

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

SECOND Amendment

This AMENDMENT (this "Amendment") is made as of the 1st day of November, 2013, in San Francisco, California, by and between **SAN FRANCISCO AIDS FOUNDATION, P.O. Box 426182, San Francisco, CA 94142-6182** ("Contractor"), and the City and County of San Francisco, a municipal corporation ("City"), acting by and through its Director of the Office of Contract Administration.

RECITALS

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and
WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend contract term and increase compensation amount;

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract Number 2006-07/08 and 2007-07/08, on July 7, 2008.

NOW THEREFORE, Contractor and the City agree as follows:

1. **Definitions.** The following definitions shall apply to this Amendment:

a. **Agreement.** The term "Agreement" shall mean the Agreement dated September 01, 2011, (BPHC12000088.and DPHC12000598/DPHC13000261), between Contractor and Cityas amended by the First Amendment dated December 1, 2012, (BPHC12000088), .

b. **Other Terms.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

2. **Modifications to the Agreement.** The Agreement is hereby modified as follows:

a. **Section 02, Term, of the Agreement currently reads as follows:**

2. **Term of the Agreement.** Subject to Section 1, the term of this Agreement shall be from September 1, 2011 to June 30, 2013.

The City shall have the sole discretion to exercise the following options to extend the Agreement term:

Option 1: 07/01/13 -06/30/14
Option 2: 07/01/14 -06/30/15
Option 3: 07/01/15 -06/30/16
Option 4: 07/01/16 -06/30/17
Option 5: 07/01/17 -06/30/18
Option 6: 07/01/18 -06/30/19
Option 7: 07/01/19 -06/30/20
Option 8: 07/01/20 -06/30/21

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

2. Term of the Agreement. Subject to Section 1, the term of this Agreement shall be from September 1, 2011 to June 30, 2014.

The City shall have the sole discretion to exercise the following options to extend the Agreement term:

Option 1:	07/01/13 -06/30/14	Exercised
Option 2:	07/01/14 -06/30/15	
Option 3:	07/01/15 -06/30/16	
Option 4:	07/01/16 -06/30/17	
Option 5:	07/01/17 -06/30/18	
Option 6:	07/01/18 -06/30/19	
Option 7:	07/01/19 -06/30/20	
Option 8:	07/01/20 -06/30/21	

b. Section 05, Compensation, of the Agreement currently reads as follows:

5. Compensation. Compensation shall be made in monthly payments on or before the 30th day of each month for work, as set forth in Section 4 of this Agreement, that the Director of the Public Health Department, in his or her sole discretion, concludes has been performed as of the last day of the immediately preceding month. In no event shall the amount of this Agreement exceed **Seven Million Four Hundred Thirty-Five Thousand Six Hundred and Eight DOLLARS (\$7,435,608)**. The breakdown of costs associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. No charges shall be incurred under this Agreement nor shall any payments become due to Contractor until reports, services, or both, required under this Agreement are received from Contractor and approved by Department of Public Health as being in accordance with this Agreement. City may withhold payment to Contractor in any instance in which Contractor has failed or refused to satisfy any material obligation provided for under this Agreement.

In no event shall City be liable for interest or late charges for any late payments.

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

5. Compensation. Compensation shall be made in monthly payments on or before the 30th day of each month for work, as set forth in Section 4 of this Agreement, that the Director of the Public Health Department, in his or her sole discretion, concludes has been performed as of the last day of the immediately preceding month. In no event shall the amount of this Agreement exceed **Nine Million Four Hundred Twenty-Nine Thousand Nine Hundred and Eighty-Two DOLLARS (\$9,429,982)**. The breakdown of costs associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. No charges shall be incurred under this Agreement nor shall any payments become due to Contractor until reports, services, or both, required under this Agreement are received from Contractor and approved by Department of Public Health as being in accordance with this Agreement. City may withhold payment to Contractor in any instance in which Contractor has failed or refused to satisfy any material obligation provided for under this Agreement.

The following Appendices are being added to or substituted for the Exhibits and/or Appendices, as indicated, in the “Original Agreement” and any subsequent “Amendments”, and are titled to support the period of 09/01/11 – 06/30/14.

Delete Appendix A, Pages 1-9, for the period 09/01/11 – 06/30/13 and substitute Appendix A, Pages 1-11, for the period 09/01/11 – 06/30/14.

Delete Appendix A-1, Pages 1-2, for the period 09/01/11 – 06/14/13 and substitute Appendix A-1, Pages 1-2, for the period 09/01/11 – 06/14/14.

Delete Appendix A-2, Pages 1-3, for the period 09/01/11 – 06/30/13 and substitute Appendix A-2, Pages 1-3, for the period 09/01/11 – 06/30/14.

Delete Appendix A-3, Pages 1-4, for the period 09/01/11 – 06/30/13 and substitute Appendix A-3, Pages 1-5, for the period 09/01/11 – 06/30/14.

Delete Appendix A-4, Pages 1-5, for the period 09/01/11 – 06/30/13 and substitute Appendix A-4, Pages 1-5, for the period 09/01/11 – 06/30/14.

Delete Appendix A-5, Pages 1-6, for the period 09/01/11 – 06/30/13 and substitute Appendix A-5, Pages 1-7, for the period 09/01/11 – 06/30/14.

Delete Appendix B, Pages 1-6, for the period 09/01/11 – 06/30/13 and substitute Appendix B, Pages 1-7, for the period 09/01/11 – 06/30/14.

Add Appendix B-1b, Pages 1- 3, for the period 06/15/13 – 06/14/14.

Add Appendix B-2c, Pages 1- 7, for the period 07/01/13 – 06/30/14.

Add Appendix B-3b, Pages 1- 7, for the period 07/01/13 - 06/30/14.

Add Appendix B-4c, Pages 1- 9, for the period 07/01/13 – 06/30/14.

Add Appendix B-5b, Pages 1- 9, for the period 07/01/13 – 06/30/14.

Delete Appendix D Additional Terms, and Substitute Appendix D additional Terms.

Delete Appendix E Business Associate Addendum and Substitute Appendix E Business Associate Addendum.

Add Appendix F-1b, for the period 06/15/13 – 06/14/14, Pages A and B.

Add Appendix F-2c, for the period 07/01/13 – 06/30/14, Pages A and B.

Add Appendix F-3b, for the period 07/01/13 – 06/30/14, Pages A and B.

Add Appendix F-4c, for the period 07/01/13 – 06/30/14, Pages A and B.

Add Appendix F-5b, for the period 07/01/13 – 06/30/14, Pages A and B.

Delete Appendix H Insurance, and Substitute Appendix H Insurance.

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

4. Legal Effect. Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

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

CITY

CONTRACTOR

Recommended by:

SAN FRANCISCO AIDS FOUNDATION

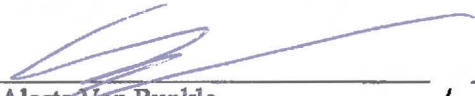

BARBARA A. GARCIA, M.P.A. / 11/15/13
Director of Health / Date

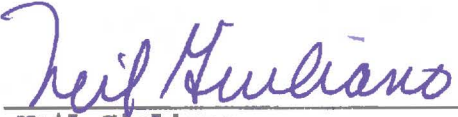
By signing this Agreement, I certify that I comply with the requirements of the Minimum Compensation Ordinance, which entitle Covered Employees to certain minimum hourly wages and compensated and uncompensated time off.

Approved as to Form:


Dennis J. Herrera
City Attorney

I have read and understood paragraph 35, the City's statement urging companies doing business in Northern Ireland to move towards resolving employment inequities, encouraging compliance with the MacBride Principles, and urging San Francisco companies to do business with corporations that abide by the MacBride Principles.

By: 
Aleeta Van Runkle / 11.26.13
Deputy City Attorney / Date


Neil Giuliano / 11/13/13
Executive Director / Date
P. O. Box 426182
San Francisco, CA 94142-6182

Approved:


Jaci Fong / 12/16/13
Director / Date
Office of Contract
Administration and Purchaser

City vendor number: 16252

Appendices

- A: Services to be provided by Contractor
- B: Calculation of Charges
- C: Reserved
- D: Additional Terms
- E: Business Associate Addendum
- F: Invoice
- G: Dispute Resolution Procedure
- H: Insurance Certificates

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Appendix A
Services to be provided by Contractor

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to Tracey Packer, 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.

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. 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. San Francisco Residents Only:

Only San Francisco residents shall be treated under the terms of this Agreement. Exceptions must have the written approval of the Contract Administrator.

H. 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.

I. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan 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 staff 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 their staff, 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.

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, and for HIV Prevention Services contracts the number of clients (NOC), for any mode of service hereunder, except for taxi scrip, bus tokens, clothing vouchers, and household goods vouchers, which may be

distributed on an as-needed basis, 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:

If any portion of 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.

P. Aerosol Transmissible Disease Program, Health and Safety:

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

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

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

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

Q. Research Study Records:

To facilitate the exchange of research study records, should this Appendix A include the use of human study subjects, Contractor will include the City in all study subject consent forms reviewed and approved by Contractor's IRB.

2. Description of Services

Detailed descriptions of services supporting the period 09/01/11-06/30/14 may be found in the following Appendixes:

Appendix A, 09/01/11 – 06/30/14, Pages 4-11	Program Summary
Appendix A-1, 09/01/11 – 06/14/14, Pages 1-2	HIV Testing – STOP Study
Appendix A-2, 09/01/11 – 06/30/14, Pages 1-3	Community Based HIV Testing
Appendix A-3, 09/01/11 – 06/30/14, Pages 1-5	The Stonewall Project
Appendix A-4, 09/01/11 – 06/30/14, Pages 1-5	African American Prevention Initiative
Appendix A-5, 09/01/11 – 06/30/14, Pages 1-7	Stonewall Castro/ LIFE Program
Appendix A-6, 09/01/11 – 06/30/13, Pages 1-3	Syringe Access Services

Contractor: San Francisco AIDS Foundation
 Fiscal Year: 2011-2012
 2012-2013
 2013-2014
 CMS#: 7164

Appendix A
 Contract Term: 09.01.11 through 06.30.14
 Funding Sources: CDC and General Fund

SUMMARY

Service Provider(s):	San Francisco AIDS Foundation
Fiscal Agency:	San Francisco AIDS Foundation
Total Contract Amount:	\$9,129,982
System of Care:	HIV Prevention Section (HPS)
Provider Address:	1035 Market Street, Suite 400, San Francisco, CA 94103
Provider Phone:	415-487-3000
Contact Person:	Richard Hill, Director, Government Contracts
	Direct Phone #: 415- 487-8042 email: rhill@sfaf.org
Program Name:	Appendix A-1 HIV Testing – STOP Study
System of Care:	HPS
Program Code:	N/A
	Funding Source: Center for Disease Control
Amount:	Year One \$26,583
Term:	9.01.11 – 6.14.12
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 month of Support Activities STOP Study Support Activities 10
Number of UDC/NOC:	N/A
Amount:	Year Two \$50,000
Term:	6.15.12 - 6.14.13
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 month of Support Activities STOP Study Support Activities 12
Number of UDC/NOC:	N/A
Amount:	Year Three \$16,500
Term:	6.15.13 – 6.14.14
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 month of Support Activities STOP Study Support Activities 4
Number of UDC/NOC:	N/A
Target Population:	There is no target population; the study will use specimens collected from clients who already present for testing at the four sites who have agreed to participate.
Description of Service:	To support the "Screening Targeted Populations to Interrupt On-going Chains of Transmission with Enhanced Partner Notification" (STOP) Study will evaluate the yield, cost-effectiveness, and feasibility of screening for Acute HIV Infection (AHI) with a fourth-generation enzyme immunoassay (EIA) in high-risk/high-incidence settings compared to pooled Nucleic Acid Amplification Test (NAAT), and will evaluate the yield, cost-effectiveness, and feasibility of enhanced partner notification/contact tracing techniques linked to AHI screening.

Contractor: San Francisco AIDS Foundation
Fiscal Year: 2011-2012
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Appendix A
Contract Term: 09.01.11 through 06.30.14
Funding Sources: CDC and General Fund

Program Name: System of Care: Program Code:	Appendix A-2 Community- Based HIV Testing HPS N/A
Amount: Term: Definition and # of UOS: Number of UDC/NOC:	Year One \$ 290,298 Funding Source: Center for Disease Control 9.01.11 – 12.31.11 A Unit of Service (UOS) is equivalent to 1 test for 1 client Numbers of test during this period 2,587 2587
Amount: Term: Definition and # of UOS: Number of UDC/NOC:	Year Two \$870,894 Funding Source: Center for Disease Control 1.01.12 - 12.31.12 A Unit of Service (UOS) is equivalent to 1 test for 1 client Numbers of test during this period 8,406 8,406
Amount: Term: Definition and # of UOS: Number of UDC/NOC:	Year Three \$435,447 Funding Source: General Fund 1.01.13 – 6.30.13 A Unit of Service (UOS) is equivalent to 1 test for 1 client Numbers of test during this period 4,850 4,850
Amount: Term: Definition and # of UOS: Number of UDC/NOC:	Year Four \$931,457 Funding Source: General Fund 7.01.13-6.30.14 A Unit of Service (UOS) is equivalent to 1 test for 1 client Numbers of test during this period 10,180 10,180
Target Population:	Gay men and other MSM, IDUs, and TFMSM in the Castro and Tenderloin.
Description of Service:	The program will expand SFAF's HIV testing services for a wide range of gay men and other MSM, IDUs and TFMSM in the Castro and Tenderloin, to ensure that HIV testing and linkage to care are readily accessible for the largest number of people at high risk. Additional testing will be done at a variety of venues that are frequented by the hardest-to-reach MSM, IDUs, and TFMSM.
Program Name: System of Care: Program Code:	Appendix A-3 The Stonewall Project HPS N/A Funding Source: General Fund
Amount:	Year One \$294,639

Contractor: San Francisco AIDS Foundation
Fiscal Year: 2011-2012
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CMS#: 7164

Appendix A
Contract Term: 09.01.11 through 06.30.14
Funding Sources: CDC and General Fund

Term:	9.01.11 – 6.30.12
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 of Condom distribution, 1 event, and 1 group hour 1 month of Social Marketing or 1 hour of Risk Reduction Counseling, Prevention CM, and Training.
	Recruitment & Linkages 4,808
	Events 23
	Groups 276
	Individual Risk Reduction Counseling 160
	Prevention Case Management 240
	Social Marketing 8
	Condom Distribution 8
	Training 16
Number of UDC/NOC:	Recruitment & Linkages 1,920
	Events 1,265
	Groups 920
	Individual Risk Reduction Counseling 320
	Prevention Case Management 288
	Social Marketing n/a
	Condom Distribution n/a
	Training 80
Amount:	Year Two \$360,320
Term:	7.01.12-6.30.13
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 of Condom distribution, 1 event, 1 group hour, and 1 month of Social Marketing or 1 hour of Risk Reduction Counseling, Prevention CM, and Training.
	Recruitment & Linkages 696
	Events 33
	Groups 400
	Individual Risk Reduction Counseling 232
	Prevention Case Management 348
	Social Marketing 12
	Condom Distribution 12
	Training 23
Number of UDC/NOC:	Recruitment & Linkages 2,784
	Events 1,815
	Groups 1,334
	Individual Risk Reduction Counseling 464
	Prevention Case Management 418
	Social Marketing n/a
	Condom Distribution n/a
	Training 116
Amount:	Year Three \$366,048
Term:	7.01.13 – 6.30.14
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 of Condom distribution, 1 event, 1 group hour, and 1 and 1 month of Social Marketing or 1 hour of Risk Reduction Counseling, Prevention

Contractor: San Francisco AIDS Foundation
Fiscal Year: 2011-2012
2012-2013
2013-2014
CMS#: 7164

Appendix A
Contract Term: 09.01.11 through 06.30.14
Funding Sources: CDC and General Fund

Number of UDC/NOC:	<table> <tr><td>CM, and Training.</td><td></td></tr> <tr><td>Recruitment & Linkages</td><td>720</td></tr> <tr><td>Events</td><td>34</td></tr> <tr><td>Groups</td><td>414</td></tr> <tr><td>Individual Risk Reduction Counseling</td><td>240</td></tr> <tr><td>Prevention Case Management</td><td>359</td></tr> <tr><td>Social Marketing</td><td>12</td></tr> <tr><td>Condom Distribution</td><td>12</td></tr> <tr><td>Training</td><td>24</td></tr> <tr><td>Recruitment & Linkages</td><td>2,880</td></tr> <tr><td>Events</td><td>N/A</td></tr> <tr><td>Groups</td><td>1,380</td></tr> <tr><td>Individual Risk Reduction Counseling</td><td>255</td></tr> <tr><td>Prevention Case Management</td><td>374</td></tr> <tr><td>Social Marketing</td><td>N/A</td></tr> <tr><td>Condom Distribution</td><td>N/A</td></tr> <tr><td>Training</td><td>120</td></tr> </table>	CM, and Training.		Recruitment & Linkages	720	Events	34	Groups	414	Individual Risk Reduction Counseling	240	Prevention Case Management	359	Social Marketing	12	Condom Distribution	12	Training	24	Recruitment & Linkages	2,880	Events	N/A	Groups	1,380	Individual Risk Reduction Counseling	255	Prevention Case Management	374	Social Marketing	N/A	Condom Distribution	N/A	Training	120
CM, and Training.																																			
Recruitment & Linkages	720																																		
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Training	24																																		
Recruitment & Linkages	2,880																																		
Events	N/A																																		
Groups	1,380																																		
Individual Risk Reduction Counseling	255																																		
Prevention Case Management	374																																		
Social Marketing	N/A																																		
Condom Distribution	N/A																																		
Training	120																																		
Target Population:	Gay men and other MSM (G/MSM) who reside in San Francisco and use methamphetamine and other substances.																																		
Description of Service:	Stonewall's substance abuse services for MSM and MSM-IDU, focus on increasing status awareness, increasing viral load suppression, maintaining or increasing levels of protected sex, and increasing access to safer injection supplies. Services will be delivered in the Castro, Mission, Tenderloin, and SOMA neighborhoods.																																		
Program Name: System of Care: Program Code:	Appendix A-4 African American Prevention Initiative HPS N/A Funding Source: Center for Disease Control & GF																																		
Amount: Term: Definition and # of UOS:	Year One \$166,339 9.01.11 – 12.31.11 A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1 event, 1 group hour, 1 hour of Individual risk Reduction Counseling or 1 linkage to PHAST Program																																		
Number of UDC/NOC:	<table> <tr><td>Events</td><td>7</td></tr> <tr><td>Groups</td><td>223</td></tr> <tr><td>HIV Testing</td><td>160</td></tr> <tr><td>Individual Risk Reduction Counseling</td><td>128</td></tr> <tr><td>Linkages</td><td>20</td></tr> <tr><td>Events</td><td>287</td></tr> <tr><td>Groups</td><td>1,198</td></tr> <tr><td>HIV Testing</td><td>160</td></tr> <tr><td>Individual Risk Reduction Counseling</td><td>128</td></tr> <tr><td>Linkages</td><td>20</td></tr> </table>	Events	7	Groups	223	HIV Testing	160	Individual Risk Reduction Counseling	128	Linkages	20	Events	287	Groups	1,198	HIV Testing	160	Individual Risk Reduction Counseling	128	Linkages	20														
Events	7																																		
Groups	223																																		
HIV Testing	160																																		
Individual Risk Reduction Counseling	128																																		
Linkages	20																																		
Events	287																																		
Groups	1,198																																		
HIV Testing	160																																		
Individual Risk Reduction Counseling	128																																		
Linkages	20																																		

Contractor: San Francisco AIDS Foundation
 Fiscal Year: 2011-2012
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 2013-2014
 CMS#: 7164

Appendix A
 Contract Term: 09.01.11 through 06.30.14
 Funding Sources: CDC and General Fund

