement and mobilization (physical and online, social media)			
Subcontractor: San Francisco Community Health Center			
Period / Funds / App	Mode of Service/Intervention Description	UOS	NOC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	<u>San Francisco Community Health Center</u> Events - Hours 1 Event/quarter x 4 hour/event x 4 quarters = 16 UOS 15 clients/quarter x 4 quarters = 60 NOC	16	60

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	<u>San Francisco Community Health Center</u> Groups - Hours\$ 6 groups/month x 3 hour/group x 12 months = 108 UOS 6 groups/month x 12 months x 6 participants/group = 216 NOC \$	108	216
Total UOS and NOC		124	276
H. HIV, HCV, STD health education and prevention counseling (integrated into all of the above services, not stand alone)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 AppA-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
I. Basic needs services (examples: food, housing, and employment)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	N/A; see methodology	N/A	N/A
J. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 AppA-5, B-5a	<u>San Francisco AIDS Foundation</u> Treatment - Encounters 1 treatment encounter = 1 UOS; 650 STI treatment service encounters (Chlamydia, Gonorrhea, Syphilis, MPX) = 650 UOS	650	N/A
Total UOS and UDC		650	N/A
K. Mental health services			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
L. Primary care			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 App A-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
M. Substance use treatment			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/23 – 6/30/24 AppA-5, B-5a	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A

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Year Three, B-5b: July 1, 2024-June 30, 2025

A. Integrated HIV, HCV, and STD testing			
Lead: San Francisco AIDS Foundation			
Subcontractors: Glide			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	<u>San Francisco AIDS Foundation</u> HIV testing - encounter 1 HIV testing encounter per 1 UOS; 7,000 testing encounters = 7,000 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	7,000	3,000
	<u>San Francisco AIDS Foundation</u> HCV testing - tests administered 1 HCV test administered per 1 UOS; 1250 tests administered = 1,250 UOS 1 unduplicated client = 1 UDC; 1,000 UDC	1,250	1,000
	<u>San Francisco AIDS Foundation</u> STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 10,000 screenings administered = 10,000 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	10,000	3,000
	<u>San Francisco AIDS Foundation</u> STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 8,5000 screenings administered = 8,500 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	8,500	3,000
	<u>San Francisco AIDS Foundation</u> Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 50 screenings administered = 50 UOS 1 unduplicated client = 1 UDC; 40 UDC	50	40
	<u>Glide</u> STI (gonorrhea/chlamydia) testing - screening administered 1 gonorrhea/chlamydia screening administered per 1 UOS; 1.0 FTE x 13% Level of Effort x 10 screenings per month x 12 months = 120 UOS 1 unduplicated client = 1 UDC; 60 UDC	120	60
	<u>Glide</u> STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 1.0 FTE x 13% Level of Efforts x 16-17 screenings per month x 12 months = 200 UOS 1 unduplicated client = 1 UDC; 100 UDC	200	100
Total UOS and UDC		27,120	10,200
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services			
Lead: San Francisco AIDS Foundation			

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Subcontractor: Shanti			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	<u>San Francisco AIDS Foundation</u> PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 750 clients engaged during 12-month period = 750 UDC	N/A	750
	<u>San Francisco AIDS Foundation</u> PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 40 PEP clients = 40 UDC	N/A	40
	<u>Shanti</u> Case Management - Hours 1 hour of Individual Health Sessions = 1 UOS; 38 ½ hours individual health sessions per month x 12 months = 460 UOS 1 client engaged in case management = 1 UDC; 25 clients enrolled in case management across 12 months = 25 UDC	460	25
	<u>Shanti</u> Support Groups - Hours 1 hour of support group sessions = 1 UOS; 1.5 hour meeting x 2/week x 44 = 132 UOS 1 client participating in the group = 1 UDC; 50 clients will participate = 50 UDC	132	50
	<u>Glide</u> Navigation - Hours 1 hour of navigation services = 1 UOS; 500 hours of navigation services = 500 UOS 1 client engaged in navigation services = 1 UDC; 40 clients will engage in navigation services = 40 UDC	500	40
Total UOS and UDC		1,092	905
C. Harm reduction services for substance use (including for opioids, stimulants, alcohol, tobacco, cannabis)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
D. Overdose prevention (including naloxone distribution)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
E. Syringe access and disposal			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC

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Term: 7/1/24 -6/30/25 App A-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
F. Condom distribution			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	San Francisco AIDS Foundation: Condom Distribution - Monthly 1 month of condom distribution = 1 UOS; 12 months x 1 month of condom distribution = 12 UOS	12	N/A
Total UOS and UDC		12	N/A
G. Community engagement and mobilization (physical and online, social media)			
Subcontractor: San Francisco Community Health Center			
Period / Funds / App	Mode of Service/Intervention Description	UOS	NOC
Term: 7/1/24 -6/30/25 App A-5, B-5b	San Francisco Community Health Center Events - Hours 1 Event/quarter x 4 hour/event x 4 quarters = 16 UOS 15 clients/quarter x 4 quarters = 60 NOC	16	60
	San Francisco Community Health Center Groups - Hours 6 groups/month x 3 hour/group x 12 months = 108 UOS 6 groups/month x 12 months x 6 participants/group = 216 NOC	108	216
Total UOS and NOC		124	276
H. HIV, HCV, STD health education and prevention counseling (integrated into all of the above services, not stand alone)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 AppA-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
I. Basic needs services (examples: food, housing, and employment)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
J. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 AppA-5, B-5b	San Francisco AIDS Foundation: Treatment - Encounters 1 treatment encounter = 1 UOS; 650 STI treatment service encounters (Chlamydia, Gonorrhea, Syphilis, MPX) = 650 UOS	650	N/A
Total UOS and UDC		650	N/A
K. Mental health services			
San Francisco AIDS Foundation			

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Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
L. Primary care			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 App A-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
M. Substance use treatment			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/24 -6/30/25 AppA-5, B-5b	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A

Year Four, B-5c: July 1, 2025-June 30, 2026

A. Integrated HIV, HCV, and STD testing			
Lead: San Francisco AIDS Foundation			
Subcontractors: Glide			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	<u>San Francisco AIDS Foundation</u> HIV testing - encounter 1 HIV testing encounter per 1 UOS; 7,000 testing encounters = 7,000 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	7,000	3,000
	<u>San Francisco AIDS Foundation</u> HCV testing - tests administered 1 HCV test administered per 1 UOS; 1250 tests administered = 1250 UOS 1 unduplicated client = 1 UDC; 1,000 UDC	1,250	1,000
	<u>San Francisco AIDS Foundation</u> STI (gonorrhea/chlamydia) testing - screening administered 1 chlamydia/gonorrhea screening administered per 1 UOS; 10,000 screenings administered = 10,000 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	10,000	3,000
	<u>San Francisco AIDS Foundation</u> STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 8,5000 screenings administered = 8,500 UOS 1 unduplicated client = 1 UDC; 3,000 UDC	8,500	3,000
	<u>San Francisco AIDS Foundation</u> Monkey Pox (MPX) screening - screening administered 1 MPX screening administered per 1 UOS; 50 screenings administered = 50 UOS	50	40

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	1 unduplicated client = 1 UDC; 40 UDC		
	<u>Glide</u> STI (gonorrhea/chlamydia) testing - screening administered 1 gonorrhea/chlamydia screening administered per 1 UOS; 1.0 FTE x 13% Level of Effort x 10 screenings per month x 12 months = 120 UOS 1 unduplicated client = 1 UDC; 60 UDC	120	60
	<u>Glide</u> STI (syphilis) testing - screening administered 1 syphilis screening administered per 1 UOS; 1.0 FTE x 13% Level of Efforts x 16-17 screenings per month x 12 months = 200 UOS 1 unduplicated client = 1 UDC; 100 UDC	200	100
Total UOS and UDC		27,120	10,200
B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services			
Lead: San Francisco AIDS Foundation			
Subcontractor: Shanti			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	<u>San Francisco AIDS Foundation</u> PrEP Navigation - clients engaged 1 client engaged in PrEP Program per 1 UDC; 750 clients engaged during 12-month period = 750 UDC	N/A	750
	<u>San Francisco AIDS Foundation</u> PEP Navigation - clients engaged 1 client connected to PEP per 1 UDC; 40 PEP clients = 40 UDC	N/A	40
	<u>Shanti</u> Case Management - Hours 1 hour of Individual Health Sessions = 1 UOS; 38 ½ hours of individual health sessions per month x 12 months = 460 UOS 1 client engaged in case management = 1 UDC; 25 clients enrolled in case management across 12 months = 25 UDC	460	25
	<u>Shanti</u> Support Groups - Hours 1 hour of support group sessions = 1 UOS; 1.5 hour meeting x 2/week x 44 = 132 UOS 1 client participating in the group = 1 UDC; 50 clients will participate = 50 UDC	132	50
	<u>Glide</u> Navigation - Hours 1 hour of navigation services = 1 UOS; 500 hours of navigation services = 500 UOS 1 client engaged in navigation services = 1 UDC; 40 clients will engage in navigation services = 40 UDC	500	40
Total UOS and UDC		1,092	905

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C. Harm reduction services for substance use (including for opioids, stimulants, alcohol, tobacco, cannabis)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
D. Overdose prevention (including naloxone distribution)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 AppA-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
E. Syringe access and disposal			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
F. Condom distribution			
Lead: San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	San Francisco AIDS Foundation Condom Distribution - Monthly 1 month of condom distribution = 1 UOS; 12 months x 1 month of condom distribution = 12 UOS	12	N/A
Total UOS and UDC		12	N/A
G. Community engagement and mobilization (physical and online, social media)			
Subcontractor: San Francisco Community Health Center			
Period / Funds / App	Mode of Service/Intervention Description	UOS	NOC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	San Francisco Community Health Center Events - Hours\$ 1 Event/quarter x 4 hour/event x 4 quarters = 16 UOS 15 clients/quarter x 4 quarters = 60 NOC\$	16	60
	San Francisco Community Health Center Groups - Hours\$ 6 groups/month x 3 hour/group x 12 months = 108 UOS 6 groups/month x 12 months x 6 participants/group = 216 NOC \$	108	216
Total UOS and NOC		124	276
H. HIV, HCV, STD health education and prevention counseling (integrated into all of the above services, not stand alone)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 AppA-5, B-5c	N/A; see methodology	N/A	N/A

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Total UOS and UDC		N/A	N/A
I. Basic needs services (examples: food, housing, and employment)			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
J. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 AppA-5, B-5c	<u>San Francisco AIDS Foundation</u> Treatment - Encounters 1 treatment encounter = 1 UOS; 650 STI treatment service encounters (Chlamydia, Gonorrhea, Syphilis, MPX) = 650 UOS	650	N/A
Total UOS and UDC		650	N/A
K. Mental health services			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
L. Primary care			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 App A-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A
M. Substance use treatment			
San Francisco AIDS Foundation			
Period / Funds / App	Mode of Service/Intervention Description	UOS	UDC
Term: 7/1/25 – 6/30/26 AppA-5, B-5c	N/A; see methodology	N/A	N/A
Total UOS and UDC		N/A	N/A

Definitions:

Linkage: Linkage services are defined as a warm hand-off to a service, typically a one-time occurrence with minimal complexity. Linkage services differ from a referral in that the service is followed-up on to ensure successful linkage to services. The purpose of linkage services is to ensure that a client is successfully linked to care.

Warm hand-off: is defined as a face-to-face interaction, where the service providers have an open line of communication.

Navigation: Navigation services guide clients through and around barriers in complex health care systems and ensure timely and appropriate care or treatment. Navigation services should help clients address barriers in their own lives that are preventing them from accessing care. Additionally, navigation services are tailored to each individual client to ensure client needs are being met, including mobile services and after hour services. Navigation services usually span a few months in time (1-3 months).

Case Management: Case management services are similar to navigation services; except they span a longer period of time (4-12 months).

5. METHODOLOGY/Service Delivery Description:

A. Integrated HIV, HCV, and STD testing

The standard of care for the MSM Health Access Point will be the provision of integrated HIV, HCV, and STI testing provided on an opt-out basis. This standard will apply at all SFAF testing sites, including Glide, and at least 80% of all testing experiences across both organizations will involve a comprehensive, integrated testing regimen that includes all relevant HIV, STI, and HCV tests. In some cases, clients will wish to receive only one or two tests based on specific symptoms or as a result of contact with an STI-positive partner, while other clients may have a preference to avoid a blood draw for syphilis.

SFAF offers integrated HIV, HCV, and STI testing and treatment; linkage to HIV care; PEP; daily and event-driven PrEP; gender affirming services; anal health services; hepatitis A and B vaccinations and flu shots; and more. A multi-racial, bilingual, and SFDPH-certified counseling and testing team is available at all SFAF testing locations to provide supportive, client-centered, and trauma-informed testing, treatment, and referral and navigation services that focus on creating a safe, welcoming, and comfortable environment for all clients.

Glide also has extensive experience providing HIV, HCV, and STI testing geared to the needs of low-income and marginalized populations. Glide's contribution will focus on engaging MSM experiencing homelessness or unstable housing in the Tenderloin. For Glide clients who have a positive STI test result, they will be linked to treatment at SFAF or another appropriate provider.

Service totals are projections and may adjust as service needs and program capacity become clearer.

In Year 1 (January 1, 2023-June 30, 2024), the MSM HAP will provide:

- 3,500 HIV tests (SFAF)
- 625 HCV tests (SFAF)
- 5,060 Chlamydia/Gonorrhea screenings (SFAF & Glide)
- 4,350 syphilis screenings (SFAF & Glide)
- 25 MPX screenings (SFAF)

In Year 2 and beyond, the MSM HAP will annually provide:

- 7,000 HIV tests (SFAF)
- 1,250 HCV tests (SFAF)
- 10,120 Chlamydia/Gonorrhea screenings (SFAF & Glide)

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- 8,700 syphilis screenings (SFAF & Glide)
- 50 MPX screenings (SFAF)

All eligible clients accessing testing and treatment services will be referred to navigation services, including PrEP benefits navigation, HCV treatment, and HIV care.

B. Linkage and navigation to PrEP, HIV care, HCV treatment, STD treatment, primary care, case management/intensive case management (ICM) and other services

The Health Access Point will minimize barriers to needed treatment, retention, benefits enrollment, and support for clients through comprehensive access to HIV, STI and HCV treatment, PrEP and PEP, HIV care and ongoing retention in care support across all SFAF sites.

Glide will link clients in need of navigation services to the MSM HAP. Shanti's case management program will support the ongoing retention needs of MSM living with HIV.

In Year 1 (January 1, 2023-June 30, 2023), SFAF, Shanti, and Glide will provide the following:

- **Linking HIV-Negative Clients to PrEP: SFAF will engage 375 individuals in PrEP services. This includes sustaining existing participants as well as enrolling new ones. Glide will navigate 20 clients in needs of HIV and HCV care, as well as STI treatment, PrEP, and PEP, to care through 250 hours of navigation services.** SFAF and Glide will provide education and counseling regarding PrEP and PEP to all HIV-negative clients, including working to leverage the confirmation of a positive STI or HCV test result as a moment when clients may be more willing to consider PrEP initiation. PrEP is available at all SFAF locations, and SFAF testing clients who are interested in PrEP will be linked to a Benefits Navigator who will assess any potential barriers to PrEP enrollment or adherence and provide referral and linkage support to any services that may be required prior to PrEP enrollment; the navigator will make every effort to complete the enrollment during that visit or will set them up with an enrollment appointment if needed. Navigators will also continually identify and provide additional levels of support for clients who are most likely to miss appointments, providing personal outreach, support, and appointment reminders to help secure retention.
- **Linking newly diagnosed individuals to HIV care:** The MSM HAP will link all newly diagnosed individuals to HIV care, including options to start HIV treatment immediately. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. ***[In-Kind]***
- **Linking previously diagnosed individuals who are out of care to HIV care:** The MSM HAP will link those who are out of care to interim HIV care while a longer-term solution is identified for ongoing HIV treatment and care. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. ***[In-Kind]***
- **Linkage to HCV treatment:** The MSM HAP will link all those living with HCV to in-house treatment and care options. Individuals enrolled in the HCV care program may also access onsite storage for their medications. ***[In-Kind]***
- **Linking Eligible HIV-negative Clients to PEP: SFAF will provide PEP to 20 clients.**

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- STI treatment: All individuals accessing MSM HAP testing service will be eligible for on-site STI diagnosis and treatment. Individuals who test positive for an STI and were not presumptively treated at the initial appointment will be contacted by a nurse and scheduled for a treatment visit.
- Providing support to those living with HIV: **Shanti will engage 13 unduplicated clients in 230 hours of individual health sessions designed to support those living with HIV with a range of supports, including referrals to basic needs, legal issues, mental health services, support groups, community engagement opportunities, and housing resources.** Sessions will also provide assistance with public benefits acquisition.
- Creating community connection through Groups: **Shanti will engage 25 unduplicated clients in ongoing groups for people impacted by HIV.** Groups are typically 1.5 hours in duration and take place twice per week (1.5-hour meeting x 2/week x 22 weeks = 66 UOS). **San Francisco Community Health Center will conduct 3 groups/month for transmen** (3 hours per group with 6 participants/group)
- Primary care: The MSM HAP will link individuals living with HIV and HCV to a primary care provider. For those who are at-risk of disengaging from care, this may also include “tandem” coordination of medical care between the MSM HAP and a primary care provider. *[In-Kind]*

In Year 2 and beyond:

- Linking HIV-Negative Clients to PrEP: **SFAF will engage 750 individuals in PrEP services. This includes sustaining existing participants as well as enrolling new ones. Glide will navigate 40 clients in needs of HIV and HCV care, as well as STI treatment, PrEP, and PEP, to care through 500 hours of navigation services.** SFAF and Glide will provide education and counseling regarding PrEP and PEP to all HIV-negative clients, including working to leverage the confirmation of a positive STI or HCV test result as a moment when clients may be more willing to consider PrEP initiation. PrEP is available at all SFAF locations, and SFAF testing clients who are interested in PrEP will be linked to a Benefits Navigator who will assess any potential barriers to PrEP enrollment or adherence and provide referral and linkage support to any services that may be required prior to PrEP enrollment; the navigator will make every effort to complete the enrollment during that visit or will set them up with an enrollment appointment if needed. Navigators will also continually identify and provide additional levels of support for clients who are most likely to miss appointments, providing personal outreach, support, and appointment reminders to help secure retention.
- Linking newly diagnosed individuals to HIV care: The MSM HAP will link all newly diagnosed individuals to HIV care, including options to start HIV treatment immediately. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. *[In-Kind]*
- Linking previously diagnosed individuals who are out of care to HIV care: The MSM HAP will link those who are out of care to interim HIV care while a longer-term solution is identified for ongoing HIV treatment and care. This includes working with a benefits navigator to acquire necessary public benefits, including insurance enrollment. *[In-Kind]*

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- Linkage to HCV treatment: The MSM HAP will link all those living with HCV to in-house treatment and care options. Individuals enrolled in the HCV care program may also access onsite storage for their medications. [In-Kind]
 - Linking Eligible HIV-negative Clients to PEP: **SFAF will provide PEP to 40 clients.**
 - STI treatment: All individuals accessing MSM HAP testing service will be eligible for on-site STI diagnosis and treatment. Individuals who test positive for an STI and were not presumptively treated at the initial appointment will be contacted by a nurse and scheduled for a treatment visit.
 - Providing support to those living with HIV: **Shanti will engage 25 unduplicated clients in 460 hours of individual health sessions designed to support those living with HIV with a range of supports, including referrals to basic needs, legal issues, mental health services, support groups, community engagement opportunities, and housing resources.** Sessions will also provide assistance with public benefits acquisition.
 - Creating community connection through Groups: **Shanti will engage 50 unduplicated clients in ongoing groups for people impacted by HIV.** Groups are typically 1.5 hours in duration and take place twice per week (1.5 hour meeting x 2/week x 44 weeks = 132 UOS). **San Francisco Community Health Center will conduct 3 groups/month for transmen** (3 hours per group with 6 participants/group)
 - Primary care: The MSM HAP will link individuals living with HIV and HCV to a primary care provider. For those who are at-risk of disengaging from care, this may also include “tandem” coordination of medical care between the MSM HAP and a primary care provider. **[In-Kind]**
- C. Harm reduction services for substance use (including for opioids, stimulants, alcohol, tobacco, cannabis)

The MSM HAP will refer individuals to its in-network harm reduction services for substance use. This includes referring individuals to SFAF’s drop-in counseling services, drop-in groups, outpatient treatment, and contingency management services (The Stonewall Project); SFAF’s harm reduction services at the Harm Reduction Center or mobile sites (Syringe Access Services); or linking individuals to Glide’s harm reduction programming.

Annually, more than 500 MSM, including people who inject drugs (PWID), will receive treatment, support, and referrals for substance use and mental health services through the Stonewall Project across all SFAF sites.

These services are currently supported through other DPH contracts and additional funding streams. Staffing includes health educators, licensed counselors, and program managers and coordinators. **[In-Kind]**

D. Syringe access and disposal

SFAF and Glide will utilize existing funding to distribute and dispose of syringes for the MSM HAP.

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SFAF's Harm Reduction Center, 5 weekly mobile syringe access sites, and outreach serve approximately 18,000 unduplicated People who Use Drug (PWUD) annually, including members of the MSM HAP. Staffing includes health educators, program managers and coordinators. *[In-Kind]*

E. Overdose prevention (including naloxone distribution)

SFAF provides overdose education and distributes naloxone through a separate and distinct CHEP contract. Clients accessing MSM HAP services will have access to robust overdose prevention education and naloxone. In FY22, SFAF trained 10,932 individuals to reverse overdoses. These individuals reported reversing 5,847 overdoses. *[In-Kind]*

F. Condom distribution

SFAF distributes safer sex supplies across all of its sites and locations. **SFAF will distribute safer sex supplies each month (1 UOS = 1 month of condom distribution).**

G. Community engagement and mobilization (physical and online, social media)

To best serve the wide range of MSM individuals and their sexual networks, San Francisco Community Health Center will engage trans and nonbinary communities who have sex with men (e.g., TMSM or non-binary individuals who have sex with nonbinary individuals assigned male at birth) through community engagement and mobilization efforts.

