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 Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
 Governor

Letter of Award

DATE: NOVEMBER 14, 2022
 TO: CALIFORNIA LOCAL HEALTH JURISDICTIONS
 SUBJECT: SYPHILIS OUTBREAK STRATEGY GRANT FUNDING

The California Department of Public Health (CDPH), Sexually Transmitted Disease Control Branch (STDCB) is pleased to announce the intent to award State local assistance funds through the Syphilis Outbreak Strategy (SOS) Grant, a one-time appropriation in the [2022 California Budget Act](#) for spend down from July 1, 2022 through June 30, 2027. The new (SOS) funds shall be allocated to eight local health jurisdictions (LHJs) with high rates of early syphilis or CS and to support innovative and impactful syphilis and CS prevention and control activities, with a focus on disproportionately impacted populations as determined by local or regional syphilis and CS epidemiology, which may include, but are not limited to, African American/Black people, Latinx people, American Indians/Alaska Native people, trans women, pregnant people experiencing homelessness or who use drugs, (e.g., people who exchange sex for money, drugs, or a place to stay), and gay, bisexual, and other men who have sex with men (MSM).

The amount of annual funding was determined by a non-competitive formula set forth in the [2022 California Budget Act, allocating 40% of funds based on congenital syphilis and 60% of funds based on early syphilis cases](#). The below chart is a summary of the SOS funding allocation for the eight identified LHJs.

SOS FUNDING ALLOCATION

Local Health Jurisdiction	FY 2022-23	PENDING GENERAL FUND APPROPRIATION		Total Allocation
		FY 2023-24	FY 2024-25	
Fresno	\$583,891	\$583,891	\$583,891	\$1,751,673
Kern	\$581,707	\$581,707	\$581,707	\$1,745,121
Los Angeles HD ¹	\$3,957,227	\$3,957,227	\$3,957,227	\$11,871,681
Orange	\$477,520	\$477,520	\$477,520	\$1,432,560
San Bernardino	\$1,069,175	\$1,069,175	\$1,069,175	\$3,207,525
San Diego	\$761,915	\$761,915	\$761,915	\$2,285,745
San Francisco ²	\$889,417	\$889,417	\$889,417	\$2,668,251
San Joaquin	\$679,148	\$679,148	\$679,148	\$2,037,444
TOTAL	\$9,000,000	\$9,000,000	\$9,000,000	\$27,000,000

1 - Los Angeles excludes Cities of Long Beach & Pasadena
 2 - San Francisco excludes City of Berkeley



In FY 2022-23, the SOS funds were appropriated at nine million for expenditure until June 30, 2027. Subsequent allocation of nine million each for FY 2023-24 and FY 2024-25 will be made available if funds are appropriated through the California state budget. In addition to the availability of appropriated funds, Grantees will need to demonstrate satisfactory performance in previous years to receive funding for subsequent years. Funds shall be used to supplement, but not supplant, existing financial and resource commitments of the LHJs for sexually transmitted disease prevention and control activities.

Grant Activities

Grantees will be responsible for all grant objectives in Exhibit A – Attachment 1 – Grant Activities unless they are marked as “Optional.” Grantees are encouraged to consider innovative approaches to addressing early syphilis and congenital syphilis prevention and control that may not be specifically listed in the grant activities. Innovative approaches must be described in the narrative portion of each part. The grant activities are enclosed (Exhibit A – Attachment 1 – Grant Activities) for your information and focused on the following key strategic targets:

- **Part I: Health Access for All: Syphilis Testing, Treatment, and Other Health Care** focuses on syphilis testing, treatment, and prophylaxis (e.g., DoxyPEP) to interrupt ongoing syphilis transmission and prevent adverse outcomes. Linkages to prenatal, preconception or family planning care are also included to prevent unintended pregnancies in people who do not want to become pregnant, and to prevent adverse outcomes for pregnant people, including congenital syphilis.
- **Part II: Supportive Services: Housing, Mental Health, and Substance Use** focuses on wrap-around services identified as priorities for syphilis and congenital syphilis prevention. Grantees must identify at least one activity from Part II.
- **Part III: Core Surveillance and Disease Intervention** focuses on core public health functions that may not be met by existing local, state, or federal funding and is considered an optional use of these funds.

All Grantees must adhere to the grant activities and STDCB Terms and Conditions, and any subsequent revisions, along with all instructions, policy memorandums, or directives issued by CDPH/STDCB. CDPH/STDCB will make any changes and/or additions to these guidelines in writing and, whenever possible, notification of such changes shall be made 30 days prior to implementation.