Amount:	Year Two	
	\$499,017	
Term:	1.01.12-12.31.12	
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1event, 1 group hour, 1 hour of Individual risk Reduction Counseling or 1 linkage to PHAST Program.	
Number of UDC/NOC:	Events	20
	Groups	503
	HIV Testing	433
	Individual Risk Reduction Counseling	589
	Linkages	65
	Events	820
	Groups	4,272
	HIV Testing	433
	Individual Risk Reduction Counseling	589
	Linkages	65
	Year Three	
	\$249,508	
	1.01.13 – 6.30.13	
	A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1event, 1 group hour, 1 hour of Individual risk Reduction Counseling or 1 linkage to PHAST Program.	
Number of UDC/NOC:	Events	12
	Groups	290
	HIV Testing	250
	Individual Risk Reduction Counseling	340
	Linkages	38
	Events	492
	Groups	2,465
	HIV Testing	250
	Individual Risk Reduction Counseling	340
	Linkages	38
	Year Four	
	\$538,192	
	7.01.13 – 6.30.14	
	A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1event, 1 group hour, 1 hour of Individual risk Reduction Counseling or 1linkage to PHAST Program	
Number of UDC/NOC:	Events	24
	Groups	580
	HIV Testing	500
	Individual Risk Reduction Counseling	262
	Prevention Case Management	200
	Events	984
	Groups	3,320
	HIV Testing	500
	Individual Risk Reduction Counseling	792
	Prevention Case Management	200

Contractor: San Francisco AIDS Foundation
Fiscal Year: 2011-2012
2012-2013
2013-2014
CMS#: 7164

Appendix A
Contract Term: 09.01.11 through 06.30.14
Funding Sources: CDC and General Fund

Target Population:	African-American gay men and other MSM (G/MSM) who reside in San Francisco, with a focus on the Tenderloin and Castro neighborhoods.			
Description of Service:	This Initiative is collaboration with STOP AIDS Project to deliver a comprehensive set of HIV prevention services to African American G/MSM with diverse backgrounds and prevention needs. The new effort will build on the strengths of SFAF's BBE and SAP's Our Love, both long-standing and successful programs designed specifically to serve African American G/MSM in San Francisco.			
Program Name:	Appendix A-5			
System of Care:	Stonewall Castro/LIFE Program			
Program Code:	HPS	Funding Source: General Fund and CDC		
	N/A			
Amount:	Year One			
Term:	\$520,385			
Definition and # of UOS:	9.01.11 – 6.30.12			
	A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1 group hour, 1 hour of Individual Risk Reduction Counseling, Prevention Case Management, or 1 hour of Recruitment and Linkage.			
	HIV Testing		400	
	Individual Risk Reduction Counseling		96	
	Prevention Case Management		320	
	Groups		207	
	Shanti LIFE Program - Individual Risk Reduction Counseling		107	
	Shanti LIFE Program - Prevention Case Management		800	
	Shanti LIFE Program – Group		403	
	Shanti LIFE Program – Recruitment & Linkage		200	
Number of UDC/NOC:	HIV Testing		400	
	Individual Risk Reduction Counseling		192	
	Prevention Case Management		320	
	Groups		690	
	Shanti LIFE Program - Individual Risk Reduction Counseling		107	
	Shanti LIFE Program - Prevention Case Management		640	
	Shanti LIFE Program – Groups		1,423	
	Shanti LIFE Program – Recruitment & Linkage		400	
Amount:	Year Two			
Term:	\$592,976			
Definition and # of UOS:	7.01.12 - 6.30.13			
	A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1 group hour, 1 hour of Individual Risk Reduction Counseling, Prevention Case Management, or 1 hour of Recruitment and Linkage.			
	HIV Testing		580	
	Individual Risk Reduction Counseling		139	
	Prevention Case Management		464	
	Groups		300	

Contractor: San Francisco AIDS Foundation
 Fiscal Year: 2011-2012
 2012-2013
 2013-2014
 CMS#: 7164

Appendix A
 Contract Term: 09.01.11 through 06.30.14
 Funding Sources: CDC and General Fund

Number of UDC/NOC:	Shanti LIFE Program - Individual Risk Reduction Counseling	155
	Shanti LIFE Program - Prevention Case Management	1,160
	Shanti LIFE Program – Groups	584
	Shanti LIFE Program – Recruitment & Linkage	290
	Individual Risk Reduction Counseling	278
	Prevention Case Management	464
	Groups	1,000
	Shanti LIFE Program - Individual Risk Reduction Counseling	155
	Shanti LIFE Program - Prevention Case Management	928
	Shanti LIFE Program – Group	2,062
	Shanti LIFE Program – Recruitment & Linkage	580
Amount:	Year Three	
Term:	\$638,849	
Definition and # of UOS:	7.01.13 – 6.30.14	
	A Unit of Service (UOS) is equivalent to 1 HIV test per 1 client, 1 group hour, 1 hour of Individual Risk Reduction Counseling, Prevention Case Management, or 1 hour of Recruitment and Linkage.	
Number of UDC/NOC:	HIV Testing	600
	Individual Risk Reduction Counseling	145
	Prevention Case Management	480
	Groups	311
	Shanti LIFE Program - Individual Risk Reduction Counseling	144
	Shanti LIFE Program - Prevention Case Management	1,080
	Shanti LIFE Program – Group	604
	Shanti LIFE Program – Recruitment & Linkage	375
	HIV Testing	360
	Individual Risk Reduction Counseling	159
Target Population:	Prevention Case Management	480
	Groups	1,035
	Shanti LIFE Program - Individual Risk Reduction Counseling	144
	Shanti LIFE Program - Prevention Case Management	864
	Shanti LIFE Program – Group	2,134
Description of Service:	Shanti LIFE Program – Recruitment & Linkage	750
	Gay men and other MSM (G/MSM) who reside in San Francisco and use methamphetamine and other substances.	
	Stonewall's substance use counseling services for G/MSM to a new site in the Castro, in close coordination with the HIV testing and gay men's health services available at Magnet, located a half block away; and to support Shanti's LIFE Program, a health-enhancement and wellness counseling program for people living with HIV.	
Program Name:	Appendix A-6	
System of Care:	Syringe Access Services	
Program Code:	HPS	
	N/A	Funding Source: General Fund
Amount:	Year One	
	\$1,061,764	

Term:	9.01.11 – 6.30.12
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 hour of service or 1 month of Program Coordination
	Syringe Access Services 2,083
	Program Coordination 8
Number of UDC/NOC:	Syringe Access Services 20,000
	Program Coordination n/a
Amount:	Year Two
	\$1,220,765
Term:	7.01.12-6.30.13
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 hour of service or 1 month of Program Coordination
	Syringe Access Services 3,020
	Program Coordination 12
Number of UDC/NOC:	Syringe Access Services 29,000
	Program Coordination n/a
Target Population:	Intravenous drug users (IDUs) throughout San Francisco.
Description of Service:	Provides access to sterile syringes and safer injection supplies thus ensuring IDUs have clean syringes, and reducing the likelihood of syringe sharing and the risk of HIV transmission among the target population. SFAF will serve as the lead agency for all syringe access and disposal services in the city, with partners St. James Infirmary, Glide, the Asian & Pacific Islander Wellness Center, and Homeless Youth Alliance.

- 1) **Program Name: HIV Testing – STOP Study**
Program Address: 1035 Market Street, Suite 400
City, State, Zip Code: San Francisco, CA 94103
Telephone: (415) 487-3000
Facsimile: (415) 487-3094

2) **Nature of Document (check one)**

☐ New ☐ Renewal ☒ **Modification**

3) **Goal Statement**

The “Screening Targeted Populations to Interrupt On-going Chains of Transmission with Enhanced Partner Notification” (STOP) Study aims are:

1. To evaluate the yield, cost-effectiveness, and feasibility of screening for Acute HIV Infection (AHI) with a fourth-generation enzyme immunoassay (EIA) in high-risk/high-incidence settings compared to pooled Nucleic Acid Amplification Test (NAAT).
2. To evaluate the yield, cost-effectiveness, and feasibility of enhanced partner notification/contact tracing techniques linked to AHI screening.

4) **Target Population**

There is no target population; the study will use specimens collected from clients who already present for testing at the four sites who have agreed to participate. Site participation involves additional support to implement the goals above.

5) **Modality(ies)/Interventions**

09/01/2011 – 06/14/2012

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
STOP Study 1 UOS = 1 month of STOP Study support activities	9.5 months	n/a
Total for this period	9.5	n/a

06/15/2012 – 06/14/2013

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
STOP Study 1 UOS = 1 month of STOP Study support activities	12 months	n/a
Total for this period	12	n/a
Total for this contract	21.5	n/a

06/15/2013 – 06/14/2014

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
STOP Study 1 UOS = 1 month of STOP Study support activities	4 months	n/a
Total for this period	4	n/a

6) Methodology

The San Francisco AIDS Foundation will develop a Program Plan with the HIV Prevention Section which will reflect program requirements of RFP 21-2010 and community planning priorities. This Plan will be reviewed with the HIV Prevention Section and changes to it will be allowed if it is agreed that clients will be more appropriately served and priorities continue to be addressed.

7) Objectives and Measurements

There are no outcome objectives for providers funded under the STOP Study; participation only requires providing additional resources to collect, handle and process specimens and/or enhance partner notification services.

8) Continuous Quality Improvement

The San Francisco AIDS Foundation agrees to adhere to the following:

- a. Current HIV Prevention Section, HIV Testing Policies and Procedures which include CDC and State Guidelines,
- b. Any relevant guidelines in the 2010 San Francisco HIV Prevention Plan,
- c. Any and all guidelines developed by the HIV Prevention Section required to implement services to meet the objectives in San Francisco's new System of Prevention.

Contractor: San Francisco AIDS Foundation
 Program: Community-Based HIV Testing
 CMS#: 7164

Appendix A-2
 Contract Term: 09/01/11 through 06/30/14
 Funding Source: General Fund

1. **Program Name:** Community-Based HIV Testing
Program Address: 1035 Market Street, Suite 400
City, State, Zip Code: San Francisco, CA 94103
Telephone: (415) 487-3000
Facsimile: (415) 487-3094

2. **Nature of Document (check one)**

☐ New ☐ Renewal ☒ **Modification**

3. **Goal Statement**

Goal: To reduce new HIV infections by 50% by 2017.

4. **Target Population**

SFAF will provide HIV testing services for a wide range of gay men and other MSM, IDUs, and TFSM through our HIV testing sites strategically located in the city's two primary HIV epicenters, the Castro and Tenderloin.

5. **Modality(ies)/Interventions**

09/01/2011 – 12/31/2011

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 9,700 tests annually for 4 months x 80% = 2,587 tests. 2,587 tests = 2,587 UOS and 2,587 contacts	2,587	2,587

01/01/2012 – 12/31/2012

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 9,700 tests annually for 8 months x 80% = 5,173 tests. 9,700 tests annually for 4 months x 100% = 3,233 tests. 5,173 + 3,233 = 8,406 tests = 8,406 UOS and 8,406 contacts	8,406	8,406

01/01/2013 – 6/30/2013

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 9,700 tests annually for 6 months x 100% = 4,850 tests. 4,850 tests = 4,850 UOS and 4,850 contacts	4,850	4,850

07/01/2013 – 06/30/2014

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 9,700 tests annually for 12 months x 100% = 9,700 tests. 9,700 tests = 9,700 UOS and 9,700 contacts	9,700	9,700
HIV Mobile Testing 1 UOS = 1 test for 1 client 480 tests annually for 12 months x 100% = 480 tests. 480 tests = 480 UOS and 480 contacts	480	480
TOTAL:	10,180	10,180

6. Methodology

The San Francisco AIDS Foundation will develop a Program Plan with the HIV Prevention Section which will reflect program requirements of RFP 21-2010 and community planning priorities. This Plan will provide a justification for the UOS and NOC in the grid above, will be reviewed with the HIV Prevention Section and changes to it will be allowed if it is agreed that clients will be more appropriately served and priorities continue to be addressed.

7. Objectives and Measurements

A. Required Objectives

The San Francisco AIDS Foundation agrees to collect data in the San Francisco data collection system as required and be prepared to report on evaluation, data collection and findings in cooperation with the HIV Prevention Section.

The San Francisco AIDS Foundation will work with the HIV Prevention Section to measure some or all of the following outcomes as appropriate for the service category and data collection system maturity.

Community-Based HIV Testing	
Citywide Goal	System of Prevention Objective
Increase status awareness	<ul style="list-style-type: none"> By 06/30/2014, the SFAF community-based testing program, (Magnet, St James and Glide) will achieve a 1.3% positivity rate as measured by EvaluationWeb and HPS acute infection data. By 06/30/2014, 90% of people testing HIV-positive at SFAF's community-based testing program will be offered partner services as measured by EvaluationWeb.*
Increase viral load	<ul style="list-style-type: none"> By 06/30/2014, 90% of HIV-positive clients in SFAF's community-

Community-Based HIV Testing	
suppression	based testing program testing positive will be offered linkage to care as measured or documented by EvaluationWeb.*
Maintain or increase levels of protected sex	<ul style="list-style-type: none">• By 06/30/2014, SFAF's community-based testing program will distribute at least 200,000 condoms (including FC2 condoms) annually as measured by invoices and/or inventory logs managed by the Data Manager.

*Programs are not directly responsible for offering linkage to care or partner services. Programs are responsible and should develop objectives for linking HIV-positive clients to the Citywide LINC'S Program.

8. Continuous Quality Improvement

The San Francisco AIDS Foundation agrees to adhere to the following:

- a. Current HIV Prevention Section, HIV Testing Policies and Procedures which include CDC and State Guidelines,
- b. Any relevant guidelines in the 2010 San Francisco HIV Prevention Plan,
- c. Any and all guidelines developed by the HIV Prevention Section required to implement services to meet the objectives in San Francisco's new System of Prevention.

Contractor: San Francisco AIDS Foundation
 Program: The Stonewall Project
 CMS#: 7164

Appendix A-3
 Contract Term: 09/01/11 through 06/30/14
 Funding Source: General Fund

1. **Program Name:** The Stonewall Project
Program Address: 1035 Market Street, Suite 400
City, State, Zip Code: San Francisco, CA 94103
Telephone: (415) 487-3000
Facsimile: (415) 487-3094

2. **Nature of Document (check one)**

☐ New ☐ Renewal ☒ **Modification**

3. **Goal Statement**

Goal: To reduce new HIV infections by 50% by 2017.

4. **Target Population**

The target population of this project is gay men and other MSM (G/MSM) who reside in San Francisco and use methamphetamine and other substances. This includes all G/MSM who are residents of San Francisco regardless of age, race, ethnicity, sexual orientation, gender identity, religion and spirituality, socioeconomic class, partner status, physical and mental ability, or HIV serostatus.

5. **Modality(ies)/Interventions**

09/01/2011 – 06/30/2012

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Recruitment & Linkages 1 UOS = 1 hour 720 hours annually for 10 months x 80% = 480 UOS. 4 contacts/hour x 720 hours annually for 10 months x 80% = 1,920 NOC.	480	1,920
Events 1 UOS = 1 event 34 events annually for 10 months x 80% = 23 UOS. Average of 55 contacts/event = 1,568 NOC.	23	1,265
Groups 1 UOS = 1 hour 276 groups annually for 10 months x 1.5 hour/group x 80% = 276 UOS. 276 groups annually for 10 months x 5 clients/group x 80% = 920 NOC.	276	920
Individual Risk Reduction Counseling 1 UOS = 1 hour 480 sessions annually for 10 months x 0.5 hour/session x 80% = 160 UOS.	160	320

480 sessions annually for 10 months x 1 client/session x 80% = 320 NOC.		
Prevention Case Management 1 UOS = 1 hour 432 sessions annually for 10 months x 0.83 hour/session x 80% = 240 UOS. 432 sessions annually for 10 months x 1 client/session x 80% = 288 NOC.	240	288
Social Marketing 1 UOS = 1 month 10 months of social marketing x 80% = 8 UOS.	8	n/a
Condom Distribution 1 UOS = 1 month 10 months of condom & lube distribution x 80% = 8 UOS.	8	n/a
Training 1 UOS = 1 hour 1 training/month x 10 months x 2 hours each x 80% = 16 UOS. 1 training/month x 10 months x 10 attendees/training x 80% = 80 NOC.	16	80

07/01/2012 – 06/30/2013

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Recruitment & Linkages 1 UOS = 1 hour 720 hours annually for 2 months x 80% = 96 UOS. 720 hours annually for 10 months x 100% = 600 UOS. 4 contacts/hour x 720 hours annually for 2 months x 80% = 384 NOC. 4 contacts/hour x 720 hours annually for 10 months x 100% = 2,400 NOC.	696	2,784
Events 1 UOS = 1 event 34 events annually for 2 months x 80% = 5 UOS. 34 events annually for 10 months x 100% = 28 UOS. Average of 55 contacts/event = 1,815 NOC.	33	1,815
Groups 1 UOS = 1 hour 276 groups annually for 2 months x 1.5 hour/group x 80% = 55 UOS. 276 groups annually for 10 months x 1.5 hour/group x 100% = 345 UOS. 276 groups annually for 2 months x 5 clients/group x 80% = 184 NOC. 276 groups annually for 10 months x 5 clients/group x 100% = 1,150 NOC.	400	1,334

Individual Risk Reduction Counseling 1 UOS = 1 hour 480 sessions annually for 2 months x 0.5 hour/session x 80% = 32 UOS. 480 sessions annually for 10 months x 0.5 hour/session x 100% = 200 UOS. 480 sessions annually for 2 months x 1 client/session x 80% = 64 NOC. 480 sessions annually for 10 months x 1 client/session x 100% = 400 NOC.	232	464
Prevention Case Management 1 UOS = 1 hour 432 sessions annually for 2 months x 0.83 hour/session x 80% = 48 UOS. 432 sessions annually for 10 months x 0.83 hour/session x 100% = 300 UOS. 432 sessions annually for 2 months x 1 client/session x 80% = 58 NOC. 432 sessions annually for 10 months x 1 client/session x 100% = 360 NOC.	348	418
Social Marketing 1 UOS = 1 month 2 months of social marketing x 80% = 2 UOS. 10 months of social marketing x 100% = 10 UOS.	12	n/a
Condom Distribution 1 UOS = 1 month 2 months of condom & lube distribution x 80% = 2 UOS. 10 months of condom & lube distribution x 100% = 10 UOS.	12	n/a
Training 1 UOS = 1 hour 1 training/month x 2 months x 2 hours each x 80% = 3 UOS. 1 training/month x 10 months x 2 hours each x 100% = 20 UOS. 1 training/month x 2 months x 10 attendees/training x 80% = 16 NOC. 1 training/month x 10 months x 10 attendees/training x 100% = 100 NOC.	23	116

07/01/2013 – 06/30/2014

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Condom Distribution 1 UOS = 1 month 12 months of condom & lube distribution x 100% = 12 UOS.	12	n/a
Events 1 UOS = 1 event 34 events annually for 12 months x 100% = 34 UOS.	34	1,496

Average of 44 contacts/event = 1,496 NOC.		
Groups 1 UOS = 1 hour 276 groups annually for 12 months x 1.5 hour/group x 100% = 414 UOS. 276 groups annually for 12 months x 5 clients/group x 100% = 1,380 NOC.	414	1,380
Individual Risk Reduction Counseling 1 UOS = 1 hour 255 sessions annually for 12 months x 0.94 hour/session x 100% = 240 UOS. 255 sessions annually for 12 months x 1 client/session x 100% = 255 NOC.	240	255
Prevention Case Management 1 UOS = 1 hour 374 sessions annually for 12 months x 0.96 hour/session x 100% = 359 UOS. 374 sessions annually for 12 months x 1 client/session x 100% = 374 NOC.	359	374
Recruitment & Linkages 1 UOS = 1 hour 720 hours annually for 12 months x 100% = 720 UOS. 4 contacts/hour x 720 hours annually for 12 months x 100% = 2,880 NOC.	720	2,880
Training 1 UOS = 1 hour 1 training/month x 12 months x 2 hours each x 100% = 24 UOS. 1 training/month x 12 months x 10 attendees/training x 100% = 120 NOC.	24	120
Social Marketing 1 UOS = 1 month 12 months of social marketing x 100% = 10 UOS.	12	n/a

6. Methodology

Please see Appendix A-2, Section 6.

7. Objectives and Measurements

A. Required Objectives

The San Francisco AIDS Foundation agrees to collect data in the San Francisco data collection system as required and be prepared to report on evaluation, data collection and findings in cooperation with the HIV Prevention Section.

The San Francisco AIDS Foundation will work with the HIV Prevention Section to measure some or all of the following outcomes as appropriate for the service category and data collection system maturity.

