

November 2019 Monthly Contracts Report

Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference (btwn. FY18-19 and FY19-20)	Annual Difference (%)	Requested Action
PHD/CHPE	Board of Trustees of the Glide Foundation	\$ 3,727,155	\$ 4,196,800	\$ 469,645	01/01/16 - 6/30/22 (6.5 Years)	01/01/16 - 6/30/22 (6.5 Years)	\$ 882,599	\$ 938,099	\$ 55,500	6.29%	Amendment
<p><b>Purpose:</b> The requested action is the approval of a contract amendment with the Board of Trustees of the Glide Foundation (formerly known as Glide Foundation) to increase the Total Contract Amount with Contingency by an amount of \$469,645. The term of 01/01/16 - 06/30/22 (6.5 years) will remain unchanged. The Health Commission previously approved this contract on December 4, 2018. However, since then, there has been funding added to the contract in excess of the value of the contingency, as detailed below, requiring the proposed amendment. This contract provides support to HCV Linkage to Care and harm reduction programs, community outreach and case management in the Tenderloin district for Law Enforcement Assisted Diversion Program (LEAD SF), and syringe disposal services at the San Francisco Public Library - Main branch. The services are authorized under RFP 30-2015.</p> <p><b>Reason for Funding Change:</b> The Department is requesting approval of a Total Contract Amount with Contingency of \$4,196,800, or an increase of \$469,645 due to the following changes: (1) FY19-20 one-time addition of unspent LEAD Grant funding in the amount of \$284,221 that has been reassigned to this contract to continue the LEAD programming, which was originally set to end on 6/30/18, (2) an annual enhancement of \$13,754 to the SF Library Work Order funds in each of the remaining three years of the contract term, or \$41,262, (3) one-time Opt-In CDC Grant funding in the amount of \$28,750 for program supplies for people experiencing homelessness, (4) one-time General Fund in the amount of \$20,450 for supplies and operating costs including retrofit of an existing outreach vehicle and the purchase of bicycles for outreach workers to reach people experiencing homelessness (5) an enhancement of \$75,000 annually in HCV Linkage to CARE General Fund and CDC grant funds for each of three remaining years of the term, or \$225,000, (6) \$29,716 adjustment increase to the CODB projected, and (7) a reduction of \$159,754 to the 12% Contingency value to have the Contingency value only applied to current and future years. Thus, the current Contingency value of \$399,338 is reduced to \$239,584.</p>											
<b>Target Population:</b>		HIV/HCV services have a focus on men who have sex with men, African-Americans, Latinos, trans and cis gender women, people who inject drugs and are experiencing homelessness in the Tenderloin, South of Market, and Mission Districts of San Francisco. Additionally, the program provides syringe disposal visits to the San Francisco Library for risk populations who are injection drug-users. LEAD SF program provides services to low level drug offenders in the Tenderloin District.									
<b>Service Description:</b>		<p><b>HIV/HCV Linkage to Care and Harm Reduction:</b> Staff provide a spectrum of HIV/HCV services from outreach to those of unknown status in the community, to those requiring case management while on treatment. Recruitment and/or Linkage to Care services in the community are provided through street-based outreach and activities in SRO hotels, methadone programs, city shelters and treatment programs to provide HCV Screening Tests. Services also include HCV Enhanced Recruitment and/or Linkage to Care and HCV Intensive Case Management as well as HCV Education and Support Groups with a focus in the Tenderloin, South of Market, and Mission District.</p> <p><b>LEAD SF:</b> Staff provides Community Outreach and Comprehensive Case Management in the Tenderloin district for Law Enforcement Assisted Diversion Program (LEAD) participants with low level drug offenses that have been assessed by DPH staff and facilitated by law enforcement partners and then referred to Glide for ongoing services.</p> <p><b>Syringe Disposal:</b> Staff perform safe syringe disposal duties by maintaining bio-containers at the San Francisco Library's main branch for the provision of targeting behavioral risk populations who are injection drug users.</p>									

