



Contract Number

17-82 A-4

SAP Number

4400010328

Department of Public Health

Department Contract Representative	<u>Lisa Ordaz, Contracts Analyst</u>
Telephone Number	<u>(909) 388-0222</u>
Contractor	<u>Foothill AIDS Project</u>
Contractor Representative	<u>La Monica Stowers</u>
Telephone Number	<u>(909) 482-2066</u>
Contract Term	<u>03/01/2017 – 02/28/2021</u>
Original Contract Amount	<u>\$9,620,387</u>
Amendment Amount	<u>(\$2,168)</u>
Total Contract Amount	<u>\$9,618,219</u>
Cost Center	<u>9300371000</u>

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 4

It is hereby agreed to amend Contract No. 17-82, effective August 25, 2020, as follows:

V. FISCAL PROVISIONS

Amend Section V, Paragraph A, to read as follows:

- A. The maximum amount of payment under this Contract shall not exceed \$9,618,219, of which \$9,618,219 may be federally funded, and shall be subject to availability of funds to the County. If the funding source notifies the County that such funding is terminated or reduced, the County shall determine whether this Contract will be terminated or the County's maximum obligation reduced. The County will notify the Contractor in writing of its determination. Additionally, the contract amount is subject to change based upon reevaluation of funding priorities by the IEHPC. Contractor will be notified in writing of any change in funding amounts. The consideration to be paid to Contractor, as provided herein, shall be in full payment for all Contractor's services and expenses incurred in the performance hereof, including travel and per diem. It includes the original contract amount and all subsequent amendments and is broken down as follows:

Original Contract	\$6,791,394	March 1, 2017 through February 29, 2020
Amendment No. 1	\$158,957 (increase)	March 1, 2017 through February 28, 2018

Amendment No. 1	\$146,707 (increase) March 1, 2018 through February 28, 2019
Amendment No. 1	\$146,707 (increase) March 1, 2019 through February 29, 2020
Amendment No. 2	(\$346,686) (decrease) March 1, 2018 through February 29, 2020
Amendment No. 3	\$251,009 (increase) March 1, 2019 through February 29, 2020
Amendment No. 3	\$2,472,299 (increase) March 1, 2020 through February 28, 2021
Amendment No. 4	(\$2,168) (decrease) March 1, 2020 through February 28, 2021

It is further broken down by Program Year as follows:

Program Year	Dollar Amount
March 1, 2017 through February 28, 2018	\$2,422,755
March 1, 2018 through February 28, 2019	\$2,253,034
March 1, 2019 through February 29, 2020	\$2,472,299
March 1, 2020 through February 28, 2021	\$2,470,131*
Total	\$9,618,219

*This amount reflects a decrease of \$69,428 and includes CARES funding of \$67,260 which results in a net decrease of \$2,168.

SECTION XI. CONCLUSION

Paragraph C is hereby replaced as follows:

- C. This Contract may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Contract. The parties shall be entitled to sign and transmit an electronic signature of this Contract (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Contract upon request.

Paragraph D is added to read as follows:

- D. IN WITNESS WHEREOF, the Board of Supervisors of the County of San Bernardino has caused this Contract to be subscribed to by the Clerk thereof, and Contractor has caused this Contract to be subscribed in its behalf by its duly authorized officers, the day, month, and year written.

ATTACHMENTS

ATTACHMENT A – Add SCOPE OF WORK – Part A for 2020-21

ATTACHMENT A1 – Add CARES ACT SCOPE OF WORK for 2020-21

ATTACHMENT B – Add SCOPE OF WORK MAI for 2020-21

ATTACHMENT H2 – Add RYAN WHITE PROGRAM BUDGET AND ALLOCATION PLAN for 2020-21

ATTACHMENT H3 – Add RYAN WHITE PART A CARES ACT FUNDING for 2020-21

All other terms and conditions of Contract No. 17-82 remain in full force and effect.

COUNTY OF SAN BERNARDINO

►

Curt Hagman, Chairman, Board of Supervisors

Dated: _____
SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Lynna Monell
Clerk of the Board of Supervisors
of the County of San Bernardino

By _____
Deputy

Foothill AIDS Project

(Print or type name of corporation, company, contractor, etc.)

By ► _____
(Authorized signature - sign in blue ink)

Name Maritza Tona

(Print or type name of person signing contract)

Title Executive Director

(Print or Type)

Dated: _____

Address 233 W. Harrison Ave.

Claremont, CA 91711

FOR COUNTY USE ONLY

Approved as to Legal Form

Adam Ebright, Deputy County Counsel
Date _____

Reviewed for Contract Compliance

Jennifer Mulhall-Daudel, HS Contracts
Date _____

Reviewed/Approved by Department

Corwin Porter, Director
Date _____

SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Mental Health
Service Goal:	Minimize crisis situations and stabilize HIV+ clients’ mental health status to maintain clients in the care system.