HERR to Address Drivers	
Citywide Goal	System of Prevention Objective
Increase status awareness	<ul style="list-style-type: none">• By 06/30/2014, 90% of males who have sex with males of HIV-negative and unknown status of the SFAF-Stonewall Project will be offered at least one HIV test annually, as measured by client treatment plan and progress notes.• By 06/30/2014, 60% of HIV-negative/unknown status MSM clients of The Stonewall Project will report having had an HIV test in the prior 6 months, as measured or documented by self-report, EvaluationWeb and/or client treatment plans.
Increase viral load suppression	<ul style="list-style-type: none">• By 06/30/2014, 80% of HIV-positive clients in the SFAF Stonewall Project either testing positive or who have not seen an HIV primary care provider in the prior 6 months will be offered linkage to care as measured or documented by client treatment plans.*
Maintain or increase levels of protected sex	<ul style="list-style-type: none">• By 06/30/2014, the SFAF Stonewall Project will distribute at least 50,000 condoms annually as measured by invoices and programs records.

*Programs are not directly responsible for offering linkage to care or partner services. Programs are responsible and should develop objectives for linking HIV-positive clients to the Citywide LINC'S Program.

8. Continuous Quality Improvement

Please see Appendix A-2, Section 8.

1. **Program Name:** African American Prevention Initiative
Program Address: 1035 Market Street, Suite 400
City, State, Zip Code: San Francisco, CA 94103
Telephone: (415) 487-3000
Facsimile: (415) 487-3094

2. **Nature of Document (check one)**

☐ New ☐ Renewal ☒ **Modification**

3. **Goal Statement**

Goal: To reduce new HIV infections by 50% by 2017.

4. **Target Population**

The target population of this project is African-American gay men and other MSM (G/MSM) who reside in San Francisco, with a focus on the Tenderloin and Castro neighborhoods.

5. **Modality(ies)/Interventions**

09/01/2011 – 12/31/2011

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Events 1 UOS = 1 event 27 events annually for 4 months x 80% = 7 UOS. Average 41 contacts/event x 7 events = 287 NOC.	7	287
Groups 1 UOS = 1 hour 279 groups annually for 4 months x 3 hour/group x 80% = 223 UOS. 279 groups annually for 4 months x average of 16.1 clients/group x 80% = 1,198 NOC.	223	1,198
HIV Testing 1 UOS = 1 test for 1 client. 600 tests annually for 4 months x 80% = 160 tests. 160 tests = 160 UOS and 160 contacts.	160	160
Individual Risk Reduction Counseling 1 UOS = 1 hour. 480 sessions annually for 4 months x 1 hour/session x 80% = 128 UOS. 480 sessions annually for 4 months x 1 client/session x 80% = 128 NOC.	128	128

Linkage 1 UOS = 1 linkage to LINC'S Program 75 linkages annually for 4 months x 80% = 20 linkages. 20 linkages = 20 UOS and 20 NOC.	20	20
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01/01/2012 – 12/31/2012

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Events 1 UOS = 1 event 23 events annually for 8 months x 80% = 12 UOS. 23 events annually for 4 months x 100% = 8 UOS. Average 41 contacts/event x 20 events = 943 NOC.	20	820
Groups 1 UOS = 1 hour 318 groups annually for 8 months x average 1.82 hour/group x 80% = 309 UOS. 318 groups annually for 4 months x average 1.82 hour/group x 100% = 194 UOS. 318 groups annually for 8 months x average of 15.5 clients/group x 80% = 2,629 NOC. 318 groups annually for 4 months x average of 15.5 clients/group x 100% = 1,643 NOC.	503	4,272
HIV Testing 1 UOS = 1 test for 1 client. 500 tests annually for 8 months x 80% = 267 tests. 500 tests annually for 4 months x 100% = 167 tests. 433 tests = 433 UOS and 433 contacts.	433	433
Individual Risk Reduction Counseling 1 UOS = 1 hour. 680 sessions annually for 8 months x 1 hour/session x 80% = 363 UOS. 680 sessions annually for 4 months x 1 hour/session x 100% = 226 UOS. 680 sessions annually for 8 months x 1 client/session x 80% = 363 NOC. 680 sessions annually for 4 months x 1 client/session x 100% = 226 NOC.	589	589
Linkage 1 UOS = 1 linkage to LINC'S Program 75 linkages annually for 8 months x 80% = 40 linkages. 75 linkages annually for 4 months x 100% = 25 linkages. 65 linkages = 65 UOS and 65 NOC.	65	65

01/01/2013 – 6/30/2013

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Events 1 UOS = 1 event 23 events annually for 6 months x 100% = 12 UOS. Average 41 contacts/event x 12 events = 492 NOC.	12	192 492 (7.10.13)
Groups 1 UOS = 1 hour 318 groups annually for 6 months x average 1.82 hour/group x 100% = 290 UOS. 318 groups annually for 6 months x average of 15.5 clients/group x 100% = 2,465 NOC.	290	2,465
HIV Testing 1 UOS = 1 test for 1 client. 500 tests annually for 6 months x 100% = 250 tests. 250 tests = 250 UOS and 250 contacts.	250	250
Individual Risk Reduction Counseling 1 UOS = 1 hour. 680 sessions annually for 6 months x 1 hour/session x 100% = 340 UOS. 680 sessions annually for 6 months x 1 client/session x 100% = 340 NOC.	340	340
Linkage 1 UOS = 1 linkage to LINC'S Program 75 linkages annually for 6 months x 100% = 38 linkages. 38 linkages = 38 UOS and 38 NOC.	38	38

07/01/2013 – 06/30/2014

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Events 1 UOS = 1 event 24 events annually for 12 months x 100% = 24 UOS. Average 41 contacts/event x 24 events = 984 NOC.	24	984
Groups 1 UOS = 1 hour 193 groups annually for 12 months x average of 3 hours/group x 100% = 580 UOS. 193 groups annually for 12 months x average of 17.2 clients/group x 100% = 3,320 NOC.	580	3,320
HIV Testing 1 UOS = 1 test for 1 client. 500 tests annually for 12 months x 100% = 500 tests.	500	500

500 tests = 500 UOS and 500 contacts.		
Individual Risk Reduction Counseling 1 UOS = 1 hour. 792 sessions annually for 12 months x .33 hour/session x 100% = 262 UOS. 792 sessions annually for 12 months x 1 client/session x 100% = 792 NOC.	262	792
Prevention Case Management 1 UOS = 1 hour. 200 sessions annually for 12 months x 1 hour/session x 100% = 200 UOS. 200 sessions annually for 12 months x 1 client/session x 100% = 200 NOC.	200	200

6. Methodology

Please see Appendix A-2, Section 6.

7. Objectives and Measurements

A. Required Objectives

The San Francisco AIDS Foundation agrees to collect data in the San Francisco data collection system as required and be prepared to report on evaluation, data collection and findings in cooperation with the HIV Prevention Section.

The San Francisco AIDS Foundation will work with the HIV Prevention Section to measure some or all of the following outcomes as appropriate for the service category and data collection system maturity.

Community-Based HIV Testing	
Citywide Goal	System of Prevention Objective
Increase status awareness	<ul style="list-style-type: none"> By 06/30/2014, SFAF African American Special Project will achieve a 1.3% positivity rate as measured by Evaluation Web and HIV acute infection data. By 06/30/2014, 65% of HIV negative/unknown status African American males who have sex with males of the African American Special Project will report having had an HIV test in the prior 6 months, as measured or documented by self-report, EvaluationWeb. By 06/30/2014, 90% of people testing HIV-positive at the SFAF African American Special Project will be offered partner services as measured by EvaluationWeb.*
Increase viral load suppression	<ul style="list-style-type: none"> By 06/30/2014, 90% of HIV-positive clients in the SFAF African

Community-Based HIV Testing	
	American Special Project either testing positive or who have not seen an HIV primary care provider in the prior 6 months will be offered linkage to care as measured or documented by EvaluationWeb and or administrative data.*
Maintain or increase levels of protected sex	<ul style="list-style-type: none"> By 06/30/2014, the SFAF African American Special Project will distribute at least 80,000 condoms annually as measured by invoices.

HERR to Address Drivers	
Citywide Goal	System of Prevention Objective
Increase status awareness	<ul style="list-style-type: none"> By 06/30/2014, 90% of HIV-negative/unknown status African American males who have sex with males of the African American Special Project will be offered at least one HIV test annually as measured by administrative data. By 06/30/2014, 65% of HIV negative/unknown status African American males who have sex with males of the African American Special Project will report having had an HIV test in the prior 6 months, as measured or documented by self-report, EvaluationWeb.
Increase viral load suppression	<ul style="list-style-type: none"> By 06/30/2014, 90% of HIV-positive clients in the SFAF African American Special Project either testing positive or who have not seen an HIV primary care provider in the prior 6 months will be offered linkage to care as measured or documented by EvaluationWeb and or administrative data.*
Maintain or increase levels of protected sex	<ul style="list-style-type: none"> By 06/30/2014, the SFAF African American Special Project will distribute at least 80,000 condoms annually as measured by invoices.

*Programs are not directly responsible for offering linkage to care or partner services. Programs are responsible and should develop objectives for linking HIV-positive clients to the Citywide LINC'S Program.

8. Continuous Quality Improvement

Please see Appendix A-2, Section 8.

Contractor: San Francisco AIDS Foundation
 Program: Stonewall Castro/LIFE Program
 CMS#: 7164

Appendix A-5
 Contract Term: 09/01/11 through 06/30/14
 Funding Source: General Fund

1. **Program Name:** Stonewall Castro/LIFE Program
Program Address: 1035 Market Street, Suite 400
City, State, Zip Code: San Francisco, CA 94103
Telephone: (415) 487-3000
Facsimile: (415) 487-3094

2. **Nature of Document (check one)**

☐ New ☐ Renewal ☒ **Modification**

3. **Goal Statement**

Goal: To reduce new HIV infections by 50% by 2017.

4. **Target Population**

The target population of this project is gay men and other MSM (G/MSM) who reside in San Francisco and use methamphetamine and other substances. This includes all G/MSM who are residents of San Francisco regardless of age, race, ethnicity, sexual orientation, gender identity, religion and spirituality, socioeconomic class, partner status, physical and mental ability, or HIV serostatus.

5. **Modality(ies)/Interventions**

09/01/2011 – 06/30/2012

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 600 tests annually for 10 months x 80% = 400 tests. 400 tests = 400 UOS and 400 contacts	400	400
Individual Risk Reduction Counseling 1 UOS = 1 hour 288 sessions annually for 10 mos. x 0.5 hr./session x 80% = 96 UOS. 288 sessions annually for 10 mos. x 1 client/session x 80% = 192 NOC.	96	192
Prevention Case Management 1 UOS = 1 hour 480 sessions annually for 10 mos. x 1 hr./session x 80% = 320 UOS. 480 sessions annually for 10 mos. x 1 client/session x 80% = 320 NOC.	320	320
Groups 1 UOS = 1 hour 207 groups annually for 10 mos. x 1.5 hr./group x 80% = 207	207	690

UOS. 207 groups annually for 10 mos. x 5 clients/group x 80% = 690 NOC.		
Shanti L.I.F.E. Program – Individual Risk Reduction Counseling 1 UOS = 1 hour 160 sessions annually for 10 mos. x 1 hr./session x 80% = 107 UOS. 160 sessions annually for 10 mos. x 1 client/session x 80% = 107 NOC.	107	107
Shanti L.I.F.E. Program – Prevention Case Management 1 UOS = 1 hour 960 sessions annually for 10 mos. x 1.25 hr./session x 80% = 800 UOS. 960 sessions annually for 10 mos. x 1 client/session x 80% = 640 NOC.	800	640
Shanti L.I.F.E. Program – Groups 1 UOS = 1 hour 45 groups annually for 10 mos. x 4 hrs./group x 80% = 120 UOS. 5 groups annually for 10 mos. x 8 hrs./group x 80% = 27 UOS. 48 groups annually for 10 mos. x 3.5 hrs./group x 80% = 112 UOS 48 groups annually for 10 mos. x 2 hrs./group x 80% = 64 UOS 48 groups annually for 10 mos. x 2.5 hrs./group x 80% = 80 UOS 194 groups annually for 10 mos. x avg. 11 clients/group x 80% = 1,423 NOC.	403	1,423
Shanti L.I.F.E. Program – Recruitment and Linkage 1 UOS = 1 hour 600 sessions annually for 10 mos. x .5 hr./session x 80% = 200 UOS. 600 sessions annually for 10 mos. x 1 client/session x 80% = 400 NOC.	200	400

07/01/2012 – 06/30/2013

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 600 tests annually for 2 mos. x 80% = 80 tests. 80 tests = 80 UOS and 80 contacts 600 tests annually for 10 mos. x 100% = 500 tests. 500 tests = 500 UOS and 500 contacts	580	580
Individual Risk Reduction Counseling 1 UOS = 1 hour 288 sessions annually for 2 mos. x 0.5 hr./session x 80% = 19 UOS.	139	278

288 sessions annually for 10 mos. x 0.5 hr./session x 100% = 120 UOS. 288 sessions annually for 2 mos. x 1 client/session x 80% = 38 NOC. 288 sessions annually for 10 mos. x 1 client/session x 100% = 240 NOC.		
Prevention Case Management 1 UOS = 1 hour 480 sessions annually for 2 mos. x 1 hr./session x 80% = 64 UOS. 480 sessions annually for 10 mos. x 1 hr./session x 100% = 400 UOS. 480 sessions annually for 2 mos. x 1 client/session x 80% = 64 NOC. 480 sessions annually for 10 mos. x 1 client/session x 100% = 400 NOC.	464	464
Groups 1 UOS = 1 hour 207 groups annually for 2 mos. x 1.5 hr./group x 80% = 41 UOS. 207 groups annually for 10 mos. x 1.5 hr./group x 100% = 259 UOS. 207 groups annually for 2 mos. x 5 clients/group x 80% = 138 NOC. 207 groups annually for 10 mos. x 5 clients/group x 100% = 862 NOC.	300	1,000
Shanti L.I.F.E. Program – Individual Risk Reduction Counseling 1 UOS = 1 hour 160 sessions annually for 2 mos. x 1 hr./session x 80% = 21 UOS. 160 sessions annually for 10 mos. x 1 hr./session x 100% = 133 UOS. 160 sessions annually for 2 mos. x 1 client/session x 80% = 21 NOC. 160 sessions annually for 10 mos. x 1 client/session x 100% = 133 NOC.	155	155
Shanti L.I.F.E. Program – Prevention Case Management 1 UOS = 1 hour 960 sessions annually for 2 mos. x 1.25 hr./session x 80% = 160 UOS. 960 sessions annually for 10 mos. x 1.25 hr./session x 100% = 1000 UOS. 960 sessions annually for 2 mos. x 1 client/session x 80% = 128 NOC. 960 sessions annually for 10 mos. x 1 client/session x 100% = 800 NOC.	1160	928
Shanti L.I.F.E. Program – Groups 1 UOS = 1 hour	584	2,062

45 groups annually for 2 mos. x 4 hrs./group x 80% = 24 UOS. 45 groups annually for 10 mos. x 4 hrs./group x 100% = 150 UOS. 5 groups annually for 2 mos. x 8 hrs./group x 80% = 5 UOS. 5 groups annually for 10 mos. x 8 hrs./group x 100% = 33 UOS. 48 groups annually for 2 mos. x 3.5 hrs./group x 80% = 22 UOS. 48 groups annually for 10 mos. x 3.5 hrs./group x 100% = 140 UOS 48 groups annually for 2 mos. x 2 hrs./group x 80% = 13 UOS. 48 groups annually for 10 mos. x 2 hrs./group x 100% = 80 UOS 48 groups annually for 2 mos. x 2.5 hrs./group x 80% = 16 UOS. 48 groups annually for 10 mos. x 2.5 hrs./group x 100% = 100 UOS 194 groups annually for 2 mos. x avg. 11 clients/group x 80% = 284 NOC. 194 groups annually for 10 mos. x avg. 11 clients/group x 100% = 1,778 NOC.		
Shanti L.I.F.E. Program – Recruitment and Linkage 1 UOS = 1 hour 600 sessions annually for 2 mos. x .5 hr./session x 80% = 40 UOS. 600 sessions annually for 10 mos. x .5 hr./session x 100% = 250 UOS. 600 sessions annually for 2 mos. x 1 client/session x 80% = 80 NOC. 600 sessions annually for 10 mos. x 1 client/session x 100% = 500 NOC.	290	580

07/01/2013 – 06/30/2014

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HIV Testing 1 UOS = 1 test for 1 client 600 tests annually for 12 mos. x 100% = 600 tests. 600 tests = 600 UOS and 600 contacts	600	600
Individual Risk Reduction Counseling 1 UOS = 1 hour 159 sessions annually for 12 mos. x 0.91 hr./session x 100% = 145 UOS. 159 sessions annually for 12 mos. x 1 client/session x 100% = 159 NOC.	145	159
Prevention Case Management 1 UOS = 1 hour 480 sessions annually for 12 mos. x 1 hr./session x 100% = 480 UOS.	480	480

480 sessions annually for 12 mos. x 1 client/session x 100% = 480 NOC.		
Groups 1 UOS = 1 hour 207 groups annually for 12 mos. x 1.5 hr./group x 100% = 311 UOS. 207 groups annually for 12 mos. x 5 clients/group x 100% = 1,035 NOC.	311	1,035
Shanti L.I.F.E. Program – Individual Risk Reduction Counseling 1 UOS = 1 hour 144 sessions annually for 12 mos. x 1 hr./session x 100% = 144 UOS. 144 sessions annually for 12 mos. x 1 client/session x 100% = 144 NOC.	144	144
Shanti L.I.F.E. Program – Prevention Case Management 1 UOS = 1 hour 864 sessions annually for 12 mos. x 1.25 hr./session x 100% = 1080 UOS. 864 sessions annually for 12 mos. x 1 client/session x 100% = 864 NOC.	1080	864
Shanti L.I.F.E. Program – Groups 1 UOS = 1 hour 45 groups annually for 12 mos. x 4 hrs./group x 100% = 180 UOS. 5 groups annually for 12 mos. x 8 hrs./group x 100% = 40 UOS. 48 groups annually for 12 mos. x 3.5 hrs./group x 100% = 168 UOS 48 groups annually for 12 mos. x 2 hrs./group x 100% = 96 UOS 48 groups annually for 12 mos. x 2.5 hrs./group x 100% = 120 UOS 194 groups annually for 12 mos. x avg. 11 clients/group x 100% = 2,134 NOC.	604	2,134
Shanti L.I.F.E. Program – Recruitment and Linkage 1 UOS = 1 hour 750 sessions annually for 12 mos. x .5 hr./session x 100% = 375 UOS. 750 sessions annually for 12 mos. x 1 client/session x 100% = 750 NOC.	375	750

6. Methodology

Please see Appendix A-2, Section 6.

7. Objectives and Measurements

A. Required Objectives

The San Francisco AIDS Foundation agrees to collect data in the San Francisco data collection system as required and be prepared to report on evaluation, data collection and findings in cooperation with the HIV Prevention Section.

The San Francisco AIDS Foundation will work with the HIV Prevention Section to measure some or all of the following outcomes as appropriate for the service category and data collection system maturity.

Community-Based HIV Testing	
Citywide Goal	System of Prevention Objective
Increase status awareness	<ul style="list-style-type: none"> By 06/30/2014, SFAF-Stonewall will achieve a 1.3% positivity rate measured by EvaluationWeb and HPS acute infection data. By 06/30/2014, 60% of HIV-negative/unknown status MSM clients of the The Stonewall Project will report having had an HIV test in the prior 6 months, as measured or documented by self-report, EvaluationWeb and/or Client Treatment plans. By 06/30/2014, 90% of people testing HIV-positive at SFAF will be offered partner services as measured by EvaluationWeb.*
Increase viral load suppression	<ul style="list-style-type: none"> By 06/30/2014, 80% of HIV-positive clients in The Stonewall Project either testing positive or who have not seen an HIV primary care provider in the prior 6 months will be offered linkage to care as measured or documented by self report or client record.*
Maintain or increase levels of protected sex	<ul style="list-style-type: none"> By 06/30/2014, the SFAF Stonewall Project will distribute at least 50,000 condoms annually as measured by invoices and/or programs records.