In Year 1 (January 1, 2023-June 30, 2023), the MSM HAP proposes:

This includes conducting quarterly MSM HAP events and weekly groups. **SFCHC proposes hosting 2 events (each 4 hours long) for 15 clients (8 UOS and 30 NOC). Additionally, SFCHC will host 3 groups/month (3 groups/month x 3 hours/group x 6 months = 54 UOS and 3 groups/month x 6 months x 6 participants/group = 108 NOC).**

In Year 2 (July 1, 2023-June 30, 2024) and beyond, the MSM HAP proposes:

This includes conducting quarterly MSM HAP events and weekly groups. **SFCHC proposes hosting 4 events (each 4 hours long) for 15 clients (16 UOS and 60 NOC). Additionally, SFCHC will host 3 groups/month (3 groups/month x 3 hours/group x 12 months = 108 UOS and 3 groups/month x 12 months x 6 participants/group = 216 NOC).**

Through funding from other revenue streams, SFAF will complete over 1,500 actions at the local, state, or federal levels, giving over 200 clients and community members a direct participating voice in the fight for health justice. Additionally, more than 3.6 million people will access health education information on HIV, HCV, other STIs and harm reduction on the SFAF.org, tweaker.org and bhocpartners.org websites and through media partnerships annually. *[In-kind]*

H. HIV, HCV, STD health education and prevention counseling*

Comprehensive risk-reduction and supportive counseling will be provided to all new clients and those who request it, regardless of test results, with discussion and offer of PrEP to those who might benefit, with an emphasis on HIV-negative clients who test positive for syphilis or a rectal STI.

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SFAF uses an Express model for persons who have already participated in an initial, comprehensive testing visit which will be used by roughly 25% of SFAF testing clients. During their first Magnet testing visit, all clients are required to participate in direct, one-on-one counseling as part of their testing experience. Clients who do not face specific barriers to testing participation are then given the option of accessing Express services at their next appointment as a strategy for encouraging them to test more frequently by reducing the appointment length, wait time, and redundant information. This approach is also extremely effective for persons on PrEP, who can utilize Express testing for two of the four annual required visits. The Express model allows clients to register at a kiosk, get their blood drawn, self-collect oral and rectal samples (with clear instructions shared through a sex-positive video shown in the bathroom), and be on their way. Health education is conducted by lab technicians, nurses, and nurse practitioners. *[In-kind]*

I. Services to meet basic needs services (examples: food, housing, and employment)*

Through funding from other revenue streams, SFAF provides basic needs services to MSM HAP clients experiencing food insecurity, housing instability, and transportation barriers. This includes provision of healthy snacks, hygiene supplies (socks and underwear), and transportation assistance to medical appointments through our partnership with UberHealth.

Upon registration, MSM HAP client will be asked about their interest in case management services and internally referred to eligible programs. Clients identifying needs are referred to either Benefits Navigators, health educators, services navigators, or case managers internally for individual support. These roles provide internal and external referrals to food programs and pantries, housing and shelter programs, as well as support with public benefits acquisition. Many of SFAF's social support programs offer meals and basic needs as well. Efforts are tracked and documented in eClinicalWorks.

SFAF also provides employment opportunities through the Clinical Assistant program as well as incentivized client leadership opportunities. *[In-kind]*

J. Prevention and treatment medication: PrEP and ART for HIV; HCV treatment; STD treatment, including medication storage

SFAF provides access to PrEP and ART; HCV treatment; STI treatment; and medication storage options.

MSM HAP benefits navigation staffing will provide linkage to same-day PREP and connect individuals newly diagnosed with HIV to same-day ART. Benefits navigators also engage individuals living with HIV but who are out of care into services, including Interim ART. Clinicians conduct PrEP assessments, provide STI treatments, and administer rapid and interim ART for individuals living with HIV, and support clients through HCV treatment. Services provided by nurses and nurse practitioners in consultation with SFAF's medical director.

K. Mental health services

SFAF provides referrals to clients seeking mental health services to SFCHC as well as a network of mental health providers like AHP. Referrals are tracked in eClinicalWorks. For those enrolled in case management and benefits navigation services, successful referrals are tracked. The MSM HAP will establish a system to track its MSM HAP referrals across organizations. *[In-kind]*

L. Primary care

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SFAF will continue to refer clients seeking primary care services to appropriate medical homes. SFCHC, an FQHC, also provides primary care to MSM HAP individuals. *[In-kind]*

M. Substance use treatment

Through efforts funded through other complementary revenue streams, at least 900 Gay / MSM, including people who inject drugs (PWID), will receive treatment, support, and referrals for substance use and mental health services through the Stonewall Project across all SFAF sites. *[In-kind]*

6. OBJECTIVES and MEASUREMENTS:

All objectives and descriptions of how objectives will be measured are contained in the CHEP document entitled “CHEP Performance Objectives FY22-23.”

7. SUBCONTRACTORS & CONSULTANTS:

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

8. CONTINUOUS QUALITY IMPROVEMENT:

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Each program at SFAF reviews data at least every six months and based on the available data refines practices and develops a set of action items to improve program quality. Reviewing both process and outcome data leads on-the-ground changes to ensure that the deliverables are being met and that the most successful strategies are enhanced.

SFAF adheres to the following:

- Current HIV Prevention Section, HIV Testing Policies and Procedures which include CDC and State Guidelines,
- Any relevant guidelines in the San Francisco HIV Prevention Plan,
- All guidelines developed by the HIV Prevention Section required to implement services to meet the objectives in San Francisco's new System of Prevention.

SFAF complies with all Health Commission, Local, State, Federal, and/or Funding Source policies and requirements, including those pertaining to Harm Reduction, the Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction.

- SFAF collects, tracks, and reports by request on demographics on all participants.
- SFAF has developed a retention protocol with DPH for clients who initiate PrEP that includes at minimum follow-up contact and adherence activities.
- SFAF has developed a system to report on the following:
 - PrEP initiations and time from decision to PrEP initiation,
 - Participants who initiate, stop and if applicable, re-initiate PrEP and their reasons,
 - Barriers for clients to access PrEP, and,
 - Barriers to maintaining the PrEP regimen.
- SFAF assesses, analyzes, and addresses HIV-related stigma in the prioritized population. Such processes include but not be limited to:
 - Client satisfaction,
 - Regular client input into programming, and,
 - Maintaining staff reflective of the prioritized population.

9. DATA COLLECTION AND REPORTING REQUIREMENTS:

SFAF complies with all CHEP requirements regarding data collection and submission, and program required elements which will include working with CHEP to measure and report on program-specific objectives and collecting/reporting basic demographic, behavioral risk, and other essential information.

Systems/processes used to collect and submit data will include:

- Evaluation Web
- CHEP Internal Data Manager (Quarterly Submission/Upload)
- Quarterly narrative report
- Other systems/processes as requested

Assigned CHEP Program Liaison will provide technical assistance & training on all above data collection systems.

10. REQUIRED LANGUAGE:

11. REQUIRED TRAINING

- a. HIV, HCV, and STD Skills Certification

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- b. Harm Reduction
- c. Overdose Response/Naloxone Administration (DOPE Project or internal)
 - i. How to use Fentanyl Test Strips
- d. Syringe Access and Disposal (TBD)
- e. Trauma Informed Systems
- f. Clear Impact Score Card
- g. Other skills building trainings as required

12. ADDITIONAL CONTRACT REQUIREMENTS

- a. Required Participation in Network Referral 30-Minute Huddles (assigned agency staff).
- b. Required participation in HAP Network Monthly Meetings (TBD by SOC).
- c. Implementation of Harm Reduction/Substance use policy
- d. Required to follow all SFDPH and CHEP SOC HIV/STI Testing policies and standard of care procedures.

Appendix B Calculation of Charges

1. Method of Payment

A. Contractor shall submit monthly invoices in the format attached in Appendix F, by the fifteenth (15th) working day of each month for reimbursement of the actual costs for Services of the immediately preceding month. All costs associated with the Services shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after Services have been rendered and in no case in advance of such Services.

2. Program Budgets and Final Invoice

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

Appendix B	Budget Summary
Appendix B-1, B-1.1, B-1a, B-1b, B-1c	Training Academy & Clinical Assistance Program
Appendix B-2, B-2a, B-1b, B-1c	Clinical Services Sustainability
Appendix B-3, B-3a, B-3b, B-1c	Capacity Building Activities: The Black Health Clinical Assistant Program
Appendix B-4, B-4a, B-4b, B-4c	HAP Capacity Building Activities Program
Appendix B-5, B-5a, B-5b, B-5c	Health Access Point Gay/MSM

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, **\$1,273,564** is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement as specified in Section 3.7 Contract Amendments; Budgeting Revisions. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

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

	Term	Funding Source	Amount
Original Agreement	01/01/2023 – 06/30/2023	GF	\$225,000
Original Agreement	01/01/2023 – 06/30/2023	GF	\$315,433
Original Agreement	01/01/2023 – 06/30/2023	GF	\$200,000
Original Agreement	01/01/2023 – 06/30/2023	GF	\$175,000
Original Agreement	01/01/2023 – 06/30/2023	GF	\$600,000
Original Agreement	01/01/2023 – 07/31/2023	CDC	\$5,000
Original Agreement	07/01/2023 – 06/30/2024	GF	\$450,000
Original Agreement	07/01/2023 – 06/30/2024	GF	\$630,866
Original Agreement	07/01/2023 – 06/30/2024	GF	\$400,000
Original Agreement	07/01/2023 – 06/30/2024	GF	\$350,000
Original Agreement	07/01/2023 – 06/30/2024	GF	\$1,200,000
Original Agreement	07/01/2024 – 06/30/2025	GF	\$450,000

Original Agreement	07/01/2024 – 06/30/2025	GF	\$630,866
Original Agreement	07/01/2024 – 06/30/2025	GF	\$400,000
Original Agreement	07/01/2024 – 06/30/2025	GF	\$350,000
Original Agreement	07/01/2024 – 06/30/2025	GF	\$1,200,000
Original Agreement	07/01/2025 – 06/30/2026	GF	\$450,000
Original Agreement	07/01/2025 – 06/30/2026	GF	\$630,866
Original Agreement	07/01/2025 – 06/30/2026	GF	\$400,000
Original Agreement	07/01/2025 – 06/30/2026	GF	\$350,000
Original Agreement	07/01/2025 – 06/30/2026	GF	<u>\$1,200,000</u>
Total Award:			\$10,613,031
Contingency:			<u>\$1,273,564</u>
(This equals the total NTE)Total			\$11,886,595

C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.

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

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

DPH 1: Department of Public Health Contract Budget Summary by Program

MOU OR CONTRACT NUMBER							Appendix B, Page3
DPH Section: Community Health Equity and Promotion (CHEP)							Contract Term : 1/1/2023 - 6/30/2026
Check one: <input checked="" type="checkbox"/> Original Agreement <input type="checkbox"/> Amendment <input type="checkbox"/> Revision to Program Budgets							
CONTRACT NOTIFICATION DATE							
Agency Name: San Francisco AIDS Foundation							
Program/Provider Name:	Training Academy & Clinical Assistance Program	Clinical Services Sustainability	Capacity Building Activities (Rafiki): The Black Health Clinical Assistant Program	HAP Capacity Building Activities Program	Health Access Point: Gay/MSM	Health Access Point: Gay/MSM	TOTALS
Appendix Number:	A-1 / B-1	A-2 / B-2	A-3 / B-3	A-4 / B-4	A-5 / B-5	A-5 / B-51.1	
Appendix Term:	1/1/2023 - 6/30/2023	1/1/2023 - 6/30/2023	1/1/2023 - 6/30/2023	1/1/2023 - 6/30/2023	1/1/2023 - 6/30/2023	01/01/23-07/31/23	
EXPENSES							
Salaries	\$ 143,480	\$ 196,593	\$ 142,537	\$ 37,500	\$ 329,449	\$ -	\$ 849,559
Employee Benefits	\$ 29,236	\$ 53,080	\$ 15,675	\$ 10,125	\$ 88,951	\$ -	\$ 197,067
Total Personnel Expenses	\$ 172,716	\$ 249,673	\$ 158,212	\$ 47,625	\$ 418,400	\$ -	\$ 1,046,626
Employee Fringe Benefit Rate	20.4%	27.0%	11.0%	27.0%	27.0%	0.0%	
Operating Expense	\$ 22,936	\$ 24,617	\$ 15,701	\$ 104,549	\$ 103,339	\$ 4,348	\$ 275,490
Subtotal Direct Costs	\$ 195,652	\$ 274,290	\$ 173,913	\$ 152,174	\$ 521,739	\$ 4,348	\$ 1,322,116
Indirect Cost Amount	\$ 29,348	\$ 41,143	\$ 26,087	\$ 22,826	\$ 78,261	\$ 652	\$ 198,317
Indirect Cost Rate (%)	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	
Total Expenses	\$ 225,000	\$ 315,433	\$ 200,000	\$ 175,000	\$ 600,000	\$ 5,000	\$ 1,520,433
REVENUES & FUNDING SOURCES							
DPH Funding Sources							
HHS RWPA EtHE							\$ -
CHEP EHE							\$ -
HHS General Fund							\$ -
CHEP General Fund	\$ 225,000	\$ 315,433	\$ 200,000	\$ 175,000	\$ 600,000		\$ 1,515,433
PS20-2010 CDC: CFDA 93.940						\$ 5,000	\$ 5,000
Total DPH Revenues	\$ 225,000	\$ 315,433	\$ 200,000	\$ 175,000	\$ 600,000	\$ 5,000	\$ 1,520,433
Total Non-DPH Revenues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Revenues (DPH and Non-DPH)	\$ 225,000	\$ 315,433	\$ 200,000	\$ 175,000	\$ 600,000	\$ 5,000	\$ 1,520,433
Cost Reimbursement (CR)	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)	
Prepared By							

DPH 1: Department of Public Health Contract Budget Summary by Program

MOU OR CONTRACT NUMBER						Appendix B, Page 4	
DPH Section: Community Health Equity and Promotion (CHEP)						Contract Term : 7/1/2023 - 6/30/2026	
Check one: <input checked="" type="checkbox"/> Original Agreement <input type="checkbox"/> Amendment <input type="checkbox"/> Revision to Program Budgets							
CONTRACT NOTIFICATION DATE							
Agency Name: San Francisco AIDS Foundation							
Program/Provider Name:	Training Academy & Clinical Assistance Program	Clinical Services Sustainability	Capacity Building Activities (Rafiki): The Black Health Clinical Assistant Program	HAP Capacity Building Activities Program	Health Access Point: Gay/MSM	TOTALS	
Appendix Number:	A-1 / B-1a	A-2 / B-2a	A-3 / B-3a	A-4 / B-4a	A-5 / B-5b		
Appendix Term:	7/1/2023 - 6/30/2024	7/1/2023 - 6/30/2024	7/1/2023 - 6/30/2024	7/1/2023 - 6/30/2024	7/1/2023 - 6/30/2024		
EXPENSES							
Salaries	\$ 286,960	\$ 393,188	\$ 285,073	\$ 75,000	\$ 658,898	\$ 1,699,119	
Employee Benefits	\$ 58,471	\$ 106,161	\$ 31,351	\$ 20,250	\$ 177,902	\$ 394,135	
Total Personnel Expenses	\$ 345,431	\$ 499,349	\$ 316,424	\$ 95,250	\$ 836,800	\$ 2,093,254	
Employee Fringe Benefit Rate	20.4%	27.0%	11.0%	27.0%	27.0%		
Operating Expense	\$ 45,873	\$ 49,231	\$ 31,402	\$ 209,098	\$ 206,678	\$ 542,282	
Subtotal Direct Costs	\$ 391,304	\$ 548,580	\$ 347,826	\$ 304,348	\$ 1,043,478	\$ 2,635,536	
Indirect Cost Amount	\$ 58,696	\$ 82,286	\$ 52,174	\$ 45,652	\$ 156,522	\$ 395,330	
Indirect Cost Rate (%)	15.0%	15.0%	15.0%	15.0%	15.0%		
Total Expenses	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
REVENUES & FUNDING SOURCES							
DPH Funding Sources							
HHS RWPA EtHE						\$ -	
CHEP EHE						\$ -	
HHS General Fund						\$ -	
CHEP General Fund	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
PS20-2010 CDC: CFDA 93.940						\$ -	
Total DPH Revenues	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
Total Non-DPH Revenues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Total Revenues (DPH and Non-DPH)	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
Cost Reimbursement (CR)	(CR)	(CR)	(CR)	(CR)	(CR)		
Prepared By							

DPH 1: Department of Public Health Contract Budget Summary by Program

MOU OR CONTRACT NUMBER						Appendix B, Page 5	
DPH Section: Community Health Equity and Promotion (CHEP)						Contract Term : 7/1/2024 - 6/30/2025	
Check one: <input checked="" type="checkbox"/> Original Agreement <input type="checkbox"/> Amendment <input type="checkbox"/> Revision to Program Budgets							
CONTRACT NOTIFICATION DATE							
Agency Name: San Francisco AIDS Foundation							
Program/Provider Name:	Training Academy & Clinical Assistance Program	Clinical Services Sustainability	Capacity Building Activities (Rafiki): The Black Health Clinical Assistant Program	HAP Capacity Building Activities Program	Health Access Point: Gay/MSM	TOTALS	
Appendix Number:	A-1 / B-1b	A-2 / B-2b	A-3 / B-3b	A-4 / B-4b	A-5 / B-5c		
Appendix Term:	7/1/2024 - 6/30/2025	7/1/2024 - 6/30/2025	7/1/2024 - 6/30/2025	7/1/2024 - 6/30/2025	7/1/2024 - 6/30/2025		
EXPENSES							
Salaries	\$ 286,960	\$ 393,188	\$ 285,073	\$ 75,000	\$ 658,898	\$ 1,699,119	
Employee Benefits	\$ 58,471	\$ 106,161	\$ 31,351	\$ 20,250	\$ 177,902	\$ 394,135	
Total Personnel Expenses	\$ 345,431	\$ 499,349	\$ 316,424	\$ 95,250	\$ 836,800	\$ 2,093,254	
Employee Fringe Benefit Rate	20.4%	27.0%	11.0%	27.0%	27.0%		
Operating Expense	\$ 45,873	\$ 49,231	\$ 31,402	\$ 209,098	\$ 206,678	\$ 542,282	
Subtotal Direct Costs	\$ 391,304	\$ 548,580	\$ 347,826	\$ 304,348	\$ 1,043,478	\$ 2,635,536	
Indirect Cost Amount	\$ 58,696	\$ 82,286	\$ 52,174	\$ 45,652	\$ 156,522	\$ 395,330	
Indirect Cost Rate (%)	15.0%	15.0%	15.0%	15.0%	15.0%		
Total Expenses	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
REVENUES & FUNDING SOURCES							
DPH Funding Sources							
HHS RWPA EtHE						\$ -	
CHEP EHE						\$ -	
HHS General Fund						\$ -	
CHEP General Fund	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
PS20-2010 CDC: CFDA 93.940						\$ -	
Total DPH Revenues	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
Total Non-DPH Revenues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Total Revenues (DPH and Non-DPH)	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	
Cost Reimbursement (CR)	(CR)	(CR)	(CR)	(CR)	(CR)		
Prepared By							

DPH 1: Department of Public Health Contract Budget Summary by Program

MOU OR CONTRACT NUMBER						Appendix B, Page 6	
DPH Section: Community Health Equity and Promotion (CHEP)						Contract Term : 7/1/2025 - 6/30/2026	
Check one: <input checked="" type="checkbox"/> Original Agreement <input type="checkbox"/> Amendment <input type="checkbox"/> Revision to Program Budgets							
CONTRACT NOTIFICATION DATE							
Agency Name: San Francisco AIDS Foundation							
Program/Provider Name:	Training Academy & Clinical Assistance Program	Clinical Services Sustainability	Capacity Building Activities (Rafiki): The Black Health Clinical Assistant Program	HAP Capacity Building Activities Program	Health Access Point: Gay/MSM	TOTALS	GRAND TOTAL
Appendix Number:	A-1 / B-1c	A-2 / B-2c	A-3 / B-3c	A-4 / B-4c	A-5 / B-5d		
Appendix Term:	7/1/2025 - 6/30/2026	7/1/2025 - 6/30/2026	7/1/2025 - 6/30/2026	7/1/2025 - 6/30/2026	7/1/2025 - 6/30/2026		
EXPENSES							
Salaries	\$ 286,960	\$ 393,188	\$ 285,073	\$ 75,000	\$ 658,898	\$ 1,699,119	\$ 5,946,916
Employee Benefits	\$ 58,471	\$ 106,161	\$ 31,351	\$ 20,250	\$ 177,902	\$ 394,135	\$ 1,379,472
Total Personnel Expenses	\$ 345,431	\$ 499,349	\$ 316,424	\$ 95,250	\$ 836,800	\$ 2,093,254	\$ 7,326,388
Employee Fringe Benefit Rate	20.4%	27.0%	11.0%	27.0%	27.0%		
Operating Expense	\$ 45,873	\$ 49,231	\$ 31,402	\$ 209,098	\$ 206,678	\$ 542,282	\$ 1,902,336
Subtotal Direct Costs	\$ 391,304	\$ 548,580	\$ 347,826	\$ 304,348	\$ 1,043,478	\$ 2,635,536	\$ 9,228,724
Indirect Cost Amount	\$ 58,696	\$ 82,286	\$ 52,174	\$ 45,652	\$ 156,522	\$ 395,330	\$ 1,384,307
Indirect Cost Rate (%)	15.0%	15.0%	15.0%	15.0%	15.0%		
Total Expenses	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	\$ 10,613,031
REVENUES & FUNDING SOURCES							
DPH Funding Sources							
HHS RWPA EHE						\$ -	\$ -
CHEP EHE						\$ -	\$ -
HHS General Fund						\$ -	\$ -
CHEP General Fund	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	\$ 10,608,031
PS20-2010 CDC: CFDA 93.940						\$ -	\$ -
Total DPH Revenues	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	\$ 10,613,031
Total Non-DPH Revenues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total Revenues (DPH and Non-DPH)	\$ 450,000	\$ 630,866	\$ 400,000	\$ 350,000	\$ 1,200,000	\$ 3,030,866	\$ 10,613,031
Cost Reimbursement (CR)	(CR)	(CR)	(CR)	(CR)	(CR)		
Prepared By							

Appendix B-1, Page 1

1/1/2023 - 6/30/2023

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		CAPACITY BUILDING Start-up Activities		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Totals
Director, Learning and Development	0.238	13,515	50%	13,515	50%	27,030
Manager, Learning and Development	0.50	21,875	50%	21,875	50%	43,750
Clinical Assistance Program Coordinato	0.50	18,750	50%	18,750	50%	37,500
Cohort Participants - Part Time, Benefits	0.76923	17,600	50%	17,600	50%	35,200
Total FTE & Salaries	2.00673	71,740	50%	71,740	50%	143,480
Fringe Benefits	27%	14,618	50%	14,618	50%	29,236
Total Personnel Expenses		86,358	50%	86,358	50%	172,716
Operating Expenses		Expense	%	Expense	%	Totals
Total Occupancy		8,769	50%	8,769	50%	17,538
Total Materials and Supplies		1,540	50%	1,539	50%	3,079
Total General Operating		1,160	50%	1,159	50%	2,319
Total Staff Travel			0%		0%	-
Consultants/Subcontractor:			0%		0%	-
Other (specify):						
			0%		0%	-
			0%		0%	-
Total Operating Expenses		11,469	50%	11,467	50%	22,936
Total Direct Expenses		97,827	50%	97,825	50%	195,652
Indirect Expenses	15.0%	14,674	50%	14,674	50%	29,348
TOTAL EXPENSES		112,501	50%	112,499	50%	225,000
Unit of Service Type	Months		Hours			
Number of UOS per Service Mode	6		770		776	
Cost Per UOS by Service Mode	\$18,750.18		\$146.11		N/A	
Number of UDC/NOC per Service Mode	N/A		35		35	