Service Health

Outcomes:

- Improve retention in care (at least 1 medical visit in each 6-month period)
- Improve viral suppression rate, improved or maintained CD4 cell count.
- Decreased level of depression post 12 individual sessions
- Decreased level of anxiety post 12 individual sessions.
- Tracking of depressive and anxiety symptoms and psychosocial functioning based on BSI 18

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert		FY 20/21 TOTAL	FY 19/20 TOTAL
Proposed Number of Clients	70	18	2	20	85	40		235	250
Proposed Number of Visits= Regardless of number of transactions or number of units	971	200	20	236	1196	672		3295	3355
Proposed Number of Units= Transactions or 15 min encounters	6080	1300	80	1480	7490	4200		20630	21000

<p>Living Well with HIV</p> <p>Living Well with HIV/AIDS psychotherapy groups are facilitated by licensed mental health professionals. Focus of group sessions are psychological/emotional issues clients experience related to living with HIV/AIDS, relationships and other topics designated by group members.</p>	1,2,4,5,6	Co-ed	Open	10	1.5 hr	1	On-going	<ul style="list-style-type: none"> ☐ Medical Visits ☐ Viral Loads ☐ Level of functioning
<p>Young and Thriving</p> <p>Young and Thriving group is for clients age 30 and under. Group focuses on topics and activities that educate as well as equip youth with social skills for cultivating health relationships on the age of social media</p>	5	Co-ed	Open	10	1.5 hr	1	On-going	
<p>Rise and Grind</p> <p>This is group is a Co-ed, strength-based psycho-education group. The group is offered in 6 weeks segments with the topic/emphasis changing every new cycle.</p>	5	Co-ed	Open	10	1.5 hr	1	On-going	
<p>Extended Family Group</p> <p>This group provides support to clients and their family network to improve their mental wellbeing and relationship in respect to social</p>	1,2	Co-ed	Open	10	1.5 hr	1	On-going	

<p>N.E.W Newly Empowered Women</p> <p>This group provides a safe environment for women to share concerns, convey support, and develop coping skills in respect to living with HIV</p>	4,5	Women	Open	10	1.5 hr	1	On-going	
<p>LGBTQIA</p>	5	Co-ed	Open	10	1.5 hr	1	On-going	

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>☐ Initial individual mental health assessment (document mental health diagnosis)</p> <p>Client will meet with Mental Health Clinician (MHC) to complete initial assessment and reassessment. MHC will conduct eligibility for services along with screening for Third Party payor.</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	<p>Client file will document initial mental health assessment and reassessment to include DSMV diagnosis, and other outcome tracking data per program standards and entered in ARIES.</p> <p>Client file will document statement of screening and eligibility.</p>
<p>☐ Development of care/treatment plan</p> <p>Client and MHC will meet to develop treatment plan</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will include initial and updated treatment plan and entered in ARIES.
<p>☐ Individual counseling session</p> <p>Client will meet with MHC for individual session</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will document session as case note and entered in ARIES.
<p>☐ Group counseling session</p> <p>MHC will convene weekly support group to discuss issues relevant to HIV/AIDS.</p> <p>For individual attending group sessions only, file will include assessment, DSMV diagnosis, and treatment plan.</p>	1,2,4,5,6	3/1/2020- 2/28/2021	Group counseling documentation will be maintained via sign-in sheets and entered in ARIES.
<p>☐ Case Conferencing</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	Documentation of case conferencing is kept in program binder.

<p>MHC will convene case conferencing to coordinate client services and address identified issues</p>			
<p>☐ Wrap-up around services regarding access to additional services including psychiatrists and other mental health professionals. MHC will meet to identify needed referrals.</p>	<p>1,2,3,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will document referral(s) provided to include referral information and follow-up on the referral</p>
<p>☐ Services are provided based on established C&L Competency Standards</p>	<p>1,2,3,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA. Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent</p>

SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Substance Abuse Services
Service Goal:	Minimize crisis situations and stabilize clients' substance use to maintain their participation in the medical care system.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care(at least 1 medical visit in each 6-month period) ☐ Improve viral load suppression rate ☐ A clinically significant reduction in level of substance use/abuse post (12) individual or group sessions

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert		FY 20/21 TOTAL	FY 19/20 TOTAL
Proposed Number of Clients	72	8	2	20	58	40		200	200
Proposed Number of Visits = Regardless of number of transactions or number of units	720	80	20	200	580	400		2000	2647
Proposed Number of Units = Transactions or 15 min encounters	4320	480	120	1200	3480	2400		12000	20271

Group Name and Description (must be HIV+ related)	Service Area of Service Delivery	Targeted Population	Open/ Closed	Expected Avg. Attend. per Session	Session Length (hours)	Sessions per Week	Group Duration	Outcome Measures
Circle of Truth	1,2,3,4,5	Co-ed	Open	10	1.5 hrs	1	On-going	<ul style="list-style-type: none"> • Medical visits • Viral loads • Substance use/abuse self-report and/or screening tool
Nuevo Amenecer		Spanish-Speaking	Open	6	1.5 hrs	1	On-going	
<p>The support group goal is to identify the irrational beliefs and to refute them. The irrational belief would then be substituted with a more rational or accurate beliefs, which should have an impact on the emotional response. Social and problem solving skills will also be used to enable clients to develop non-substance use habits in order to adhere to their HIV care. HIV prevention risk-reduction including condom use as related to substance use is also discussed.</p>								
Clean and Serene	6	Co-ed	Open	8	1.5 hrs	1	On-going	
This support group focuses on Cognitive Behavioral content								