HERR to Address Drivers	
Citywide Goal	System of Prevention Objective
Increase status awareness	<ul style="list-style-type: none"> By 06/30/2014, 90% of males who have sex with males of SFAF-Stonewall will be offered at least one HIV test annually, as measured by client treatment plans and progress note.
Increase viral load suppression	<ul style="list-style-type: none"> By 06/30/2014, 80% of HIV-positive clients in The Stonewall Project either testing positive or who have not seen an HIV primary care provider in the prior 6 months will be offered linkage to care as measured or documented by self report or client record.*
Maintain or increase levels of protected sex	<ul style="list-style-type: none"> By 06/30/2014, the SFAF Stonewall Project will distribute at least 50,000 condoms annually as measured by invoices and/or programs

Contractor: San Francisco AIDS Foundation
Program: Stonewall Castro/LIFE Program
CMS#: 7164

Appendix A-5
Contract Term: 09/01/11 through 06/30/14
Funding Source: General Fund

HERR to Address Drivers	
Citywide Goal	System of Prevention Objective
	records.

*Programs are not directly responsible for offering linkage to care or partner services. Programs are responsible and should develop objectives for linking HIV-positive clients to the Citywide LINC'S Program.

8. Continuous Quality Improvement

Please see Appendix A-2, Section 8.

Appendix B Calculation of Charges

1. Method of Payment

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 supporting the period 09/01/2011 –06/30/2014 may be found in the following Appendixes:

Appendix B, 09/01/2011 – 06/30/2013, Page 1-7	Budget Summary
Appendix B-1, 09/01/11-06/14/12, Pages 1-4	HIV Testing – STOP Study
Appendix B-1a, 06/15/12-06/14/13, Pages 1-4	HIV Testing – STOP Study
Appendix B-1b, 06/15/13-06/14/14, Pages 1-3	HIV Testing – STOP Study
Appendix B-2, 09/01/11-12/31/11, Pages 1-7	Community Based HIV Testing
Appendix B-2a, 01/01/12-12/31/12, Pages 1-7	Community Based HIV Testing
Appendix B-2b, 01/01/13-06/30/13, Pages 1-7	Community Based HIV Testing
Appendix B-2c, 07/01/14-06/30/14, Pages 1-7	Community Based HIV Testing
Appendix B-3, 09/01/11-06/30/12, Pages 1-7	The Stonewall Project
Appendix B-3a, 07/01/12-06/30/13, Pages 1-7	The Stonewall Project
Appendix B-3b, 07/01/13-06/30/14, Pages 1-7	The Stonewall Project
Appendix B-4, 09/01/11-12/31/11, Pages 1-8	African American Prevention Initiative
Appendix B-4a, 01/01/12-12/31/12, Pages 1-9	African American Prevention Initiative
Appendix B-4b, 01/01/13-06/30/13, Pages 1-8	African American Prevention Initiative
Appendix B-4c, 07/01/13-06/30/14, Pages 1-9	African American Prevention Initiative
Appendix B-5, 09/01/11-06/30/12, Pages 1-7	Stonewall Castro/ LIFE Program
Appendix B-5a, 07/01/12-06/30/13, Pages 1-8	Stonewall Castro/ LIFE Program
Appendix B-5b, 07/01/13-06/30/14, Pages 1-9	Stonewall Castro/ LIFE Program
Appendix B-6, 09/01/11-06/30/12, Pages 1-9	Syringe Access Services
Appendix B-6a, 09/01/11-06/30/12, Pages 1-2	Syringe Access Services
Appendix B-6b, 09/01/11-06/30/12, Pages 1-2	Syringe Access Services
Appendix B-6c, 09/01/11-06/30/12, Pages 1-2	Syringe Access Services
Appendix B-6d, 07/01/12-06/30/13, Pages 1-11	Syringe Access Services
Appendix B-6e, 07/01/12-06/30/13, Pages 1-2	Syringe Access Services
Appendix B-6f, 07/01/12-06/30/13, Pages 1-2	Syringe Access Services
Appendix B-6g, 07/01/12-06/30/13, Pages 1-2	Syringe Access Services

B. Contractor understands that, of the maximum dollar obligation listed in Section 5 of this Agreement, **\$300,000** is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the

availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

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

Original Agreement	Federal CDC	\$53,166	09/01/11-06/14/12
Original Agreement	Federal CDC	\$1,826,548	09/01/11-12/31/12
Original Agreement	CCSF General Fund	\$3,619,919	09/01/11-06/30/13
Original Agreement	CCSF General Children Fund	\$326,659	09/01/11-06/30/13
Internal Contract Revision #1	CCSF General Fund	\$63,525	09/01/11-06/30/12
Amendment #1	Federal CDC	\$23,417	06/15/12-06/14/13
Amendment #1	Federal CDC	-\$648,595	01/01/12-12/31/12
Amendment #1	CCSF General Fund	\$1,370,894	01/01/12-06/30/13
Amendment #1	CCSF General Children Fund	\$3,403	07/01/12-06/30/13
Amendment #2	Federal CDC	\$16,500	06/15/13-06/14/14
Amendment #2	CCSF General Fund	\$2,474,546	07/01/13-06/30/14
		<u>\$9,129,982</u>	
	Contingency	<u>\$300,000</u>	
		<u>\$9,429,982</u>	

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.

Department of Public Health Contract Budget Summary by Program
(HUH, HPS, HHS, CHPP AND MCAH)

A	B	C	D	E	F	G	H	I	J	K
1	Check one:						Appendix B Page 3			
2	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification						Appendix Term: 9/1/11 - 6/30/14			
3	If modification, Effective Date of Mod. No. of Mod.									
4	FISCAL YEAR: 2012-13						DPH1			
5	LEGAL ENTITY/ ORGANIZATION NAME: San Francisco AIDS Foundation						VENDOR ID (DPH USE ONLY)			
6	LEGAL ENTITY CODE: (CBHS Only)									
7	CONTRACTOR/ PROVIDER NAME: San Francisco AIDS Foundation									
8	PROGRAM/ PROVIDER NAME: San Francisco AIDS Foundation									
9										
10	APPENDIX NUMBER (Narrative/Budget)				A-1/B-1	A-1/B-1a	A-2/B-2	A-2/B-2a	A-2/B-2b	
11	APPENDIX TERM:				9/1/11-6/14/12	6/15/12-6/14/13	9/1/11-12/31/11	1/1/12-12/31/12	1/1/13-6/30/13	TOTALS
12	EXPENSES:									
13	SALARIES & EMPLOYEE BENEFITS				21,274	41,879	169,097	507,289	253,644	993,183
14	OPERATING EXPENSE				\$ 2,892	3,576	94,810	284,433	142,218	527,929
15	CAPITAL OUTLAY (COST \$5,000 AND OVER)				0	0	0	0	0	0
16	SUBTOTAL DIRECT COSTS				24,166	45,455	263,907	791,722	395,862	1,521,112
17	INDIRECT COST AMOUNT:				2,417	4,545	26,391	79,172	39,585	152,110
18	INDIRECT RATE :				10.0%	10.0%	10.0%	10.0%	10.0%	
19	TOTAL EXPENSES:				26,583	50,000	290,298	870,894	435,447	1,673,222
20										
21	REVENUES:									
22										
23	HOUSING & URBAN HEALTH (HUH) FUNDING SOURCES:									
33	TOTAL HOUSING & URBAN TOTAL HOUSING & URBAN HEALTH FUNDING SOURCES						0			0
34										
35	HIV PREVENTION SECTION (HPS) FUNDING SOURCES:									
36	CDC Grant (HIV Prevention Project)				26,583	50,000	290,298	479,451		846,332
37	General Fund							391,443	435,447	826,890
38	Other Funding Source (Identify by name)									0
39	Children General Fund									0
40	TOTAL HIV PREVENTION SECTION FUNDING SOURCES				26,583	50,000	290,298	870,894	435,447	1,673,222
41										
42	HIV HEALTH SERVICES (HHS) FUNDING SOURCES:									
49										
50	TOTAL HIV HEALTH SERVICES FUNDING SOURCES									
51										
52	CHPP FUNDING SOURCES:									
61	TOTAL CHPP FUNDING SOURCES									
62										
63	MCAH FUNDING SOURCES:									
80	TOTAL MCAH FUNDING SOURCES									
81										
82	TOTAL DPH REVENUES				26,583	50,000	290,298	870,894	435,447	1,673,222
89	TOTAL OTHER/ NON-DPH REVENUE									
90										
91	TOTAL REVENUES (DPH AND NON-DPH)				26,583	50,000	290,298	870,894	435,447	1,673,222
92	Prepared by/Phone # Larry Zpatka / 415-487-3055									

**Department of Public Health Contract Budget Summary by Program
(HUH, HPS, HHS, CHPP AND MCAH)**

	A	B	C	D	E	F	G	H	I	J	K	
1	Check one:							Appendix B Page 4				
2	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification							Appendix Term: 9/1/11 - 6/30/14				
3	If modification, Effective Date of Mod. No. of Mod. 2											
4	FISCAL YEAR: 2012-13							DPH1				
5	LEGAL ENTITY/ ORGANIZATION NAME: San Francisco AIDS Foundation							VENDOR ID (DPH USE ONLY)				
6	LEGAL ENTITY CODE: (CBHS Only)											
7	CONTRACTOR/ PROVIDER NAME: San Francisco AIDS Foundation											
8	PROGRAM/ PROVIDER NAME: San Francisco AIDS Foundation											
9												
10	APPENDIX NUMBER (Narrative/ Budget)		A-3/B-3	A-3/B-3a	A-4/B-4	A-4/B-4a	A-4/B-4b					
11	APPENDIX TERM:		9/1/11-6/30/12	7/1/12-6/30/13	9/1/11-12/31/11	1/1/12-12/31/12	1/1/13-6/30/13	TOTALS				
12	EXPENSES:											
13	SALARIES & EMPLOYEE BENEFITS		207,512	249,014	72,707	218,123	164,319	1,904,858				
14	OPERATING EXPENSE		60,342	78,549	\$ 78,510	235,529	62,506	1,043,365				
15	CAPITAL OUTLAY (COST \$5,000 AND OVER)		0	0	0	0	0	0				
16	SUBTOTAL DIRECT COSTS		267,854	327,563	151,217	453,652	226,825	2,948,223				
17	INDIRECT COST AMOUNT:		26,785	32,757	15,123	45,365	22,683	294,823				
18	INDIRECT RATE :		10.0%	10.0%	10.0%	10.0%	10.0%	10.0%				
19	TOTAL EXPENSES:		294,639	360,320	166,340	499,017	249,508	3,243,046				
20												
21	REVENUES:											
22												
23	HOUSING & URBAN HEALTH (HUH) FUNDING SOURCES:											
33	TOTAL HOUSING & URBAN HEALTH FUNDING SOURCES 0 0											
34												
35	HIV PREVENTION SECTION (HPS) FUNDING SOURCES:											
36	CDC Grant (HIV Prevention Project)				166,340	241,864	0	1,254,536				
37	General Fund		294,639	360,320		257,153	249,508	1,988,510				
38	Other Funding Source (Identify by name)							0				
39	Children General Fund							0				
40	TOTAL HIV PREVENTION SECTION FUNDING SOURCES		294,639	360,320	166,340	499,017	249,508	3,243,046				
41												
42	HIV HEALTH SERVICES (HHS) FUNDING SOURCES:											
49												
50	TOTAL HIV HEALTH SERVICES FUNDING SOURCES											
51												
52	CHPP FUNDING SOURCES:											
61	TOTAL CHPP FUNDING SOURCES											
62												
63	MCAH FUNDING SOURCES:											
80	TOTAL MCAH FUNDING SOURCES											
81												
82	TOTAL DPH REVENUES		294,639	360,320	166,340	499,017	249,508	3,243,046				
89	TOTAL OTHER/ NON-DPH REVENUE											
90												
91	TOTAL REVENUES (DPH AND NON-DPH)		294,639	360,320	166,340	499,017	249,508	3,243,046				
92	Prepared by/Phone # Larry Zapatka / 415-487-3055											

**Department of Public Health Contract Budget Summary by Program
(HUH, HPS, HHS, CHPP AND MCAH)**

	A	B	C	D	E	F	G	H	I	J	K	
1	Check one:							Appendix B Page 5 Appendix Term: 9/1/11 - 6/30/14				
2	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification											
3	If modification, Effective Date of Mod. _____ No. of Mod. 2 _____											
4	FISCAL YEAR: 2012-13 DPH1											
5	LEGAL ENTITY/ ORGANIZATION NAME: San Francisco AIDS Foundation							VENDOR ID (DPH USE ONLY)				
6	LEGAL ENTITY CODE: (CBHS Only)											
7	CONTRACTOR/ PROVIDER NAME: San Francisco AIDS Foundation											
8	PROGRAM/ PROVIDER NAME: San Francisco AIDS Foundation											
9												
10	APPENDIX NUMBER (Narrative/ Budget)			A-5/B-5	A-5/B-5a	A-6/B-6	A-6/B-6a	A-6/B-6b				
11	APPENDIX TERM:			9/1/21-6/30/12	7/1/12-6/30/13	9/1/11-6/30/12	9/1/11-6/30/12	9/1/11-6/30/12	TOTALS			
12	EXPENSES:											
13	SALARIES & EMPLOYEE BENEFITS			120,563	144,675	208,074	0	0	2,378,170			
14	OPERATING EXPENSE			338,335	378,769	\$ 622,182	68,665	60,407	2,511,723			
15	CAPITAL OUTLAY (COST \$5,000 AND OVER)			0	0	0	0	0	0			
16	SUBTOTAL DIRECT COSTS			458,898	523,444	830,256	68,665	60,407	4,889,893			
17	INDIRECT COST AMOUNT:			61,487	69,532	83,026	6,866	6,041	521,775			
18	INDIRECT RATE :			13.4%	13.3%	10.0%	10.0%	10.0%				
19	TOTAL EXPENSES:			520,385	592,976	913,282	75,531	66,448	5,411,668			
20												
21	REVENUES:											
22												
23	HOUSING & URBAN HEALTH (HUH) FUNDING SOURCES:											
33	TOTAL HOUSING & URBAN TOTAL HOUSING & URBAN HEALTH FUNDING SOURCES											
34												
35	HIV PREVENTION SECTION (HPS) FUNDING SOURCES:											
36	CDC Grant (HIV Prevention Project)								1,254,536			
37	General Fund			520,385	592,976	913,282			4,015,153			
38	Other Funding Source (identify by name)								0			
39	Children General Fund						75,531	66,448	141,979			
40	TOTAL HIV PREVENTION SECTION FUNDING SOURCES			520,385	592,976	913,282	75,531	66,448	5,411,668			
41												
42	HIV HEALTH SERVICES (HHS) FUNDING SOURCES:											
49												
50	TOTAL HIV HEALTH SERVICES FUNDING SOURCES											
51												
52	CHPP FUNDING SOURCES:											
61	TOTAL CHPP FUNDING SOURCES											
62												
63	MCAH FUNDING SOURCES:											
80	TOTAL MCAH FUNDING SOURCES											
81												
82	TOTAL DPH REVENUES			520,385	592,976	913,282	75,531	66,448	5,411,668			
89	TOTAL OTHER/ NON-DPH REVENUE											
90												
91	TOTAL REVENUES (DPH AND NON-DPH)			520,385	592,976	913,282	75,531	66,448	5,411,668			
92	Prepared by/Phone # Larry Zapatka / 415-487-3055											

**Department of Public Health Contract Budget Summary by Program
(HUH, HPS, HHS, CHPP AND MCAH)**

	A	B	C	D	E	F	G	H	I	J	K	
1	Check one:						Appendix B Page 6					
2	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification						Appendix Term: 9/1/11 - 6/30/14					
3	If modification, Effective Date of Mod. No. of Mod.											
4	FISCAL YEAR: 2011-12						DPH1					
5	LEGAL ENTITY/ ORGANIZATION NAME: San Francisco AIDS Foundation						VENDOR ID (DPH USE ONLY)					
6	LEGAL ENTITY CODE: (CBHS Only)											
7	CONTRACTOR/ PROVIDER NAME: San Francisco AIDS Foundation											
8	PROGRAM/ PROVIDER NAME: San Francisco AIDS Foundation											
9												
10	APPENDIX NUMBER (Narrative/ Budget)						A-6/B-6c	A-6/B-6d	A-6/B-6e	A-6/B-6f	A-6/B-6g	
11	APPENDIX TERM:						9/1/11-6/30/12	7/1/22-6/30/13	7/1/12-6/30/13	7/1/12-6/30/13	7/1/12-6/30/13	TOTALS
12	EXPENSES:											
13	SALARIES & EMPLOYEE BENEFITS						0	249,690	0	0	0	2,627,860
14	OPERATING EXPENSE						5,912	695,024	83,972	73,874	7,230	3,377,735
15	CAPITAL OUTLAY (COST \$5,000 AND OVER)						0	0	0	0	0	0
16	SUBTOTAL DIRECT COSTS						5,912	944,714	83,972	73,874	7,230	6,005,595
17	INDIRECT COST AMOUNT:						591	94,471	8,396	7,386	722	633,341
18	INDIRECT RATE :						10.0%	10.0%	10.0%	10.0%	10.0%	10.0%
19	TOTAL EXPENSES:						6,503	1,039,185	92,368	81,260	7,952	6,638,936
20												
21	REVENUES:											
22												
23	HOUSING & URBAN HEALTH (HUH) FUNDING SOURCES:											
33	TOTAL HOUSING & URBAN HEALTH FUNDING SOURCES						0					0
34												
35	HIV PREVENTION SECTION (HPS) FUNDING SOURCES:											
36	CDC Grant (HIV Prevention Project)											1,254,536
37	General Fund							1,039,185				5,054,338
38	Other Funding Source (Identify by name)											0
39	Children General Fund						6,503		92,368	81,260	7,952	330,062
40	TOTAL HIV PREVENTION SECTION FUNDING SOURCES						6,503	1,039,185	92,368	81,260	7,952	6,638,936
41												
42	HIV HEALTH SERVICES (HHS) FUNDING SOURCES:											
49												
50	TOTAL HIV HEALTH SERVICES FUNDING SOURCES											
51												
52	CHPP FUNDING SOURCES:											
61	TOTAL CHPP FUNDING SOURCES											
62												
63	MCAH FUNDING SOURCES:											
80	TOTAL MCAH FUNDING SOURCES											
81												
82	TOTAL DPH REVENUES						6,503	1,039,185	92,368	81,260	7,952	6,638,936
89	TOTAL OTHER/ NON-DPH REVENUE											
90												
91	TOTAL REVENUES (DPH AND NON-DPH)						6,503	1,039,185	92,368	81,260	7,952	6,638,936
92	Prepared by/Phone # Larry Zapatka / 415-487-3055											

Department of Public Health Contract Budget Summary by Program
(HUH, HPS, HHS, CHPP and MCAH)

A	B	C	D	E	F	G	H	I	J	K	
1	Check one:					Appendix B Page 7					
2	[] New [] Renewal [X] Modification					Appendix Term: 9/1/11-6/30/14					
3	If modification, Effective Date of Mod. No. of Mod.										
4	FISCAL YEAR: 2011-12					DPH1					
5	LEGAL ENTITY/ ORGANIZATION NAME: San Francisco AIDS Foundation					VENDOR ID (DPH USE ONLY)					
6	LEGAL ENTITY CODE: (CBHS Only)										
7	CONTRACTOR/ PROVIDER NAME: San Francisco AIDS Foundation										
8	PROGRAM/ PROVIDER NAME: San Francisco AIDS Foundation										
9											
10	APPENDIX NUMBER (Narrative/ Budget)					A-1/B-1b	A-2/B-2c	A-3/B-3b	A-4/B-4c	A-5/B-5b	
11	APPENDIX TERM:					7/1/13- 6/30/14	7/1/13- 6/30/14	7/1/13- 6/30/14	7/1/13- 6/30/14	7/1/13- 6/30/14	TOTALS
12	EXPENSES:										
13	SALARIES & EMPLOYEE BENEFITS					13,205	556,285	277,534	381,887	178,889	4,035,660
14	OPERATING EXPENSE					1,795	290,494	55,237	107,380	386,024	4,218,665
15	CAPITAL OUTLAY (COST \$5,000 AND OVER)					0	0	0	0	0	0
16	SUBTOTAL DIRECT COSTS					15,000	846,779	332,771	489,267	564,913	8,254,325
17	INDIRECT COST AMOUNT:					1,500	84,678	33,277	48,925	73,936	875,657
18	INDIRECT RATE :					10.0%	10.0%	10.0%	10.0%	13.1%	10.0%
19	TOTAL EXPENSES:					16,500	931,457	366,048	538,192	638,849	9,129,982
20											
21	REVENUES:										
22											
23	HOUSING & URBAN HEALTH (HUH) FUNDING SOURCES:										
33	TOTAL HOUSING & URBAN TOTAL HOUSING & URBAN HEALTH FUNDING SOURCES										
34											
35	HIV PREVENTION SECTION (HPS) FUNDING SOURCES:										
36	CDC Grant (HIV Prevention Project)					16,500					1,271,036
37	General Fund						931,457	366,048	538,192	638,849	7,528,884
38	Other Funding Source (Identify by name)										0
39	Children General Fund										330,062
40	TOTAL HIV PREVENTION SECTION FUNDING SOURCES					16,500	931,457	366,048	538,192	638,849	9,129,982
41											
42	HIV HEALTH SERVICES (HHS) FUNDING SOURCES:										
49											
50	TOTAL HIV HEALTH SERVICES FUNDING SOURCES										
51											
52	CHPP FUNDING SOURCES:										
61	TOTAL CHPP FUNDING SOURCES										
62											
63	MCAH FUNDING SOURCES:										
80	TOTAL MCAH FUNDING SOURCES										
81											
82	TOTAL DPH REVENUES					16,500	931,457	366,048	538,192	638,849	9,129,982
89	TOTAL OTHER/ NON-DPH REVENUE										
90											
91	TOTAL REVENUES (DPH AND NON-DPH)					16,500	931,457	366,048	538,192	638,849	9,129,982
92	Prepared by/Phone # Larry Zapatka / 415-487-3055										