BUDGET JUSTIFICATION**1a) SALARIES****1/1/2023 - 6/30/2023**

Staff Position 1	Director, Learning and Development				
Duties related to this program and UDC served	The Project Manager will lead subcontractor and vendor coordination, convene and facilitate all collaborators, assist with data collection, data analysis, interpretation and key takeaways to assist in writing of final report.				
Degree, license, experience	Ability to design and implement multi-layered program initiatives with complex goals and deliverables. Requires a high school diploma.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,810	0.475	6	0.238	\$ 27,030
Staff Position 2:	Manager, Learning and Development				
Duties re program and UDC served	Roles include liasoning, event hosts, providing backend support to training participants.				
Degree, license exp	BA degree and at least 1 year experience of Training experience.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	87,500	1.00	6	0.50	\$ 43,750
Staff Position 3:	Clinical Assistance Program Coordinator				
Duties re prog/UDC	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of five Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license exp	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity i.e., a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	6	0.50	\$ 37,500
Staff Position 4:	Cohort Participants - Part Time, Benefits Ineligible				
Duties related to this program and UDC served	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 5 participants at \$22 per hour, for 20 hours per week, for 16 weeks.				
Degree, license exp	High School Diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	1.53846	6	0.76923	\$ 35,200
	Total FTE, Base:	4.01346	Annualized:	2.00673	
				Total Salaries:	\$ 143,480

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.			
	FICA	\$	8,283.42
	SUI	\$	563.06
	Health/Life	\$	16,242.00
	Disability	\$	86.62
	WC	\$	649.68
	Retirement Plan	\$	3,410.82
		\$	-
		\$	-
		Total Fringe Benefit:	\$ 29,236
		Fringe Benefit %:	27.00%
		TOTAL SALARIES/BENEFITS:	\$ 172,716

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 17,538
Total Occupancy:			\$ 17,538

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 609
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$494 per participant, for 5 participants.	\$494	\$ 2,470
Total Materials & Supplies:			\$ 3,079

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 2,319
Total General Operating:			\$ 2,319

				TOTAL OPERATING EXPENSES:	\$	22,936
				TOTAL DIRECT COSTS:	\$	195,652
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount		
TOTAL SALARIES/BENEFITS:					\$	172,716
TOTAL OPERATING EXPENSES:					\$	22,936
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$	29,348
				TOTAL EXPENSES:	\$	225,000

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7/1/2023 - 6/30/2024

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Director, Learning and Development	0.475	54,060	100%	54,060
Manager, Learning and Development	1.00	87,500	100%	87,500
Clinical Assistance Program Coordinato	1.00	75,000	100%	75,000
Cohort Participants - Part Time, Benefits	1.53846	70,400	100%	70,400
Total FTE & Salaries	4.01346	286,960	100%	286,960
Fringe Benefits	27%	58,471	100%	58,471
Total Personnel Expenses		345,431	100%	345,431
Operating Expenses		Expense	%	Totals
Total Occupancy		35,077	100%	35,077
Total Materials and Supplies		6,158	100%	6,158
Total General Operating		4,638	100%	4,638
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		45,873	100%	45,873
Total Direct Expenses		391,304	100%	391,304
Indirect Expenses 15.0%		58,696	100%	58,696
TOTAL EXPENSES		450,000	100%	450,000
Unit of Service Type		Hours		
Number of UOS per Service Mode		1,995		1,995
Cost Per UOS by Service Mode		\$225.57		N/A
Number of UDC/NOC per Service Mode		85		85

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2023 - 6/30/2024**

Staff Position 1	Director, Learning and Development				
Duties related to this program and UDC served	The Project Manager will lead subcontractor and vendor coordination, convene and facilitate all collaborators, assist with data collection, data analysis, interpretation and key takeaways to assist in writing of final report.				
Degree, license, experience	Ability to design and implement multi-layered program initiatives with complex goals and deliverables. Requires a high school diploma.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,810	0.475	12	0.475	\$ 54,060
Staff Position 2:	Manager, Learning and Development				
Duties re program and UDC served	Roles include liasoning, event hosts, providing backend support to training participants.				
Degree, license exp	BA degree and at least 1 year experience of Training experience.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	87,500	1.00	12	1.00	\$ 87,500
Staff Position 3:	Clinical Assistance Program Coordinator				
Duties re prog/UDC	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of five Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license exp	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity i.e., a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
Staff Position 4:	Cohort Participants - Part Time, Benefits Ineligible				
Duties related to this program and UDC served	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 5 participants at \$22 per hour, for 20 hours per week, for 16 weeks.				
Degree, license exp	High School Diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	1.53846	12	1.53846	\$ 70,400
Total FTE, Base:		4.01346	Annualized:	4.01346	
				Total Salaries:	\$ 286,960

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO			
	FICA	\$	16,566.84
	SUI	\$	1,126.11
	Health/Life	\$	32,484.00
	Disability	\$	173.25
	WC	\$	1,299.36
	Retirement Plan	\$	6,821.64
		\$	-
		\$	-
		Total Fringe Benefit:	\$ 58,471
		Fringe Benefit %:	27.00%
		TOTAL SALARIES/BENEFITS:	\$ 345,431

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 35,077
Total Occupancy:			\$ 35,077

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 1,218
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$494 per participant, for 10 participants.	\$494	\$ 4,940
Total Materials & Supplies:			\$ 6,158

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 4,638
Total General Operating:			\$ 4,638

				TOTAL OPERATING EXPENSES:	\$ 45,873
				TOTAL DIRECT COSTS:	\$ 391,304
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount	
TOTAL SALARIES/BENEFITS:				\$	345,431
TOTAL OPERATING EXPENSES:				\$	45,873
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 58,696
				TOTAL EXPENSES:	\$ 450,000

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7/1/2024 - 6/30/2025

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Director, Learning and Development	0.475	54,060	100%	54,060
Manager, Learning and Development	1.00	87,500	100%	87,500
Clinical Assistance Program Coordinator	1.00	75,000	100%	75,000
Cohort Participants - Part Time, Benefits	1.53846	70,400	100%	70,400
Total FTE & Salaries	4.01346	286,960	100%	286,960
Fringe Benefits	27%	58,471	100%	58,471
Total Personnel Expenses		345,431	100%	345,431
Operating Expenses		Expense	%	Totals
Total Occupancy		35,077	100%	35,077
Total Materials and Supplies		6,158	100%	6,158
Total General Operating		4,638	100%	4,638
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		45,873	100%	45,873
Total Direct Expenses		391,304	100%	391,304
Indirect Expenses	15.0%	58,696	100%	58,696
TOTAL EXPENSES		450,000	100%	450,000
Unit of Service Type		Hours		
Number of UOS per Service Mode		1,995		1,995
Cost Per UOS by Service Mode		\$225.57		N/A
Number of UDC/NOC per Service Mode		85		85

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2024 - 6/30/2025**

Staff Position 1	Director, Learning and Development				
Duties related to this program and UDC served	The Project Manager will lead subcontractor and vendor coordination, convene and facilitate all collaborators, assist with data collection, data analysis, interpretation and key takeaways to assist in writing of final report.				
Degree, license, experience	Ability to design and implement multi-layered program initiatives with complex goals and deliverables. Requires a high school diploma.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,810	0.475	12	0.475	\$ 54,060
Staff Position 2:	Manager, Learning and Development				
Duties re program and UDC served	Roles include liasoning, event hosts, providing backend support to training participants.				
Degree, license exp	BA degree and at least 1 year experience of Training experience.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	87,500	1.00	12	1.00	\$ 87,500
Staff Position 3:	Clinical Assistance Program Coordinator				
Duties re prog/UDC	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of five Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license exp	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity i.e., a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
Staff Position 4:	Cohort Participants - Part Time, Benefits Ineligible				
Duties related to this program and UDC served	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 5 participants at \$22 per hour, for 20 hours per week, for 16 weeks.				
Degree, license exp	High School Diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	1.53846	12	1.53846	\$ 70,400
Total FTE, Base:		4.01346	Annualized:	4.01346	
				Total Salaries:	\$ 286,960

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO			
	FICA	\$	16,566.84
	SUI	\$	1,126.11
	Health/Life	\$	32,484.00
	Disability	\$	173.25
	WC	\$	1,299.36
	Retirement Plan	\$	6,821.64
		\$	-
		\$	-
		Total Fringe Benefit:	\$ 58,471
		Fringe Benefit %:	27.00%
		TOTAL SALARIES/BENEFITS:	\$ 345,431

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 35,077
Total Occupancy:			\$ 35,077

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Sh	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 1,218
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$494 per participant, for 10 participants.	\$494	\$ 4,940
Total Materials & Supplies:			\$ 6,158

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 4,638
Total General Operating:			\$ 4,638

				TOTAL OPERATING EXPENSES:	\$ 45,873
				TOTAL DIRECT COSTS:	\$ 391,304
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount	
TOTAL SALARIES/BENEFITS:				\$	345,431
TOTAL OPERATING EXPENSES:				\$	45,873
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 58,696
				TOTAL EXPENSES:	\$ 450,000

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Director, Learning and Development	0.475	54,060	100%	54,060
Manager, Learning and Development	1.00	87,500	100%	87,500
Clinical Assistance Program Coordinator	1.00	75,000	100%	75,000
Cohort Participants - Part Time, Benefits	1.53846	70,400	100%	70,400
Total FTE & Salaries	4.01346	286,960	100%	286,960
Fringe Benefits	27%	58,471	100%	58,471
Total Personnel Expenses		345,431	100%	345,431
Operating Expenses		Expense	%	Totals
Total Occupancy		35,077	100%	35,077
Total Materials and Supplies		6,158	100%	6,158
Total General Operating		4,638	100%	4,638
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		45,873	100%	45,873
Total Direct Expenses		391,304	100%	391,304
Indirect Expenses	15.0%	58,696	100%	58,696
TOTAL EXPENSES		450,000	100%	450,000
Unit of Service Type	Hours			
Number of UOS per Service Mode	1,995		1,995	
Cost Per UOS by Service Mode	\$225.57		N/A	
Number of UDC/NOC per Service Mode	85		85	

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2025 - 6/30/2026**

Staff Position 1	Director, Learning and Development				
Duties related to this program and UDC served	The Project Manager will lead subcontractor and vendor coordination, convene and facilitate all collaborators, assist with data collection, data analysis, interpretation and key takeaways to assist in writing of final report.				
Degree, license, experience	Ability to design and implement multi-layered program initiatives with complex goals and deliverables. Requires a high school diploma.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	113,810	0.475	12	0.475	\$ 54,060
Staff Position 2:	Manager, Learning and Development				
Duties re program and UDC served	Roles include liasoning, event hosts, providing backend support to training participants.				
Degree, license exp	BA degree and at least 1 year experience of Training experience.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	87,500	1.00	12	1.00	\$ 87,500
Staff Position 3:	Clinical Assistance Program Coordinator				
Duties re prog/UDC	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of five Clinical Assistants to provide HIV prevention, tratment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license exp	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity i a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
Staff Position 4:	Cohort Participants - Part Time, Benefits Ineligible				
Duties related to this program and UDC served	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 5 participants at \$22 per hour, for 20 hours per week, for 16 weeks.				
Degree, license exp	High School Diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	1.53846	12	1.53846	\$ 70,400
Total FTE, Base:		4.01346	Annualized:	4.01346	
				Total Salaries:	\$ 286,960

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO			
	FICA	\$	16,566.84
	SUI	\$	1,126.11
	Health/Life	\$	32,484.00
	Disability	\$	173.25
	WC	\$	1,299.36
	Retirement Plan	\$	6,821.64
		\$	-
		\$	-
		Total Fringe Benefit:	\$ 58,471
		Fringe Benefit %:	27.00%
		TOTAL SALARIES/BENEFITS:	\$ 345,431

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 35,077
Total Occupancy:			\$ 35,077

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 1,218
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$494 per participant, for 10 participants	\$494	\$ 4,940
Total Materials & Supplies:			\$ 6,158

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 4,638
Total General Operating:			\$ 4,638

				TOTAL OPERATING EXPENSES:	\$ 45,873
				TOTAL DIRECT COSTS:	\$ 391,304
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount	
TOTAL SALARIES/BENEFITS:				\$	345,431
TOTAL OPERATING EXPENSES:				\$	45,873
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 58,696
				TOTAL EXPENSES:	\$ 450,000

INTEGRATED HCV/HIV TESTING PROGRAM

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		LINKAGE AND NAVIGATION		PREVENTION AND TREATMENT MEDICATION		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Registered Nurse	0.40	41,283	95%		0%	2,173	5%	43,456
Nurse Practitioner	0.40	49,471	95%		0%	2,604	5%	52,075
Manager of Registered Nurses	0.40	49,471	95%		0%	2,604	5%	52,075
Manager of Nurse Practitioners	0.175	25,315	95%		0%	1,332	5%	26,647
Director of Clinical Services	0.1134	21,223	95%		0%	1,117	5%	22,340
Total FTE & Salaries	1.4884	186,763	95%	-	0%	9,830	5%	196,593
Fringe Benefits	27%	50,426	95%	-	0%	2,654	5%	53,080
Total Personnel Expenses		237,189	95%	-	0%	12,484	5%	249,673
Operating Expenses		Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		20,040	95%		0%	1,055	5%	21,095
Total Materials and Supplies		695	95%		0%	37	5%	732
Total General Operating		2,650	95%		0%	140	5%	2,790
Total Staff Travel		-	0%		0%	-	0%	-
Consultants/Subcontractor:		-	0%		0%	-	0%	-
Other (specify):								
			0%		0%		0%	-
			0%		0%		0%	-
Total Operating Expenses		23,385	95%	-		1,232	5%	24,617
Total Direct Expenses		260,574	95%	-	0%	13,716	5%	274,290
Indirect Expenses	15.0%	39,085	95%	-	0%	2,057	5%	41,142
TOTAL EXPENSES		299,659	95%	-	0%	15,773	5%	315,432
Unit of Service Type		Encounters		Hours		Encounters		
Number of UOS per Service Mode		8,925		N/A		250		9,175
Cost Per UOS by Service Mode		\$33.58		\$0.00		\$63.10		N/A
Number of UDC/NOC per Service Mode		N/A		290		N/A		290

BUDGET JUSTIFICATION**1a) SALARIES****1/1/2023 - 6/30/2023**

Staff Position 1	Registered Nurse				
Duties related to this program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license, experience	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,641	0.80	6	0.40	\$ 43,456
Staff Position 2:	Nurse Practitioner				
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	6	0.40	\$ 52,075
Staff Position 3:	Manager of Registered Nurses				
Duties re prog/UDC	Provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	6	0.40	\$ 52,075
Staff Position 4:	Manager of Nurse Practitioners				

Duties related to this program and UDC served	The Nurse Practitioner provides advanced sexual health care and takes an active leadership role for the daily clinical operations, under a scope of practice with the Medical Director. The Nurse Practitioner serves as the primary interface with clients seeking screening for sexually health services, Hepatitis C treatment, Pre Exposure Prophylaxis (PrEP) and non-Occupational Post Exposure Prophylaxis (nPEP) services. Provides direct clinical services as defined by clinic protocols and treatment guidelines including but not limited to obtaining medical history and physical, specimen collection, high-volume phlebotomy, administration of treatments, performing point of care lab tests, management of Hepatitis C, PrEP and nPEP care, client counseling, and education. Assists the Director of Nursing in developing, implementing and evaluating best practices, protocols, policies and procedures. Ensures Confidential Morbidity Reports are submitted to the Department of Public Health and addresses any submission issues.				
Degree, license exp	Master's degree in Nursing required. Current California Registered Nurse and Nurse Practitioner license. Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire. Employee must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing. Current DEA and California Furnishing license required. Current Health Care Provider Basic Life Support (BLS) certification required. Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire. Training in Good Clinical Practices, research ethics, and IATA shipping preferred. At least one year experience in outpatient sexual health clinic preferred. At least one year experience in clinical research preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	152,271	0.35	6	0.175	\$ 26,647
Staff Position 5: Director of Clinical Services					
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,000	0.2268	6	0.1134	\$ 22,340
Total FTE, Base:		2.9768	Annualized:	1.4884	
				Total Salaries:	\$ 196,593

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.	
FICA	\$ 15,039.36
SUI	\$ 1,022.28
Health/Life	\$ 29,488.95
Disability	\$ 157.27
WC	\$ 1,179.56
Retirement Plan	\$ 6,192.68
	\$ -

	\$	-
	Total Fringe Benefit:	\$ 53,080
	Fringe Benefit %:	27.00%
	TOTAL SALARIES/BENEFITS:	\$ 249,673

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 21,095
Total Occupancy:			\$ 21,095

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 732
Total Materials & Supplies:			\$ 732

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 2,790
Total General Operating:			\$ 2,790

TOTAL OPERATING EXPENSES:	\$ 24,617
TOTAL DIRECT COSTS:	\$ 274,290

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

				Amount
TOTAL SALARIES/BENEFITS:				\$ 249,673
TOTAL OPERATING EXPENSES:				\$ 24,617
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS: \$ 41,143
			TOTAL EXPENSES:	\$ 315,433

INTEGRATED HCV/HIV TESTING PROGRAM

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		LINKAGE AND NAVIGATION		PREVENTION AND TREATMENT MEDICATION		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Registered Nurse	0.80	82,567	95%		0%	4,346	5%	86,913
Nurse Practitioner	0.80	98,942	95%		0%	5,208	5%	104,150
Manager of Registered Nurses	0.80	98,942	95%		0%	5,208	5%	104,150
Manager of Nurse Practitioners	0.35	50,630	95%		0%	2,665	5%	53,295
The Nurse Practitioner provides advance	0.2268	42,446	95%		0%	2,234	5%	44,680
Total FTE & Salaries	2.9768	373,527	95%	-	0%	19,661	5%	393,188
Fringe Benefits	27%	100,852	95%	-	0%	5,309	5%	106,161
Total Personnel Expenses		474,379	95%	-	0%	24,970	5%	499,349
Operating Expenses		Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		40,078	95%		0%	2,109	5%	42,187
Total Materials and Supplies		1,391	95%		0%	73	5%	1,464
Total General Operating		5,301	95%		0%	279	5%	5,580
Total Staff Travel		-	0%		0%	-	0%	-
Consultants/Subcontractor:		-	0%		0%	-	0%	-
Other (specify):								
			0%		0%		0%	-
			0%		0%		0%	-
Total Operating Expenses		46,770	95%	-		2,461	5%	49,231
Total Direct Expenses		521,149	95%	-	0%	27,431	5%	548,580
Indirect Expenses	15.0%	78,171	95%	-	0%	4,115	5%	82,286
TOTAL EXPENSES		599,320	95%	-	0%	31,546	5%	630,866
Unit of Service Type		Encounters		Hours		Encounters		
Number of UOS per Service Mode		14,825		N/A		500		15,325
Cost Per UOS by Service Mode		\$40.43		\$0.00		\$63.10		N/A
Number of UDC/NOC per Service Mode		N/A		580		N/A		580

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2023 - 6/30/2024**

Staff Position 1	Registered Nurse				
Duties related to this program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license, experience	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,641	0.80	12	0.80	\$ 86,913
Staff Position 2:	Nurse Practitioner				
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	12	0.80	\$ 104,150
Staff Position 3:	Manager of Registered Nurses				
Duties re prog/UDC	Provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	12	0.80	\$ 104,150
Staff Position 4:	Manager of Nurse Practitioners				

Duties related to this program and UDC served	The Nurse Practitioner provides advanced sexual health care and takes an active leadership role for the daily clinical operations, under a scope of practice with the Medical Director. The Nurse Practitioner serves as the primary interface with clients seeking screening for sexually health services, Hepatitis C treatment, Pre Exposure Prophylaxis (PrEP) and non-Occupational Post Exposure Prophylaxis (nPEP) services. Provides direct clinical services as defined by clinic protocols and treatment guidelines including but not limited to obtaining medical history and physical, specimen collection, high-volume phlebotomy, administration of treatments, performing point of care lab tests, management of Hepatitis C, PrEP and nPEP care, client counseling, and education. Assists the Director of Nursing in developing, implementing and evaluating best practices, protocols, policies and procedures. Ensures Confidential Morbidity Reports are submitted to the Department of Public Health and addresses any submission issues.				
Degree, license exp	Master's degree in Nursing required. Current California Registered Nurse and Nurse Practitioner license. Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire. Employee must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing. Current DEA and California Furnishing license required. Current Health Care Provider Basic Life Support (BLS) certification required. Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire. Training in Good Clinical Practices, research ethics, and IATA shipping preferred. At least one year experience in outpatient sexual health clinic preferred. At least one year experience in clinical research preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	152,271	0.35	12	0.35	\$ 53,295
Staff Position 5:	Director of Clinical Services				
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,000	0.2268	12	0.2268	\$ 44,680
Total FTE, Base:		2.9768	Annualized:	2.9768	
				Total Salaries:	\$ 393,188

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.	
FICA	\$ 30,078.88
SUI	\$ 2,044.58
Health/Life	\$ 58,978.20
Disability	\$ 314.55
WC	\$ 2,359.13
Retirement Plan	\$ 12,385.42
	\$ -

	\$	-
	Total Fringe Benefit:	\$ 106,161
	Fringe Benefit %:	27.00%
	TOTAL SALARIES/BENEFITS:	\$ 499,349

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 42,187
Total Occupancy:			\$ 42,187

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 1,464
Total Materials & Supplies:			\$ 1,464

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 5,580
Total General Operating:			\$ 5,580

TOTAL OPERATING EXPENSES:	\$ 49,231
TOTAL DIRECT COSTS:	\$ 548,580

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

				Amount
TOTAL SALARIES/BENEFITS:				\$ 499,349
TOTAL OPERATING EXPENSES:				\$ 49,231
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS: \$ 82,286
			TOTAL EXPENSES:	\$ 630,866