<p>with an emphasis on practicing new coping skills in maintaining sobriety.</p> <p>Moving On</p> <p>This group targets those who have lived with HIV for a number of years and who have a history of and/or current struggles with substance use.</p>	5	Co-ed	Open	10	1.5 hrs	1	On-going	
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Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> Initial individual substance abuse assessment Client will meet with Substance Abuse Counselor (SAC) to complete initial assessment and reassessment. SAC will conduct eligibility for services along with screening for Third Party payor. 	1,2,3,4,5,6	3/1/2020-2/28/2021	<p>Client file will document initial substance abuse assessment and reassessment along with and other outcome tracking data per program standards and entered in ARIES.</p> <p>Client file will document statement of screening and eligibility.</p>
<ul style="list-style-type: none"> Development of treatment plan Client and SAC will meet to develop treatment plan 	1,2,3,4,5,6	3/1/2020-2/28/2021	<p>Client file will include initial and updated treatment plan and entered in ARIES.</p> <p>Treatment plan will be updated at least every 120 days.</p>
<ul style="list-style-type: none"> Individual counseling session Client will meet with SAC for individual session 	1,2,3,4,5,6	3/1/2020-2/28/2021	Client file will document session as case note and entered in ARIES.
<ul style="list-style-type: none"> Group counseling session SAC will convene weekly support group to discuss issues relevant to HIV/AIDS. <p>For individual attending group sessions only, file will include assessment, and treatment plan.</p>	1,2,3,4,5,6.	3/1/2020-2/28/2021	<p>Group counseling documentation will be maintained via sign-in sheets and entered in ARIES.</p> <p>For individual attending group sessions only, file will include assessment, and treatment plan.</p>
<ul style="list-style-type: none"> Case conferencing SAC will participate in case conferencing to coordinate services and address identified issues 	1,2,3,4,5,6.	3/1/2020-2/28/2021	Documentation of case conferencing will be kept in program binder.
<ul style="list-style-type: none"> Referral to other mental health professionals SAC will meet with client to identify needed referrals. 	1,2,3,4,5,6	3/1/2020-2/28/2021	Client file will document referral(s) provided to include referral information and follow-up on the referral
<ul style="list-style-type: none"> Services are provided based on established C&L Competency Standards 	1,2,3,4,5,6	3/1/2020-2/28/2021	Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training

			<p>Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services</p>
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SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	X Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Housing Services
Service Goal:	To provide shelter, on an emergency or temporary basis, to eligible clients throughout the TGA at risk for homelessness or with unstable housing to ensure that they have access to and/or remain in medical care.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care (at least 1 medical visit in each –month period) ☐ Improve viral suppression rate ☐ Improve stable housing rate

	SA1	SA2	SA3	SA4	SA5	SA6	FY	FY
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert	20/21	19/20
							TOTAL	TOTAL
Housing Case Management								
Proposed Number of Clients	0	0	0	5	60	0	65	65
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	60	735	0	795	430
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	490	5885	0	6375	6375

Emergency Housing	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert		FY 20/21 TOTAL	FY 19/20 TOTAL
Proposed Number of Clients	0	0	0	0	38	0		38	55
Proposed Number of Units (nights) = Transactions or 15 min encounters	0	0	0	0	1164	0		1164	3300

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>Service Delivery Element #1:</p> <ul style="list-style-type: none"> <i>Emergency housing assistance for a maximum of 90 nights (hotel/motel or rental assistance for up to 90 nights) per client will be provided to 38 eligible clients throughout the TGA based on current TGA and C&L standards.</i> 	<p>1,2,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will evidence housing intake and assessment activities, including comprehensive housing plan, eligibility screening, as well as insurance/third party payer. Client file will document HIV status, acknowledgement of Partner Services, proof of insurance, income and residency according to IEHPC standards.</p> <p>Client file will contain Consent for Services, ARIES consent (updated every three years), HIPAA Notification and Partner Services Acknowledgement form. Client file will contain housing assistance vouchers and proof of payment, housing applications, leases, etc.</p> <p>Emergency housing assistance will be documented in ARIES</p>

<p>Service Delivery Element #2:</p> <ul style="list-style-type: none"> ▪ <i>Housing case management/navigation will be provided to 65 difficult-to-place high housing acuity eligible clients based on current TGA and C&L standards</i> 	<p>1,2,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will evidence housing intake and assessment activities, including comprehensive housing plan, eligibility screening, navigation assessment, acuity level as well as insurance/third party payer. Client file will document HIV status, Acknowledgement of Partner Services, proof of insurance, income and residency according to IEHPC standards.</p> <p>Client file will contain Consent for Services, ARIES consent (updated every three years), HIPAA Notification and Partner Services Acknowledgement form. Client file will contain housing assistance vouchers and proof of payment, housing applications, leases, etc.</p> <p>Emergency housing assistance will be documented in ARIES</p>