	A	B	C	D	E	F	G	H	I
1	Contractor Name: San Francisco AIDS Foundation		Appendix B-1b Page 1						
2	Contract Term: 9/1/11-6/30/14		Appendix Term: 6/15/13-06/14/14						
3	Funding Source: CDC								
4									
5	SFDPH AIDS OFFICE CONTRACT								
6	UOS COST ALLOCATION BY SERVICE MODE								
7									
8									
9	Personnel Expenses		SERVICE MODES						
10	Position Titles	FTE	Testing						Contract Totals
11	Magnet Director	0.10	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	3,043
12	HIV CTL Services Manager	0.40	3,043	100%	7,693	100%			7,693
13									
14									
15									
16									
17									
18									
19									
20									
21	Total FTE & Total Salaries	0.50	10,736	100%					10,736
22	Fringe Benefits	23%	2,469	100%					2,469
23	Total Personnel Expenses		13,205	100%					13,205
24									
25	Operating Expenses		Expenditure	%	Expenditure	%			Contract Total
26	Total Occupancy		1,605	100%					1,605
27	Total Materials and Supplies		70	100%					70
28	Total General Operating		120	100%					120
29	Total Staff Travel								
30	Consultants/Subcontractor:								
31									
32	Other:								
33									
34									
35									
36									
37									
38									
39									
40	Total Operating Expenses		\$ 1,795	100%					\$ 1,795
41									
42	Total Direct Expenses		15,000	100%					15,000
43	Indirect Expenses	10%	1,500	100%					1,500
44	TOTAL EXPENSES		\$ 16,500	100%					\$16,500
45									
46	Number of Units of Service (UOS) per Service Mode		4						4
47	Cost Per Unit of Service by Service Mode		\$4,125.00						
48	Number of Unduplicated Clients (UDC) per Service Mode								
49									
50	DPH #1A(1)								

Rev. 05/2010

BUDGET JUSTIFICATION

Community-Based HIV Testing

Salaries and Benefits

Magnet Director

Responsible for staff recruitment and supervision. Oversees day-to-day management of facility. Coordinates training and insures contract compliance. Serves as spokesperson as well as primary liaison to SFDPH.

Minimum Qualifications: Bachelor's degree with five years HIV and STD experience.

.10 FTE x \$91,300 = \$9,130 per year/ 12 months = \$760.84/mo. x 4.0 months = \$ 3,043

HIV CTL Services Manager

Manages clinic staff and oversees phlebotomy services for confirmatory HIV antibody testing and RNA testing at multiple sites. Supervises specimen collection for transport to SFDPH laboratory. Oversees quality assurance efforts.

Minimum Qualifications: Bachelor's Degree, certified HIV test counselor and State certified phlebotomist. At least two years demonstrated experience managing clinic operations and working with populations at risk for HIV/STD infection.

.40 FTE x \$ 57,700 = \$23,080 per year/ 12 mo. = \$1,923.34/mo x 4.0 months = \$ 7,693

Total Salaries	\$	10,736
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Total Benefits	23% of \$ 10,736 total salaries =	\$	2,469
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Social Security, Worker's Compensation, Health Benefits, Unemployment, State and Federal Taxes, Retirement Plan.

TOTAL SALARIES & BENEFITS	\$	13,205
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Operating Expenses

Occupancy:

Rent:

SFAF is requesting reimbursement for rent expense at various locations throughout San Francisco, including the Magnet program location in the Castro district and SFAF's main offices at 1035 Market St. Other locations to be determined. Monthly estimate is based on SFAF's current rate of \$700 per FTE per month x 10.55 FTEs.

\$710 per month x .50 FTE x 4.0 months = \$ 1,420

Utilities:

Telephone expense based on SFAF's experience rate of \$73.57 per FTE per

\$73.57 per month x .50 FTE x 4.0 months = \$ 147

Maintenance

Building maintenance & repair

\$18.95 per month x .50 FTE x 4.0 months = \$ 38

Total Occupancy:	\$	1,605
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Materials and Supplies:

Office Supplies/Postage:

Office supplies/postage expense based on SFAF's experience rate of \$35.00 per FTE per month.

\$35 per month x .50 FTE x 4.0 months = \$ 70

Total Materials and Supplies:

\$ 70

General Operating:

Insurance:

Occupancy insurance expense based on SFAF's experience rate of \$60.00 per

\$60.00 per month x .50 FTE x 4.0 months = \$ 120

Total General Operating:

\$ 120

Staff Travel (Local & Out of Town):

Total Staff Travel:

\$ -

Consultants/Subcontractors:

Total Consultants/Subcontractors:

\$ -

Other:

Total Other:

\$ -

TOTAL OPERATING EXPENSES

\$ 1,795

CAPITAL EXPENDITURES (Equipment/Construction)

Total Capital Expenditures:

\$ -

TOTAL DIRECT COSTS

\$ 15,000

INDIRECT COSTS

Indirect expenses for the San Francisco AIDS Foundation are approximately 17%

10% of Total Expense \$15,000 = \$ 1,500

TOTAL INDIRECT COSTS

\$ 1,500

APPENDIX TOTAL

\$ 16,500

BUDGET JUSTIFICATION

Community-Based HIV Testing

Salaries and Benefits

Magnet Director

Responsible for staff recruitment and supervision. Oversees day-to-day management of facility. Coordinates training and insures contract compliance. Serves as spokesperson as well as primary liaison to SFDPH.

Minimum Qualifications: Bachelor's degree with five years HIV and STD experience.

Annual Salary \$ 91,300 x 0.10 FTE = \$ 9,130

Director of Government Contracts

Responsible for all data management and contract related activities. Maintains operational and statistical reporting mechanisms in accordance with contract and departmental requirements, produces routine and ad hoc reporting as needed, and ensures the integrity of the service database by overseeing database quality assurance activities.

Minimum Qualifications: Bachelor's degree and at least two years demonstrated experience in health services program planning, design, and evaluation; grant development and writing; government contracts management and negotiations.

Annual Salary \$ 90,000 x 0.05 FTE = \$ 4,500

Evaluation Associate

Responsible for data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic requirements

Minimum Qualifications: Bachelor's degree and 2 years experience managing and ensuring quality for large client data sets or 5 years equivalent experience.

Annual Salary \$ 58,000 x 0.10 FTE = \$ 5,800

HIV CTL Services Manager

Manages clinic staff and oversees phlebotomy services for confirmatory HIV antibody testing and RNA testing at multiple sites. Supervises specimen collection for transport to SFDPH laboratory. Oversees quality assurance efforts.

Minimum Qualifications: Bachelor's Degree, certified HIV test counselor and State certified phlebotomist. At least two years demonstrated experience managing clinic operations and working with populations at risk for HIV/STD infection.

Annual Salary \$ 57,700 x 0.60 FTE = \$ 34,620

HIV Coordinator

Coordinates and provides phlebotomy services for confirmatory HIV antibody testing and RNA testing at multiple sites. Prepares specimen collection for transport to SFDPH laboratory. Assists with quality assurance activities.

Minimum Qualifications: Bachelor's Degree, certified HIV test counselor and State certified phlebotomist. At least one year demonstrated experience in a multi-site clinic environment and working with populations at risk for HIV/STD infection.

Annual Salary \$ 54,000 x 0.80 FTE = \$ 43,200

Receptionist

Greets clients and provides an overview of services. Conducts data entry.

Minimum Qualifications: High school diploma or equivalency and one year of customer

Annual Salary \$ 40,674 x 1.80 FTE = \$ 73,213

Phlebotomist

Performs phlebotomy services for confirmatory HIV antibody testing and RNA testing. Prepares specimen collection for transport to SFDPH laboratory.

Minimum Qualifications: State certified phlebotomist.

Annual Salary \$ 43,180 x 3.75 FTE = \$ 161,925

Data Manager

Manages data collection activities at all sites. Ensures the completeness, accuracy and timely entry of data into database systems. Assists with database quality assurance activities.

Minimum Qualifications: Bachelor's degree and at least two years demonstrated experience in database management.

Annual Salary \$ 50,000 x 0.80 FTE = \$ 40,000

HIV Counselor

Provides individual and/or group counseling to clients on issues related to HIV/STD testing, prevention and treatment.

Minimum Qualifications: Bachelor's Degree and certified HIV test counselor with at least two years of experience counseling populations at risk for HIV/STD infection.

Annual Salary \$ 47,424 x 0.40 FTE = \$ 18,970

Volunteer Coordinator

Responsible for recruiting, training, and supervising volunteers.

Minimum Qualifications: High school diploma or equivalency and one year of experience working with volunteers.

Annual Salary \$ 47,400 x 0.80 FTE = \$ 37,920

Network Coordinator

Network Coordinator: Supports all components of RV and venue-based HIV testing. Provides administrative and logistical support for testing including driving and parking RV, working with SFDPT to secure parking permits are in place and enforced, and insures the RV is properly stocked with clinic supplies, fuel, etc. Recruits clients to test during mobile shifts. Conducts data entry

Minimum qualifications: Bachelor's degree and 2 years experience in a public health organization or equivalent years

Annual Salary \$ 45,000/12 mo= \$3,750.00/mo x 0.30 FTE x 6 mo = \$ 6,750

Testing Counselor:

Provides informed consent, HIV/RNA counseling and test disclosure information to clients being tested. Performs specimen collection (finger sticks) for HIV antibody rapid test. Processes, develops, and interprets HIV antibody testing kits (OraQuick and StatPak) and document results. Assists in data entry. State of California HIV Test Counselor Certification is required.

Minimum qualifications: State of California Test counselor certification is required.

Annual Salary \$ 45,000/12 mo= \$3,750.00/mo x 0.40 FTE x 6 mo = \$ 9,000

Total Salaries **\$ 445,028**

Total Benefits 25% of \$445,028 total salaries = **\$ 111,257**

Federal Taxes, Retirement Plan.

TOTAL SALARIES & BENEFITS **\$ 556,285**

Operating Expenses

Occupancy:

Rent:

SFAF is requesting reimbursement for rent expense at various locations

\$710 per month x 9.90 FTE x 12 mo = \$ 84,348

Utilities:

Telephone expense based on SFAF's experience rate of \$73.57 per FTE per

\$73.56 per month x 9.90 FTE x 12 months = \$ 8,739

Total Occupancy: **\$ 93,087**

Materials and Supplies:

Office Supplies/Postage:

Office supplies/postage expense based on SFAF's experience rate of \$35.00 per

\$35 per month x 9.90 FTE x 12 months = \$ 4,158

Program/Medical Supplies:

Program materials needed to carry out day to day operations. Materials include but not limited to condoms & lube \$16,212; medical supplies such as syringes, needles, gloves \$15,000, etc; medical record charts and labels \$3,000; biowaste disposal \$8,000

\$ 42,212

Total Materials and Supplies: **\$ 46,370**

General Operating:

Insurance:

Occupancy insurance expense based on SFAF's experience rate of \$60.00 per FTE per month.

$$\$60 \text{ per month} \times 9.90 \text{ FTE} \times 12 \text{ months} = \$ 7,128$$

Outside Storage:

Storage expense based on SFAF's experience rate of \$4.25 per FTE per month.

$$\$4.25 \text{ per month} \times 9.90 \text{ FTE} \times 12 \text{ months} = \$ 505$$

Rental/Maintenance of Equipment:

Equipment rental expense based on SFAF's experience rate of \$59.00 per FTE per month. Equipment maintenance expense based on SFAF's experience rate of \$42.00 per FTE per month.

$$\begin{aligned} \text{Rental} - \$59 \text{ per month} \times 9.90 \text{ FTE} \times 12 \text{ months} &= \$ 7,009 \\ \text{Maintenance} - \$42 \text{ per month} \times 9.90 \text{ FTE} \times 12 \text{ months} &= \$ 4,990 \end{aligned}$$

Total General Operating: **\$ 19,632**

Staff Travel (Local & Out of Town):

7 monthly Clipper Cards for staff to travel to multiple testing locations.

$$7 \text{ monthly passes} \times \$60 \text{ per pass} \times 12 \text{ months} = \$ 5,040$$

R.V Expense to include fuel 7 maintenance

$$\$333.34/\text{mo} \times 6 \text{ mo} = \$ 2,000$$

Total Staff Travel: **\$ 7,040**

Consultants/Subcontractors:

St. James Infirmary

Provide venue-based testing and counseling services for marginalized MSM, IDUs

Harm Reduction Counseling Coordinator: Coordinates all Harm Reduction & Peer Counseling/HIV Counseling and Testing activities; coordinates quality assurance activities. *Minimum Qualifications:* Experience coordinating Harm Reduction services and supervising staff.

$$0.5 \text{ FTE} \times \$31,400 \text{ per year} = \$ 15,700$$

Phlebotomist: Certified for specimen collection

$$.25 \text{ FTE} \times \$47,840 \text{ per year} = \$ 11,960$$

Total Salaries \$ 27,660

Benefits: Social Security, Worker's Compensation, Health Benefits, Unemployment, State and Federal Taxes, Retirement Plan.

$$20\% \text{ of } \$27,660 \text{ total salaries} = \$ 5,532$$

Total Salaries & Benefits \$ 33,192

Payroll & Accounting Services: Agency expense budgeted at \$30,000 per year. Requesting 8% of annual cost.

$$\text{approx. } 7.78\% \text{ of annual } \$30,000 \text{ cost} = \$ 2,333$$

Program/Medical Supplies:

Condoms, lubricant, T-shirts, hats and other like items to be distributed to clients to promote awareness.

$$\$ 4,545$$

St. James Infirmary Total \$ 40,070

Glide

HIV Services Program Manager: Oversees all HIV Prevention Programs and activities under the direct supervision of the Glide Health Services Medical Director. Coordinates quality assurance activities, oversees all evaluation activities, prepares monthly invoices, annual agency reports, and maintains communications with all collaborative partners. *Minimum Qualifications:* Master's degree in Social Work, Public Health, or other related fields, or equivalent work experience.

0.37FTE x \$60,989 per year = \$ 22,566

Administrative Assistant: Responsible for assisting with all administrative tasks, including: answering phones during business hours, checking phone messages and calling back individuals who request general information (Glide hours, services, location). Works with the Program Manager and Coordinators/ counselor/outreach workers to create monthly schedules for all HIV Prevention activities and assists with ordering and maintaining all program supplies. *Minimum Qualifications:* Experience in or knowledge of HIV Prevention. Experience working with people of different ethnic backgrounds, sexual identity and orientations, and people living with HIV/AIDS; Good written, verbal and organizational skills and data entry experience.

0.037 FTE x \$31,973 per year = \$ 1,183

Outreach Counselors: Coordinates monthly outreach schedules, provides on-call/back-up coverage for outreach workers during weekly shifts, organizes and maintains information and data related to target population venues, outreach contacts, and community resource listings and materials. Provide assistance with evaluation activities and provides programmatic support during monitoring periods. *Minimum Qualifications:* Experience coordinating outreach services and supervising staff; Experience with HIV/STI prevention education including safer sex education; Experience working with people of different ethnic backgrounds, sexual identity and orientations, and people

n/c \$ -

Total Salaries \$ 23,749

Benefits: Social Security, Worker's Compensation, Health Benefits, Unemployment, State and Federal Taxes, Retirement Plan.

approx 27.16% of \$ 23,749 total salaries = \$ 6,450

Total Salaries & Benefits \$ 30,199

Supplies: Programmatic and administrative supplies. \$ 2,012

Staff Training/Travel: Trainings for staff to keep current on related issues \$ 1,592

Rent: Prorated rent for program staff \$ 1,722

Program Materials: Condoms for outreeach \$ 4,545.00

Glide Total \$ 40,070

YTH (formally ISIS)

YTHS will develop and maintain an electronic system that will remind Magnet

Deputy Director: Provides overall leadership and direction and is responsible for project deliverables. *Minimum Qualifications:* Masters in health services.

0.06 FTE x \$104,500 per year = \$ 6,270

Program Manager: Responsible for day to day activities including reporting, managing consultants and text message development. *Minimum Qualifications:* Masters in health services.

0.10 FTE x \$95,000 per year = \$ 9,500

Program Assistant: Responsible for all administrative activities, loading text messages and tech problem solving. *Minimum Qualifications:* High school diploma or equivalency.

0.22 FTE x \$50,000 per year = \$ 11,000

Total Salaries \$ 26,770

Benefits: Social Security, Worker's Compensation, Health Benefits, Unemployment, State and Federal Taxes, Retirement Plan.

approx 28.525% of \$ 26,770 total salaries = \$ 7,636

Total Salaries & Benefits \$ 34,406

Professional Services: For developing text message platform and maintenance.

40 hrs/yr @ 95.475 = \$ 3,819

Short code networking, for shared shortcode, keyword and campaign pushes

\$500/mo x 12 mo. \$ 6,000

YTH (formally ISIS) Total \$ 44,225

Total Consultants/Subcontractors: \$ 124,365

Other:

Total Other: \$ -

TOTAL OPERATING EXPENSES \$ 290,494

CAPITAL EXPENDITURES: (If needed - A unit valued at \$5,000 or more)

Total Capital Expenditures: \$ -

TOTAL DIRECT COSTS \$ 846,779

INDIRECT COSTS

Indirect expenses for the San Francisco AIDS Foundation are approximately 17% of operating costs. SFAF requests reimbursement at 10% of the total direct costs in this proposal to cover operating expenses incurred by the Foundation, including finance and administrative staff, building maintenance, equipment rental & maintenance and information technology services.