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<b>UOS (annual):</b>		HCV Screening Tests: \$91,416/781=\$117.05 HCV Recruitment and/or Linkage Efforts Hours: \$247,258/1861=\$132.87 HCV Education and Support Groups Hours: \$1,826/16=\$114.13 HCV Enhanced Recruitment and Linkage Efforts Hours: \$50,000/1200=\$41.67 HCV Intensive Case Management Hours: \$150,000/300=\$500.00  LEAD SF Community Outreach Contact Hours: \$171,298/3072=\$55.76 LEAD SF Comprehensive Case Management Hours: \$212,547/3072=\$69.19  Syringe Disposal Events: \$13,754/96=\$143.27									
<b>NOC (annual)</b>		4,288									
<b>Funding Source(s):</b>		General Fund, CDC Grant, LEAD SF State Grant, and Work Order from San Francisco Library									
<b>Selection Type</b>		RFP 30-2015 HIV Informed Hepatitis C Screening and Linkage to Care									
<b>Monitoring</b>		Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)									
PHD/CHPEP	San Francisco AIDS Foundation	\$ 1,807,928	\$ 2,145,922	\$ 337,994	02/01/16 - 06/30/21 (5.42 Years)	02/01/16 - 06/30/21 (5.42 Years)	\$ 402,531	\$ 664,257	\$ 261,726	65.02%	Amendment
<p><b>Purpose:</b> The requested action is the approval of a contract amendment with the San Francisco AIDS Foundation (SFAF) to increase to the Total Contract Amount with Contingency by an amount of \$337,994. The term of 02/01/16 - 06/30/21 (5.42 years) will remain unchanged. The Health Commission previously approved a new contract memo on March 1, 2016. This contract provides support for HIV Informed Hepatitis C Linkage to Care Services. The proposed amendment is authorized under RFP 30-2015. Additional funding will enhance the continual support under the HCV Linkage to Care and Outreach and Linkage to Care modalities and add treatment to provide a full spectrum of services.</p> <p><b>Reason for Funding Change:</b> The Department is requesting approval of a Total Contract Amount of \$2,145,922, or an increase of \$337,994 due to the following changes that have occurred subsequent to the original approval, and which bring the contract up to the \$500k annual threshold triggering review by the Health Commission: (1) FY19-20 one-time carry-forward grant funding in the amount of \$31,510 to support outreach supplies to enhance HIV/HCV/STD outreach and linkage services for people experiencing homelessness, (this is unspent grant funding reallocated to this contract), (2) FY19-20 one-time General Fund monies in the amount of \$70,490 to purchase supplies, including a vehicle to perform outreach and testing at homeless encampments, (3) a Board of Supervisors addback in amount of \$280,00 spread over FY19-20 and FY20-21 to support new low-threshold HCV services, including funding for a clinician to provide HCV treatment in community settings, (4) a \$5,631 increase to the total CODB projection, and (5) a reduction of \$49,637 to the 12% Contingency value to have the Contingency value only applied to current and future years. Thus, the current Contingency value of \$193,707 is reduced to \$144,070.</p>											

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<b>Target Population:</b>	San Franciscans, with a focus on HCV-positive individuals who are recruited from SFAF's existing syringe access services, other SFAF programs, and via relationships with other CBOs and organizations serving populations at high risk for Hepatitis-C. This is a community-based HCV (Hepatitis-C Virus) linkage-to-care model that supports co-located HIV/HCV risk reduction screening efforts and diminishes patient, provider, and health care system barriers by targeting behavioral risk populations with a focus on people who inject drugs. The primary population for HCV Linkage to Care are HCV-positive individuals. The primary population for Outreach and Linkage to Care (OPT-IN) are African Americans, Latinos, women, people who inject substances, and people experiencing homelessness. This same population will receive low-threshold clinical services, i.e. treatment in non-clinic based settings including a mobile van.										
<b>Service Description:</b>	<p><b>HIV Informed HCV Screening and Linkage to Care:</b> Treatment Readiness Assessment Checklist (TRAC) is used to help identify a client's need and readiness for engagement in care and treatment. Potential clients who are not stable with regard to their substance abuse and/or mental health issues and/or medical issues, but who are otherwise determined to be eligible for linkage services will be provided case management services by the SAS case manager to address these issues. These are Level I clients. Potential clients who are deemed eligible for the HCV Linkage Program by the TRAC and are stable will be offered enrollment into the linkage to care program as Level II clients. Services include HCV Education Groups, Recruitment and/or Linkage Outreach Efforts, and Linkage to Care.</p> <p><b>HIV HCV OPT-IN Outreach and Linkage to Care:</b> Primary recruitment occurs through SFAF's van-based and encampment outreach, existing syringe access services, and other SFAF programs. Clients are referred to 6th St Harm Reduction Center to access sexual health screening and screening, as well as services with SFAF's Nurse Practitioner, including wound care, treatment, and PrEP. Clients are also able to access suboxone through a partnership with the DPH Street Medicine Team, group-based support, and individual substance use counseling through Stonewall Project and Harm Reduction Therapy Center. Services include HCV Street-based Outreach services, HIV/HCV/STD Tests, and HIV/HCV Prevention Case Management.</p> <p><b>Low-Threshold HCV:</b> SFAF's Nurse Practitioner provides additional hours in community-settings, primarily via a mobile van, to clients identified as ready for care and treatment, but who face challenges accessing services in traditional brick and mortar settings.</p>										
<b>UOS (annual):</b>	<p>HCV Education Groups Hours: \$26,724/90=\$296.93  HCV Recruitment and Linkage Outreach Efforts Hours: \$182,944/595=\$307.47  HCV Linkage to Care Hours: \$54,582/814=\$67.05</p> <p>OPT-IN Street-based Outreach Services Hours: \$82,321/360=\$228.67  OPT-IN HIV/HCV/STI Tests: \$68,880/600=\$114.80  OPT-IN HIV/HCV Prevention Case Management Hours: \$93,806/810= \$115.81</p> <p>Low-Threshold HCV Hours: \$155,000/528=\$293.56</p>										
<b>NOC (annual)</b>	4402										
<b>Funding Source(s):</b>	General Fund and CDC OPT-IN Grant Funding										
<b>Selection Type</b>	RFP 30-2015 HIV Informed Hepatitis C Screening and Linkage to Care										
<b>Monitoring</b>	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)										