SCOPE OF WORK – PART A	
USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE	
Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Food Services
Service Goal:	The overall goal of food services is to supplement eligible HIV/AIDS consumer’s financial ability to maintain continuous access to adequate caloric intake and balanced nutrition sufficient to maintain optimal health in the face of compromised health status due to HIV infection in the TGA.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention on care (at least 1 medical visit in each 6-month period) ☐ Improve viral load suppression rate

	SA1	SA2	SA3	SA4	SA5	SA6		FY	FY
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert		20/21	19/20
								TOTAL	TOTAL
Proposed Number of Clients	70	30	5	50	280	55		490	585
Proposed Number of Visits = Regardless of number of transactions or number of units	490	210	35	350	1960	385		3430	3418
Proposed Number of Units = Transactions or 15 min encounters	2870	1230	205	2050	11537	2255		20147	17906

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>☐ Food Vouchers</p> <p>Food assistance needs will be identified by staff during assessment/reassessment, which will be included in the Individual Care Plan (ICP). Eligibility will be determined according to current TGA eligibility guidelines.</p> <p>Eligible Clients will make appointment for picking up vouchers – whenever possible.</p> <p>Food vouchers will be distributed on a monthly or as needed to eligible clients not to exceed a maximum of six vouchers per month.</p> <p>Food vouchers will be kept in locked file cabinet in FAP’s Administration offices and logged out to program using FAP’s internal Food Voucher Request form.</p> <p>Food vouchers will be kept in locked file cabinet in FAP’s program sites and logged out to eligible clients using FAP’s internal Monthly Food Voucher Log.</p> <p>Current local limit: \$60 per client per month</p>	<p>1,2,3,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will evidence eligibility screening for Ryan White funds as well other party payers.</p> <p>Client file will document HIV status, proof of medical insurance, residence, and income according to IEHPC standards. Client file will contain Consent for Services; ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form.</p> <p>Client file will evidence need for food assistance. Client file will contain proof of food assistance received as client signature on copy of food vouchers.</p> <p>Client file will contain evidence of referral to other sources of food assistance, as applicable.</p>

<p>☐ Services are provided based on established C&L Competency Standards</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	<p>Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Medical Transportation Services
Service Goal:	To enhance clients' access to health care or support services using multiple forms of transportation throughout the TGA.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care (at least 1 medical visit in each 6-month period) ☐ Improve viral suppression rate

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert		FY 20/21 TOTAL	FY 19/20 TOTAL
Proposed Number of Clients	67	37	6	35	285	50		480	608
Proposed Number of Visits = Regardless of number of transactions or number of units	804	444	72	420	3420	600		5760	3917
Proposed Number of Units = Transactions or 15 min encounters	1913	1057	171	1000	8141	1428		13710	12170

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>Bus passes</p> <p>CM will determine client eligibility: HIV diagnosis, residency, income, purpose of trips. CM will document services ordered in client file.</p> <p>Staff will provide bus pass to client and will enter service provided on Transportation log</p> <p>Medical Transportation services will be provided to access services according to TGA guidelines</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	<p>Client file will document eligibility screening every six months and statement of need for transportation assistance.</p> <p>Transportation Log will evidence client signature acknowledging receipt of bus pass.</p> <p>Bus Pass assistance will be documented in ARIES.</p>
<p>Taxi service</p> <p>CM will determine client eligibility: HIV diagnosis, residency, income, purpose and date of trip. CM will document services ordered in client file.</p> <p>Staff will order taxi service; notify client of time and need to be ready on time. Staff will enter service provided on Taxi Services Binder</p> <p>Services and will be provided to access services according to TGA guidelines</p> <p>Staff will document trip point of origin, destination and reason for trip</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	<p>Client file will document eligibility screening and statement of need for urgent trip.</p> <p>Taxi Services Binder will include taxi request depicting point of origin and destination and statement of need for urgent trip.</p> <p>Services will be provided within the TGA.</p> <p>Taxi assistance will be documented in ARIES.</p>

<p>Gas Vouchers</p> <p>CM will determine client eligibility: HIV diagnosis, residency, income, purpose and date of trip. CM will document service provided in client file.</p> <p>Staff will log voucher disbursement in Gas Card Log</p> <p>Gas cards will be provided to access services according to TGA guidelines</p>	<p>1,2,3,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will document eligibility screening every six months and statement of need for transportation assistance.</p> <p>Transportation log will evidence client signature acknowledging receipt of gas vouchers.</p> <p>Gas Voucher assistance will be documented in ARIES.</p>
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SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Medical Nutrition Therapy
Service Goal:	Facilitate maintenance of nutritional health to improve health outcome or maintain positive health outcomes.
Service Health Outcomes:	<input type="checkbox"/> Improve retention in care (at least 1 medical visit in each 6-month period) <input type="checkbox"/> Improve viral suppression rate