\$846,779 x 10% =

TOTAL INDIRECT COSTS \$ 84,678

APPENDIX TOTAL \$ 931,457

	A	B	C	D	E	F	G	H	I
1	Contractor Name: San Francisco AIDS Foundation					Appendix B-3b Page 1			
2	Contract Term: 9/1/11-6/30/14					Appendix Term: 7/1/13-6/30/14			
3	Funding Source: General Fund								
4									
5	SFDPH AIDS OFFICE CONTRACT								
6	UOS COST ALLOCATION BY SERVICE MODE								
7									
8									
9	Personnel Expenses		SERVICE MODES						
10	Position Titles	FTE	Recruitment & Linkages		Events		Groups		Page Total
11	Vice-President of Program & Services	0.05	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	4,400
12	Director of Government Contracts	0.05	1,600	20%	1,680	21%	1,120	14%	2,835
13	Evaluation Associate	0.10	990	25%	810	20%	1,035	26%	2,958
14	Stonewall Director	0.20	928	12%	696	9%	1,334	17%	7,176
15	Director of Clinical Operations	0.15	2,024	12%	2,024	12%	3,128	18%	5,160
16	Health Educator	0.80	1,080	10%	1,080	10%	3,000	29%	28,570
17	Project Assistant	0.70	11,981	31%	11,981	31%	4,608	12%	16,694
18	Speed Project Coordinator	0.90	5,342	20%	5,342	20%	6,010	23%	30,528
19	Counselor I/II	0.80	12,879	30%	12,879	30%	4,770	11%	31,851
20			10,617	26%	6,001	14%	15,233	37%	
21									
22	Total FTE & Total Salaries	3.75	47,441	21%	42,493	19%	40,238	18%	130,172
23	Fringe Benefits	25%	11,860	21%	10,623	19%	10,060	18%	32,543
24	Total Personnel Expenses		59,301	21%	53,116	19%	50,298	18%	162,715
25									
26	Operating Expenses		Expenditure	%	Expenditure	%			Page Total
27	Total Occupancy		8,570	22%	7,401	19%	7,012	18%	22,983
28	Total Materials and Supplies		1,294	22%	1,117	19%	1,058	18%	3,469
29	Total General Operating		1,430	22%	1,235	19%	1,170	18%	3,835
30	Total Staff Travel								
31	Consultants/Subcontractor:		550	22%	475	19%	450	18%	1,475
32									
33	Other:		308	22%	266	19%	252	18%	826
34									
35									
36									
37									
38									
39									
40									
41	Total Operating Expenses		\$ 12,152	15%	\$ 10,494	13%	9,942	13%	\$ 32,588
42									
43	Total Direct Expenses		71,453	22%	63,610	19%	60,240	18%	195,303
44	Indirect Expenses	10%	7,145	22%	6,361	19%	6,024	18%	19,530
45	TOTAL EXPENSES		\$ 78,598	22%	\$ 69,971	19%	66,264	18%	\$214,833
46									
47	Number of Units of Service (UOS) per Service Mode		720		34		414		1,168
48	Cost Per Unit of Service by Service Mode		\$109.16		2057.97		160.06		
49	Number of Contacts (NOC) per Service Mode		2,880		1,496		1380		
50									
51	DPH #1A(1)								

	A	B	C	D	E	F	G	H	I
1	Contractor Name: San Francisco AIDS Foundation					Appendix B-3b Page 2			
2	Contract Term: 9/1/11-6/30/14					Appendix Term: 7/1/13-6/30/14			
3	Funding Source: General Fund								
4									
5	SFDPH AIDS OFFICE CONTRACT								
6	UOS COST ALLOCATION BY SERVICE MODE								
7									
8									
9	Personnel Expenses		SERVICE MODES						
10	Position Titles	FTE	IRRC		PCM		Social Marketing		Page Total
11	Vice-President of Program & Services	0.05	Salaries 720	% FTE 9%	Salaries 960	% FTE 12%	Salaries 1,520	% FTE 19%	7,600
12	Director of Government Contracts	0.05	405	10%	540	14%	495	12%	4,275
13	Evaluation Associate	0.10	522	7%	696	9%	1,334	17%	5,510
14	Stonewall Director	0.20	2,944	17%	3,680	21%	2,576	15%	16,376
15	Director of Clinical Operations	0.15	2,160	21%	2,400	23%	1,680	16%	11,400
16	Health Educator	0.80	2,765	7%	0	0%	11,520	30%	42,855
17	Project Assistant	0.70	3,005	11%	4,006	15%	8,013	30%	31,718
18	Speed Project Coordinator	0.90	2,862	7%	0	0%	11,448	27%	44,838
19	Counselor I/II	0.80	2,770	7%	8,770	21%	923	2%	44,314
20									0
21									0
22	Total FTE & Total Salaries	3.75	18,153	8%	21,052	9%	39,509	18%	208,886
23	Fringe Benefits	25%	4,538	8%	5,263	9%	9,877	18%	52,221
24	Total Personnel Expenses		22,691	8%	26,315	9%	49,386	18%	261,107
25									
26	Operating Expenses		Expenditure	%	Expenditure	%			Page Total
27	Total Occupancy		3,117	8%	3,507	9%	7,012	18%	36,619
28	Total Materials and Supplies		470	8%	529	9%	1,059	18%	5,527
29	Total General Operating		520	8%	585	9%	1,170	18%	6,110
30	Total Staff Travel								
31	Consultants/Subcontractor:		200	8%	225	9%	450	18%	2,350
32									0
33	Other:		112	8%	126	9%	252	18%	1,316
34									
35									
36									
37									
38									
39									
40									
41	Total Operating Expenses		\$ 4,419	6%	\$ 4,972	6%	9,943	13%	\$ 51,922
42									
43	Total Direct Expenses		27,110	8%	31,287	10%	59,328	18%	313,029
44	Indirect Expenses	10%	2,711	8%	3,129	10%	5,933	18%	31,303
45	TOTAL EXPENSES		\$ 29,821	8%	\$ 34,416	10%	65,262	18%	\$344,332
46									
47	Number of Units of Service (UOS) per Service Mode		240		359		12		611
48	Cost Per Unit of Service by Service Mode		\$124.25		95.87		5438.50		
49	Number of Contacts (NOC) per Service Mode		255		374				
50									
51	DPH #1A(1)								

	A	B	C	D	E	F	G	H	I
1	Contractor Name: San Francisco AIDS Foundation						Appendix B-3b		Page 3
2	Contract Term: 9/1/11-6/30/14						Appendix Term: 7/1/13-6/30/14		
3	Funding Source: General Fund								
4									
5	SFDPH AIDS OFFICE CONTRACT								
6	UOS COST ALLOCATION BY SERVICE MODE								
7									
8									
9	Personnel Expenses		SERVICE MODES						
10	Position Titles	FTE	Condom distribution		Training				Contract Totals
11	Vice-President of Program & Services	0.05	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	
12	Director of Government Contracts	0.05	240	3%	180	2%			8,000
13	Evaluation Associate	0.10	135	3%	90	2%			4,500
14	Stonewall Director	0.20	174	3%	116	2%			5,800
15	Director of Clinical Operations	0.15	1,104	6%	920	5%			18,400
16	Health Educator	0.80	360	3%	240	2%			12,000
17	Project Assistant	0.70	2,304	5%	921	2%			46,080
18	Speed Project Coordinator	0.90	1,002	3%	667	2%			33,387
19	Counselor I/II	0.80	1,908	4%	954	2%			47,700
20			923	2%	923	2%			46,160
21									
22	Total FTE & Total Salaries	3.75	8,150	4%	4,991	2%			222,027
23	Fringe Benefits	25%	2,038	4%	1,248	2%			55,507
24	Total Personnel Expenses		10,188	4%	6,239	2%			277,534
25									
26	Operating Expenses		Expenditure	%	Expenditure	%			Contract Total
27	Total Occupancy		1,559	4%	779	2%			38,957
28	Total Materials and Supplies		236	4%	118	2%			5,881
29	Total General Operating		260	4%	129	2%			6,499
30	Total Staff Travel								
31	Consultants/Subcontractor:		100	4%	50	2%			2,500
32									
33	Other:		56	4%	28	2%			1,400
34									
35									
36									
37									
38									
39									
40									
41	Total Operating Expenses		\$ 2,211	4%	\$ 1,104	2%			\$ 55,237
42									
43	Total Direct Expenses		12,399	4%	7,343	2%			332,771
44	Indirect Expenses	10%	1,240	4%	734	2%			33,277
45	TOTAL EXPENSES		\$ 13,639	4%	\$ 8,077	2%			\$366,048
46									
47	Number of Units of Service (UOS) per Service Mode		12		24				1,815
48	Cost Per Unit of Service by Service Mode		\$1,136.58		336.54				
49	Number of Contacts (NOC) per Service Mode				120				
50									
51	DPH #1A(1)								

BUDGET JUSTIFICATION

Stonewall Project

Salaries and Benefits

Vice-President of Program & Services

Responsible for ensuring the implementation, management and evaluation of the program structure and provision of professional oversight to create a service delivery continuum that is responsive to the current health and well-being needs, including HIV needs of gay & bisexual men.

Minimum Qualifications: Master's degree in psychology, social services, business or related disciplines. Requirements also include three years' experience in supervisory capacity, especially in HIV prevention and demonstrated program management and program development experience.

Annual Salary \$ 160,000 x 0.05 FTE = \$ 8,000

Director of Government Contracts

Responsible for all data management and contract related activities. Maintains operational and statistical reporting mechanisms in accordance with contract and departmental requirements, produces routine and ad hoc reporting as needed, and ensures the integrity of the service database by overseeing database quality assurance activities.

Minimum Qualifications: Bachelor's degree and at least two years demonstrated experience in health services program planning, design, and evaluation; grant development and writing; government contracts management and negotiations.

Annual Salary \$ 90,000 x 0.05 FTE = \$ 4,500

Evaluation Associate

Responsible for coordinating data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic and contract requirements.

Minimum Qualifications: Bachelor's degree and 2 years experience managing and ensuring quality for large client data sets or 5 years equivalent experience required.

Annual Salary \$ 58,000 x 0.10 FTE = \$ 5,800

Stonewall Director

Responsible for oversight of all operations including documentation of all services, administrative supervision of staff, analyzing data and writing reports. Provides HIV prevention and care services to a caseload of Stonewall clients.

Minimum Qualifications: Master's degree and at least five years experience in managing at social services programs.

Annual Salary \$ 92,000 x 0.20 FTE = \$ 18,400

Director of Clinical Operations

Dir. Of Clinical Operations assists with daily operations, provides HIV prevention and care services to a caseload of Stonewall clients.

Minimum Qualifications: Masters Degree and three years experience in managing at social services programs.

Annual Salary \$ 80,000 x 0.15 FTE = \$ 12,000

Health Educator

Responsible for coordinating web site, MSW, IRRC, Health Ed, Referral & linkages, training, scheduling and management of the Peer Educators, overseeing and reviewing log sheets, field notes, and performs field observations.

Minimum Qualifications: High school diploma or equivalency and at least 5 years experience in HIV prevention and education.

Annual Salary \$ 57,600 x 0.80 FTE = \$ 46,080

Project Assistant

Provides administrative support to the program. And will assist in data collecting and data entry.

Minimum Qualifications: High school diploma or equivalency and two years experience in office clerical work and computer skills.

Annual Salary \$ 47,695 x 0.70 FTE = \$ 33,387

Speed Project Coordinator

Responsible for the Speed Project field implementation. Will recruit peer advocates from the speed using community and those in recovery from speed use. Responsible for supervision and performance of Peer Advocates, ensuring that they are receiving all necessary logistical support. The Speed Project Outreach Coordinator will help develop and implement the initial training for the peer advocates as well as ongoing training activities.

Minimum Qualifications: Experience in health/human services and or related disciplines. Also requires experience coordinating outreach activities among communities of color and MSM populations, experience providing HIV/AIDS services and knowledge of substance use and harm reduction services.

Annual Salary \$ 53,000 x 0.90 FTE = \$ 47,700

Counselor I/II

Responsible for intake assessments, individual and group counseling, referrals to psychiatrist, documentation of all counseling.

Minimum Qualifications: Master's degree or at least five years experience in substance use, mental health, or HIV counseling.

Annual Salary \$ 57,700 x 0.80 FTE = \$ 46,160

Total Salaries

\$ 222,027

Total Benefits

25% of \$ 222,027 total salaries = **\$ 55,507**

Social Security, Worker's Compensation, Health Benefits, Unemployment, State and Federal Taxes, Retirement Plan.

BENEFITS

\$ 277,534

Operating Expenses

Occupancy:

Rent:

Rent expense based on SFAF's experience rate of \$792.13 per FTE per month.

\$792.13 per month x 3.75 FTE x 12 months = \$ 35,646

Utilities:

Telephone expense based on SFAF's experience rate of \$73.57 per FTE per month.
 $\$73.57 \text{ per month} \times 3.75 \text{ FTE} \times 12 \text{ months} = \$ 3,311$

Total Occupancy: **\$ 38,957**

Materials and Supplies:

Office Supplies/Postage:

Office supplies/postage expense based on SFAF's experience rate of \$75.41 per FTE per month.

$\$75.41 \text{ per month} \times 3.75 \text{ FTE} \times 12 \text{ months} = \$ 3,393$

Program/Medical Supplies:

Condoms, lubricant, T-shirts, hats and other like items to be distributed to clients to promote awareness. **\$ 1,000**

Printing & Reproduction

Printing flyers, stickers, palm cards and other reproduction costs.

$2,976 \text{ pieces} \times \$0.50 \text{ average estimated cost per piece} = \$ 1,488$

Total Materials and Supplies: **\$ 5,881**

General Operating:

Insurance:

Occupancy insurance expense based on SFAF's experience rate of \$45.14 per FTE per month.

$\$45.14 \text{ per month} \times 3.75 \text{ FTE} \times 12 \text{ months} = \$ 2,031$

Rental/Maintenance of

Equipment:

Equipment rental expense based on SFAF's experience rate of \$44.71 per FTE per month.

Equipment maintenance expense based on SFAF's experience rate of \$50.33 per FTE per month.

Rental - $\$44.71 \text{ per month} \times 3.75 \text{ FTE} \times 12 \text{ months} = \$ 2,012$

Maintenance - $\$50.33 \text{ per month} \times 3.75 \text{ FTE} \times 12 \text{ months} = \$ 2,265$

Outside Storage:

Storage expense based on SFAF's experience rate of \$4.25 per FTE per month.

$\$4.25 \text{ per month} \times 3.75 \text{ FTE} \times 12 \text{ months} = \$ 191$

Total General Operating: **\$ 6,499**

Consultants/Subcontractors:

Clinical Consultant - bi-weekly meetings with program staff

$\$100 \text{ per hours} \times 25 \text{ meetings} = \$ 2,500$

Total Consultants/Subcontractors: **\$ 2,500**

Other:

Staff Training

Registration and/or travel for trainings and conferences

\$350 per registration x 4 conference/seminars = \$ 1,400

Total Other:

\$ 1,400

TOTAL OPERATING EXPENSES

\$55,237

CAPITAL EXPENDITURES: (If needed - A unit valued at \$5,000 or more)

Total Capital Expenditures:

\$ -

TOTAL DIRECT COSTS

\$ 332,771

INDIRECT COSTS

Indirect expenses for the San Francisco AIDS Foundation are approximately 17% of operating costs. SFAF requests reimbursement at 12% of the total direct costs in this proposal to cover operating expenses incurred by the Foundation, including finance and administration.

$\$332,771 \times 10\% = \$ 33,277$

TOTAL INDIRECT COSTS

\$ 33,277

APPENDIX TOTAL

\$ 366,048

	A	B	C	D	E	F	G	H	I
1	Contractor Name: San Francisco AIDS Foundation						Appendix B-4c		Page 1
2	Contract Term: 9/1/11-6/30/14						Appendix Term: 7/1/13-6/30/14		
3	Funding Source: General Fund								
4									
5	SFDPH AIDS OFFICE CONTRACT								
6	UOS COST ALLOCATION BY SERVICE MODE								
7									
8									
9	Personnel Expenses		SERVICE MODES						
10	Position Titles	FTE	Events		Groups		Testing		Page Total
11	Vice-President of Program & Services	0.10	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	
12	Director of Government Contracts	0.05	2,880	18%	7,520	47%	3,360	21%	13,760
13	Evaluation Associate	0.05	225	5%	3,105	69%	1,035	23%	4,365
14	Contracts & Purchasing Manager	0.05	145	5%	2,001	69%	667	23%	2,813
15	BBE MGR	0.05	225	5%	3,105	69%	1,035	23%	4,365
16	Community Organizer/Mobilization Manager	0.80	16,600	32%	29,120	56%	0	0%	45,720
17	Health Educator	0.80	18,600	36%	27,040	52%	0	0%	45,640
18	Speed Project Coord	0.10	2,419	42%	0	0%	1,210	21%	3,629
19	Counselor I/II	0.10	1,113	21%	2,014	38%	0	0%	3,127
20	Administrative Assistant	0.20	0	0%	4,501	39%	4,385	38%	8,886
21	Dir., Prevention Services	0.10	315	6%	4,463	85%	315	6%	5,093
22	Dir., Program Development & Ops	0.15	15,345	62%	5,940	24%	3,218	13%	24,503
23	YBMSM Program Manager	0.10	4,650	62%	1,800	24%	975	13%	7,425
24	YBMSM Program Coordinator	0.90	32,643	62%	12,636	24%	6,845	13%	52,124
25	Outreach /Testing Counselor	0.50	13,237	62%	5,124	24%	2,775	13%	21,136
26	Testing Coordinator	0.40	0		0		14,959	100%	14,959
27	Media Designer	0.25	6,975	62%	2,700	24%	1,463	13%	11,138
28	Volunteer Manager	0.10	5,084	62%	1,968	24%	1,066	13%	8,118
29	Total FTE & Total Salaries	4.85	123,618	93%	114,261	86%	43,971	33%	281,850
30	Fringe Benefits	25%	30,905	101%	28,565	93%	10,993	36%	70,463
31	Total Personnel Expenses		154,523	94%	142,826	87%	54,964	33%	352,313
32									
33	Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
34	Total Occupancy		5,672	11%	17,016	33%	7,465	15%	30,153
35	Total Materials and Supplies		4,951	13%	23,700	62%	6,566	17%	35,217
36	Total General Operating		1,630	11%	9,782	69%	1,644	12%	13,056
37	Consultants/Subcontractor		385	11%	2,415	69%	385	11%	3,185
38									
39									
40	Other:								
41									
42									
43									
44									
45									
46									
47									
48	Total Operating Expenses		\$ 12,638	20%	\$ 52,913	85%	16,060	26%	\$ 81,611
49									
50	Total Direct Expenses		167,161	74%	195,739	86%	71,024	31%	433,924
51	Indirect Expenses 10%		16,716	74%	19,573	86%	7,102	31%	43,391
52	TOTAL EXPENSES		\$ 183,877	74%	\$ 215,312	86%	78,126	31%	\$477,315
53									
54	Number of Units of Service (UOS) per Service Mode		24		580		500		1,104
55	Cost Per Unit of Service by Service Mode		\$7,661.54		\$371.23		156.25		
56	Number of Contacts (NOC) per Service Mode		984		3,320		500		
57									
58	DPH #1A(1)								
	Rev. 05/2010								

	A	B	C	D	E	F	G	H	I	
1	Contractor Name: San Francisco AIDS Foundation					Appendix B-4c				Page 2
2	Contract Term: 9/1/11-6/30/14					Appendix Term: 7/1/13-6/30/14				
3	Funding Source: General Fund									
4										
5										
6	SFDPH AIDS OFFICE CONTRACT									
7	UOS COST ALLOCATION BY SERVICE MODE									
8										
9	Personnel Expenses		SERVICE MODES							
10	Position Titles	FTE	IRRC		PCM				Contract Totals	
11	Vice-President of Program & Services	0.10	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE		
12	Director of Government Contracts	0.05	1,240	8%	1,000	6%			16,000	
13	Evaluation Associate	0.05	135	3%	0	0%			4,500	
14	Contracts & Purchasing Manager	0.05	87	3%	0	0%			2,900	
15	BBE MGR	0.05	135	3%	0	0%			4,500	
16	BBE MGR	0.80	520	1%	5,760	11%			52,000	
17	Community Organizer/Mobilization Manager	0.80	1,040	2%	5,320	10%			52,000	
18	Health Educator	0.10	921	16%	1,210	21%			5,760	
19	Speed Project Coord	0.10	0	0%	2,173	41%			5,300	
20	Counselor I/II	0.20	2,192	19%	462	4%			11,540	
21	Administrative Assistant	0.10	0	0%	157	3%			5,250	
22	Dir., Prevention Services	0.15	247	1%	0	0%			24,750	
23	Dir., Program Development & Ops	0.10	75	1%	0	0%			7,500	
24	YBMSM Program Manager	0.90	526	1%	0	0%			52,650	
25	YBMSM Program Coordinator	0.50	214	1%	0	0%			21,350	
26	Outreach/Teasing Counselor	0.40	0	0%	0	0%			14,959	
27	Testing Coordinator	0.25	112	1%	0	0%			11,250	
28	Media Designer	0.10	82	1%	0	0%			8,200	
29	Volunteer Manager	0.10	51	1%	0	0%			5,100	
30	Total FTE & Total Salaries	4.85	7,577	2%	16,082	5%			305,509	
31	Fringe Benefits	23%	1,894	2%	4,021	5%			76,378	
32	Total Personnel Expenses		9,471	2%	20,103	5%			381,887	
33	Operating Expenses		Expenditure	%	Expenditure	%			Contract Total	
34	Total Occupancy		18,907	37%	2,363	5%			51,423	
35	Total Materials and Supplies		1,317	3%	1,645	4%			38,178	
36	Total General Operating		544	4%	679	5%			14,279	
37	Consultants/Subcontractor		0	0%	315	9%			3,500	
38										
39										
40	Other:									
41										
42										
43										
44										
45										
46										
47										
48	Total Operating Expenses		\$ 20,768	19%	\$ 5,002	5%			\$ 107,380	
49										
50	Total Direct Expenses		30,239	6%	25,105	5%			489,267	
51	Indirect Expenses	10%	3,024	6%	2,510	5%			48,925	
52	TOTAL EXPENSES		\$ 33,263	6%	\$ 27,615	5%			\$538,192	
53										
54	Number of Units of Service (UOS) per Service Mode		262		200				1,566	
55	Cost Per Unit of Service by Service Mode		\$126.96		\$138.08					
56	Number of Contacts (NOC) per Service Mode		792		200					
57										
58	DPH #1A(1)									
	Rev. 05/2010									

BUDGET JUSTIFICATION

African-American Prevention Initiative

Salaries and Benefits

Vice-President of Program & Services

Responsible for ensuring the implementation, management and evaluation of the program structure and provision of professional oversight to create a service delivery continuum that is responsive to the current health and well-being needs, including HIV needs of gay & bisexual men.