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SFHN/HHS	Shanti Project	\$ 4,185,765	\$ 4,401,426	\$ 215,661	03/01/13 - 02/28/22 (9 years)	03/01/13 - 02/28/22 (9 years)	\$ 632,509	\$ 642,578	\$ 10,069	1.59%	Amendment

**Purpose:** The requested action is the approval of a contract amendment with the Shanti Project to increase the Total Contract Amount with Contingency by an amount of \$215,661. The term of 03/01/13 - 02/28/22 (9 years) will remain unchanged. The Health Commission previously approved this contract on May 5, 2014. This contract provides Emotional and Practical Support by trained volunteers and Psychosocial Support by staff to people living with HIV. The proposed amendment is authorized under RFP 21-2012. The additional funding will enhance the continual support under the Psycho-Social Support modality.

**Reason for Funding Change:** The Department is requesting approval of a Total Contract Amount with Contingency of \$4,401,426, or an increase of \$215,661 due to the following changes that have occurred subsequent to the original approval, and which bring the contract up to the \$500k annual threshold triggering review by the Health Commission: (1) A two-year Board of Supervisor's addback providing funding for Shanti's Senior Survivor Support program (which serves HIV positive clients who are over 50) for individual and group Psychosocial Support in the amount of \$173,537 in FY19-20, and \$86,770 in FY20-21, or \$260,307 total, (2) an amount of \$30,198 to increase the CODB projection, and (3) a reduction of \$74,847 to the 12% Contingency value to cover only FY19-20 through FY21-22 instead of the entire life of the contract (FY13-14 through FY21-22). The current contingency value is \$274,938 and the requested amount is \$200,091.

**Target Population:**

The Emotional and Practical Support Program targets low income and/or homeless persons with HIV/AIDS in San Francisco. This will include the following sub-populations: gay, bisexual, heterosexual, and transgender, men, and women; persons of color; newly diagnosed; seniors; persons co-infected with Hepatitis C; undocumented persons; bi/monolingual (Spanish-speaking) persons; injection drug users and other substance users; persons with mental health issues; and persons new to San Francisco, recently released from prison or with a criminal justice history.

The Senior Survivor Support Program targets long-term survivors of the AIDS epidemic, i.e. seniors defined as people over the age of 50, including gay, bisexual, heterosexual, and transgender, men, and women, and people of color.

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<b>Service Description:</b>		<p><b>The Emotional and Practical Support Services Program:</b>                      The program is designed to affirm and strengthen the clients' ability to make empowering, health enhancing personal choices, and is aimed at easing the burdens and improving the well-being of people in difficult life situations. Service provision includes client advocacy and care navigation, emotional support and practical assistance, support groups and health counseling, a drop-in center, an activities and events program, and client support that matches trained volunteers providing emotional support and practical assistance with persons living with HIV/AIDS in San Francisco. Clients receive day-to-day assistance in their daily activities which may include accompanying them to medical or social service appointments as well as arranging transportation to other activities that promote quality of life.</p> <p><b>The Senior Survivor Support Program:</b>                      This program utilizes a combination of group and individual interventions, comprised of a weekly support group for long-term survivors; individual psychosocial support, i.e., assistance establishing and maintaining a connection to primary medical care and mental health services; establishment, maintenance, and optimization of stable, safe housing; advocacy with providers; and information and referrals to legal services, food, and other relevant providers to meet the basic needs of clients; and a variety of ongoing, peer-facilitated activities designed to build community among long-term survivors.</p>									
<b>UOS (annual):</b>		Psychosocial Staff Support (Navigation/Advocacy)Hours: \$212,312/4286=\$49.54 Psychosocial Staff Support Volunteers Hours: \$83,848/1325=\$63.28 Psychosocial Emotional/ Practical Support Volunteer Hours: \$70,738/9600=\$7.37  Senior Psychosocial Staff Support Hours: \$262,903/2940=\$89.42 Senior Weekly Support Group Hours: \$12,777/72=\$177.46									
<b>UDC (annual)</b>		685									
<b>Funding Source(s):</b>		Ryan White Part A and General Fund									
<b>Selection Type</b>		RFP 21-2012 Psychosocial Support Services to People Living with HIV									
<b>Monitoring</b>		Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)									