INTEGRATED HCV/HIV TESTING PROGRAM

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		LINKAGE AND NAVIGATION		PREVENTION AND TREATMENT MEDICATION		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Registered Nurse	0.80	82,567	95%		0%	4,346	5%	86,913
Nurse Practitioner	0.80	98,942	95%		0%	5,208	5%	104,150
Manager of Registered Nurses	0.80	98,942	95%		0%	5,208	5%	104,150
Manager of Nurse Practitioners	0.35	50,630	95%		0%	2,665	5%	53,295
The Nurse Practitioner provides advance	0.2268	42,446	95%		0%	2,234	5%	44,680
Total FTE & Salaries	2.9768	373,527	95%	-	0%	19,661	5%	393,188
Fringe Benefits	27%	100,852	95%	-	0%	5,309	5%	106,161
Total Personnel Expenses		474,379	95%	-	0%	24,970	5%	499,349
Operating Expenses		Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		40,078	95%		0%	2,109	5%	42,187
Total Materials and Supplies		1,391	95%		0%	73	5%	1,464
Total General Operating		5,301	95%		0%	279	5%	5,580
Total Staff Travel		-	0%		0%	-	0%	-
Consultants/Subcontractor:		-	0%		0%	-	0%	-
Other (specify):								
			0%		0%		0%	-
			0%		0%		0%	-
Total Operating Expenses		46,770	95%	-		2,461	5%	49,231
Total Direct Expenses		521,149	95%	-	0%	27,431	5%	548,580
Indirect Expenses 15.0%		78,171	95%	-	0%	4,115	5%	82,286
TOTAL EXPENSES		599,320	95%	-	0%	31,546	5%	630,866
Unit of Service Type		Encounters		Hours		Encounters		
Number of UOS per Service Mode		14,825		N/A		500		15,325
Cost Per UOS by Service Mode		\$40.43		\$0.00		\$63.10		N/A
Number of UDC/NOC per Service Mode		N/A		580		N/A		580

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2024 - 6/30/2025**

Staff Position 1	Registered Nurse				
Duties related to this program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license, experience	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,641	0.80	12	0.80	\$ 86,913
Staff Position 2:	Nurse Practitioner				
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	12	0.80	\$ 104,150
Staff Position 3:	Manager of Registered Nurses				
Duties re prog/UDC	Provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	12	0.80	\$ 104,150
Staff Position 4:	Manager of Nurse Practitioners				

Duties related to this program and UDC served	The Nurse Practitioner provides advanced sexual health care and takes an active leadership role for the daily clinical operations, under a scope of practice with the Medical Director. The Nurse Practitioner serves as the primary interface with clients seeking screening for sexually health services, Hepatitis C treatment, Pre Exposure Prophylaxis (PrEP) and non-Occupational Post Exposure Prophylaxis (nPEP) services. Provides direct clinical services as defined by clinic protocols and treatment guidelines including but not limited to obtaining medical history and physical, specimen collection, high-volume phlebotomy, administration of treatments, performing point of care lab tests, management of Hepatitis C, PrEP and nPEP care, client counseling, and education. Assists the Director of Nursing in developing, implementing and evaluating best practices, protocols, policies and procedures. Ensures Confidential Morbidity Reports are submitted to the Department of Public Health and addresses any submission issues.				
Degree, license exp	Master's degree in Nursing required. Current California Registered Nurse and Nurse Practitioner license. Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire. Employee must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing. Current DEA and California Furnishing license required. Current Health Care Provider Basic Life Support (BLS) certification required. Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire. Training in Good Clinical Practices, research ethics, and IATA shipping preferred. At least one year experience in outpatient sexual health clinic preferred. At least one year experience in clinical research preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	152,271	0.35	12	0.35	\$ 53,295
Staff Position 5:	Director of Clinical Services				
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,000	0.2268	12	0.2268	\$ 44,680
Total FTE, Base:		2.9768	Annualized:	2.9768	
				Total Salaries:	\$ 393,188

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO	
FICA	\$ 30,078.88
SUI	\$ 2,044.58
Health/Life	\$ 58,978.20
Disability	\$ 314.55
WC	\$ 2,359.13
Retirement Plan	\$ 12,385.42
	\$ -

	\$	-
	Total Fringe Benefit:	\$ 106,161
	Fringe Benefit %:	27.00%
	TOTAL SALARIES/BENEFITS:	\$ 499,349

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 42,187
Total Occupancy:			\$ 42,187

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 1,464
Total Materials & Supplies:			\$ 1,464

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 5,580
Total General Operating:			\$ 5,580

TOTAL OPERATING EXPENSES:	\$ 49,231
TOTAL DIRECT COSTS:	\$ 548,580

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

				Amount
TOTAL SALARIES/BENEFITS:				\$ 499,349
TOTAL OPERATING EXPENSES:				\$ 49,231
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS: \$ 82,286
			TOTAL EXPENSES:	\$ 630,866

INTEGRATED HCV/HIV TESTING PROGRAM

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		LINKAGE AND NAVIGATION		PREVENTION AND TREATMENT MEDICATION		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Registered Nurse	0.80	82,567	95%		0%	4,346	5%	86,913
Nurse Practitioner	0.80	98,942	95%		0%	5,208	5%	104,150
Manager of Registered Nurses	0.80	98,942	95%		0%	5,208	5%	104,150
Manager of Nurse Practitioners	0.35	50,630	95%		0%	2,665	5%	53,295
Director of Clinical Services	0.2268	42,446	95%		0%	2,234	5%	44,680
Total FTE & Salaries	2.9768	373,527	95%	-	0%	19,661	5%	393,188
Fringe Benefits	27%	100,852	95%	-	0%	5,309	5%	106,161
Total Personnel Expenses		474,379	95%	-	0%	24,970	5%	499,349
Operating Expenses		Expense	%	Expense	%	Expense	%	Totals
Total Occupancy		40,078	95%		0%	2,109	5%	42,187
Total Materials and Supplies		1,391	95%		0%	73	5%	1,464
Total General Operating		5,301	95%		0%	279	5%	5,580
Total Staff Travel		-	0%		0%	-	0%	-
Consultants/Subcontractor:		-	0%		0%	-	0%	-
Other (specify):								
			0%		0%		0%	-
			0%		0%		0%	-
Total Operating Expenses		46,770	95%	-		2,461	5%	49,231
Total Direct Expenses		521,149	95%	-	0%	27,431	5%	548,580
Indirect Expenses	15.0%	78,171	95%	-	0%	4,115	5%	82,286
TOTAL EXPENSES		599,320	95%	-	0%	31,546	5%	630,866
Unit of Service Type		Encounters		Hours		Encounters		
Number of UOS per Service Mode		14,825		N/A		500		15,325
Cost Per UOS by Service Mode		\$40.43		\$0.00		\$63.10		N/A
Number of UDC/NOC per Service Mode		N/A		580		N/A		580

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2025 - 6/30/2026**

Staff Position 1	Registered Nurse				
Duties related to this program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license, experience	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,641	0.80	12	0.80	\$ 86,913
Staff Position 2:	Nurse Practitioner				
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	12	0.80	\$ 104,150
Staff Position 3:	Manager of Registered Nurses				
Duties re prog/UDC	Provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	130,188	0.80	12	0.80	\$ 104,150
Staff Position 4:	Manager of Nurse Practitioners				

Duties related to this program and UDC served	The Nurse Practitioner provides advanced sexual health care and takes an active leadership role for the daily clinical operations, under a scope of practice with the Medical Director. The Nurse Practitioner serves as the primary interface with clients seeking screening for sexually health services, Hepatitis C treatment, Pre Exposure Prophylaxis (PrEP) and non-Occupational Post Exposure Prophylaxis (nPEP) services. Provides direct clinical services as defined by clinic protocols and treatment guidelines including but not limited to obtaining medical history and physical, specimen collection, high-volume phlebotomy, administration of treatments, performing point of care lab tests, management of Hepatitis C, PrEP and nPEP care, client counseling, and education. Assists the Director of Nursing in developing, implementing and evaluating best practices, protocols, policies and procedures. Ensures Confidential Morbidity Reports are submitted to the Department of Public Health and addresses any submission issues.				
Degree, license exp	Master's degree in Nursing required. Current California Registered Nurse and Nurse Practitioner license. Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire. Employee must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing. Current DEA and California Furnishing license required. Current Health Care Provider Basic Life Support (BLS) certification required. Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire. Training in Good Clinical Practices, research ethics, and IATA shipping preferred. At least one year experience in outpatient sexual health clinic preferred. At least one year experience in clinical research preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	152,271	0.35	12	0.35	\$ 53,295
Staff Position 5: Director of Clinical Services					
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,000	0.2268	12	0.2268	\$ 44,680
Total FTE, Base: 2.9768 Annualized: 2.9768 Total Salaries: \$ 393,188					

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO	
FICA	\$ 30,078.88
SUI	\$ 2,044.58
Health/Life	\$ 58,978.20
Disability	\$ 314.55
WC	\$ 2,359.13
Retirement Plan	\$ 12,385.42
	\$ -

	\$	-
	Total Fringe Benefit:	\$ 106,161
	Fringe Benefit %:	27.00%
	TOTAL SALARIES/BENEFITS:	\$ 499,349

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 42,187
Total Occupancy:			\$ 42,187

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 1,464
Total Materials & Supplies:			\$ 1,464

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 5,580
Total General Operating:			\$ 5,580

	TOTAL OPERATING EXPENSES:	\$ 49,231
	TOTAL DIRECT COSTS:	\$ 548,580

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

				Amount	
TOTAL SALARIES/BENEFITS:				\$	499,349
TOTAL OPERATING EXPENSES:				\$	49,231
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 82,286
				TOTAL EXPENSES:	\$ 630,866

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		CAPACITY BUILDING Start-up Activities		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Totals
Clinical Assistance Program Coordinator	0.50	18,750	50%	18,750	50%	37,500
Sr. Director, Community Partnerships and	0.104	10,278	50%	10,279	50%	20,557
Cohort Participants - Part-Time, Benefited	1.84616	42,240	50%	42,240	50%	84,480
Total FTE & Salaries	2.45016	71,268	50%	71,269	50%	142,537
Fringe Benefits	27%	7,837	50%	7,838	50%	15,675
Total Personnel Expenses		79,105	50%	79,107	50%	158,212
Operating Expenses		Expense	%	Expense	%	Totals
Total Occupancy		4,280	50%	4,280	50%	8,560
Total Materials and Supplies		3,004	50%	3,005	50%	6,009
Total General Operating		566	50%	566	50%	1,132
Total Staff Travel		-	0%	-	0%	-
Consultants/Subcontractor:		-	0%	-	0%	-
Other (specify):						
			0%		0%	-
			0%		0%	-
Total Operating Expenses		7,850	50%	7,851		15,701
Total Direct Expenses		86,955	50%	86,958	50%	173,913
Indirect Expenses	15.0%	13,043	50%	13,044	50%	26,087
TOTAL EXPENSES		99,998	50%	100,002	50%	200,000
Unit of Service Type		Months		Hours		
Number of UOS per Service Mode		3		1,200		1,203
Cost Per UOS by Service Mode		\$33,332.67		\$83.33		N/A
Number of UDC/NOC per Service Mode		N/A		12		12

BUDGET JUSTIFICATION**1a) SALARIES****1/1/2023 - 6/30/2023**

Staff Position 1	Clinical Assistance Program Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of twelve Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity in a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	6	0.50	\$ 37,500
Staff Position 2:	Sr. Director, Community Partnerships and Engagement				
Duties re program and UDC served	Program development and implementation of a portfolio of programs serving Black communities, including but not limited to staffing, training, protocols, and materials development; Maintain relationship with subcontractors, establish data reporting systems, and ensure compliance with reporting and contract requirements; Program and service oversight and supervision of staff.				
Degree, license exp	Experience overseeing government funded contracts, designing and implementing new services and programs; Previous experiencing supervising staff; Bachelors degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,660	0.208	6	0.104	\$ 20,557
Staff Position 3:	Cohort Participants - Part-Time, Benefits Ineligible				
Duties re prog/UDC	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 12 participants at \$22/hr, for 20 hrs/week, for 16 weeks.				
Degree, license exp	High school Diploma or equivalent				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	3.69231	6	1.84616	\$ 84,480
Total FTE, Base:		4.90031	Annualized:	2.45016	
				Total Salaries:	\$ 142,537

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.	
FICA	\$ 4,441.36
SUI	\$ 301.90
Health/Life	\$ 8,708.55
Disability	\$ 46.45
WC	\$ 348.34

Retirement Plan	\$	1,828.80
	\$	-
	\$	-
Total Fringe Benefit:		\$ 15,675
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 158,212

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 8,560
Total Occupancy:			\$ 8,560

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 297
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$476 per participant, for 12 participants.	\$476.00	\$ 5,712
Total Materials & Supplies:			\$ 6,009

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$188.67 per FTE per month (excluding cohort FTE).	\$188.67	\$ 1,132
Total General Operating:			\$ 1,132

				TOTAL OPERATING EXPENSES:	\$	15,701
				TOTAL DIRECT COSTS:	\$	173,913
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount		
TOTAL SALARIES/BENEFITS:					\$	158,212
TOTAL OPERATING EXPENSES:					\$	15,701
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$	26,087
				TOTAL EXPENSES:	\$	200,000

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7/1/2023 - 6/30/2024

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Clinical Assistance Program Coordinator	1.00	75,000	100%	75,000
Sr. Director, Community Partnerships and	0.208	41,113	100%	41,113
Cohort Participants - Part-Time, Benefit	3.69231	168,960	100%	168,960
Total FTE & Salaries	4.90031	285,073	100%	285,073
Fringe Benefits	27%	31,351	100%	31,351
Total Personnel Expenses		316,424	100%	316,424
Operating Expenses		Expense	%	Totals
Total Occupancy		17,120	100%	17,120
Total Materials and Supplies		12,018	100%	12,018
Total General Operating		2,264	100%	2,264
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		31,402	100%	31,402
Total Direct Expenses		347,826	100%	347,826
Indirect Expenses	15.0%	52,174	100%	52,174
TOTAL EXPENSES		400,000	100%	400,000
Unit of Service Type		Hours		
Number of UOS per Service Mode		2,400		2,400
Cost Per UOS by Service Mode		\$166.67		N/A
Number of UDC/NOC per Service Mode		24		24

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2023 - 6/30/2024**

Staff Position 1	Clinical Assistance Program Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of twelve Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity in a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
Staff Position 2:	Sr. Director, Community Partnerships and Engagement				
Duties re program and UDC served	Program development and implementation of a portfolio of programs serving Black communities, including but not limited to staffing, training, protocols, and materials development; Maintain relationship with subcontractors, establish data reporting systems, and ensure compliance with reporting and contract requirements; Program and service oversight and supervision of staff.				
Degree, license exp	Experience overseeing government funded contracts, designing and implementing new services and programs; Previous experiencing supervising staff; Bachelors degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,660	0.208	12	0.208	\$ 41,113
Staff Position 3:	Cohort Participants - Part-Time, Benefits Ineligible				
Duties re prog/UDC	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 12 participants at \$22/hr, for 20 hrs/week, for 16 weeks.				
Degree, license exp	High school Diploma or equivalent.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	3.69231	12	3.69231	\$ 168,960
Total FTE, Base:		4.90031	Annualized:	4.90031	
				Total Salaries:	\$ 285,073

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.	
FICA	\$ 8,882.64
SUI	\$ 603.79
Health/Life	\$ 17,416.95
Disability	\$ 92.89
WC	\$ 696.68

Retirement Plan	\$	3,657.56
	\$	-
	\$	-
Total Fringe Benefit:		\$ 31,351
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 316,424

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 17,120
Total Occupancy:			\$ 17,120

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 594
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$476 per participant, for 24 participants.	\$476.00	\$ 11,424
Total Materials & Supplies:			\$ 12,018

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 2,264
Total General Operating:			\$ 2,264

				TOTAL OPERATING EXPENSES:	\$	31,402
				TOTAL DIRECT COSTS:	\$	347,826
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount		
TOTAL SALARIES/BENEFITS:					\$	316,424
TOTAL OPERATING EXPENSES:					\$	31,402
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$	52,174
				TOTAL EXPENSES:	\$	400,000

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7/1/2024 - 6/30/2025

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Clinical Assistance Program Coordinator	1.00	75,000	100%	75,000
Sr. Director, Community Partnerships and	0.208	41,113	100%	41,113
Cohort Participants - Part-Time, Benefit	3.69231	168,960	100%	168,960
Total FTE & Salaries		285,073	100%	285,073
Fringe Benefits	27%	31,351	100%	31,351
Total Personnel Expenses		316,424	100%	316,424
Operating Expenses		Expense	%	Totals
Total Occupancy		17,120	100%	17,120
Total Materials and Supplies		12,018	100%	12,018
Total General Operating		2,264	100%	2,264
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		31,402	100%	31,402
Total Direct Expenses		347,826	100%	347,826
Indirect Expenses 15.0%		52,174	100%	52,174
TOTAL EXPENSES		400,000	100%	400,000
Unit of Service Type		Hours		
Number of UOS per Service Mode		2,400		2,400
Cost Per UOS by Service Mode		\$166.67		N/A
Number of UDC/NOC per Service Mode		24		24

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2024 - 6/30/2025**

Staff Position 1	Clinical Assistance Program Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of twelve Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity in a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
Staff Position 2:	Sr. Director, Community Partnerships and Engagement				
Duties re program and UDC served	Program development and implementation of a portfolio of programs serving Black communities, including but not limited to staffing, training, protocols, and materials development; Maintain relationship with subcontractors, establish data reporting systems, and ensure compliance with reporting and contract requirements; Program and service oversight and supervision of staff.				
Degree, license exp	Experience overseeing government funded contracts, designing and implementing new services and programs; Previous experiencing supervising staff; Bachelors degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,660	0.208	12	0.208	\$ 41,113
Staff Position 3:	Cohort Participants - Part-Time, Benefits Ineligible				
Duties re prog/UDC	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 12 participants at \$22/hr, for 20 hrs/week, for 16 weeks.				
Degree, license exp	High school Diploma or equivalent				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	3.69231	12	3.69231	\$ 168,960
Total FTE, Base:					4.90031
Annualized:					4.90031
Total Salaries:					\$ 285,073

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.	
FICA	\$ 8,882.64
SUI	\$ 603.79
Health/Life	\$ 17,416.95
Disability	\$ 92.89
WC	\$ 696.68

Retirement Plan	\$	3,657.56
	\$	-
	\$	-
Total Fringe Benefit:		\$ 31,351
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 316,424

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 17,120
Total Occupancy:			\$ 17,120

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 594
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$476 per participant, for 24 participants.	\$476.00	\$ 11,424
Total Materials & Supplies:			\$ 12,018

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 2,264
Total General Operating:			\$ 2,264

				TOTAL OPERATING EXPENSES:	\$	31,402
				TOTAL DIRECT COSTS:	\$	347,826
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount		
TOTAL SALARIES/BENEFITS:					\$	316,424
TOTAL OPERATING EXPENSES:					\$	31,402
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$	52,174
				TOTAL EXPENSES:	\$	400,000

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7/1/2025 - 6/30/2026

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Clinical Assistance Program Coordinator	1.00	75,000	100%	75,000
Sr. Director, Community Partnerships and	0.208	41,113	100%	41,113
Cohort Participants - Part-Time, Benefit	3.69231	168,960	100%	168,960
Total FTE & Salaries		285,073	100%	285,073
Fringe Benefits	27%	31,351	100%	31,351
Total Personnel Expenses		316,424	100%	316,424
Operating Expenses		Expense	%	Totals
Total Occupancy		17,120	100%	17,120
Total Materials and Supplies		12,018	100%	12,018
Total General Operating		2,264	100%	2,264
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		31,402	100%	31,402
Total Direct Expenses		347,826	100%	347,826
Indirect Expenses 15.0%		52,174	100%	52,174
TOTAL EXPENSES		400,000	100%	400,000
Unit of Service Type		Hours		
Number of UOS per Service Mode		2,400		2,400
Cost Per UOS by Service Mode		\$166.67		N/A
Number of UDC/NOC per Service Mode		24		24

BUDGET JUSTIFICATION**1a) SALARIES**

7/1/2025 - 6/30/2026

Staff Position 1	Clinical Assistance Program Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Clinical Training , will train a cohort of twelve Clinical Assistants to provide HIV prevention, treatment and advocacy and support Clinical Assistants. Coordinate and supervise Clinical Assistants in their work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in clinical health setting , two years experience in an administrative capacity in a public health organization. CA Phlebotomy License & cA HIV Test Counselor Certification and two year of experience in Supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
Staff Position 2:	Sr. Director, Community Partnerships and Engagement				
Duties re program and UDC served	Program development and implementation of a portfolio of programs serving Black communities, including but not limited to staffing, training, protocols, and materials development; Maintain relationship with subcontractors, establish data reporting systems, and ensure compliance with reporting and contract requirements; Program and service oversight and supervision of staff.				
Degree, license exp	Experience overseeing government funded contracts, designing and implementing new services and programs; Previous experiencing supervising staff; Bachelors degree.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	197,660	0.208	12	0.208	\$ 41,113
Staff Position 3:	Cohort Participants - Part-Time, Benefits Ineligible				
Duties re prog/UDC	The Cohort Participants (also known as Clinical Assistants) will partake in a robust Sexual Health Clinical Training with the San Francisco AIDS Foundation Health Equity Training Academy. The training will provide an opportunity to work alongside sexual health clinicians and volunteers, insurance and benefits navigators, and community programs staff, all who are experts in HIV prevention, treatment, and advocacy. 12 participants at \$22/hr, for 20 hrs/week, for 16 weeks.				
Degree, license exp	High school Diploma or equivalent				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	45,760	3.69231	12	3.69231	\$ 168,960
	Total FTE, Base:	4.90031	Annualized:	4.90031	
				Total Salaries:	\$ 285,073

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO.	
FICA	\$ 8,882.64
SUI	\$ 603.79
Health/Life	\$ 17,416.95
Disability	\$ 92.89
WC	\$ 696.68

Retirement Plan	\$	3,657.56
	\$	-
	\$	-
Total Fringe Benefit:		\$ 31,351
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 316,424

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month (excluding cohort FTE).	\$1,181.05	\$ 17,120
Total Occupancy:			\$ 17,120

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month (excluding cohort FTE).	\$41.00	\$ 594
Program Materials	Materials directly related to cohort participation, including but not limited to those needed for cohort gatherings and cohort work spaces. \$476 per participant, for 24 participants.	\$476.00	\$ 11,424
Total Materials & Supplies:			\$ 12,018

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month (excluding cohort FTE).	\$156.15	\$ 2,264
Total General Operating:			\$ 2,264

				TOTAL OPERATING EXPENSES:	\$	31,402
				TOTAL DIRECT COSTS:	\$	347,826
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount		
TOTAL SALARIES/BENEFITS:					\$	316,424
TOTAL OPERATING EXPENSES:					\$	31,402
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$	52,174
				TOTAL EXPENSES:	\$	400,000

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1/1/2023 - 6/30/2023

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Project Coordinator	0.50	37,500	100%	37,500
Total FTE & Salaries	0.50	37,500	100%	37,500
Fringe Benefits	27%	10,125	100%	10,125
Total Personnel Expenses		47,625	100%	47,625
Operating Expenses		Expense	%	Totals
Total Occupancy		7,086	100%	7,086
Total Materials and Supplies		246	100%	246
Total General Operating		937	100%	937
Total Staff Travel			0%	-
Consultants/Subcontractor:		96,280	100%	96,280
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		104,549	100%	104,549
Total Direct Expenses		152,174	100%	152,174
Indirect Expenses 15.0%		22,826	100%	22,826
TOTAL EXPENSES		175,000	100%	175,000
Unit of Service Type		Months		
Number of UOS per Service Mode		6		6
Cost Per UOS by Service Mode		\$29,166.68		N/A
Number of UDC/NOC per Service Mode		N/A		N/A