Minimum Qualifications: Master's degree in psychology, social services, business or related disciplines. Requirements also include three years' experience in supervisory capacity, especially in HIV prevention and demonstrated program management and program development experience.

Annual Salary \$ 160,000 x 0.10 FTE = \$ 16,000

Director of Government Contracts

Responsible for all data management and contract related activities. Maintains operational and statistical reporting mechanisms in accordance with contract and departmental requirements, produces routine and ad hoc reporting as needed, and ensures the integrity of the service database by overseeing database quality assurance activities.

Minimum Qualifications: Bachelor's degree and at least two years demonstrated experience in health services program planning, design, and evaluation; grant development and writing; government contracts management and negotiations.

Annual Salary \$ 90,000 x 0.05 FTE = \$ 4,500

Evaluation Associate

Responsible for coordinating data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic and contract requirements.

Minimum Qualifications: Bachelor's degree and 2 years experience managing and ensuring quality for large client data sets or 5 years equivalent experience required.

Annual Salary \$ 58,000 x 0.05 FTE = \$ 2,900

Contracts & Purchasing Manager

Prepares monthly contract invoices, records contract accruals into financial management system, prepares budgets for contract proposals, modifications, and revisions. Prepares reports for contract financial information and maintains databases related to contract allocations.

Minimum Qualifications: Bachelor's degree in Finance or related field or equivalent experience in accounting, budgeting and contract management. Two years demonstrated experience in a finance/contract management capacity.

Annual Salary \$ 90,000 x 0.05 FTE = \$ 4,500

BBE MGR

Manages and coordinates all day-to-day aspects of the program. Responsible for the development, administration and facilitation of all BBE group program activities. Duties include co-facilitation of the weekly drop-in support group (Phoenix Rising), coordination of all workshops (Afrochats, Many Men, Many Voices, Healthy relationships) curricula development and logistic support and facilitation of the BBE Steering Committee.

Minimum Qualifications: Experience in health/human services and or related disciplines. Also requires experience coordinating outreach activities among African American populations, experience providing HIV/AIDS services and knowledge of substance use and harm reduction services.

Annual Salary \$ 65,000 x 0.80 FTE = \$ 52,000

Community Organizer/Mobilization Manager

Responsible for the development and implementation of group and community level interventions that organizes and mobilizes communities in order to increase their level of social capital. This position provides a clinical/social services perspective on how to work with individuals in our target population and engage them in community building activities. Targets health promotion and wellness among African American gay and bisexual and same gender loving men.

Minimum Qualifications: Bachelor's degree in psychology, social services or related discipline. Also requires experience coordinating outreach activities among communities of color and MSM populations, experience providing HIV/AIDS services and knowledge of substance use and harm reductions services.

Annual Salary \$ 65,000 x 0.80 FTE = \$ 52,000

Health Educator

Performs phlebotomy services for confirmatory HIV antibody testing and RNA testing. Prepares specimen collection for transport to SFDPH laboratory.

Minimum Qualifications: State certified phlebotomist.

Annual Salary \$ 57,600 x 0.10 FTE = \$ 5,760

Speed Project Coordinator

Responsible for the Speed Project field implementation. Will recruit peer advocates from the speed using community and those in recovery from speed use. Responsible for supervision and performance of Peer Advocates, ensuring that they are receiving all necessary logistical support. The Speed Project Outreach Coordinator will help develop and implement the initial training for the peer advocates as well as ongoing training activities.

Minimum Qualifications: Experience in health/human services and or related disciplines. Also requires experience coordinating outreach activities among communities of color and MSM populations, experience providing HIV/AIDS services and knowledge of substance use and harm reduction services.

Annual Salary \$ 53,000 x 0.10 FTE = \$ 5,300

Counselor I/II

Responsible for intake assessments, individual and group counseling, referrals to psychiatrist, documentation of all counseling.

Minimum Qualifications: Master's degree or at least five years experience in substance use, mental health, or HIV counseling.

Annual Salary \$ 57,700 x 0.20 FTE = \$ 11,540

Administrative Assistant

Provide administrative office support to the BBE program (including correspondence, filing, ordering supplies, scheduling meetings, and preparing materials packets).

Minimum Qualifications: High school diploma or equivalency and one year of experience working as an Administrative Assistant.

Annual Salary \$ 52,500 x 0.10 FTE = \$ 5,250

Director, Prevention Services: Responsible for supervision of program staff and will act as liaison to prevention and care partners; responsible for program planning, implementation and evaluation. *Minimum qualifications:* Master's Degree and 4 years community organizing & disease prevention experience or an equivalent combination of education and experience.

Annual Salary \$99,000 x .25 FTE = \$ 24,750

Director, Program Development and Operations: Responsible for staff and volunteer education/training; keeps up to date on new trends in HIV prevention with an eye toward possible program impacts; works on program design and delivery plan, and coordinates program evaluation. *Minimum qualifications:* Masters in Public Health and 3 years community organizing and public health experience or an equivalent combination of education and experience.

Annual Salary \$75,000 x .10 FTE = \$ 7,500

YBMSM Program Manager: Responsible for program oversight and supervision of YBMSM Program Coordinator. Responsible for program design input, program implementation, and evaluation. Oversees outreach efforts to community providers and provides case management to link clients to resources and services. Oversees HIV testing efforts, recruits participants for annual Black PLUS, and arranges Black PLUS logistics with Positive Force staff. *Minimum qualifications:* Demonstratable cultural competence and a Master's degree in a relevant field (Counseling, MSW, Psychology, MFT, etc) and 3 years related experience.

Annual Salary \$58,500 x .90 FTE = \$ 52,650

YBMSM Program Coordinator: Responsible for HIV testing recruitment, client outreach, program delivery. Oversees drop-in space and coordinates drop-in space logistics. *Minimum qualifications:* BA or one year experience in community organizing and health promotion, or an equivalent combination.

Annual Salary \$42,700 x .50 FTE = \$ 21,350

Outreach/Testing Counselor: Conducts targeted recruitment activities for HIV testing at specific venues in the community. This can include accompanying client to testing site. Provides informed consent, HIV/RNA counseling and test disclosure information to clients being tested. Perform specimen collection (finger stick) for HIV antibody rapid test. Processes, develops, and interprets HIV antibody testing kits (OraQuick and StatPak) document results. Assists in data entry. *Minimum qualifications:* State of California HIV Test Counselor Certification required.

Annual Salary \$37,398 x .40 FTE = \$ 14,959

Testing Coordinator: Responsible for managing the testing calendar and coordinating shift logistics with AHP staff; responsible for RV maintenance including, but not limited to, any pertinent permit and parking issues, driving, managing client flow and providing HIV testing services. *Minimum qualifications:* BA degree or 2 years related work experience; state-certified IRRC counselor and certified phlebotomist.

Annual Salary \$45,000 x .25 FTE = \$ 11,250

Media Designer: Designs social marketing campaigns and promotional media pieces. *Minimum qualifications:* BA and 2 years experience or an equivalent combination of education and experience.

Annual Salary \$82,000 x .10 FTE = \$ 8,200

Volunteer Manager: Performs intake interviews with potential volunteers to match skills & interests to components of our programs; develops & implements plans to increase volunteerism; develops & coordinates volunteer orientations and trainings; develops & implements performance evaluation methods; tracks volunteer hours worked; develops support and retentions activities and designs leadership development curriculum for volunteers in order to increase retention. *Minimum qualifications:* BA and 2 years experience in volunteer coordinatio, or an equivalent combination of education and experience.

Annual Salary \$51,000 x .10 FTE = \$ 5,100

Total Salaries \$ 305,509

Total Benefits 25% of \$ 305,509 total salaries = \$ 76,378

Social Security, Worker's Compensation, Health Benefits, Unemployment, State and

TOTAL SALARIES & BENEFITS \$ 381,887

Operating Expenses

Occupancy:

Rent:

Rent expense based on SFAF's experience rate of \$792.13 per FTE per month.

\$792.13 per month x 4.95 FTE x 12 months = \$ 47,053

Utilities:

Telephone expense based on SFAF's experience rate of \$73.57 per FTE per month.

\$73.57 per month x 4.95 FTE x 12 months = \$ 4,370

Total Occupancy: \$ 51,423

Materials and Supplies:

Office Supplies/Postage:

Office supplies/postage expense based on SFAF's experience rate of \$75.41 per FTE per month.

\$75.41 per month x 4.95 FTE x 12 months = \$ 4,482

Case Management/Event Expense:

Food and supplies for drop-in space, MUNI cards for client appointments, and fees/expenses associated with program promotion at community events (street fairs, Pride Parade, Juneteenth, Kwanzaa, etc.).

200 drop-in + 75 case mgmt clients annually x approx \$58.35/client \$ 16,047

Approx 6 community Events x \$2,941.60 per event \$ 17,650

Total Materials and Supplies:	\$	38,178
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General Operating:

Insurance:

Occupancy insurance expense based on SFAF's experience rate of \$45.14 per FTE per month.

\$45.14 per month x 4.95 FTE x 12 months =	\$	2,681
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Outside Storage:

Storage expense based on SFAF's experience rate of \$4.25 per FTE per month.

\$4.25 per month x 4.95 FTE x 12 months =	\$	252
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Rental/Maintenance of Equipment:

Equipment rental expense based on SFAF's experience rate of \$44.71 per FTE per month. Equipment maintenance expense based on SFAF's experience rate of \$50.33 per FTE per month.

Rental - \$44.71 per month x 4.95 FTE x 12 months =	\$	2,656
Maintenance - \$50.33 per month x 4.95 FTE x 12 months =	\$	2,990

Program Incentives:

\$20 testing incentives x 125 tests =	\$2,500	\$	2,500
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<u>Communications/Promotional Media:</u> Promote one Black PLUS events (2 days session), 2 Status Awareness events and 1 Major event. \$400 each media buy	\$	1,600
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<u>Misc.</u> Fuel and parking space rental for R.V. for HIV/STD testing	\$	1,600
Prorated fuel and parking for RV @ \$133.33/mo x 12 mo		

Total General Operating:	\$	14,279
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Consultants/Subcontractors:

Temporary Staff

Youth to help administer YBMSM program, assist with outreach, set-up and clean up

\$20/hour x 7 hours/week x 25 weeks	\$	3,500
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Total Consultants/Subcontractors:	\$	3,500
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TOTAL OPERATING EXPENSES	\$	107,380
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TOTAL DIRECT COSTS	\$	489,267
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INDIRECT COSTS

Indirect expenses for the San Francisco AIDS Foundation are approximately 17% of operating costs. SFAF requests reimbursement at 10% of the total direct costs in this proposal to cover operating expenses incurred by the Foundation, including finance and administration.

$\$489,266 \times 10\% = \$$ 48,927

TOTAL INDIRECT COSTS \$ 48,927

APPENDIX TOTAL \$ 538,194

	A	B	C	D	E	F	G	H	I	
1	Contractor Name: San Francisco AIDS Foundation					Appendix B-5b				Page 1
2	Contract Term: 9/1/11-06/30/14					Appendix Term: 07/1/13-06/30/14				
3	Funding Source: General Fund									
4										
5	SFDPH AIDS OFFICE CONTRACT									
6	UOS COST ALLOCATION BY SERVICE MODE									
7										
8										
9	Personnel Expenses		SERVICE MODES							
10	Position Titles	FTE	Testing		IRRC		PCM		Page Total	
11	Director of Clinical Operations	0.20	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE		
12	Director of Government Contracts	0.10	5,440	34%	960	6%	4,320	27%	10,720	
13	Evaluation Associate	0.10	3,060	34%	360	4%	2,610	29%	6,030	
14	HIV CTL Services Manager	0.40	1,972	34%	232	4%	1,682	29%	3,886	
15	Data Manager	0.10	13,706	78%	351	2%	1,406	8%	15,463	
16	Counselor I and II	1.25	1,700	34%	400	8%	1,250	25%	3,350	
17	Counselor I and II	1.25	6,057	9%	8,076	12%	28,266	42%	42,399	
18	Outreach/Testing Counselor	0.60	22,439	100%	0		0		22,439	
19										
20										
21										
22										
23										
24	Total FTE & Total Salaries	2.75	54,374	46%	10,379	9%	39,534	34%	104,287	
25	Fringe Benefits	25%	13,594	38%	2,595	7%	9,884	28%	26,073	
26	Total Personnel Expenses		67,968	38%	12,974	7%	49,418	28%	130,360	
27										
28	Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total	
29	Total Occupancy		9,315	48%	1,806	9%	4,514	23%	15,635	
30	Total Materials and Supplies		4,834	30%	1,741	11%	6,804	42%	13,379	
31	Total General Operating		721	48%	140	9%	350	23%	1,211	
32	Total Staff Travel									
33	Consultants/Subcontractor:									
34										
35	Other:									
36										
37										
38										
39										
40										
41										
42										
43	Total Operating Expenses		\$ 14,870	4%	\$ 3,687	1%	11,668	3%	\$ 30,225	
44										
45	Total Direct Expenses		82,838	15%	16,661	3%	61,086	11%	160,585	
46	Indirect Expenses 10%/15%		8,284	11%	1,666	2%	6,109	8%	16,059	
47	TOTAL EXPENSES		\$ 91,122	14%	\$ 18,327	3%	67,195	11%	\$176,644	
48										
49	Number of Units of Service (UOS) per Service Mode		600		145		480		1,225	
50	Cost Per Unit of Service by Service Mode		\$151.87		\$126.39		139.99			
51	Number of Contacts (NOC) per Service Mode		600		159		480			
52										
53	DPH #1A(1)									Rev. 05/2010

	A	B	C	D	E	F	G	H	I	
1	Contractor Name: San Francisco AIDS Foundation					Appendix B-5b				Page 3
2	Contract Term: 9/1/11-06/30/14					Appendix Term: 07/1/13-06/30/14				
3	Funding Source: General fund									
4										
5	SFDPH AIDS OFFICE CONTRACT									
6	UOS COST ALLOCATION BY SERVICE MODE									
7										
8										
9	Personnel Expenses		SERVICE MODES							
10	Position Titles	FTE	LIFE Groups		LIFE R & L				Contract Totals	
11	Director of Clinical Operations	0.20	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	16,000	
12	Director of Government Contracts	0.10		0%					9,000	
13	Evaluation Associate	0.10		0%					5,800	
14	HIV CTL Services Manager	0.40		0%					17,572	
15	Data Manager	0.10		0%					5,000	
16	Counselor I and II	1.25		0%					67,300	
17	Outreach/Testing Counselor	0.60		0%					22,439	
18										
19										
20										
21										
22										
23										
24	Total FTE & Total Salaries	2.75	0	0%					143,111	
25	Fringe Benefits	25%	0	0%					35,778	
26	Total Personnel Expenses		0	0%					178,889	
27										
28	Operating Expenses		Expenditure	%	Expenditure	%			Contract Total	
29	Total Occupancy			0%					19,246	
30	Total Materials and Supplies			0%					16,385	
31	Total General Operating			0%					1,490	
32	Total Staff Travel								0	
33	Consultants/Subcontractor:		153,517	44%	38,380	11%			348,903	
34										
35	Other:									
36										
37										
38										
39										
40										
41										
42										
43	Total Operating Expenses		\$ 153,517	40%	\$ 38,380	10%			\$ 386,024	
44										
45	Total Direct Expenses		153,517	27%	38,380	7%			564,913	
46	Indirect Expenses	10%/15%	23,028	31%	5,756	8%			73,936	
47	TOTAL EXPENSES		\$ 176,545	28%	\$ 44,136	7%			\$638,849	
48										
49	Number of Units of Service (UOS) per Service Mode		604		375				3,739	
50	Cost Per Unit of Service by Service Mode		\$292.29		\$117.70					
51	Number of Contacts (NOC) per Service Mode		2,134		750					
52										
53	DPH #1A(1)									

BUDGET JUSTIFICATION

Stonewall Castro/ LIFE Program

Salaries and Benefits

Director of Clinical Operations

Dir. Of Clinical Operations assists with daily operations, provides HIV prevention and care services to a caseload of Stonewall clients.

Minimum Qualifications: Master's degree and at least five years experience in managing at social services programs.

.20 FTE x \$ 80,000 = \$16,000

Director of Government Contracts

Responsible for all data management and contract related activities. Maintains operational and statistical reporting mechanisms in accordance with contract and departmental requirements, produces routine and ad hoc reporting as needed, and ensures the integrity of the service database by overseeing database quality assurance activities.

Minimum Qualifications: Bachelor's degree and at least two years demonstrated experience in health services program planning, design, and evaluation; grant development and writing; government contracts management and negotiations.

.10 FTE x \$ 90,000 = \$9,000

Evaluation Associate

Responsible for coordinating data collection, quality assurance, reporting and summaries to ensure foundation programs are rigorously evaluated for process and health outcomes and public health impact. Responsible for review, abstraction from client records and database entry of all data collected from clients as well as data analysis to meet programmatic and contract requirements.

Minimum Qualifications: Bachelor's degree and 2 years experience managing and ensuring quality for large client data sets or 5 years equivalent experience required.

.10 FTE x \$ 58,000 = \$5,800

HIV CTL Services Manager

Manages clinic staff and oversees phlebotomy services for confirmatory HIV antibody testing and RNA testing at multiple sites. Supervises specimen collection for transport to SFDPH laboratory. Oversees quality assurance efforts.

Minimum Qualifications: Bachelor's Degree, certified HIV test counselor and State certified phlebotomist. At least two years demonstrated experience managing clinic operations and working with populations at risk for HIV/STD infection.

$$.40 \text{ FTE} \times \$ 43,930 = \$17,572$$

Data Manager

Manages data collection activities at all sites. Ensures the completeness, accuracy and timely entry of data into database systems. Assists with database quality assurance activities.

Minimum Qualifications: Bachelor's degree and at least two years demonstrated experience in database management.

$$.10 \text{ FTE} \times \$ 50,000 = \$5,000$$

Counselor I and II

Responsible for intake assessments, individual and group counseling, referrals to psychiatrist, documentation of all counseling.

Minimum Qualifications: Master's degree or at least five years experience in substance use, mental health, or HIV counseling.

$$1.25 \text{ FTE} \times \$ 53,840 = \$67,300$$

Outreach/Testing Counselor: Conducts targeted recruitment activities for HIV testing at specific venues in the community. This can include accompanying client to testing site. Provides informed consent, HIV/RNA counseling and test disclosure information to clients being tested. Perform specimen collection (finger stick) for HIV antibody rapid test. Processes, develops, and interprets HIV antibody testing kits (OraQuick and StatPak) document results. Assists in data entry. Minimum qualifications: State of California HIV Test Counselor Certification required.

$$.60 \text{ FTE} \times \$37,398 = \$22,439$$

Total Salaries	\$143,111
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Total Benefits	25% of \$ 143,111 total salaries =	\$35,778
State and Federal Taxes, Retirement Plan.		

TOTAL SALARIES & BENEFITS	\$178,889
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Operating Expenses

Occupancy: _____
Rent: _____

Rent expense based on SFAF's experience rate of \$583.22 per FTE per month.

$$\$583.22 \text{ per mo.} \times 2.75 \text{ FTE} \times 12 \text{ months} = \$19,246$$

Total Occupancy:	\$19,246
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Materials and Supplies:

Program/Medical Supplies:

Condoms and lubricant to distribute to clients.