	SA1	SA2	SA3	SA4	SA5	SA6		FY	FY
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert		20/21	19/20
								TOTAL	TOTAL
Proposed Number of Clients	10	0	0	5	20	5		40	75
Proposed Number of Visits = Regardless of number of transactions or number of units	50	0	0	25	100	50		225	605
Proposed Number of Units = Transactions or 15 min encounters	305	0	0	150	1000	150		1605	2450

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>☐ Intake/assessment of nutritional needs</p>	<p>1,4,5,6</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will evidence intake activities including screening for eligibility as well as insurance/third party payor. Eligibility certification and re-certification will be conducted every six months. Client file will document HIV status, proof of insurance, residence, and income according to IEHPC standards.</p> <p>Client file will document referral as appropriate.</p> <p>Client file will evidence assessment of nutritional needs signed and dated by Registered Dietician.</p> <p>Client file will contain Consent for Services, ARIES consent updated every three years,</p>

			Partner Services Acknowledgement form.
☐ Development of nutritional plan with the client within 30 days of the initial assessment and re-evaluation of plan (every six months).	1,4,5,6	3/1/2020- 2/28/2021	Client file will document individualized nutritional plan signed and dated by Registered Dietitian. Client file will document re-evaluation of the nutritional plan signed and dated by the Registered Dietitian every six months.
☐ Follow-up counseling with clients regarding medical nutritional recommendations, discuss barriers to implement recommendations and assess new nutritional needs as needed.	1,4,5,6	3/1/2020- 2/28/2021	Client file will document follow-up counseling and re-assessment as needed. Notes will document progress towards nutritional plan goals and barriers to implement recommendation and interventions to address these barriers as recommended.
☐ Provide nutrition group education to increase knowledge of healthy food choices and enhance strategies to accomplish nutritional goals, food/drug interactions and medications side effects associated with long-term pharmacotherapy.	1,4,5,6	3/1/2020- 2/28/2021	Group sign-in will be maintained in Nutrition Group binder at respective locations.
☐ Case conferencing with Medical Case Management (MCM) Staff and Primary Care Provider. Registered Dietitian will participate in case conference to discuss issues and problem-solve identified issues.	1,4,5,6	3/1/2020- 2/28/2021	Client file will reflect staff participation at case conference with MCM and Primary Care Provider, issues discussed and resolutions identified.
☐ Services are provided based on established C&L Competency Standards	1,4,5,6	3/1/2020- 2/28/2021	Staff education on FAP cultural competency plan as well as on other cultural competency topics is tracked

			<p>and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>
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SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Medical Case Management Services
Service Goal:	The goal of providing medical case management services is to ensure that those who are unable to self-manage their care, struggling with challenging barriers to care, marginally in care, and/or experiencing poor CD4/Viral load test results receive intense care coordinating assistance to support participation in HIV medical care. MCM services are the best delivered when co-located in facilities that provide HIV/primary medical care.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care (at least 1 medical visit in each 6-month period) ☐ Improve viral suppression rate

	SA1	SA2	SA3	SA4	SA5	SA6		FY	FY
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert		20/21	19/20
								TOTAL	TOTAL
Proposed Number of Clients	10	5	0	5	15	5		40	70
Proposed Number of Visits = Regardless of number of transactions or number of units	80	40	0	40	120	40		320	740
Proposed Number of Units = Transactions or 15 min encounters	620	310	0	310	930	310		2480	3684

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> ☐ Screening, Initial and on-going assessment of needs <i>*Medical Case Management will target clients who experience barriers in self-managing their HIV medical care; poor CD4 and viral load count; and do not have access to medical case management thru their medical homes, thus needing intense care coordination</i> 	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will evidence intake activities including screening for eligibility as well as insurance/third party payor. Eligibility certification will be conducted every six months. Client file will evidence initial and on-going assessment of needs.
<ul style="list-style-type: none"> ☐ Development of comprehensive, individualized care plan with the client and re-evaluation of plan (every six months). ☐ Rate areas of medical case management needs to measure acuity level. 	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will document individualized comprehensive care plan and acuity level that are to be re-evaluated every six months.
<ul style="list-style-type: none"> ☐ Client monitoring to assess the efficacy of plan, periodic re-evaluation and adaptation of the plan as necessary (6 months). MCM will meet with client to assess progress and re-define objectives as needed. 	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will document in ARIES case note contacts to monitor progress and re-evaluation of plan every six months.