BUDGET JUSTIFICATION**1a) SALARIES****1/1/2023 - 6/30/2023**

Staff Position 1	Project Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Training , will train a cohort of six Assistants to provide HIV prevention, treatment and advocacy and support Assistants. Coordinate and supervise Assistants in their work alongside sexual health and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in health setting , two years experience in an administrative capacity in a public health organization and 2 year experience in a supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	6	0.50	\$ 37,500
	Total FTE, Base:	1.00	Annualized:	0.50	
				Total Salaries:	\$ 37,500

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO		
FICA	\$	2,868.75
SUI	\$	195.00
Health/Life	\$	5,625.00
Disability	\$	30.00
WC	\$	225.00
Retirement Plan	\$	1,181.25
	\$	-
	\$	-
Total Fringe Benefit:		\$ 10,125
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 47,625

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 7,086
Total Occupancy:			\$ 7,086

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 246
Total Materials & Supplies:			\$ 246

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 937
Total General Operating:			\$ 937

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
Integrated Testing Consultant	Professional Services consulting on an as-needed basis to support Integrated HIV/STI/HEP C Testing within HAP Network. Time estimated at \$161/hr for 598 hours.	\$161.00	\$ 96,280
Total Consultants/Subcontractors:			\$ 96,280

				TOTAL OPERATING EXPENSES:	\$ 104,549
				TOTAL DIRECT COSTS:	\$ 152,174
Please list here the personnel and ledger expenses that are included in your shared costs?					
					Amount
TOTAL SALARIES/BENEFITS:				\$	47,625
TOTAL OPERATING EXPENSES:				\$	104,549
4) INDIRECT COSTS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 22,826
					TOTAL EXPENSES:
					\$ 175,000

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7/1/2023 - 6/30/2024

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Project Coordinator	1.00	75,000	100%	75,000
Total FTE & Salaries	1.00	75,000	100%	75,000
Fringe Benefits	27%	20,250	100%	20,250
Total Personnel Expenses		95,250	100%	95,250
Operating Expenses		Expense	%	Totals
Total Occupancy		14,172	100%	14,172
Total Materials and Supplies		492	100%	492
Total General Operating		1,874	100%	1,874
Total Staff Travel			0%	-
Consultants/Subcontractor:		192,560	100%	192,560
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		209,098	100%	209,098
Total Direct Expenses		304,348	100%	304,348
Indirect Expenses 15.0%		45,652	100%	45,652
TOTAL EXPENSES		350,000	100%	350,000
Unit of Service Type		Months		
Number of UOS per Service Mode		12		12
Cost Per UOS by Service Mode		\$29,166.68		N/A
Number of UDC/NOC per Service Mode		N/A		N/A

BUDGET JUSTIFICATION**1a) SALARIES**

7/1/2023 - 6/30/2024

Staff Position 1	Project Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Training , will train a cohort of six Assistants to provide HIV prevention, treatment and advocacy and support Assistants. Coordinate and supervise Assistants in their work alongside sexual health and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in health setting , two years experience in an administrative capacity in a public health organization and 2 year experience in a supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
	Total FTE, Base:	1.00	Annualized:	1.00	
				Total Salaries:	\$ 75,000

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO		
FICA	\$	5,737.50
SUI	\$	390.00
Health/Life	\$	11,250.00
Disability	\$	60.00
WC	\$	450.00
Retirement Plan	\$	2,362.50
	\$	-
	\$	-
Total Fringe Benefit:		\$ 20,250
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 95,250

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 14,172
Total Occupancy:			\$ 14,172

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 492
Total Materials & Supplies:			\$ 492

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 1,874
Total General Operating:			\$ 1,874

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
Integrated Testing Consultant	Professional Services consulting on an as-needed basis to support Integrated HIV/STI/HEP C Testing within HAP Network. Time estimated at \$161/hr for 1,196 hours.	\$161.00	\$ 192,560
Total Consultants/Subcontractors:			\$ 192,560

				TOTAL OPERATING EXPENSES:	\$ 209,098
				TOTAL DIRECT COSTS:	\$ 304,348
Please list here the personnel and ledger expenses that are included in your shared costs?					
					Amount
TOTAL SALARIES/BENEFITS:				\$	95,250
TOTAL OPERATING EXPENSES:				\$	209,098
4) INDIRECT COSTS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 45,652
					TOTAL EXPENSES: \$ 350,000

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7/1/2024 - 6/30/2025

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Project Coordinator	1.00	75,000	100%	75,000
Total FTE & Salaries	1.00	75,000	100%	75,000
Fringe Benefits	27%	20,250	100%	20,250
Total Personnel Expenses		95,250	100%	95,250
Operating Expenses		Expense	%	Totals
Total Occupancy		14,172	100%	14,172
Total Materials and Supplies		492	100%	492
Total General Operating		1,874	100%	1,874
Total Staff Travel			0%	-
Consultants/Subcontractor:		192,560	100%	192,560
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		209,098	100%	209,098
Total Direct Expenses		304,348	100%	304,348
Indirect Expenses 15.0%		45,652	100%	45,652
TOTAL EXPENSES		350,000	100%	350,000
Unit of Service Type		Months		
Number of UOS per Service Mode		12		12
Cost Per UOS by Service Mode		\$29,166.68		N/A
Number of UDC/NOC per Service Mode		N/A		N/A

1a) SALARIES

7/1/2024 - 6/30/2025

Staff Position 1	Project Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Training , will train a choort of six Assistants to provide HIV prevention, tratment and advocacy and support Assistants. Coordinate and supervise Assistants in their work alongside sexual health and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in health setting , two years experience in an administrative capacity in a public health organization and 2 year experience in a supervisory or teaching position.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
	Total FTE, Base:	1.00	Annualized:	1.00	
				Total Salaries:	\$ 75,000

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO		
FICA	\$	5,737.50
SUI	\$	390.00
Health/Life	\$	11,250.00
Disability	\$	60.00
WC	\$	450.00
Retirement Plan	\$	2,362.50
	\$	-
	\$	-
Total Fringe Benefit:		\$ 20,250
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 95,250

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 14,172
Total Occupancy:			\$ 14,172

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 492
Total Materials & Supplies:			\$ 492

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month.	\$156.15	\$ 1,874
Total General Operating:			\$ 1,874

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
Integrated Testing Consultant	Professional Services consulting on an as-needed basis to support Integrated HIV/STI/HEP C Testing within HAP Network. Time estimated at \$161/hr for 1,196 hours.	\$161.00	\$ 192,560
Total Consultants/Subcontractors:			\$ 192,560

				TOTAL OPERATING EXPENSES:	\$ 209,098
				TOTAL DIRECT COSTS:	\$ 304,348
Please list here the personnel and ledger expenses that are included in your shared costs?					
					Amount
TOTAL SALARIES/BENEFITS:				\$	95,250
TOTAL OPERATING EXPENSES:				\$	209,098
4) INDIRECT COSTS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 45,652
					TOTAL EXPENSES: \$ 350,000

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7/1/2025 - 6/30/2026

CAPACITY BUILDING ACTIVITIES

UOS COST ALLOCATION CHEP General Fund

Service Modes:		CAPACITY BUILDING Implementation Activities		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Project Coordinator	1.00	75,000	100%	75,000
Total FTE & Salaries	1.00	75,000	100%	75,000
Fringe Benefits	27%	20,250	100%	20,250
Total Personnel Expenses		95,250	100%	95,250
Operating Expenses		Expense	%	Totals
Total Occupancy		14,172	100%	14,172
Total Materials and Supplies		492	100%	492
Total General Operating		1,874	100%	1,874
Total Staff Travel			0%	-
Consultants/Subcontractor:		192,560	100%	192,560
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		209,098	100%	209,098
Total Direct Expenses		304,348	100%	304,348
Indirect Expenses 15.0%		45,652	100%	45,652
TOTAL EXPENSES		350,000	100%	350,000
Unit of Service Type		Months		
Number of UOS per Service Mode		12		12
Cost Per UOS by Service Mode		\$29,166.68		N/A
Number of UDC/NOC per Service Mode		N/A		N/A

1a) SALARIES

7/1/2025 - 6/30/2026

Staff Position 1	Project Coordinator				
Duties related to this program and UDC served	Coordinator will partake in developing a robust Sexual Health Training , will train a cohort of six Assistants to provide HIV prevention, treatment and advocacy and support Assistants. Coordinate and supervise Assistants in their work alongside sexual health and volunteers, insurance and benefits navigators, and community program staff.				
Degree, license, experience	A bachelor's degree or equivalent of four years experience in health setting , two years experience in an administrative capacity in a public health organization and 2 year experience in a supervisory or teaching position				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	75,000	1.00	12	1.00	\$ 75,000
	Total FTE, Base:	1.00	Annualized:	1.00	
				Total Salaries:	\$ 75,000

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO		
FICA	\$	5,737.50
SUI	\$	390.00
Health/Life	\$	11,250.00
Disability	\$	60.00
WC	\$	450.00
Retirement Plan	\$	2,362.50
	\$	-
	\$	-
Total Fringe Benefit:		\$ 20,250
Fringe Benefit %:		27.00%
TOTAL SALARIES/BENEFITS:		\$ 95,250

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Occupancy Shared	Shared Occupancy expenses, including but not limited to Rent and Telephone expense, allocated at \$1,181.05 per FTE per month.	\$1,181.05	\$ 14,172
Total Occupancy:			\$ 14,172

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Office Supplies Shared	Shared Office Supply expenses, including but not limited to postage, consumable office supplies, non-depreciable software and technology, at \$41 per FTE per month.	\$41.00	\$ 492
Total Materials & Supplies:			\$ 492

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
General Operating	Shared General Operating expenses, including but not limited to insurance, equipment rental and maintenance, and off-site storage, at \$156.15 per FTE per month	\$156.15	\$ 1,874
Total General Operating:			\$ 1,874

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
Integrated Testing Consultant	Professional Services consulting on an as-needed basis to support Integrated HIV/STI/HEP C Testing within HAP Network. Time estimated at \$161/hr for 1,196 hours.	\$161.00	\$ 192,560
Total Consultants/Subcontractors:			\$ 192,560

				TOTAL OPERATING EXPENSES:	\$ 209,098
				TOTAL DIRECT COSTS:	\$ 304,348
Please list here the personnel and ledger expenses that are included in your shared costs?					
					Amount
TOTAL SALARIES/BENEFITS:				\$	95,250
TOTAL OPERATING EXPENSES:				\$	209,098
4) INDIRECT COSTS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 45,652
				TOTAL EXPENSES:	\$ 350,000

CAT 4: GAY/MSM HEALTH ACCESS POINT (I-

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		PREVENTION AND TREATMENT MEDICATION		CONDOM DISTRIBUTION		LINKAGE AND NAVIGATION		COMMUNITY ENGAGEMENT AND MOBILIZATION			
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals	
Lab Technician	1.00	61,696	90%	6,855	10%	-	0%		0%		0%	68,551	
Manager - Lab Technicians	0.50	48,383	90%	5,376	10%	-	0%		0%		0%	53,759	
Manager, Navigation	0.50	17,200	62%	8,323	30%	832	3%	1,387	5%		0%	27,742	
Navigator	0.375	14,124	60%	7,062	30%	706	3%	1,648	7%		0%	23,540	
Associate Director, PrEP & HIV Services	0.15	10,025	62%	4,850	30%	485	3%	808	5%		0%	16,168	
Nurse	0.50	33,718	62%	19,034	35%	1,632	3%		0%		0%	54,384	
Nurse Practitioner	0.275	23,195	62%	13,094	35%	1,122	3%		0%		0%	37,411	
Clinical Services Director	0.25	28,736	60%	19,158	40%	-	0%		0%		0%	47,894	
Total FTE & Salaries	3.55	237,077	72%	83,752	25%	4,777	1%	3,843	1%	-	0%	329,449	
Fringe Benefits	27%	64,010	72%	22,613	25%	1,290	1%	1,038	1%	-	0%	88,951	
Total Personnel Expenses		301,087	72%	106,365	25%	6,067	1%	4,881	1%	-	0%	418,400	
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Expense	%	Totals	
Total Occupancy			0%		0%		0%		0%		0%	-	
Total Materials and Supplies			0%		0%		0%		0%		0%	-	
Total General Operating		1,669	2%	1,670	2%		0%		0%		0%	3,339	
Total Staff Travel			0%		0%		0%		0%		0%	-	
Consultants/Subcontractor:		25,000	24%		0%		0%	50,000	48%	25,000	24%	100,000	
Other (specify):													
			0%		0%		0%		0%		0%	-	
			0%		0%		0%		0%		0%	-	
Total Operating Expenses		26,669	26%	1,670		-		50,000		25,000		103,339	
Total Direct Expenses		327,756	63%	108,035	21%	6,067	1%	54,881	11%	25,000	5%	521,739	
Indirect Expenses		15.0%	49,164	63%	16,205	21%	910	1%	8,232	11%	3,750	5%	78,261
TOTAL EXPENSES			376,920	63%	124,240	21%	6,977	1%	63,113	11%	28,750	5%	600,000
Unit of Service Type		Encounters		Hours		Months		Hours		Hours			
Number of UOS per Service Mode		13,380		325		6		546		62		14,319	
Cost Per UOS by Service Mode		\$28.18		\$382.28		\$1,162.89		\$115.60		\$463.72		N/A	
Number of UDC/NOC per Service Mode		5,100		N/A		N/A		453		138		5691	

BUDGET JUSTIFICATION**1a) SALARIES****1/1/2023 - 6/30/2023**

Staff Position 1	Lab Technician				
Duties related to this program and UDC served	Performs phlebotomy services for confirmatory HIV antibody testing and RNA testing. Prepares specimen collection for transport to SFDPH laboratory.				
Degree, license, experience	State certified phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	68,551	2.00	6	1.00	\$ 68,551
Staff Position 2:	Manager - Lab Technicians				
Duties re program and UDC served	This position will be responsible for supervising the SFAF-wide lab tech team and working with the Director of Clinical Operations to oversee laboratory services. This position also serves as a lab tech as needed.				
Degree, license exp	Must have an active CPT License with the California Department of Public Health; Experience working with diverse populations including but not limited to LGBTQ+, injection drug users, and unhoused individuals; Must have two years of experience supervising staff; A minimum of three years of experience working in a laboratory setting; Must have two years of experience as a licensed phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,518	1.00	6	0.50	\$ 53,759
Staff Position 3:	Manager, Navigation				
Duties re prog/UDC	The Services Navigator is responsible for greeting clients and other visitors and guests, managing the flow of traffic, assessing client and guest needs, scheduling and registering clients for services, explaining and referring people to appropriate services and/or individuals and keeping the lobby areas functioning smoothly. The Services Navigator is responsible for enforcing community expectations and maintaining an environment that is inviting across our Mid Market and Castro locations.				
Degree, license exp	High School diploma or equivalent; Minimum of three years of work in community-based customer service, social work or triage required; Experience with electronic health record systems highly regarded; Experience working with people living with HIV, people who are substance users, have a mental health diagnosis, and/or are experiencing homelessness highly regarded.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	55,483	1.00	6	0.50	\$ 27,742
Staff Position 4:	Navigator				
Duties related to this program and UDC served	Answers phone calls, greets and connects clients and visitors to pertinent services, resources or staff. Screens clients for COVID-19 exposure and/or symptoms. Assess client needs and concerns and provides support, assistance, information and referrals. Obtains patient demographic and verifying insurance information at each visit. Educates clients and visitors about SFAF programs, services and departments. Registers clients for services and schedules client appointments.				
Degree, license exp	HS Diploma, 3 years of experience in customer service, social work, or triage. Experience with an electronic health record system. Experience with target populations.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	62,773	0.75	6	0.375	\$ 23,540

Staff Position 5:	Associate Director, PrEP & HIV Services				
Duties re program and UDC served	Responsible for the development and implementation of community and clinical level navigation interventions that targets the health of clients served in clinical services at SFAF. Supervises and develops Navigators.				
Degree, license exp	Bachelors Degree. Experience in target population, experience and knowledge of navigation interventions and frameworks, extensive knowledge of social support and health services in the region.				
		x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,786	0.30	6	0.15	\$ 16,168
Staff Position 6:	Nurse				
Duties re program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,767	1.00	6	0.50	\$ 54,384
Staff Position 7:	Nurse Practitioner				
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	136,041	0.55	6	0.275	\$ 37,411
Staff Position 8:	Clinical Services Director				
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	191,574	0.50	6	0.25	\$ 47,894

Total FTE, Base:	7.10	Annualized:	3.55	
			Total Salaries:	\$ 329,449

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO				
	FICA	\$		25,202.85
	SUI	\$		1,713.13
	Health/Life	\$		49,417.35
	Disability	\$		263.56
	WC	\$		1,976.69
	Retirement Plan	\$		10,377.64
		\$		-
		\$		-
			Total Fringe Benefit:	\$ 88,951
			Fringe Benefit %:	27.00%
			TOTAL SALARIES/BENEFITS:	\$ 418,400

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Total Occupancy:			\$ -

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Total Materials & Supplies:			\$ -

General Operating:

Expense Item	Brief Description	Rate/Formula	Cost
Data Collection	Employee Health Record, eClinicalWorks license - 5 licenses at	525	\$ 3,339

Total General Operating:			\$ 3,339

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost
Total Staff Travel:			\$	-

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
SFCHC	Subcontract on cost reimbursement basis.	25000	\$ 25,000
Shanti	Subcontract on cost reimbursement basis.	50000	\$ 50,000
Glide	Subcontract on cost reimbursement basis.	25000	\$ 25,000
Total Consultants/Subcontractors:			\$ 100,000

Other Expenses			
Expense Item	Brief Description	Rate/Formula	Cost
Total Other:			\$ -

		TOTAL OPERATING EXPENSES:	\$ 103,339
		TOTAL DIRECT COSTS:	\$ 521,739
Please list here the personnel and ledger expenses that are included in your shared costs?			
			Amount
TOTAL SALARIES/BENEFITS:			\$ 418,400
TOTAL OPERATING EXPENSES:			\$ 103,339
4) INDIRECT COSTS	Indirect Rate:	15.00%	
		TOTAL INDIRECT COSTS:	\$ 78,261
		TOTAL EXPENSES:	\$ 600,000

CAT 4: GAY/MSM HEALTH ACCESS POINT (H

PS20-2010 CDC: CFDA 93.940

UOS COST ALLOCATION BY SERVICE MODE

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		
Position Titles	Annual FTE	Salaries	% FTE	Totals
Total FTE & Salaries	0.00	-	0%	-
Fringe Benefits	0%	-	0%	-
Total Personnel Expenses		-	0%	-
Operating Expenses		Expense	%	Totals
Total Occupancy			0%	-
Total Materials and Supplies		2,848	100%	2,848
Total General Operating		1,500	100%	1,500
Total Staff Travel			0%	-
Consultants/Subcontractor:			0%	-
Other (specify):				
			0%	-
			0%	-
Total Operating Expenses		4,348	100%	4,348
Total Direct Expenses		4,348	100%	4,348
Indirect Expenses 15.0%		652	100%	652
TOTAL EXPENSES		5,000	100%	5,000
Unit of Service Type		Encounters		
Number of UOS per Service Mode		180		180
Cost Per UOS by Service Mode		\$27.79		N/A
Number of UDC/NOC per Service Mode		N/A		N/A

BUDGET JUSTIFICATION**1a) SALARIES**

1/1/23 - 7/31/23

Staff Position 1	Position 1				
Duties related to this program and UDC served					
Degree, license, experience					
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
				0.00	\$ -
	Total FTE, Base:	0.00	Annualized:	0.00	
				Total Salaries:	\$ -

1b) EMPLOYEE FRINGE BENEFITS:

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

Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO		
Social Security	\$	-
Retirement	\$	-
Medical	\$	-
Dental	\$	-
Unemployment Insurance	\$	-
Disability Insurance	\$	-
Paid Time Off	\$	-
Life Insurance	\$	-
Total Fringe Benefit:		\$ -
Fringe Benefit %:		0.00%
TOTAL SALARIES/BENEFITS:		\$ -

2) OPERATING EXPENSES:**Occupancy:**

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Total Occupancy:			\$ -

Materials & Supplies:

Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Program Materials	Materials to operate the clinic. Includes, but not limited to, vacutainers, alcohol pads, bandaids, test kits, specimen cups, etc.	2848	\$ 2,848

Total Materials & Supplies:			\$ 2,848
General Operating:			
Expense Item	Brief Description	Rate/Formula	Cost
Staff Training	\$1,500 deliverables-based contract for clinical services staff training.	1500	\$ 1,500
Total General Operating:			\$ 1,500

				TOTAL OPERATING EXPENSES:	\$ 4,348
				TOTAL DIRECT COSTS:	\$ 4,348
Please list here the personnel and ledger expenses that are included in your shared costs?				Amount	
Total Materials & Supplies:				\$	2,848
Total General Operating:				\$	1,500
4) INDIRECT COS	Indirect Rate:	15.00%		TOTAL INDIRECT COSTS:	\$ 652
				TOTAL EXPENSES:	\$ 5,000

CAT 4: GAY/MSM HEALTH ACCESS POINT (I-

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		PREVENTION AND TREATMENT MEDICATION		CONDOM DISTRIBUTION		LINKAGE AND NAVIGATION		COMMUNITY ENGAGEMENT AND MOBILIZATION		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Lab Technician	2.00	123,392	90%	13,710	10%	-	0%		0%		0%	137,102
Manager - Lab Technicians	1.00	96,766	90%	10,752	10%	-	0%		0%		0%	107,518
Manager, Navigation	1.00	34,400	62%	16,645	30%	1,664	3%	2,774	5%		0%	55,483
Navigator	0.75	28,248	60%	14,124	30%	1,412	3%	3,296	7%		0%	47,080
Associate Director, PrEP & HIV Service	0.30	20,048	62%	9,701	30%	970	3%	1,617	5%		0%	32,336
Nurse	1.00	67,436	62%	38,068	35%	3,263	3%		0%		0%	108,767
Nurse Practitioner	0.55	46,390	62%	26,188	35%	2,245	3%		0%		0%	74,823
Clinical Services Director	0.50	57,473	60%	38,316	40%	-	0%		0%		0%	95,789
Total FTE & Salaries	7.10	474,153	72%	167,504	25%	9,554	1%	7,687	1%	-	0%	658,898
Fringe Benefits	27%	128,022	72%	45,226	25%	2,579	1%	2,075	1%	-	0%	177,902
Total Personnel Expenses		602,175	72%	212,730	25%	12,133	1%	9,762	1%	-	0%	836,800
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy			0%		0%		0%		0%		0%	-
Total Materials and Supplies			0%		0%		0%		0%		0%	-
Total General Operating		3,339	2%	3,339	2%		0%		0%		0%	6,678
Total Staff Travel			0%		0%		0%		0%		0%	-
Consultants/Subcontractor:		50,000	24%		0%		0%	100,000	48%	50,000	24%	200,000
Other (specify):												
			0%		0%		0%		0%		0%	-
			0%		0%		0%		0%		0%	-
Total Operating Expenses		53,339	26%	3,339		-		100,000		50,000		206,678
Total Direct Expenses		655,514	63%	216,069	21%	12,133	1%	109,762	11%	50,000	5%	1,043,478
Indirect Expenses	15.0%	98,327	63%	32,411	21%	1,820	1%	16,464	11%	7,500	5%	156,522
TOTAL EXPENSES		753,841	63%	248,480	21%	13,953	1%	126,226	11%	57,500	5%	1,200,000
Unit of Service Type		Encounters		Hours		Months		Hours		Hours		
Number of UOS per Service Mode		27,120		650		12		1,092		124		28,998
Cost Per UOS by Service Mode		\$27.80		\$382.28		\$1,162.75		\$115.60		\$463.72		N/A
Number of UDC/NOC per Service Mode		10,200		N/A		N/A		905		276		11381