107,312 condoms x \$0.08 per condom =	\$8,585
312 incentives @ \$25.00 each =	\$7,800

Total Materials and Supplies:	\$16,385
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General Operating:

Insurance:

Occupancy insurance expense based on SFAF's experience rate of \$45.14 per month.

$$\$45.14 \text{ per mo.} \times 2.75 \text{ FTE} \times 12 \text{ months} = \$1,490$$

Total General Operating:	\$1,490
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Staff Travel (Local & Out of Town):

Total Staff Travel:	\$0
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Consultants/Subcontractors:

Shanti Project
Program Manager

Responsible for: logistical and administrative support to program staff for all services; supervises Health Counselors, including individual and group case conferences; CRCS counseling; facilitation of SSG Health Education and MSW groups; clinical intakes.

Minimum Qualifications : Graduate degree in health services related field and/or 3 years experience in providing health services-related program management.

$$.70 \text{ FTE} \times \$70,000 = \$49,000$$

Database Administrator

Responsible for: management of data design and collection, administrative support, and database quality assurance, analysis and reporting.

Minimum Qualifications: Graduate degree in health services-related field and/or 3 years experience in providing health services-related program management.

.50 FTE x \$55,000 = \$27,500

Senior Health Coordinator I/ Clinical Supervisor

Responsible for: CRCS counseling; facilitation of SSG Health Education and MSW groups; clinical intakes; assists with outreach; intakes and follow-up; lead Health Counselor; provides clinical supervision, performance feedback and staff training on clinical topics.

Minimum Qualifications: Professional degree in Psychology, Clinical Social Work, Counseling and/or valid California license as a Clinical Psychologist, Clinical Social Worker, or Marriage and Family Therapist; 5 years direct service experience in mental health counseling and/or health services-related field; 4 years experience working with adults in a clinical setting; 2 years experience working in a supervisory capacity.

.9 FTE x \$50,000 = \$45,000

.25 FTE X \$156,000 = \$39,000

Senior Health Coordinator II

Responsible for: CRCS counseling; facilitation of SSG Health Education and MSW groups; clinical intakes; assists with outreach; intakes and follow-up; provides coordination of and outreach for communities of color interventions.

Minimum Qualifications: Graduate degree in mental health counseling or health services related field and/or 3 years direct service experience in mental health counseling and/or health services-related field; 3 years experience providing or coordinating direct services for communities of color and/or peer-based trainings and workshops.

.90 FTE x \$48,611 \$43,750

Health Counselor

Responsible for: CRCS counseling; facilitation of SSG Health Education and MSW groups; clinical intakes; assists with outreach.

Minimum Qualifications: College degree in health service-related field and/or 2 years direct service experience in mental health counseling, small group facilitation, client advocacy and/or health education.

1.1 FTE x \$45,397 = \$49,937

Admin Assistant

Responsible for: data entry; logistical and administrative support.

Minimum Qualifications: College degree and/or minimum 3 years experience in administrative assistance within health services-related field.

.30 FTE x \$29,120 = \$8,737

Benefits: Social Security, Worker's Compensation, Health Benefits, Unemployment, State and Federal Taxes, Retirement Plan.

Approx. 19.5% of total salaries (\$262,924) = \$51,249

Rent

Rental of property including rent, utilities, building maintenance and IT services including pro-rata share of shared expenses.

\$1,659.17 x 12 months = \$19,910

Materials & Supplies

Supplies, postage, printing and photocopying of materials, educational materials, food, software, telephone/internet including pro-rata share of shared expenses.

\$791.67/month x 12 months = \$9,500

General Operating

Staff training, staff travel, insurance and equipment rental including pro-rata share of shared expenses.

\$291.67/ month x 12 months = \$3,500

Advertising

Costs for advertising placement for client recruitment and program based social marketing campaigns and related materials.

.67/ month x 12 months less inkind funding for advertising of \$7090 =
\$666.67 x 12 = \$8,000 less \$7,090 = \$910

Intervention Materials

Incentives to support recruitment, attendance, punctuality and retention and related materials.

\$786.83/ month x 12 months less \$8,531 inkind funding for materials \$910
\$786.75 x 12 mo = \$9,441 less \$8,531 =

Total Consultants/Subcontractors:

\$348,903

Other:

Total Other:

\$0

TOTAL OPERATING EXPENSES

\$386,024

CAPITAL EXPENDITURES: (if needed - A unit valued at \$5,000 or more)

Total Capital Expenditures:

\$0

TOTAL DIRECT COSTS

\$564,913

INDIRECT COSTS

Stonewall Castro

Indirect expenses for the San Francisco AIDS Foundation are

$\$ 216,010 \times 10\% =$ \$21,601

LIFE Program

Indirect expenses for the San Francisco AIDS Foundation & Shanti

$\$ 348,903 \times 15\% =$ \$52,335

TOTAL INDIRECT COSTS

\$73,936

APPENDIX TOTAL

\$638,849

**Appendix D
Additional Terms**

1. HIPAA

The parties acknowledge that City is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is therefore required to abide by the Privacy Rule contained therein. The parties further agree that Contractor falls within the following definition under the HIPAA regulations:

- ☐ A Covered Entity subject to HIPAA and the Privacy Rule contained therein; or
- ☒ A Business Associate subject to the terms set forth in Appendix E;
- ☐ Not Applicable, Contractor will not have access to Protected Health Information.

2. 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.

3. 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.

4. 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 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 for each of its service site. 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.

5. CERTIFICATION REGARDING LOBBYING

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

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

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

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

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

Appendix E

BUSINESS ASSOCIATE ADDENDUM

This Business Associate Addendum ("Addendum") supplements and is made a part of the contract ("Contract") by and between the City and County of San Francisco, Covered Entity ("CE") and Contractor, Business Associate ("BA").

RECITALS

- A. CE wishes to disclose certain information to BA pursuant to the terms of the Contract, some of which may constitute Protected Health Information ("PHI") (defined below).
- B. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Contract 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 thereunder by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws.
- C. 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 Addendum.

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

1. Definitions

- a. **Breach** 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].
- 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** 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** 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** 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** 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.
- h. **Electronic Health Record** shall have the meaning given to such term in 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, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501. Protected Health Information includes Electronic Protected Health Information [45 C.F.R. Sections 160.103, 164.501].
- 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** 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** 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. **Permitted Uses.** BA shall use Protected Information only for the purpose of performing BA's obligations under the Contract and as permitted or required under the Contract and Addendum, 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 164.504(e)(2) and 164.504(e)(4)(i)].

- b. **Permitted Disclosures.** BA shall disclose Protected Information only for the purpose of performing BA's obligations under the Contract and as permitted or required under the Contract and Addendum, 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 Addendum 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, suspected breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2. m. of the Addendum, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)].
- c. **Prohibited Uses and Disclosures.** BA shall not use or disclose PHI other than as permitted or required by the Contract and Addendum, 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 PHI solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(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 Contract.
- d. **Appropriate Safeguards.** BA shall implement appropriate safeguards to prevent the use or disclosure of Protected Information other than as permitted by the Contract or Addendum, 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 164.308, 164.310, and 164.312. [45 C.F.R. Section 164.504(e)(2)(ii)(B); 45 C.F.R. Section 164.308(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. [42 U.S.C. Section 17931]

- e. **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 Protected Information and implement the safeguards required by paragraph 2.d. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2)(ii)(D); 45 C.F.R. Section 164.308(b)]. BA shall implement and maintain sanctions against agents and subcontractors that violate such restrictions and conditions and shall mitigate the effects of any such violation (see 45 C.F.R. Sections 164.530(f) and 164.530(e)(1)).
- f. **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 six(6) 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. If a patient 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.
- g. **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.

- h. **Minimum Necessary.** BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the purpose of the request, use or disclosure. [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.”
- i. **Data Ownership.** BA acknowledges that BA has no ownership rights with respect to the Protected Information.
- j. **Notification of Possible Breach.** BA shall notify CE within twenty-four (24) hours of any suspected or actual breach of Protected Information; any use or disclosure of Protected Information not permitted by the Contract or Addendum; any security incident (i.e., any attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system) related to Protected Information, and any actual or suspected 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 who unsecured Protected Information has been, or is reasonably believed by the business associate 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. (This provision should be negotiated.) [42 U.S.C. Section 17921; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]
- k. **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)(ii), 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 Addendum or other arrangement, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the Contract or other arrangement 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 Addendum or other arrangement within five (5) 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 Addendum, as determined by CE, shall constitute a material breach of the Contract and shall provide grounds for immediate termination of the Contract, any provision in the Contract to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii)].
- b. **Judicial or Administrative Proceedings.** CE may terminate the Contract, 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 Contract 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 Addendum 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)(ii)(2)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.
- d. **Disclaimer**

CE makes no warranty or representation that compliance by BA with this Addendum, HIPAA, the HITECH Act, or the HIPAA Regulations 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 Contract or Addendum 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 Addendum embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable laws. CE may terminate the Contract upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Contract or Addendum when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Contract or Addendum 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

In the event that CE pays a fine to a state or federal regulatory agency based on an impermissible use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine within thirty (30) calendar days.

APPENDIX F-1b
Appendix Term: 06/15/13-06/14/14
PAGE A

FINAL Invoice ☐ (check if Yes)

Date: _____

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.

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.

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

APPENDIX F-3b
Appendix Term: 07/01/13-06/30/14
PAGE A

Contractor: **San Francisco AIDS Foundation**
Address: **P.O. Box 426182**
San Francisco, CA 94142-4182

Telephone: **487-3000**
Fax: **487-3009**

HPS

CMS #
7164

Invoice Number
A-3JUL13

Contract Purchase Order No: _____

Funding Source: **General Fund**

Grant Code/Detail: **HCHIVPREVNGF**

Project Code/Detail: _____

Program Name: **The Stonewall Project**

ACE Control #: _____

Invoice Period: **07/1/13 - 07/31/13**

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
in Distribution 1 month	120	na							12	#####
1 event	34	1,496							34	1,496
Groups 1 hour	414	1,380							414	1,380
RRC 1 hour	240	255							240	255
CM 1 hour	359	374							359	374
recruitment & Linkages 1 hour	720	2,880							720	2,880
Training 1 hour	24	120							24	120
Social Marketing 1 month	12	na					#####		12	#####

	NOC	NOC	NOC	NOC	NOC
Unduplicated Clients for Appendix					

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$222,027				\$222,027.00
Fringe Benefits	\$55,507				\$55,507.00
Total Personnel Expenses	\$277,534				\$277,534.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$38,957				\$38,957.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$5,881				\$5,881.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$6,499				\$6,499.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$2,500				\$2,500.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)	\$1,400				\$1,400.00
Total Operating Expenses	\$55,237				\$55,237.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$332,771				\$332,771.00
Indirect Expenses	\$33,277				\$33,277.00
TOTAL EXPENSES	\$366,048				\$366,048.00
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: **SFDPH Fiscal / Invoice Processing**
1380 Howard Street, 4th Floor
San Francisco, CA 94103
Attn: Contract Payments

By: _____
(DPH Authorized Signatory)

Date: _____

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

APPENDIX F-4c
Appendix Term: 07/01/13-06/30/14
PAGE A

Contractor: **San Francisco AIDS Foundation**
Address: **P.O. Box 426182**

CMS #
7164

Invoice Number
XXXXXXXXA-4JUL13

Contract Purchase Order No:

Telephone: **483-3000**

Fax:

HPS

Funding Source: **General Fund**

Grant Code/Detail: **HCHIVPREVNGF**

Program Name: **African American Preventin Initiative**

Project Code/Detail:

ACE Control #:

Invoice Period: **07/1/13 - 07/31/13**

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
Spits 1 event	24.0	984					98400%		24	984
Spits 1 hour	580	3,320							580	3,320
HIV Testing 1 test	500	500							500	500
IRRC 1 hour	262	792							262	792
Linkage 1 linkage	200	200							200	200

	NOC	NOC	NOC	NOC	NOC
Unduplicated Clients for Appendix					

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$305,509				\$305,509.00
Fringe Benefits	\$76,378				\$76,378.00
Total Personnel Expenses	\$381,887				\$381,887.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$51,423				\$51,423.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$38,178				\$38,178.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$14,279				\$14,279.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$3,500				\$3,500.00
Other - (e.g., Client Food, Client Travel, Client Activities and Client Supplies)					
Total Operating Expenses	\$107,380				\$107,380.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$489,267				\$489,267.00
Indirect Expenses	\$5,925				\$48,925.00
TOTAL EXPENSES	\$538,192				\$538,192.00
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: **SFDPH Fiscal / Invoice Processing**
1380 Howard Street, 4th Floor
San Francisco, CA 94103
Attn: Contract Payments

By: _____
(DPH Authorized Signatory)

Date: _____

APPENDIX F-4c
Appendix Term: 07/01/13-06/30/14
PAGE B

FINAL Invoice ☐ (check if Yes)

ACE Control #:

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.

Title: _____

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

APPENDIX F-5b
Appendix Term: 07/01/13-06/30/14
PAGE A

Contractor: San Francisco AIDS Foundation
Address: P.O. Box 426182
San Francisco, CA 94142-4182

Telephone: 487-3000
Fax: 487-3009

HPS

CMS #
7164

Invoice Number
A-5JUL13

Contract Purchase Order No:

Funding Source: General Fund

Grant Code/Detail: HCHIVPREVNGF

Project Code/Detail:

Program Name: Stonewall Castro/LIFE Program

ACE Control #:

Invoice Period: 07/1/13 - 07/31/13

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
1 test	600	600							600	600
1 hour	145	159							145	159
CM 1 hour	480	480							480	480
Groups 1 hour	311	1,035							311	1,035
Shanti LIFE Individual Risk Reduction 1 hour	144	144							144	144
Shanti LIFE Prevention Case Mgmt 1 hour	1,080	864							1,080	864
Shanti LIFE Group 1 hour	604	2,134							604	2,134
Shanti LIFE Recruitment & Linkages 1 hour	375	750							375	750

	NOC	NOC	NOC	NOC	NOC
Unduplicated Clients for Appendix					

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries (See Page B)	\$143,111				\$143,111.00
Fringe Benefits	\$35,778				\$35,778.00
Total Personnel Expenses	\$178,889				\$178,889.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$19,246				\$19,246.00
Materials and Supplies -(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$16,385				\$16,385.00
General Operating -(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$1,490				\$1,490.00
Staff Travel - (e.g., Local & Out of Town)					
Consultant/Subcontractor	\$348,903				\$348,903.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					
Total Operating Expenses	\$386,024				\$386,024.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$564,913				\$564,913.00
Indirect Expenses	\$73,936				\$73,936.00
TOTAL EXPENSES	\$638,849				\$638,849.00
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: SFDPH Fiscal / Invoice Processing
1380 Howard Street, 4th Floor
San Francisco, CA 94103
Attn: Contract Payments

By: _____
(DPH Authorized Signatory)

Date: _____

APPENDIX F-5b
Appendix Term: 07/01/13-06/30/14
PAGE B

A-5JUL13

Contract Purchase Order No:

Fund Source: General Fund

Program Name: Stonewall Castro/LIFE Program

Grant Code/Detail: HCHIVPREVNGF

Project Code/Detail:

ACE Control #: _____

Invoice Period: 07/1/13 - 07/31/13

FINAL Invoice ☐ (check if Yes)

[illegible]

Certified By: _____

Date: _____

Title: _____



SANFRAN-02

BUCDA1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/17/2013

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

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

PRODUCER License # 0H81923
G2 Insurance Services, LLC
601 California Street, 3rd Floor
San Francisco, CA 94108

CONTACT**NAME:****PHONE**
(A/C, No, Ext): (415) 426-6600 6636**FAX**

(A/C, No): (415) 426-6601

E-MAIL**ADDRESS:****INSURER(S) AFFORDING COVERAGE****NAIC #****INSURER A:** Berkshire Hathaway Homestate Insurance Company**20044****INSURED**

San Francisco AIDS Foundation
1035 Market Street, Ste. 400
San Francisco, CA 94103

INSURER B:**INSURER C:****INSURER D:****INSURER E:****INSURER F:****COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY						EACH OCCURRENCE
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person)
							PERSONAL & ADV INJURY
							GENERAL AGGREGATE
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)
							\$
	UMBRELLA LIAB						EACH OCCURRENCE
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR					AGGREGATE
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	<input type="checkbox"/> CLAIMS-MADE					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N					OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						
				3300057174-121	7/1/2013	7/1/2014	E.L. EACH ACCIDENT
							\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE
							\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT
							\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Evidence of Workers Compensation Coverage

CERTIFICATE HOLDER

City and County of SF - SFDPH
101 Grove Street
San Francisco, CA 94102

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CERTIFICATE OF LIABILITY INSURANCE

SANFRAN-07

WILSONLE

DATE (MM/DD/YYYY)
4/3/2013

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

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

PRODUCER Willis Insurance Services of California, Inc. c/o 28 Century Blvd. P.O. Box 305191 Nashville, TN 37230-5191	CONTACT NAME: certificates@willis.com PHONE (A/C, Ho, Ext.): (877) 945-7378 FAX (A/C, No): (888) 467-2378 E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Nonprofits' Insurance Alliance of California Inc NAIC #: C0815 INSURER B: Cypress Insurance Company 10855 INSURER C: INSURER D: INSURER E: INSURER F:
INSURED San Francisco AIDS Foundation 1035 Market St., #400 Attn: Controller San Francisco, CA 94103	

COVERAGES		CERTIFICATE NUMBER:		REVISION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURER	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	X	2013-00950	4/1/2013	4/1/2014
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	X	2013-00950	4/1/2013	4/1/2014
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		2013-00950-UMB	4/1/2013	4/1/2014
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	3300057174121	7/1/2012	7/1/2013
A	Business Auto		2013-00950	4/1/2013	4/1/2014
LIMITS					
EACH OCCURRENCE \$ 1,000,000					
DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000					
MED EXP (Any one person) \$ 20,000					
PERSONAL & ADV INJURY \$ 1,000,000					
GENERAL AGGREGATE \$ 3,000,000					
PRODUCTS - COM/PROP AGG \$ 3,000,000					
SOCIAL SERV PRO \$ 3,000,000					
COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000					
BODILY INJURY (Per person) \$					
BODILY INJURY (Per accident) \$					
PROPERTY DAMAGE (PER ACCIDENT) \$					
EACH OCCURRENCE \$ 10,000,000					
AGGREGATE \$ 10,000,000					
WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTH-ER <input type="checkbox"/>					
E.L. EACH ACCIDENT \$ 1,000,000					
E.L. DISEASE - EA EMPLOYEE \$ 1,000,000					
E.L. DISEASE - POLICY LIMIT \$ 1,000,000					
Comp/Coll Deductible 1,000					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Re: Ongoing service contract with City and County of San Francisco.

City and County of San Francisco, SFDPH, its Officers, Directors, Employees, Agents and Representatives are included as Additional Insureds with respects to General Liability and Auto Liability.

Insurance listed above is Primary insurance with respect to this contract.

CERTIFICATE HOLDER

CANCELLATION

City and County of San Francisco - SFDPH 101 Grove Street San Francisco, CA 94102	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Mark Keane</i>
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POLICY NUMBER: 2013-00950

COMMERCIAL GENERAL LIABILITY
CG 20 10 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

<p align="center">Name Of Additional Insured Person(s) Or Organization(s):</p>	<p align="center">Location(s) Of Covered Operations</p>
<p>Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.</p>	<p>All insured premises and operations</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>	

- A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
1. Your acts or omissions; or
 2. The acts or omissions of those acting on your behalf;
- in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.
- B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:**
- This insurance does not apply to "bodily injury" or "property damage" occurring after:
1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.



NONPROFITS' INSURANCE ALLIANCE OF CALIFORNIA
P.O. Box 8507, Santa Cruz, CA 95061

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

COMPANY: Nonprofits' Insurance Alliance of California (00950)
POLICY NUMBER: 2013-00950-NPO
NAMED INSURED: San Francisco AIDS Foundation*
POLICY CHANGE EFFECTIVE: 04/01/2013
COVERAGE PART AFFECTED: BUSINESS AUTO
POLICY CHANGE#: 1 Page 1

The following additional insured(s)/loss payee(s) is/are hereby added to read:

Veh #	VIN #	Additional Insured - NIAC-A1
ALL		City And County Of San Francisco, SFDPH, Its Officers, Directors, Employees, Agents and Representatives 101 Grove Street San Francisco, CA 94102 AS RESPECTS: Ongoing service contract with City and County of San Francisco

All other terms, limits and conditions remain the same.

ADDITIONAL PREMIUM:	\$0
RETURN PREMIUM:	\$0
TOTAL PREMIUM:	\$0

04/04/2013

AUTHORIZED SIGNATURE

(00606)