<p>☐ Provide group treatment adherence education, e.g. HIV health numeracy in respect to viral load.</p>	1,2,4,5,6	3/1/2020- 2/28/2021	Group sign-in sheets will be kept in Treatment Adherence Group binder at respective FAP location.
<p>☐ Client specific advocacy and/or review of utilization of services, coordination and follow-up of medical treatments</p>	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will document specific advocacy, coordination and follow-up of services and medical treatments.
<p>☐ Provide or refer clients for advice, support, counseling on topics surrounding HIV disease, treatments, medications, treatment adherence education, caregiver bereavement support, dietary/nutrition advice and education, and terms and information needed by client to effectively participate in his/her medical care.</p>	1,2,4,5,6	3/1/2020- 2/28/2021	<p>Client file will reflect service provided to include advice and counseling regarding treatment adherence, nutrition, and support to effectively participate in the system of care.</p> <p>As applicable, client file will reflect coordination of services with client's local managed-care plan.</p> <p>Performance Measures:</p> <ol style="list-style-type: none"> 1) Care Plan 2) Gap in HIV medical visits
<p>☐ Services are provided based on established C&L Competency Standards</p>	1,2,4,5,6	3/1/2020- 2/28/2021	<p>Staff education on FAP cultural competency plan as well as on other cultural competency topics is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Case Management Services (Non-Medical)
Service Goal:	Facilitate linkage and retention in care through the provision of guidance and assistance with service information and referrals.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care (at least 1 medical visit in each 6-month period) ☐ Improve viral suppression rate

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert		FY 20/21 TOTAL	FY 19/20 TOTAL
Proposed Number of Clients	80	10	5	40	95	50		280	309
Proposed Number of Visits = Regardless of number of transactions or number of units	800	100	50	400	950	500		2800	6000
Proposed Number of Units = Transactions or 15 min encounters	5300	663	331	2650	6294	3312		18550	22390

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>☐ Intake/assessment of needs</p> <p><i>*Non-Medical Case Management collaborates closely AIDS Healthcare Foundation, Veterans Hospital Loma Linda; Hesperia, Ontario and San Bernardino SBDPH clinics; Riverside University Health System Riverside and Perris clinics; and local medical managed-care systems and private medical practices.</i></p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	<p>Client file will evidence intake activities including screening for eligibility as well as insurance/third party payor. Client file will document HIV status, proof of insurance, residence, and income according to IEHPC standards.</p> <p>Client file will evidence assessment of needs.</p> <p>Client file will contain Consent for Services, ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form.</p>
<p>☐ Initial and ongoing assessment of needs.</p> <p>Case Manager (CM) will complete initial Acuity Level based on identified needs and assess new acuity level as needed.</p>	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will document assessment of needs

			Client file will document assessment of initial acuity level and ongoing acuity level using the Client Acuity tool.
☐ Development of initial care plan and on-going reassessment of care plan	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will document initial care plan as well as reassessment of the care plan.
☐ Provide education, advice assistance in obtaining medical, social, community, legal, financial (e.g. benefits counseling), and other services. CM will provide ct with client to provide education and assistance as identified from need assessment.	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will document in progress note contacts to provide education and advice on accessing medical, social, community, legal, benefits counseling, treatment adherence counseling and other services. Client file will document entry of referrals provided and their outcomes in ARIES. Case Manager will track health outcomes (viral load and CD4 as well as access to medical care services data.
☐ Discuss budgeting with clients to maintain access to necessary services CM will meet with client to complete Budgeting form and discuss budgeting issues as related to maintaining access to necessary services.	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client will include Budgeting Form. Client file will document in progress note discussion regarding budgeting in order to maintain access to necessary services.
☐ Case conferencing with Medical Case Management (MCM) and other departments on behalf of the client. CM will participate in case conference to discuss issues and resolution to problem-solve identified issues.	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will reflect staff participation at case conference with MCM, issues discussed and resolutions identified. As applicable, client file will reflect coordination of services with Market Plan medical providers.
☐ Eligibility worker will collaborate with case manager to ensure eligibility certification and re-certification every six months.	1,2,3,4,5,6	3/1/2020- 2/28/2021	Client file will evidence documents supporting eligibility for services

			according to the Inland Empire HIV Planning Council Standards.
☐ Services are provided based on established C&L Competency Standards	1,2,3,4,5,6	3/1/2020- 2/28/2021	<p>Staff education on FAP cultural competency plan as well as on other cultural competency topics is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

Contract Number:

Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Psychosocial Support Services
Service Goal:	To provide psychosocial support services to person living with HIV/AIDS in the TGA in order to maintain them in the HIV system of care.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care (at least 1 medical visit in each 6-month period) ☐ Improve viral suppression rate

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert		FY 20/21 TOTAL	FY 19/20 TOTAL
Proposed Number of Clients	0	0	0	5	55	0		60	55
Proposed Number of Visits = Regardless of number of transactions or number of units	0	0	0	60	740	0		800	770
Proposed Number of Units = Transactions or 15 min encounters	0	0	0	463	5130	0		5593	5093

Group Name and Description (must be HIV+ related)	Service Area of Service Delivery	Targeted Population	Open/ Closed	Expected Avg. Attend. per Session	Session Length (hours)	Sessions per Week	Group Duration	Outcome Measures
Group Name #1 Abriendo Caminos- Group provides a forum to share to learn HIV self-management skills and healthy living and support each other.	4,5	Spanish-speaking	Open	10	1.5 hr	1	On-going	Medical visits Reduction in Unmet Need