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2023 - 6/30/2024**

Staff Position 1	Lab Technician				
Duties related to this program and UDC served	Performs phlebotomy services for confirmatory HIV antibody testing and RNA testing. Prepares specimen collection for transport to SFDPH laboratory.				
Degree, license, experience	State certified phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	68,551	2.00	12	2.00	\$ 137,102
Staff Position 2:	Manager - Lab Technicians				
Duties re program and UDC served	This position will be responsible for supervising the SFAF-wide lab tech team and working with the Director of Clinical Operations to oversee laboratory services. This position also serves as a lab tech as needed.				
Degree, license exp	Must have an active CPT License with the California Department of Public Health; Experience working with diverse populations including but not limited to LGBTQ+, injection drug users, and unhoused individuals; Must have two years of experience supervising staff; A minimum of three years of experience working in a laboratory setting; Must have two years of experience as a licensed phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,518	1.00	12	1.00	\$ 107,518
Staff Position 3:	Manager, Navigation				
Duties re prog/UDC	The Services Navigator is responsible for greeting clients and other visitors and guests, managing the flow of traffic, assessing client and guest needs, scheduling and registering clients for services, explaining and referring people to appropriate services and/or individuals and keeping the lobby areas functioning smoothly. The Services Navigator is responsible for enforcing community expectations and maintaining an environment that is inviting across our Mid Market and Castro locations.				
Degree, license exp	High School diploma or equivalent; Minimum of three years of work in community-based customer service, social work or triage required; Experience with electronic health record systems highly regarded; Experience working with people living with HIV, people who are substance users, have a mental health diagnosis, and/or are experiencing homelessness highly regarded.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	55,483	1.00	12	1.00	\$ 55,483
Staff Position 4:	Navigator				
Duties related to this program and UDC served	Answers phone calls, greets and connects clients and visitors to pertinent services, resources or staff. Screens clients for COVID-19 exposure and/or symptoms. Assess client needs and concerns and provides support, assistance, information and referrals. Obtains patient demographic and verifying insurance information at each visit. Educates clients and visitors about SFAF programs, services and departments. Registers clients for services and schedules client appointments.				
Degree, license exp	HS Diploma, 3 years of experience in customer service, social work, or triage. Experience with an electronic health record system. Experience with target populations.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	62,773	0.75	12	0.75	\$ 47,080
Staff Position 5:	Associate Director, PrEP & HIV Services				

Duties re program and UDC served	Responsible for the development and implementation of community and clinical level navigation interventions that targets the health of clients served in clinical services at SFAF. Supervises and develops Navigators.				
Degree, license exp	Bachelors Degree. Experience in target population, experience and knowledge of navigation interventions and frameworks, extensive knowledge of social support and health services in the region.				
		x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,786	0.30	12	0.30	\$ 32,336
Staff Position 6: Nurse					
Duties re program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,767	1.00	12	1.00	\$ 108,767
Staff Position 7: Nurse Practitioner					
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	136,041	0.55	12	0.55	\$ 74,823
Staff Position 8: Clinical Services Director					
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	191,574	0.50	12	0.50	\$ 95,789

Total FTE, Base:		7.10	Annualized:	7.10
				Total Salaries: \$ 658,898

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)				
Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO				
FICA		\$	50,405.70	
SUI		\$	3,426.27	
Health/Life		\$	98,834.70	
Disability		\$	527.12	
WC		\$	3,953.39	
Retirement Plan		\$	20,755.29	
		\$	-	
		\$	-	
Total Fringe Benefit:			\$	177,902
Fringe Benefit %:				27.00%
TOTAL SALARIES/BENEFITS:			\$	836,800

2) OPERATING EXPENSES:

Occupancy:			
Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Total Occupancy:			\$ -
Materials & Supplies:			
Expense Item	Concise/ Specific Description	Rate/Formula	Cost
Total Materials & Supplies:			\$ -
General Operating:			
Expense Item	Brief Description	Rate/Formula	Cost

Data Collection	Employee Health Record, eClinicalWorks license - 5 licenses at \$525 per month, totaling \$31,500 per year. This contract seeks reimbursement for \$6,678 total.	525	\$ 6,678

Total General Operating: \$ 6,678

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost

Total Staff Travel: \$ -

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
SFCHC	Subcontract on cost reimbursement basis.	50000	\$ 50,000
Glide	Subcontract on cost reimbursement basis.	100000	\$ 100,000
Shanti	Subcontract on cost reimbursement basis.	50000	\$ 50,000

Total Consultants/Subcontractors: \$ 200,000

Other Expenses			
Expense Item	Brief Description	Rate/Formula	Cost
Total Other:			\$ -

TOTAL OPERATING EXPENSES: \$ 206,678

TOTAL DIRECT COSTS: \$ 1,043,478

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

	Amount
TOTAL SALARIES/BENEFITS:	\$ 836,800
TOTAL OPERATING EXPENSES:	\$ 206,678

4) INDIRECT COSTS Indirect Rate: 15.00% TOTAL INDIRECT COSTS: \$ 156,522

TOTAL EXPENSES: \$ 1,200,000

CAT 4: GAY/MSM HEALTH ACCESS POINT (I-

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		PREVENTION AND TREATMENT MEDICATION		CONDOM DISTRIBUTION		LINKAGE AND NAVIGATION		COMMUNITY ENGAGEMENT AND MOBILIZATION			
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals	
Lab Technician	2.00	123,392	90%	13,710	10%	-	0%		0%		0%	137,102	
Manager - Lab Technicians	1.00	96,766	90%	10,752	10%	-	0%		0%		0%	107,518	
Manager, Navigation	1.00	34,400	62%	16,645	30%	1,664	3%	2,774	5%		0%	55,484	
Navigator	0.75	28,248	60%	14,124	30%	1,412	3%	3,296	7%		0%	47,080	
Associate Director, PrEP & HIV Service	0.30	20,048	62%	9,701	30%	970	3%	1,617	5%		0%	32,336	
Nurse	1.00	67,436	62%	38,068	35%	3,263	3%		0%		0%	108,767	
Nurse Practitioner	0.55	46,390	62%	26,188	35%	2,245	3%		0%		0%	74,823	
Clinical Services Director	0.50	57,473	60%	38,316	40%	-	0%		0%		0%	95,789	
Total FTE & Salaries	7.10	474,153	72%	167,504	25%	9,554	1%	7,687	1%	-	0%	658,898	
Fringe Benefits	27%	128,022	72%	45,226	25%	2,579	1%	2,075	1%	-	0%	177,902	
Total Personnel Expenses		602,175	72%	212,730	25%	12,133	1%	9,762	1%	-	0%	836,800	
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Expense	%	Totals	
Total Occupancy			0%		0%		0%		0%		0%	-	
Total Materials and Supplies			0%		0%		0%		0%		0%	-	
Total General Operating		3,339	2%	3,339	2%		0%		0%		0%	6,678	
Total Staff Travel			0%		0%		0%		0%		0%	-	
Consultants/Subcontractor:		50,000	24%		0%		0%	100,000	48%	50,000	24%	200,000	
Other (specify):													
			0%		0%		0%		0%		0%	-	
			0%		0%		0%		0%		0%	-	
Total Operating Expenses		53,339	26%	3,339		-		100,000		50,000		206,678	
Total Direct Expenses		655,514	63%	216,069	21%	12,133	1%	109,762	11%	50,000	5%	1,043,478	
Indirect Expenses		15.0%	98,327	63%	32,411	21%	1,820	1%	16,464	11%	7,500	5%	156,522
TOTAL EXPENSES			753,841	63%	248,480	21%	13,953	1%	126,226	11%	57,500	5%	1,200,000
Unit of Service Type		Encounters		Hours		Months		Hours		Hours			
Number of UOS per Service Mode		27,120		650		12		1,092		124		28,998	
Cost Per UOS by Service Mode		\$27.80		\$382.28		\$1,162.75		\$115.60		\$463.72		N/A	
Number of UDC/NOC per Service Mode		10,200		N/A		N/A		905		276		11381	

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2024 - 6/30/2025**

Staff Position 1	Lab Technician				
Duties related to this program and UDC served	Performs phlebotomy services for confirmatory HIV antibody testing and RNA testing. Prepares specimen collection for transport to SFDPH laboratory.				
Degree, license, experience	State certified phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	68,551	2.00	12	2.00	\$ 137,102
Staff Position 2:	Manager - Lab Technicians				
Duties re program and UDC served	This position will be responsible for supervising the SFAF-wide lab tech team and working with the Director of Clinical Operations to oversee laboratory services. This position also serves as a lab tech as needed.				
Degree, license exp	Must have an active CPT License with the California Department of Public Health; Experience working with diverse populations including but not limited to LGBTQ+, injection drug users, and unhoused individuals; Must have two years of experience supervising staff; A minimum of three years of experience working in a laboratory setting; Must have two years of experience as a licensed phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,518	1.00	12	1.00	\$ 107,518
Staff Position 3:	Manager, Navigation				
Duties re prog/UDC	The Services Navigator is responsible for greeting clients and other visitors and guests, managing the flow of traffic, assessing client and guest needs, scheduling and registering clients for services, explaining and referring people to appropriate services and/or individuals and keeping the lobby areas functioning smoothly. The Services Navigator is responsible for enforcing community expectations and maintaining an environment that is inviting across our Mid Market and Castro locations.				
Degree, license exp	High School diploma or equivalent; Minimum of three years of work in community-based customer service, social work or triage required; Experience with electronic health record systems highly regarded; Experience working with people living with HIV, people who are substance users, have a mental health diagnosis, and/or are experiencing homelessness highly regarded.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	55,483	1.00	12	1.00	\$ 55,483
Staff Position 4:	Navigator				
Duties related to this program and UDC served	Answers phone calls, greets and connects clients and visitors to pertinent services, resources or staff. Screens clients for COVID-19 exposure and/or symptoms. Assess client needs and concerns and provides support, assistance, information and referrals. Obtains patient demographic and verifying insurance information at each visit. Educates clients and visitors about SFAF programs, services and departments. Registers clients for services and schedules client appointments.				
Degree, license exp	HS Diploma, 3 years of experience in customer service, social work, or triage. Experience with an electronic health record system. Experience with target populations.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	62,773	0.75	12	0.75	\$ 47,080
Staff Position 5:	Associate Director, PrEP & HIV Services				

Duties re program and UDC served	Responsible for the development and implementation of community and clinical level navigation interventions that targets the health of clients served in clinical services at SFAF. Supervises and develops Navigators.				
Degree, license exp	Bachelors Degree. Experience in target population, experience and knowledge of navigation interventions and frameworks, extensive knowledge of social support and health services in the region.				
		x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,786	0.30	12	0.30	\$ 32,336
Staff Position 6: Nurse					
Duties re program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,767	1.00	12	1.00	\$ 108,767
Staff Position 7: Nurse Practitioner					
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	136,041	0.55	12	0.55	\$ 74,823
Staff Position 8: Clinical Services Director					
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	191,574	0.50	12	0.50	\$ 95,789

Total FTE, Base:	7.10	Annualized:	7.10	
			Total Salaries:	\$ 658,898

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)				
Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO				
	FICA	\$		50,405.70
	SUI	\$		3,426.27
	Health/Life	\$		98,834.70
	Disability	\$		527.12
	WC	\$		3,953.39
	Retirement Plan	\$		20,755.29
		\$		-
		\$		-
			Total Fringe Benefit:	\$ 177,902
			Fringe Benefit %:	27.00%
			TOTAL SALARIES/BENEFITS:	\$ 836,800

2) OPERATING EXPENSES:

Occupancy:			
Expense Item	Concise/ Specific Description	Rate/Formula	Cost
			Total Occupancy: \$ -
Materials & Supplies:			
Expense Item	Concise/ Specific Description	Rate/Formula	Cost
			Total Materials & Supplies: \$ -
General Operating:			
Expense Item	Brief Description	Rate/Formula	Cost

Data Collection	Employee Health Record, eClinicalWorks license - 5 licenses at \$525 per month, totaling \$31,500 per year. This contract seeks reimbursement for \$6,678 total.	525	\$ 6,678

Total General Operating: \$ 6,678

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate/Formula	Cost

Total Staff Travel: \$ -

Consultants/Subcontractors:

Consult/Subcontractor	Service Description	Rate/Formula	Cost
SFCHC	Subcontract on cost reimbursement basis.	50000	\$ 50,000
Glide	Subcontract on cost reimbursement basis.	100000	\$ 100,000
Shanti	Subcontract on cost reimbursement basis.	50000	\$ 50,000

Total Consultants/Subcontractors: \$ 200,000

Other Expenses			
Expense Item	Brief Description	Rate/Formula	Cost
Total Other:			\$ -

TOTAL OPERATING EXPENSES: \$ 206,678

TOTAL DIRECT COSTS: \$ 1,043,478

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

	Amount
TOTAL SALARIES/BENEFITS:	\$ 836,800
TOTAL OPERATING EXPENSES:	\$ 206,678

4) INDIRECT COSTS Indirect Rate: 15.00% TOTAL INDIRECT COSTS: \$ 156,522

TOTAL EXPENSES: \$ 1,200,000

CAT 4: GAY/MSM HEALTH ACCESS POINT (I-

UOS COST ALLOCATION BY SERVICE MODE

CHEP General Fund

Service Modes:		INTEGRATED HIV/HCV/STD TESTING		PREVENTION AND TREATMENT MEDICATION		CONDOM DISTRIBUTION		LINKAGE AND NAVIGATION		COMMUNITY ENGAGEMENT AND MOBILIZATION		
Position Titles	Annual FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
Lab Technician	2.00	123,392	90%	13,710	10%	-	0%		0%		0%	137,102
Manager - Lab Technicians	1.00	96,766	90%	10,752	10%	-	0%		0%		0%	107,518
Manager, Navigation	1.00	34,400	62%	16,645	30%	1,664	3%	2,774	5%		0%	55,483
Navigator	0.75	28,248	60%	14,124	30%	1,412	3%	3,296	7%		0%	47,080
Associate Director, PrEP & HIV Service	0.30	20,048	62%	9,701	30%	970	3%	1,617	5%		0%	32,336
Nurse	1.00	67,436	62%	38,068	35%	3,263	3%		0%		0%	108,767
Nurse Practitioner	0.55	46,390	62%	26,188	35%	2,245	3%		0%		0%	74,823
Clinical Services Director	0.50	57,473	60%	38,316	40%	-	0%		0%		0%	95,789
Total FTE & Salaries	7.10	474,153	72%	167,504	25%	9,554	1%	7,687	1%	-	0%	658,898
Fringe Benefits	27%	128,022	72%	45,226	25%	2,579	1%	2,075	1%	-	0%	177,902
Total Personnel Expenses		602,175	72%	212,730	25%	12,133	1%	9,762	1%	-	0%	836,800
Operating Expenses		Expense	%	Expense	%	Expense	%	Expense	%	Expense	%	Totals
Total Occupancy			0%		0%		0%		0%		0%	-
Total Materials and Supplies			0%		0%		0%		0%		0%	-
Total General Operating		3,339	2%	3,339	2%		0%		0%		0%	6,678
Total Staff Travel			0%		0%		0%		0%		0%	-
Consultants/Subcontractor:		50,000	24%		0%		0%	100,000	48%	50,000	24%	200,000
Other (specify):												
			0%		0%		0%		0%		0%	-
			0%		0%		0%		0%		0%	-
Total Operating Expenses		53,339	26%	3,339		-		100,000		50,000		206,678
Total Direct Expenses		655,514	63%	216,069	21%	12,133	1%	109,762	11%	50,000	5%	1,043,478
Indirect Expenses 15.0%		98,327	63%	32,411	21%	1,820	1%	16,464	11%	7,500	5%	156,522
TOTAL EXPENSES		753,841	63%	248,480	21%	13,953	1%	126,226	11%	57,500	5%	1,200,000
Unit of Service Type		Encounters		Hours		Months		Hours		Hours		
Number of UOS per Service Mode		27,120		650		12		1,092		124		28,998
Cost Per UOS by Service Mode		\$27.80		\$382.28		\$1,162.75		\$115.60		\$463.72		N/A
Number of UDC/NOC per Service Mode		10,200		N/A		N/A		905		276		11381

BUDGET JUSTIFICATION**1a) SALARIES****7/1/2025 - 6/30/2026**

Staff Position 1	Lab Technician				
Duties related to this program and UDC served	Performs phlebotomy services for confirmatory HIV antibody testing and RNA testing. Prepares specimen collection for transport to SFDPH laboratory.				
Degree, license, experience	State certified phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	68,551	2.00	12	2.00	\$ 137,102
Staff Position 2:	Manager - Lab Technicians				
Duties re program and UDC served	This position will be responsible for supervising the SFAF-wide lab tech team and working with the Director of Clinical Operations to oversee laboratory services. This position also serves as a lab tech as needed.				
Degree, license exp	Must have an active CPT License with the California Department of Public Health; Experience working with diverse populations including but not limited to LGBTQ+, injection drug users, and unhoused individuals; Must have two years of experience supervising staff; A minimum of three years of experience working in a laboratory setting; Must have two years of experience as a licensed phlebotomist.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,518	1.00	12	1.00	\$ 107,518
Staff Position 3:	Manager, Navigation				
Duties re prog/UDC	The Services Navigator is responsible for greeting clients and other visitors and guests, managing the flow of traffic, assessing client and guest needs, scheduling and registering clients for services, explaining and referring people to appropriate services and/or individuals and keeping the lobby areas functioning smoothly. The Services Navigator is responsible for enforcing community expectations and maintaining an environment that is inviting across our Mid Market and Castro locations.				
Degree, license exp	High School diploma or equivalent; Minimum of three years of work in community-based customer service, social work or triage required; Experience with electronic health record systems highly regarded; Experience working with people living with HIV, people who are substance users, have a mental health diagnosis, and/or are experiencing homelessness highly regarded.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	55,483	1.00	12	1.00	\$ 55,483
Staff Position 4:	Navigator				
Duties related to this program and UDC served	Answers phone calls, greets and connects clients and visitors to pertinent services, resources or staff. Screens clients for COVID-19 exposure and/or symptoms. Assess client needs and concerns and provides support, assistance, information and referrals. Obtains patient demographic and verifying insurance information at each visit. Educates clients and visitors about SFAF programs, services and departments. Registers clients for services and schedules client appointments.				
Degree, license exp	HS Diploma, 3 years of experience in customer service, social work, or triage. Experience with an electronic health record system. Experience with target populations.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	62,773	0.75	12	0.75	\$ 47,080
Staff Position 5:	Associate Director, PrEP & HIV Services				

Duties re program and UDC served	Responsible for the development and implementation of community and clinical level navigation interventions that targets the health of clients served in clinical services at SFAF. Supervises and develops Navigators.				
Degree, license exp	Bachelors Degree. Experience in target population, experience and knowledge of navigation interventions and frameworks, extensive knowledge of social support and health services in the region.				
		x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	107,786	0.30	12	0.30	\$ 32,336
Staff Position 6: Nurse					
Duties re program and UDC served	The Clinical Registered Nurse (RN) provides direct patient care at the Nurse-led clinic at Magnet at Strut. The position will function within the scope of practice as defined by Strut's protocols and the State of California. This includes assessment, planning, implementing, and evaluating Strut's clients for sexually transmitted infections (STI) and HIV infection. All Magnet at Strut staff members also serve as HIV testing counselors as needed in the clinic. This is a per diem position that includes weekday, weekends, and evening shifts.				
Degree, license exp	A minimum of an Associate Degree in Nursing is required; Bachelor of Science in Nursing preferred; Current California Registered Nurse License is required; must maintain an active Registered Nurse License with the California Board of Nursing; Basic Life Support (BLS) certification for Health Care Providers required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire; At least one year of nursing experience in an outpatient sexual health setting preferred.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	108,767	1.00	12	1.00	\$ 108,767
Staff Position 7: Nurse Practitioner					
Duties re program and UDC served	The Nurse Practitioner (NP) provides advanced sexual health care and takes an active leadership role for the daily clinical operations of the Foundation, reporting to the Clinic Director. The NP works under a clinical scope of practice with the Senior Director of Clinical Services and Medical Director.				
Degree, license exp	Master's degree in Nursing required; Current California Registered Nurse and Nurse Practitioner license; Must have or obtain certification as a Nurse practitioner (NP) within 6 months of hire; must maintain an active Registered Nurse and Nurse Practitioner License with the California Board of Nursing; Current DEA and California Furnishing license required; Current Health Care Provider Basic Life Support (BLS) certification required; Current California Certification as an HIV Counselor required or must be obtained within 6 months of hire.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	136,041	0.55	12	0.55	\$ 74,823
Staff Position 8: Clinical Services Director					
Duties re program and UDC served	Responsible for overseeing the day to day operations at all SFAF clinical sites. Primary responsibilities include supervising the managers of the lab technician and services navigation teams, ensuring compliance with lab regulations at all SFAF sites (i.e., staff competencies, proficiency testing, and quality assurance under Moderate Complexity CLIA regulations), oversees clinical licensing, ensures supply availability at all clinical sites, updating client and laboratory related policies and best practices when indicated, and oversees clinical partnerships with San Francisco Department of Public Health and community-based organizations.				
Degree, license exp	Bachelor's Degree highly regarded; 3 years of managing and supervising staff required; Possession and maintenance of a State of California Certification as a Phlebotomist I or II; Basic Life Support (BLS) certification for Health Care Providers required; Knowledge of Title 22, Title 24, HIPAA and other regulations related to healthcare; Preferred experience in sexual health screenings and prevention.				
	Annual Salary	x Base FTE	x Mos per Yr	Annualized FTE if < 12 mo	Total
	191,574	0.50	12	0.50	\$ 95,789

Total FTE, Base:	7.10	Annualized:	7.10	
			Total Salaries:	\$ 658,898

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)				
Estimated Social Security, Retirement, Medical, Dental, Unemployment Ins, Disability, PTO				
	FICA	\$		50,405.70
	SUI	\$		3,426.27
	Health/Life	\$		98,834.70
	Disability	\$		527.12
	WC	\$		3,953.39
	Retirement Plan	\$		20,755.29
		\$		-
		\$		-
			Total Fringe Benefit:	\$ 177,902
			Fringe Benefit %:	27.00%
			TOTAL SALARIES/BENEFITS:	\$ 836,800

2) OPERATING EXPENSES:

Occupancy:			
Expense Item	Concise/ Specific Description	Rate/Formula	Cost
			Total Occupancy: \$ -
Materials & Supplies:			
Expense Item	Concise/ Specific Description	Rate/Formula	Cost
			Total Materials & Supplies: \$ -
General Operating:			
Expense Item	Brief Description	Rate/Formula	Cost

Appendix C

Insurance Waiver Reserved

Appendix D

FEMA EMERGENCY & EXIGENCY CONTRACTS REQUIREMENTS Reserved

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

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

RECITALS

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

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

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

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

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

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

1. Definitions.

a. **Breach** means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

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

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

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

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

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

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

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

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

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

k. Protected Health Information or PHI means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or

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with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this BAA, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

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

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

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

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

2. Obligations of Business Associate.

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

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

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

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

e. Prohibited Uses and Disclosures. BA shall not use or disclose Protected Information other than as permitted or required by the Agreement and BAA, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the Protected Information solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

f. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Agreement or this

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San Francisco Department of Public Health
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BAA, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

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

h. Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least seven (7) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

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

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

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

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

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

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

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

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

3. Termination.

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

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

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

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

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

4. Amendment to Comply with Law.

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

5. Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible access, use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days from City's written notice to BA of such fines, penalties or damages.

