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

Grant Resolution Information Form (Effective July 2011)

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

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

- 1. Grant Title: Ending the HIV Epidemic: A Plan for America-Ryan White HIV/AIDS Program Parts A and B
- 2. Department: **Department of Public Health HIV Health Service Section**

3. Contact Person: **Dean Goodwin** Telephone: **628-206-7675**

4. Grant Approval Status (check one):

[X] Approved by funding agency [7] Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$2,667,000 (Year 1 March 01, 2020 - February 28, 2021: \$1,000,000 Year 2 March 01, 2021 - February 28, 2022: \$1,667,000)

6a. Matching Funds Required: \$0

b. Source(s) of matching funds (if applicable): N.A.

7a. Grant Source Agency: Health Resource and Service Administration (HRSA)

b. Grant Pass-Through Agency (if applicable): N.A.

8. Proposed Grant Project Summary:

The goals of the ETHE funding is very similar to that our local Getting to Zero campaign: to reduce new HIV infections to zero (the CDC funded portion of the ETHE grant addresses this) and to increase Viral Load Suppression and to address and remove health disparities among communities who may experience these. HIV Health Services focused our application and the allocated funding from our grant award to programs that would work to address health disparities and improve viral load suppression overall, but most particularly focusing on the following target populations living with HIV: transgender women (particularly transgender women of color), persons experiencing homelessness, persons who inject drugs, African-American clients, Latinx clients, and persons experiencing incarceration.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **03/01/2020** End-Date: **02/28/2022**

10a. Amount budgeted for contractual services: \$2,466,519

b. Will contractual services be put out to bid? No, existing services

- c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? **N.A.**
- d. Is this likely to be a one-time or ongoing request for contracting out? On going

1	1a.	Does	the	budget	include	indirect	costs?
---	-----	------	-----	--------	---------	----------	--------

ш	V
ш	1 45

[X] No

- b1. If yes, how much? \$0
- b2. How was the amount calculated? N.A.
- c1. If no, why are indirect costs not included?
 - [x] Not allowed by granting agency
 - [] To maximize use of grant funds on direct services [] Other (please explain)
- c2. If no indirect costs are included, what would have been the indirect costs? 50,120 (25% of Personnel costs and Fringe benefits)
- 12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive to March 01, 2020. The Department received the letters of funding allocation on January 21, 2021, and on March 10, 2021.

This grant does not require an ASO amendment and reimburses the Department for three positions:

No.	Class	Job Title	FTE	Start Date	End Date
1	2593	Health Program Coordinator III	1.00	07/01/2021	02/28/2022
2	2587	Health Worker III	.50	07/01/2021	02/28/2022
3	2587	Health Worker lii	.50	07/01/2021	02/28/2022

Fund ID: 11580 Dept. ID: 162644

Project Desc: HN HIV 2122 PD140 Ryan White Parts A & B

Project ID: 10036978 Authority ID: 10001

Disability Access Checklist*(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)						
13. This Grant is intended for activities at (check all that apply):						
[X] Existing Site(s)[] Rehabilitated Site(s)[] New Site(s)	[] Existing Structure(s) [] Rehabilitated Structure(s) [] New Structure(s)	[] Existing Program(s) or Service(s) [] New Program(s) or Service(s)				
14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:						
1. Having staff trained in	how to provide reasonable modifica	ations in policies, practices and procedures;				
· ·	·	anner in order to ensure communication access;				
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.						
If such access would be tec	hnically infeasible, this is described	I in the comments section below:				
Comments:						
Departmental ADA Coordina	ator or Mayor's Office of Disability F	Reviewer:				
Toni Rucker PhD (Name)						
,						
DPH ADA Coordinator (Title)		DocuSigned by:				
Date Reviewed: 5/13/2	2021 3:59 PM PDT	toni Rucker				
		(Sighature Required)				
Department Head or Designee Approval of Grant Information Form:						
Dr. Grant Colfax						
(Name)						
Director of Health		DocuSigned by:				
(Title) 5/14/2	2021 10:58 AM PDT	Greg Wagner				
Date Reviewed: 5/14/2021 10:58 AM PDT Gry Waguer (Signature Required)						

Greg Wagner, COO for