<p>Group Name #2 Men Empowering Men -Group provides a forum to share their HIV experiences and support each other.</p>	<p>4,5</p>	<p>Co-ed English</p>	<p>closed</p>	<p>10</p>	<p>1.5</p>	<p>1</p>	<p>On-going</p>	<p>Viral loads</p>
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Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
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<p>☐ Initial individual needs assessment</p> <p>Psychosocial Case Manager (CM) will meet with client to complete initial assessment and reassessment of needs.</p>	4,5,6	3/1/2020- 2/28/2021	<p>Client file will evidence intake activities to include screening for eligibility as well as insurance/third party payer. Client file will document HIV status, proof of insurance, residence, and income according to IEHPC standards.</p> <p>Client file will evidence assessment of needs.</p> <p>Client file will contain Consent for Services, ARIES consent updated every three years, HIPAA Notification and Partner Services Acknowledgement form.</p>
<p>☐ Individual support/counseling session</p> <p>Psychosocial CM will meet with client to provide individual session.</p>	4,5,6	3/1/2020- 2/28/2021	<p>Client file will evidence in progress note individual support session received.</p>
<p>☐ Coordination with Medical Case Manager, if applicable</p>	4,5,6	3/1/2020- 2/28/2021	<p>Client file will document linkage with Medical Case Management as applicable.</p> <p>Client file will document in progress note coordination with Medical Case Management.</p>

<p>☐ Group support/counseling session</p> <p>Psychosocial CM will convene weekly support group.</p> <p>Chronic disease self-management based on evaluated Stanford University Chronic Disease Self-Management curriculum will be provided two times per year.</p>	<p>4,5</p>	<p>3/1/2020- 2/28/2021</p>	<p>Client file will reflect in progress note participation in support group.</p> <p>Group sign-in sheets will be maintained.</p>
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<p>☐ Case conferencing session</p> <p>Psychosocial CM will participate in case conference to coordinate services, discuss issues and resolution to identified issues</p>	4,5,6	3/1/2020- 2/28/2021	Client file will reflect staff participation at case conference with MCM, issues discussed and resolutions identified.
<p>☐ Referral to Mental Health Professionals (MHP)</p> <p>Psychosocial CM will provide MHP referrals as needed.</p>	4,5,6	3/1/2020- 2/28/2021	Client file will evidence referral to MHP. Referrals along with outcome will be entered in ARIES.
<p>☐ Services are provided based on established C&L Competency Standards</p>	4,5,6	3/1/2020- 2/28/2021	<p>Staff education on FAP cultural competency plan as well as on other cultural competency topics is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document client preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Early Intervention Services Part A
Service Goal:	Quickly link HIV infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintenance in medical care. Decreasing the time between acquisition of HIV and entry into care and decrease instances of out of care facility access to medications, decrease transmission rate, and improve health outcomes.
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ If RW-funded test: maintain 1.1% positivity rate or higher (targeted testing) ☐ Link newly diagnosed HIV+ medical care in 30 days or less ☐ Improve retention in care (at least 1 medical visit in each 6 month period) ☐ Improve viral suppression rate

	SA1	SA2	SA3	SA4	SA5	SA6		FY	FY
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert		20/21	19/20
								TOTAL	TOTAL
Proposed Number of Clients	197	88	0	20	250	20		575	575
Proposed Number of Visits = Regardless of number of transactions or number of units	190	310	0	20	760	20		1300	1600

Proposed Number of Units = Transactions or 15 min encounters	1900	1450	0	20	2310	20		5700	8700
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Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
☐ One-on-one, in-depth encounters	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will evidence encounters in case notes entered in ARIES and on outreach logs
☐ Coordination with local HIV Prevention Programs	1,2,4,5,6	3/1/2020- 2/28/2021	FAP maintain collaboration with Riverside and San Bernardino DPH and other local prevention programs to coordinate outreach activities. Documentation of outreach activities and attendance to prevention meetings is kept in program binder.
☐ Identify and problem-solve barriers to care	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will evidence in case note entered in ARIES identification of barriers to care and plan to problem-solve such barriers.
☐ Referrals to testing, medical care, and support services	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will evidence referrals to medical care and support services via the Referral Tracking Plan. Referrals to medical and support services along with

			their outcome will be documented in ARIES. Referrals to testing will be documented in outreach log and sign-in sheet.
☐ HIV Testing and Counseling	1,2,4,5,6	3/1/2020- 2/28/2021	HIV Testing and counseling documentation will be delivered and documentation maintained following approved HIV testing and counseling quality assurance. HIV Testing and Counseling will be documented in ACE.
☐ Utilize Navigation approach to reconnect those that have fallen out of care	1,2,4,5,6	3/1/2020- 2/28/2021	FAP follow-up/no contact protocol includes mail, community, home visit, and phone contact. Client file will evidence attempts to contact, education and support provided to address barriers to care. Attempts and contact with client will be documented in ARIES.
☐ Establish and maintain formal linkages with traditional (prisons, homeless shelters, treatment centers, etc) and non-traditional (faith-based organizations, community centers, hospitals, etc.) entry points	1,2,4,5,6	3/1/2020- 2/28/2021	Memoranda of Understanding (MOU) are kept at Administration. Staff maintain a List of Collaborators (traditional and non-traditional) which depicts the name of the agency collaborating, the target population, the type and frequency of outreach activity to be provided at the site.
☐ Provide education/information regarding availability of testing and HIV care services to HIV+ those affected by HIV, and caregivers. Activities that are exclusively HIV prevention education are prohibited.	1,2,4,5,6	3/1/2020- 2/28/2021	Client file will evidence education of the HIV system of care in case note entered in ARIES. Sign-in sheets document location as well as attendees information for outreach activities.