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

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

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

Contractor Name:		Contractor City Vendor ID	
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PRIVACY ATTESTATION

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

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

I. All Contractors.

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

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

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

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

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

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

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

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

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

I. All Contractors.

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

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

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

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

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
-------------------------------	--------------	--	-----------	--	------	--

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

F-1
01/01/2023 - 06/30/2023
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-1JAN23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No: _____

Funding Source: _____ GF

Department ID-Authority ID: _____

Program Name: Training Academy & Clinical Assistance Program

Project ID-Activity ID: _____

ACE Control #: _____

Invoice Period: **01/1/23 - 01/31/23**

FINAL Invoice ☐ (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Start-up Activities	6	n/a						#####	6	#####
Capacity Building Implementation Activities	770	35							770	35

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	35				35

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$143,480				\$143,480.00
Fringe Benefits	\$29,236				\$29,236.00
Total Personnel Expenses	\$172,716				\$172,716.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$17,538				\$17,538.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$3,079				\$3,079.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$2,319				\$2,319.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$22,936				\$22,936.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$195,652				\$195,652.00
Indirect Expenses	\$29,348				\$29,348.00
TOTAL EXPENSES	\$225,000				\$225,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

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

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-1JUL23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: Training Academy & Clinical Assistance Program

ACE Control #:

Invoice Period: 07/1/23 - 07/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	1,995	85							1,995	85

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	85				85

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$286,960				\$286,960.00
Fringe Benefits	\$58,471				\$58,471.00
Total Personnel Expenses	\$345,431				\$345,431.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$35,077				\$35,077.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$6,158				\$6,158.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$4,638				\$4,638.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$45,873				\$45,873.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$391,304				\$391,304.00
Indirect Expenses	\$58,696				\$58,696.00
TOTAL EXPENSES	\$450,000				\$450,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE

F-1b
07/01/2024 - 06/30/2025
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-1JUL24

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Program Name: Training Academy & Clinical Assistance Program

Funding Source: GF

ACE Control #:

Department ID-Authority ID:

Project ID-Activity ID:

Invoice Period: 07/1/24 - 07/31/24

FINAL Invoice

(check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	1,995	85							1,995	85

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	85				85

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$286,960				\$286,960.00
Fringe Benefits	\$58,471				\$58,471.00
Total Personnel Expenses	\$345,431				\$345,431.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$35,077				\$35,077.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$6,158				\$6,158.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$4,638				\$4,638.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$45,873				\$45,873.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$391,304				\$391,304.00
Indirect Expenses	\$58,696				\$58,696.00
TOTAL EXPENSES	\$450,000				\$450,000.00
LESS: Initial Payment Recovery			NOTES:		
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____

Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

By: _____

Date: _____

Attn: Accounts Payable (DPH Authorized Signatory)

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

F-1c
07/01/2025 - 06/30/2026
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-1JUL25

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: Training Academy & Clinical Assistance Program

ACE Control #:

Invoice Period: 07/1/25 - 07/31/25

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	1,995	85							1,995	85

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	85				85

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$286,960				\$286,960.00
Fringe Benefits	\$58,471				\$58,471.00
Total Personnel Expenses	\$345,431				\$345,431.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$35,077				\$35,077.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$6,158				\$6,158.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$4,638				\$4,638.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$45,873				\$45,873.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$391,304				\$391,304.00
Indirect Expenses	\$58,696				\$58,696.00
TOTAL EXPENSES	\$450,000				\$450,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-2
01/01/2023 - 06/30/2023
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-2JAN23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: Clinical Services Sustainability

ACE Control #:

Invoice Period: 01/1/23 - 01/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	8,925	N/A					#####		8,925	#####
Linkage and Navigation	N/A	290					#####		#####	290
Prevention and Treatment Medication	250	N/A					#####		250	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	290				290

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$196,593				\$196,593.00
Fringe Benefits	\$53,080				\$53,080.00
Total Personnel Expenses	\$249,673				\$249,673.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$21,095				\$21,095.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$732				\$732.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$2,790				\$2,790.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$24,617				\$24,617.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$274,290				\$274,290.00
Indirect Expenses	\$41,142				\$41,142.00
TOTAL EXPENSES	\$315,432				\$315,432.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

By: _____
(DPH Authorized Signatory)

Date: _____

Attn: Accounts Payable

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

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

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-2JUL23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: Clinical Services Sustainability

ACE Control #:

Invoice Period: 07/1/23 - 07/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	14,825	N/A					#####		14,825	#####
Linkage and Navigation	N/A	580					#####		#####	580
Prevention and Treatment Medication	500	N/A					#####		500	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	580				580

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$393,188				\$393,188.00
Fringe Benefits	\$106,161				\$106,161.00
Total Personnel Expenses	\$499,349				\$499,349.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$42,187				\$42,187.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$1,464				\$1,464.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$5,580				\$5,580.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$49,231				\$49,231.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$548,580				\$548,580.00
Indirect Expenses	\$82,286				\$82,286.00
TOTAL EXPENSES	\$630,866				\$630,866.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-2b
07/01/2024 - 06/30/2025
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-2JUL24

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: Clinical Services Sustainability

ACE Control #:

Invoice Period: 07/1/24 - 07/31/24

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	14,825	N/A					#####		14,825	#####
Linkage and Navigation	N/A	580					#####		#####	580
Prevention and Treatment Medication	500	N/A					#####		500	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	580				580

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$393,188				\$393,188.00
Fringe Benefits	\$106,161				\$106,161.00
Total Personnel Expenses	\$499,349				\$499,349.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$42,187				\$42,187.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$1,464				\$1,464.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$5,580				\$5,580.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$49,231				\$49,231.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$548,580				\$548,580.00
Indirect Expenses	\$82,286				\$82,286.00
TOTAL EXPENSES	\$630,866				\$630,866.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-2c
07/01/2025 - 06/30/2026
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-2JUL25

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No: _____

Funding Source: _____ GF

Department ID-Authority ID: _____

Program Name: Clinical Services Sustainability

Project ID-Activity ID: _____

ACE Control #: _____

Invoice Period: **07/1/25 - 07/31/25**

FINAL Invoice ☐ (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	14,825	N/A					#####		14,825	#####
Linkage and Navigation	N/A	580					#####		#####	580
Prevention and Treatment Medication	500	N/A					#####		500	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	580				580

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$393,188				\$393,188.00
Fringe Benefits	\$106,161				\$106,161.00
Total Personnel Expenses	\$499,349				\$499,349.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$42,187				\$42,187.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$1,464				\$1,464.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$5,580				\$5,580.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$49,231				\$49,231.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$548,580				\$548,580.00
Indirect Expenses	\$82,286				\$82,286.00
TOTAL EXPENSES	\$630,866				\$630,866.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-3
01/01/2023 - 06/30/2023
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-3JAN23

Contract Purchase Order No: _____

Telephone: 415-487-3000
Fax: _____

CHEP

Funding Source: _____ GF

Department ID-Authority ID: _____

Program Name: Capacity Building Activities: The Black Health Clinical Assistant Program

Project ID-Activity ID: _____

ACE Control #: _____

Invoice Period: **01/1/23 - 01/31/23**

FINAL Invoice ☐ (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Startup Activities	3	N/A						#####	3	#####
Capacity Building Implementation Activities	1,200	12							1,200	12

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	12				12

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$142,537				\$142,537.00
Fringe Benefits	\$15,675				\$15,675.00
Total Personnel Expenses	\$158,212				\$158,212.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$8,560				\$8,560.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$6,009				\$6,009.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,132				\$1,132.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$15,701				\$15,701.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$173,913				\$173,913.00
Indirect Expenses	\$26,087				\$26,087.00
TOTAL EXPENSES	\$200,000				\$200,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-3a
07/01/2023 - 06/30/2024
PAGE A

Contractor: **San Francisco AIDS Foundation**
Address: **1035 Market Street, Suite 400**
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-3JUL23

Contract Purchase Order No:

Telephone: **415-487-3000**
Fax:

CHEP

Funding Source:

Department ID-Authority ID:

Program Name: **Capacity Building Activities: The Black Health Clinical Assistant Program**

Project ID-Activity ID:

ACE Control #:

Invoice Period: **07/1/23 - 07/31/23**

FINAL Invoice ☐ (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	2,400	24							2,400	24

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	24				24

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$285,073				\$285,073.00
Fringe Benefits	\$31,351				\$31,351.00
Total Personnel Expenses	\$316,424				\$316,424.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$17,120				\$17,120.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$12,018				\$12,018.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$2,264				\$2,264.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$31,402				\$31,402.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$347,826				\$347,826.00
Indirect Expenses	\$52,174				\$52,174.00
TOTAL EXPENSES	\$400,000				\$400,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: **AidsOffice@sfdph.org**

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE

F-3b
07/01/2024 - 06/30/2025
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-3JUL24

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Department ID-Authority ID:

Funding Source: GF

Project ID-Activity ID:

Program Name: Capacity Building Activities: The Black Health Clinical Assistant Program

ACE Control #:

Invoice Period: 07/1/24 - 07/31/24

FINAL Invoice

(check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	2,400	24							2,400	24

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	24				24

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$285,073				\$285,073.00
Fringe Benefits	\$31,351				\$31,351.00
Total Personnel Expenses	\$316,424				\$316,424.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$17,120				\$17,120.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$12,018				\$12,018.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$2,264				\$2,264.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$31,402				\$31,402.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$347,826				\$347,826.00
Indirect Expenses	\$52,174				\$52,174.00
TOTAL EXPENSES	\$400,000				\$400,000.00
LESS: Initial Payment Recovery			NOTES:		
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____

Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-3c
07/01/2025 - 06/30/2026
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-3JUL25

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Program Name: Capacity Building Activities: The Black Health Clinical Assistant Program

Project ID-Activity ID:

ACE Control #:

Invoice Period: 07/1/25 - 07/31/25

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	2,400	24							2,400	24

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	24				24

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$285,073				\$285,073.00
Fringe Benefits	\$31,351				\$31,351.00
Total Personnel Expenses	\$316,424				\$316,424.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$17,120				\$17,120.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$12,018				\$12,018.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$2,264				\$2,264.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$31,402				\$31,402.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$347,826				\$347,826.00
Indirect Expenses	\$52,174				\$52,174.00
TOTAL EXPENSES	\$400,000				\$400,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-4
01/01/2023 - 06/30/2023
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-4JAN23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: HAP Capacity Building Activities Program

ACE Control #:

Invoice Period: 01/1/23 - 01/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	6	N/A						#####	6	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		N/A			#####

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$37,500				\$37,500.00
Fringe Benefits	\$10,125				\$10,125.00
Total Personnel Expenses	\$47,625				\$47,625.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$7,086				\$7,086.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$246				\$246.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$937				\$937.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$96,280				\$96,280.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$104,549				\$104,549.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$152,174				\$152,174.00
Indirect Expenses	\$22,826				\$22,826.00
TOTAL EXPENSES	\$175,000				\$175,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-4a
07/01/2023 - 06/30/2024
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-4JUL23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Project ID-Activity ID:

Program Name: HAP Capacity Building Activities Program

ACE Control #:

Invoice Period: 07/1/23 - 07/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	12	N/A						#####	12	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		N/A			#####

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$75,000				\$75,000.00
Fringe Benefits	\$20,250				\$20,250.00
Total Personnel Expenses	\$95,250				\$95,250.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$14,172				\$14,172.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$492				\$492.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,874				\$1,874.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$192,560				\$192,560.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$209,098				\$209,098.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$304,348				\$304,348.00
Indirect Expenses	\$45,652				\$45,652.00
TOTAL EXPENSES	\$350,000				\$350,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE

F-4b
07/01/2024 - 06/30/2025
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-4JUL24

Telephone: 415-487-3000
Fax:



Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Program Name: HAP Capacity Building Activities Program

Project ID-Activity ID:

ACE Control #:

Invoice Period: 07/1/24 - 07/31/24

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	12	N/A						#####	12	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		N/A			#####

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$75,000				\$75,000.00
Fringe Benefits	\$20,250				\$20,250.00
Total Personnel Expenses	\$95,250				\$95,250.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$14,172				\$14,172.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$492				\$492.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,874				\$1,874.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$192,560				\$192,560.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$209,098				\$209,098.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$304,348				\$304,348.00
Indirect Expenses	\$45,652				\$45,652.00
TOTAL EXPENSES	\$350,000				\$350,000.00
LESS: Initial Payment Recovery			NOTES:		
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to:	AidsOffice@sfdph.org	By:		Date:	
Attn: Accounts Payable		(DPH Authorized Signatory)			

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

F-4c
07/01/2025 - 06/30/2026
PAGE A

Contractor: **San Francisco AIDS Foundation**
Address: **1035 Market Street, Suite 400**
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-4JUL25

Telephone: **415-487-3000**
Fax:

CHEP

Contract Purchase Order No:

Funding Source:

Department ID-Authority ID:

Program Name: **HAP Capacity Building Activities Program**

Project ID-Activity ID:

ACE Control #:

Invoice Period: **07/1/25 - 07/31/25**

FINAL Invoice ☐ (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Capacity Building Implementation Activities	12	N/A						#####	12	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		N/A			#####

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$75,000				\$75,000.00
Fringe Benefits	\$20,250				\$20,250.00
Total Personnel Expenses	\$95,250				\$95,250.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$14,172				\$14,172.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$492				\$492.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,874				\$1,874.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$192,560				\$192,560.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$209,098				\$209,098.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$304,348				\$304,348.00
Indirect Expenses	\$45,652				\$45,652.00
TOTAL EXPENSES	\$350,000				\$350,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: **AidsOffice@sfdph.org**

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-5
01/01/2023 - 06/30/2023
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-5JAN23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Program Name: Health Access Point Gay/MSM

Project ID-Activity ID:

ACE Control #:

Invoice Period: 01/1/23 - 01/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	13,380	5,100							13,380	5,100
Prevention and Treatment Medication	325	N/A							325	#####
Condom Distribution	6	N/A							6	#####
Linkage and Navigation	546	453							546	453
Community Engagement and Mobilization	62	138							62	138

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		5691			5,691

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$329,449				\$329,449.00
Fringe Benefits	\$88,951				\$88,951.00
Total Personnel Expenses	\$418,400				\$418,400.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)					
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)					
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$3,339				\$3,339.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$100,000				\$100,000.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$103,339				\$103,339.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$521,739				\$521,739.00
Indirect Expenses	\$78,261				\$78,261.00
TOTAL EXPENSES	\$600,000				\$600,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-5.1
01/01/2023 - 07/31/2023
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-5JAN23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: 20-2010 CDC: CFDA 93.9

Department ID-Authority ID:

Program Name: Health Access Point Gay/MSM

Project ID-Activity ID:

ACE Control #:

Invoice Period: 01/1/23 - 01/31/23

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	180	N/A						#####	180	#####

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		N/A			#####

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)					
Fringe Benefits					
Total Personnel Expenses					
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)					
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$2,848				\$2,848.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,500				\$1,500.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$4,348				\$4,348.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$4,348				\$4,348.00
Indirect Expenses	\$652				\$652.00
TOTAL EXPENSES	\$5,000				\$5,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-5a
07/01/2023 - 06/30/2024
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-5JUL23

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No: _____

Funding Source: _____ GF

Department ID-Authority ID: _____

Program Name: Health Access Point Gay/MSM

Project ID-Activity ID: _____

ACE Control #: _____

Invoice Period: **07/1/23 - 07/31/23**

FINAL Invoice ☐ (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	27,120	10,200							27,120	10,200
Prevention and Treatment Medication	650	N/A							650	#####
Condom Distribution	12	N/A							12	#####
Linkage and Navigation	1,092	905							1,092	905
Community Engagement and Mobilization	124	276							124	276

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		11381			11,381

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$658,898				\$658,898.00
Fringe Benefits	\$177,902				\$177,902.00
Total Personnel Expenses	\$836,800				\$836,800.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)					
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)					
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$6,678				\$6,678.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$200,000				\$200,000.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$206,678				\$206,678.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$1,043,478				\$1,043,478.00
Indirect Expenses	\$156,522				\$156,522.00
TOTAL EXPENSES	\$1,200,000				\$1,200,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-5b
07/01/2024 - 06/30/2025
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-5JUL24

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Program Name: Health Access Point Gay/MSM

Project ID-Activity ID:

ACE Control #:

Invoice Period: 07/1/24 - 07/31/24

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	27,120	10,200							27,120	10,200
Prevention and Treatment Medication	650	N/A							650	#####
Condom Distribution	12	N/A							12	#####
Linkage and Navigation	1,092	905							1,092	905
Community Engagement and Mobilization	124	276							124	276

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		11381			11,381

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$658,898				\$658,898.00
Fringe Benefits	\$177,902				\$177,902.00
Total Personnel Expenses	\$836,800				\$836,800.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)					
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)					
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$6,678				\$6,678.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$200,000				\$200,000.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$206,678				\$206,678.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$1,043,478				\$1,043,478.00
Indirect Expenses	\$156,522				\$156,522.00
TOTAL EXPENSES	\$1,200,000				\$1,200,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

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

F-5c
07/01/2025 - 06/30/2026
PAGE A

Contractor: San Francisco AIDS Foundation
Address: 1035 Market Street, Suite 400
San Francisco, CA 94103

Contract ID #
1000024734

Invoice Number
A-5JUL25

Telephone: 415-487-3000
Fax:

CHEP

Contract Purchase Order No:

Funding Source: GF

Department ID-Authority ID:

Program Name: Health Access Point Gay/MSM

Project ID-Activity ID:

ACE Control #:

Invoice Period: 07/1/25 - 07/31/25

FINAL Invoice (check if Yes)

DELIVERABLES	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES	
	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Integrated HIV/HCV/STD Testing	27,120	10,200							27,120	10,200
Prevention and Treatment Medication	650	N/A							650	#####
Condom Distribution	12	N/A							12	#####
Linkage and Navigation	1,092	905							1,092	905
Community Engagement and Mobilization	124	276							124	276

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix		11381			11,381

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$658,898				\$658,898.00
Fringe Benefits	\$177,902				\$177,902.00
Total Personnel Expenses	\$836,800				\$836,800.00
Operating Expenses:					
Occupancy -(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)					
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)					
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$6,678				\$6,678.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$200,000				\$200,000.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$206,678				\$206,678.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$1,043,478				\$1,043,478.00
Indirect Expenses	\$156,522				\$156,522.00
TOTAL EXPENSES	\$1,200,000				\$1,200,000.00
LESS: Initial Payment Recovery					
Other Adjustments (Enter as negative, if appropriate)					
REIMBURSEMENT					

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title: _____

Send to: AidsOffice@sfdph.org

Attn: Accounts Payable

By: _____
(DPH Authorized Signatory)

Date: _____

Appendix G

Dispute Resolution Procedure For Health and Human Services Nonprofit Contractors 9-06

Introduction

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

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

Dispute Resolution Procedure

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

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

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

- **Step 1** The contractor will submit a written statement of the concern or dispute addressed to the Contract/Program Manager who oversees the agreement in question. The writing should describe the nature of the concern or dispute, i.e., program, reporting, monitoring, budget, compliance or other concern. The Contract/Program Manager will investigate the concern with the appropriate department staff that are involved with the nonprofit agency's program, and will either convene a meeting with the contractor or provide a written response to the contractor within 10 working days.
- **Step 2** Should the dispute or concern remain unresolved after the completion of Step 1, the contractor may request review by the Division or Department Head who supervises the Contract/Program Manager. This request shall be in writing and should describe why the concern is still unresolved and propose a solution that is satisfactory to the contractor. The Division or Department Head will consult with other Department and City staff as appropriate, and will provide a written determination of the resolution to the dispute or concern within 10 working days.
- **Step 3** Should Steps 1 and 2 above not result in a determination of mutual agreement, the contractor may forward the dispute to the Executive Director of the Department or their designee. This dispute shall be in writing and describe both the nature of the dispute or concern and why the steps taken

Appendix G

to date are not satisfactory to the contractor. The Department will respond in writing within 10 working days.

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

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

Appendix H
Reserved

Appendix I
Reserved

Appendix J
Grant Terms Reserved

APPENDIX K

Data Access and Sharing Terms

Article 1 Access

1.1 Revision to Scope of Access (RSA):

Any added access may be granted by the City to Agency and each Agency Data User through a Revision to Scope of Access in writing and executed by both parties. Any Revision to Scope of Access shall be considered a part of and incorporated into this Agreement, governed by all its terms, by reference.

1.2 Primary and Alternate Agency Site Administrator.

Before System(s) access is granted, Agency must appoint a primary and alternate Agency Site Administrator responsible for System(s) access tasks, including but not limited to the following:

1.2.1 Completing and obtaining City approval of the Account Provisioning Request documents and/or Data Set Request documents;

1.2.2 Communicating with the SFDPH IT Service Desk;

1.2.3 Providing Agency Data User(s) details to the City;

1.2.4 Ensuring that Agency Data User(s) complete required SFDPH trainings annually;

1.2.5 Ensuring that Agency Data User(s) understand and execute SFDPH's data access confidentiality agreement; and

1.2.6 Provisioning and deprovisioning Agency Data Users as detailed herein. To start the process, the Agency Site Administrator must contact the SFDPH IT Service Desk at 628-206-7378, dph.helpdesk@sfdph.org.

1.3 SFDPH IT Service Desk.

For new provisioning requests, only Agency Site Administrators are authorized to contact the SFDPH IT Service Desk. The City reserves the right to decline any call placed by other than the Agency Site Administrator. Individual Agency Data Users are not authorized to contact the SFDPH IT Service Desk.