Travel Costs in Budget

The grant budget may include funds for staff to attend meetings, statewide conferences, and trainings related to addressing early syphilis and congenital syphilis prevention and control. The budget may also include travel expenditures for case investigations or outbreak response. The amount of funds allocated for travel may be adjusted or redirected to another line item on a later date to accurately reflect actual planned trips. For additional information about travel reimbursement, please refer to Exhibit B, section 5.

Indirect Costs

Beginning with FY 2014/2015, the CDPH negotiated the Indirect Cost Rate (ICR) with each LHJ to standardize the rate. This rate is applied to all contracts and grants that CDPH has with your agency. Please see the attached FY 2022-23 ICR for your use in completing your budgets. Please note that most of the LHJs apply the ICR to the total personnel costs only. However, there are a few that apply the rate to the total direct costs (this includes personnel, benefits, operating expenses, travel, and subcontracts line items). Your ICR cannot exceed the negotiated amount, nor can the application of the ICR be changed. However, you may elect to reduce the published Indirect Cost Rate percentage or not include Indirect Costs in the budget

Board of Resolution or Minute Order Requirements

All agreements with LHJs must have a current Board of Resolution or Minute Order. If the grant is amended during the term of the agreement, a new Board of Resolution or Minute Order must be obtained unless the original resolution clearly states the allowance for amendments, extensions, and renewals to be approved without going through the Board of Supervisors.

Terms and Conditions and HIV Confidentiality Documents

To enhance coordination across CDPH programs and compliance with CDPH regulations and policies, the STD Control Branch developed guidance documents associated with local assistance funding. Please see the attached STD Terms and Conditions and Exhibit B, Budget Detail and Payment Provision. Additionally, LHJ staff who work with client-level data will be required to sign confidentiality agreements to ensure appropriate handling and data security of STD/HIV data.

The grant agreement documents have been prepared by the STD Control Branch, Business Operation Support Section (BOSS) and approved by CDPH – Contracts Management Unit. **In an effort to expedite this grant agreement through the approval process, we request that the following items be returned no later than 12/12/2022 via email at STDLHJContracts@cdph.ca.gov with a cc to Adriana.Cervantes@cdph.ca.gov.**

1. Exhibit A – Attachment 1 – Grant Activities

- Fill out Parts I through III

2. Original copies of the Grant Agreement (CDPH 1229)

Signature page only (page five of the grant agreement) must bear original or digital signatures.

- Due to the continued presence of COVID-19, CDPH is accepting digitally signed grant agreements and electronic submittals. Therefore, until further notice, any documents received electronically will be considered original copies.
- When submitting the grant documents electronically, ensure electronic submittals are “clean and legible,” preferably scanned in color with minimum 300x300 resolution.

3. One copy of the Board Resolution/Order/Motion, ordinance, or other similar document authorizing execution of the grant agreement.

LHJs may exercise their delegated authority to accept and implement this grant agreement and future amendments.

- **If your next board meeting is scheduled after 12/12/2022, please submit a Letter of Intent to add this grant agreement to your next board meeting.**
- When you have the documents authorizing the execution of the grant agreement, please send us a copy of the Board Resolution/Order/Motion or ordinance.

4. Contractor Certification Clause (CCC 042017)

5. Budget for Fiscal Years (FY) 2022-2023 thru 2024-2025

6. Budget Justification for FYs 2022-2023 thru 2024-2025

Upon final approval of the grant agreement documents, you will receive an executed copy. If you have any questions, please feel free to contact Adriana Cervantes by email at Adriana.Cervantes@cdph.ca.gov or Jasmin Delgado Jasmin.Delgado@cdph.ca.gov.

Sincerely,

Rachel Piper

Rachel Piper, Chief
Contracts and Purchasing Unit
Business Operations Support Section
STD Control Branch

Enclosures

cc: Kathleen Jacobson, MD, Chief, STD Control Branch
Jessica Frasure-Williams, Chief, Program Development Section, STD Control Branch
Jasmin Delgado, Local Capacity Building Unit Chief and Acting Northern California
Regional Capacity Building Coordinator, STD Control Branch
Danelle Del Rincon, Southern California Regional Capacity Building Coordinator,
STD Control Branch
Cary Escovedo, Bay Area Regional Capacity Building Coordinator,
STD Control Branch
Sophie Lyons, Central Inland Regional Capacity Building Coordinator,
STD Control Branch