1.4 Deprovisioning Schedule.

Agency, through the Agency Site Administrator, has sole responsibility to deprovision Agency Data Users from the System(s) as appropriate on an ongoing basis. Agency must immediately deprovision an Agency Data User upon any event ending that Data User's need to access the System(s), including job duty change and/or termination. Agency remains liable for the conduct of Agency Data Users until deprovisioned. When deprovisioning employees via the SFDPH IT Service Desk, Agency must maintain evidence that the SFDPH IT Service Desk was notified.

1.5 Active Directory.

Agency Data Users will need an SFDPH Active Directory account in order to access each System(s). These Active Directory Accounts will be created as part of the provisioning process.

1.6 Role Based Access.

Each Agency Data User's access to the System(s) will be role-based and access is limited to that necessary for treatment, payment, and health care operations. The City will assign Agency Data User roles upon provisioning and reserves the right to deny, revoke, limit, or modify Agency Data User's access acting in its sole discretion.

1.7 Training Requirements.

Before System(s) access is granted, and annually thereafter, each Agency Data User must complete SFDPH compliance, privacy, and security training. Agency must maintain written records evidencing such annual training for each Agency Data User and provide copies upon request to the City. For questions about how to complete SFDPH's compliance, privacy, and security training, contact Compliance.Privacy@sfdph.org, (855) 729-6040.

Before Agency Data User first access to System(s), system-specific training must be completed. For training information, Agency Site Administrator may contact the SFDPH IT Service Desk,

1.8 Agency Data User Confidentiality Agreement.

Before System(s) access is granted, as part of SFDPH's compliance, privacy, and security training, each Agency Data User must complete SFDPH's individual user confidentiality, data security and electronic signature agreement form. The agreement must be renewed annually.

1.9 Corrective Action.

Agency shall take corrective action, including but not limited to termination and/or suspension of any System(s) access by any Agency Data User who acts in violation of this Agreement and/or applicable regulatory requirements.

1.10 User ID and Password.

Each Agency Data User will be assigned or create a User ID and password. Agency and each Agency Data User shall protect the confidentiality of User IDs and passwords and shall not divulge them to any other person(s). Agency is responsible for the security of the User IDs and passwords issued to or created by Agency Data Users and is liable for any misuse.

1.11 Notification of Compromised Password.

In the event that a password assigned to or created by an Agency Data User is compromised or disclosed to a person other than the Agency Data User, Agency shall upon learning of the compromised password immediately notify the City, at Compliance.Privacy@sfdph.org, (855) 729-6040. Agency is liable for any such misuse. Agency's failure to monitor each Agency Data User's ID and/or password use shall provide grounds for the City to terminate and/or limit Agency's System(s) access.

1.12 Multi Factor Authentication.

Agency and each Agency Data User must use multi-factor authentication as directed by the City to access the System(s).

1.13 Qualified Personnel.

Agency shall allow only qualified personnel under Agency's direct supervision to act as Agency Data Users with access to the System(s).

1.14 Workstation/Laptop encryption.

All workstations and laptops that process and/or store City Data must be encrypted using a current industry standard algorithm. The encryption solution must be full disk unless approved by the SFDPH Information Security Office.

1.15 Server Security.

Servers containing unencrypted City Data must have sufficient administrative, physical, and technical controls in place to protect that data, based upon a risk assessment/system security review.

1.16 Removable media devices.

All electronic files that contain City Data must be encrypted using a current industry standard algorithm when stored on any removable media or portable device (i.e. USB thumb drives, CD/DVD, smart devices tapes etc.).

1.17 Antivirus software.

All workstations, laptops and other systems that process and/or store City Data must install and actively use a comprehensive anti-virus software solution with automatic updates scheduled at least daily.

1.18 Patch Management.

All workstations, laptops and other systems that process and/or store City Data must have operating system and application security patches applied, with system reboot if necessary. There must be a documented patch management process that determines installation timeframe based on risk assessment and vendor recommendations.

1.19 System Timeout.

The system must provide an automatic timeout, requiring reauthentication of the user session after no more than 20 minutes of inactivity.

1.20 Warning Banners.

All systems containing City Data must display a warning banner each time a user attempts access, stating that data is confidential, systems are logged, and system use is for business purposes only. User must be directed to log off the system if they do not agree with these requirements.

1.21 Transmission encryption.

All data transmissions of City Data outside the Agency's secure internal network must be encrypted using a current industry standard algorithm. Encryption can be end to end at the network level, or the data files containing City Data can be encrypted. This requirement pertains to any type of City Data in motion such as website access, file transfer, and e-mail.

1.22 No Faxing/Mailing.

City Data may not be faxed or mailed.

1.23 Intrusion Detection.

All systems involved in accessing, holding, transporting, and protecting City Data that are accessible via the Internet must be protected by a comprehensive intrusion detection and prevention solution.
of the City.

1.24 Security of PHI.

Agency is solely responsible for maintaining data security policies and procedures, consistent with those of the City that will adequately safeguard the City Data and the System. Upon request, Agency will provide such security policies and procedures to the City. The City may examine annually, or in response to a security or privacy incident, Agency's facilities, computers, privacy and security policies and procedures and related records as may be necessary to be assured that Agency is in compliance with the terms of this Agreement, and as applicable HIPAA, the HITECH Act, and other federal and state privacy and security laws and regulations. Such examination will occur at a mutually acceptable time agreed upon by the parties but no later than ten (10) business days of Agency's receipt of the request.

1.25 Data Security and City Data

Agency shall provide security for its networks and all internet connections consistent with industry best practices, and will promptly install all patches, fixes, upgrades, updates and new versions of any security software it employs. For information disclosed in electronic form, Agency agrees that appropriate safeguards include electronic barriers (e.g., "firewalls", Transport Layer Security (TLS), Secure Socket Layer [SSL] encryption, or most current industry standard encryption, intrusion prevention/detection or similar barriers).

1.26 Data Privacy and Information Security Program.

Without limiting Agency's obligation of confidentiality as further described herein, Agency shall be responsible for establishing and maintaining a data privacy and information security program, including physical, technical, administrative, and organizational safeguards, that is designed to: (i) ensure the security and confidentiality of the City Data; (ii) protect against any anticipated threats or hazards to the security or integrity of the City Data; (iii) protect against unauthorized disclosure, access to, or use of the City Data; (iv) ensure the proper disposal of City Data; and, (v) ensure that all of Agency's employees, agents, and subcontractors, if any, comply with all of the foregoing. In no case shall the safeguards of Agency's data privacy and information security program be less stringent than the safeguards and standards recommended by the National Institute of Standards and Technology (NIST) Cybersecurity Framework and the Health Information Technology for Economic and Clinical Health Act (HITECH).

1.27 Disaster Recovery.

Agency must establish a documented plan to protect the security of electronic City Data in the event of an emergency. Emergency means any circumstance or situation that causes normal computer operations to become unavailable for use in performing the work required under this agreement for more than 24 hours.

1.28 Supervision of Data.

City Data in paper form shall not be left unattended at any time, unless it is locked in a file cabinet, file room, desk or office. Unattended means that information is not being observed by an Agency Data User authorized to access the information. City Data in paper form shall not be left unattended at any time in vehicles or planes and shall not be checked in baggage on commercial airplanes.

1.29 As Is Access.

The City provides Agency and each Agency Data User with System(s) access on an "as is" basis with no guarantee as to uptime, accessibility, or usefulness. To the fullest extent permissible by applicable law, the City disclaims all warranties, express or implied, including, without limitation, implied warranties of merchantability, fitness for a particular purpose, title and non-infringement.

1.30 No Technical or Administrative Support.

Except as provided herein, the City will provide no technical or administrative support to Agency or Agency Data Users for System(s) access.

1.31 City Audit of Agency and Agency Data Users.

The City acting in its sole discretion may audit Agency and Agency Data Users at any time. If an audit reveals an irregularity or security issue, the City may take corrective action including but not limited to termination of such Agency's and/or Agency Data User's access to the System(s) permanently or until the City determines that all irregularities have been satisfactorily cured. Agency and each Agency Data User understands that the City may create and review an audit trail for each Agency Data User, including but not limited to, noting each Agency Data User's ID(s), the patient information accessed, and/or the date accessed. Agency and each Agency Data User understands that any inappropriate access or use of patient information, as determined by the City, may result in the temporary and/or permanent termination of Agency's or such Agency Data User's access to the System(s). Agency remains liable for all inappropriate System(s) access, misuse and/or breach of patient information, whether in electronic or hard-copy form.

1.32 Minimum Necessary.

Agency and each Agency Data User shall safeguard the confidentiality of all City Data that is viewed or obtained through the System(s) at all times. Agency and each Agency Data User shall access patient information in the System(s) only to the minimum extent necessary for its assigned duties and shall only disclose such information to persons authorized to receive it, as minimally necessary for treatment, payment and health care operations.

1.33 No Re-Disclosure or Reporting.

Agency may not in any way re-disclose SFDPH Data or otherwise prepare reports, summaries, or any other material (in electronic or hard-copy format) regarding or containing City Data for transmission to any other requesting individuals, agencies, or organizations without prior written City approval and where such re-disclosure is otherwise permitted or required by law.

1.34 Health Information Exchange.

If Agency is qualified to enroll in a health information exchange, the City encourages Agency to do so in order to facilitate the secure exchange of data between Agency's electronic health record system (EHR) and the City's Epic EHR.

1.35 Subcontracting.

Agency may not subcontract any portion of Data Access Agreement, except upon prior written approval of City. If the City approves a subcontract, Agency remains fully responsible for its subcontractor(s) throughout the term and/or after expiration of this Agreement. All Subcontracts must incorporate the terms of this Data Access Agreement. To the extent that any subcontractor would have access to a System, each such subcontractor's access must be limited and subject to the same governing terms to the same extent as Agency's access. In addition, each contract between Agency and that subcontractor must, except as the City otherwise agrees, include a Business Associate Agreement requiring such subcontractor to comply with all regulatory requirements regarding third-party access, and include a provision obligating that subcontractor to (1) defend, indemnify, and hold the City harmless in the event of a data

breach in the same manner in which Agency would be so obligated, (2) provide cyber with limits identified in Article 5, and (3) ensure that such data has been destroyed, returned, and/or protected as provided by HIPAA at the expiration of the subcontract term.

Article 2 Indemnity

2.1 Medical Malpractice Indemnification.

Agency recognizes that the System(s) is a sophisticated tool for use only by trained personnel, and it is not a substitute for competent human intervention and discretionary thinking. Therefore, if providing patient treatment, Agency agrees that it will:

- (a) Read information displayed or transmitted by the System accurately and completely;
- (b) Ensure that Agency Data Users are trained on the use of the System;
- (c) Be responsible for decisions made based on the use of the System;
- (d) Verify the accuracy of all information accessed through the System using applicable standards of good medical practice to no less a degree than if Agency were using paper records;
- (e) Report to the City as soon as reasonably practicable all data errors and suspected problems related to the System that Agency knows or should know could adversely affect patient care;
- (f) Follow industry standard business continuity policies and procedures that will permit Agency to provide patient care in the event of a disaster or the System unavailability;
- (g) Use the System only in accordance with applicable standards of good medical practice.

Agency agrees to indemnify, hold harmless and defend City from any claim by or on behalf of any patient, or by or on behalf of any other third party or person claiming damage by virtue of a familial or financial relationship with such a patient, regardless of the cause, if such claim in any way arises out of or relates to patient care or outcomes based on Agency's or an Agency Data User's System access.

Article 3 Proprietary Rights and Data Breach

3.1 Ownership of City Data.

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

3.2 Data Breach; Loss of City Data.

The Agency shall notify City immediately by telephone call plus email upon the discovery of a breach (as herein). For purposes of this Section, breaches and security incidents shall be treated as discovered by Agency as of the first day on which such breach or security incident is known to the Agency, or, by exercising reasonable diligence would have been known to the Agency. Agency shall be deemed to have knowledge of a breach if such breach is known, or by exercising reasonable diligence would have been known, to any person, other than the person committing the breach, who is an employee or agent of the Agency.

Agency shall take:

- i. prompt corrective action to mitigate any risks or damages involved with the breach or security incident and to protect the operating environment; and

- ii. any action pertaining to a breach required by applicable federal and state laws.

3.2.1 Investigation of Breach and Security Incidents: The Agency shall immediately investigate such breach or security incident. As soon as the information is known and shall inform the City of:

- i. what data elements were involved, and the extent of the data disclosure or access involved in the breach, including, specifically, the number of individuals whose personal information was breached; and
- ii. a description of the unauthorized persons known or reasonably believed to have improperly used the City Data and/or a description of the unauthorized persons known or reasonably believed to have improperly accessed or acquired the City Data, or to whom it is known or reasonably believed to have had the City Data improperly disclosed to them; and
- iii. a description of where the City Data is believed to have been improperly used or disclosed; and
- iv. a description of the probable and proximate causes of the breach or security incident; and
- v. whether any federal or state laws requiring individual notifications of breaches have been triggered.

3.2.2 Written Report: Agency shall provide a written report of the investigation to the City as soon as practicable after the discovery of the breach or security incident. The report shall include, but not be limited to, the information specified above, as well as a complete, detailed corrective action plan, including information on measures that were taken to halt and/or contain the breach or security incident, and measures to be taken to prevent the recurrence or further disclosure of data regarding such breach or security incident.

3.2.3 Notification to Individuals: If notification to individuals whose information was breached is required under state or federal law, and regardless of whether Agency is considered only a custodian and/or non-owner of the City Data, Agency shall, at its sole expense, and at the sole election of City, either:

- i. make notification to the individuals affected by the breach (including substitute notification), pursuant to the content and timeliness provisions of such applicable state or federal breach notice laws. Agency shall inform the City of the time, manner and content of any such notifications, prior to the transmission of such notifications to the individuals; or
- ii. cooperate with and assist City in its notification (including substitute notification) to the individuals affected by the breach.

3.2.4 Sample Notification to Individuals: If notification to individuals is required, and regardless of whether Agency is considered only a custodian and/or non-owner of the City Data, Agency shall, at its sole expense, and at the sole election of City, either:

- i. electronically submit a single sample copy of the security breach notification as required to the state or federal entity and inform the City of the time, manner and content of any such submissions, prior to the transmission of such submissions to the Attorney General; or
- ii. cooperate with and assist City in its submission of a sample copy of the notification to the Attorney General.

3.3 Media Communications

City shall conduct all media communications related to such Data Breach, unless in its sole discretion, City directs Agency to do so.

Attachment 1 to Appendix K System Specific Requirements

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

A. SFDPH Care Link Requirements:

1. Connectivity.

- a) Agency must obtain and maintain connectivity and network configuration and required hardware and equipment in accordance with specifications provided by Epic and must update the configuration of all first and third-party software as required. Technical equipment and software specifications for accessing SFDPH Care Link will change over time. Current required browser, system and connection requirements can be found on the Target Platform Roadmap and Target Platform Notes sections of the Epic Galaxy website galaxy.epic.com. Agency is responsible for all associated costs. Agency shall ensure that Agency Data Users access the System only through equipment owned or leased and maintained by Agency.

2. Compliance with Epic Terms and Conditions.

- a) Agency will at all times access and use the System strictly in accordance with the Epic Terms and Conditions. The following Epic Care Link Terms and Conditions are embedded within the SFDPH Care Link application, and each Data User will need to agree to them electronically upon first sign-in before accessing SFDPH Care Link:

3. Epic-Provided Terms and Conditions

- a) Some short, basic rules apply to you when you use your EpicCare Link account. Please read them carefully. The Epic customer providing you access to EpicCare Link may require you to accept additional terms, but these are the rules that apply between you and Epic.
- b) Epic is providing you access to EpicCare Link, so that you can do useful things with data from an Epic customer's system. This includes using the information accessed through your account to help facilitate care to patients shared with an Epic customer, tracking your referral data, or otherwise using your account to further your business interests in connection with data from an Epic customer's system. However, you are not permitted to use your access to EpicCare Link to help you or another organization develop software that is similar to EpicCare Link. Additionally, you agree not to share your account information with anyone outside of your organization.

II. For Access to SFDPH Epic through Epic Hyperspace and Epic Hyperdrive the following terms shall apply:

A. SFDPH Epic Hyperspace and Epic Hyperdrive:

1. Connectivity.

- a) Agency must obtain and maintain connectivity and network configuration and required hardware and equipment in accordance with specifications provided by Epic and SFDPH and must update the configuration of all first and third-party software as required. Technical equipment and software specifications for accessing SFDPH Epic Hyperspace will change over time. Epic Hyperdrive is a web-based platform that will replace Epic Hyperspace in the future. You may request a copy of current required browser, system and connection requirements from the SFDPH IT team. Agency is responsible for all

associated costs. Agency shall ensure that Agency Data Users access the System only through equipment owned or leased and maintained by Agency.

2. Application For Access and Compliance with Epic Terms and Conditions.

- a) Prior to entering into agreement with SFDPH to access SFDPH Epic Hyperspace or Epic Hyperdrive, Agency must first complete an Application For Access with Epic Systems Corporation of Verona, WI. The Application For Access is found at: <https://userweb.epic.com/Forms/AccessApplication>. Epic Systems Corporation must notify SFDPH, in writing, of Agency's permissions to access SFDPH Epic Hyperspace or Epic Hyperdrive prior to completing this agreement. Agency will at all times access and use the system strictly in accordance with the Epic Terms and Conditions.

III. For Access to SFDPH myAvatar through WebConnect and VDI the following terms shall apply:

A. SFDPH myAvatar via WebConnect and VDI:

1. Connectivity.

- a. Agency must obtain and maintain connectivity and network configuration and required hardware and equipment in accordance with specifications provided by SFDPH and must update the configuration of all first and third-party software as required. Technical equipment and software specifications for accessing SFDPH myAvatar will change over time. You may request a copy of current required browser, system and connection requirements from the SFDPH IT team. Agency is responsible for all associated costs. Agency shall ensure that Agency Data Users access the System only through equipment owned or leased and maintained by Agency.

2. Information Technology (IT) Support.

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

3. Access Control.

- a. Access to the BHS Electronic Health Record is granted based on clinical and business requirements in accordance with the Behavioral Health Services EHR Access Control Policy (6.00-06). The Access Control Policy is found at: <https://www.sfdph.org/dph/files/CBHSPolProcMnl/6.00-06.pdf>
- b. Each user is unique and agrees not to share accounts or passwords.
- c. Applicants must complete the myAvatar Account Request Form found at https://www.sfdph.org/dph/files/CBHSdocs/BHISdocs/UserDoc/Avatar_Account_Request_Form.pdf
- d. Applicants must complete the credentialing process in accordance with the DHCS MHSUDS Information Notice #18-019.
- e. Applicants must complete myAvatar Training.
- f. Level of access is based on "Need to Know", job duties and responsibilities.

Attachment 2 to Appendix K

Protected Information Destruction Order Purge Certification - Contract ID # 1000024734

In accordance with section 3.c (Effect of Termination) of the Business Associate Agreement, attached as Appendix E to the Agreement between the City and Contractor dated January 1st, 2023 (“Agreement”), the City hereby directs Contractor to destroy all Protected Information that Contractor and its agents and subcontractors (collectively “Contractor”) still maintain in any form. Contractor may retain no copies of destroyed Protected Information.” Destruction must be in accordance with the guidance of the Secretary of the U.S. Department of Health and Human Services (“Secretary”) regarding proper destruction of PHI.

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

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

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

So Certified

Tyler Termeer

Title: Chief Executive Officer

Date:



San Francisco Ethics Commission

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

Phone: 415.252.3100 . Fax: 415.252.3112

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

Received On:

File #: 221194

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

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

A Public Document

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

1. FILING INFORMATION

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

2. CITY ELECTIVE OFFICE OR BOARD

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

3. FILER'S CONTACT

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

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Kelly Hiramoto	415-255-3492
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	kelly.hiramoto@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR San Francisco AIDS Foundation	TELEPHONE NUMBER 415-487-3000
STREET ADDRESS (including City, State and Zip Code) 1035 Market Street, Suite 400, San Francisco, CA 94103	EMAIL ttermeer@sfaf.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 221194
DESCRIPTION OF AMOUNT OF CONTRACT Not to exceed \$11,886,595		
NATURE OF THE CONTRACT (Please describe) To provide Health Access Point services and integrated HIV, HCV and STD prevention for affected communities.		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Awasthy	Rahul	Board of Directors
2	Brooke	Keri	Board of Directors
3	Duff	Frank	Board of Directors
4	Frankland	Colin	Board of Directors
5	Garcia	Ferd	Board of Directors
6	Hodges	Philip	Board of Directors
7	Katz	Ken	Board of Directors
8	Kinsley	Michael	Board of Directors
9	Livingston	Sean	Board of Directors
10	Mapps	Roscoe	Board of Directors
11	Millard	Jonathan	Board of Directors
12	Nungaray	Manny	Board of Directors
13	Reid	Kat	Board of Directors
14	Silvia	Fredo	Board of Directors
15	walker	La Shon	Board of Directors
16	Watson	Maureen	Board of Directors
17	TerMeer	Tyler	CEO
18	Honey-Brooks	Lara	Other Principal Officer
19	Shanti Project		Subcontractor

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20	SF Community Health Center		Subcontractor
21	Glide Foundation		Subcontractor
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24			
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39			
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☐ Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	



City and County of San Francisco
London N. Breed, Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

November 22, 2022

Angela Calvillo, Clerk of the Board
Board of Supervisors
1 Dr. Carlton B. Goodlett Place, Room 244
San Francisco, CA 94102-4689

Dear Ms. Calvillo:

Please find attached a proposed resolution for Board of Supervisors approval of an agreement between the Department of Public Health and San Francisco AIDS Foundation, in the amount not to exceed \$11,886,595.

This contract agreement requires Board of Supervisors approval under San Francisco Charter Section 9.118.

The following is a list of accompanying documents:

- Proposed resolution
- Proposed Original Agreement
- Form SFEC-126

For questions on this matter, please contact me at (415) 255-3492, kelly.hiramoto@sfdph.org.

Thank you for your time and consideration.

Sincerely,

Kelly Hiramoto

Kelly Hiramoto
Acting Supervisor
Office of Contracts Management and Compliance
DPH Business Office

cc: Dr. Grant Colfax, Director of Health
Greg Wagner, Chief Operating Officer

The mission of the San Francisco Department of Public Health is to protect and promote the health of all San Franciscans.

We shall ~ Assess and research the health of the community ~ Develop and enforce health policy ~ Prevent disease and injury ~

~ Educate the public and train health care providers ~ Provide quality, comprehensive, culturally-proficient health services ~ Ensure equal access to all ~

kellyhiramoto@SFDPH.org – office 415-255-3492 – fax 415 252-3088

1380 Howard Street, Room 419B, San Francisco, CA 94103

Addressee
Date
Page 2 of 2

Michelle Ruggels, Director, DPH Business Office