<p>Utilize standardized, required documentation to record encounters, progress</p>	1,2,4,5,6	3/1/2020- 2/28/2021	<p>Client will file evidence use of standardized, required documentation to include Bridge/EIS Consent form, Enrollment form and Progress report form among others.</p>
<p>Maintain update, quantifiable, required documentation to accommodate reporting and evaluation.</p>	1,2,4,5,6	3/1/2020- 2/28/2021	<p>Encounters are documented in ARIES. Referrals and their outcome are documented in ARIES. Outreach activities are documented in sign-in sheets and outreach logs and entered in the ARIES Anonymous Contact dashboard. Case Manager will track health outcomes (viral load and CD4 as well as access to medical care services data.</p>
<p>Eligibility worker will collaborate with Early Intervention case manager to conduct eligibility certification and re-certification every six months.</p>	1,2,4,5,6	3/1/2020- 2/28/2021	<p>Client file will evidence documents supporting eligibility for services according to the Inland Empire HIV Planning Council Standards.</p>
<p>Services are provided based on established C&L Competency Standards</p>	1,2,4,5,6	3/1/2020- 2/28/2021	<p>Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as well as any other pertinent information in order to provide culturally and linguistically competent services.</p>

SCOPE OF WORK – PART A

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDS Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Emergency Financial Assistance
Service Goal:	To enable HIV service clients at risk of loss of utility services to remain connected, thus allowing them to maintain a stable living environment thereby improving quality of life and clinical health outcomes
Service Health Outcomes:	<ul style="list-style-type: none"> ☐ Improve retention in care (at least 1 medical visit in each –month period) ☐ Improve viral suppression rate

Emergency Financial Assistance

	SA1	SA2	SA3	SA4	SA5	SA6	FY	FY
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert	20/21	19/20
							TOTAL	TOTAL

Proposed Number of Clients	5	0	0	7	15	10	37	7
Proposed Number of Units (nights) = Transactions or 15 min encounters	5	0	0	7	15	10	37	7

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<p>Service Delivery Element #1:</p> <ul style="list-style-type: none"> ▣ <i>Emergency Financial Assistance (EFA) will be provided to 15 eligible clients throughout the TGA based on current TGA and C&L standards. EFA will provide payment of a <u>maximum</u> of three (3) consecutive months of utilities to assist the RWHAP client with an emergent need for paying essential utilities.</i> ▣ <u>Direct Payment to client is not permitted</u> ▣ <u>Assistance for telephone is not permitted</u> ▣ <u>(IEHPC EFA Standards of 11-17-17)</u> 	<p>1,4,5,6</p>	<p>03/01/2020- 2/28/2021</p>	<p>Client file will evidence of utility assistance requested along with all pertinent supportive documentation and proof of payment to utility company or authorized third party billing entity. Client will also include eligibility screening and assessment for EFA according to IEHPC standards of Care, as well as insurance/third party payer. Client file will document HIV status, acknowledgement of Partner Services, proof of insurance, income and residency according to IEHPC standards.</p> <p>Client file will contain Consent for Services, ARIES consent (updated every three years), HIPAA Notification and Partner Services Acknowledgement form.</p> <p>Emergency Financial Assistance will be documented in ARIES as client/transaction</p>

CARES Act Award - Scope of Work

Use Separate Scope of Work for Each Proposed Grant and Service

Contract Number:	
Contractor:	Foothill AIDS Project
Grant and Period:	X CARES Act Fund Contract 4/1/2020 – 02/28/2021
Service Category:	Early Intervention Services – <i>Prevent</i>
Service Goal:	To prevent or minimize the impact of COVID 19 on RWHAP clients
Service Outcome:	<ul style="list-style-type: none"> • Administer countermeasures to reduce the risk of COVID 19 for people with HIV • Improve access to mitigating services related to COVID 19

	SA1 West Riv	SA2 Mid Riv	SA3 East Riv	SA4 San B West	SA5 San B East	SA6 San B Desert	FY 20/21 Total
Proposed Number of Clients	60	10	15	60	300	90	535
Proposed Number of Visits = Regardless of number of transactions or number Units	60	10	15	60	300	90	535
Proposed Number of Units = Transactions or 15 mins encounters	120	20	30	120	600	180	1070

Planned Service Delivery and Implementation Activities	Service Area	Process Outcomes
To educate clients on the availability of FAP’s interactive website in order to access reliable sources of information related to COVID 19	1,2,3,4,5,6	4/1/2020 – 3/31/2021 Staff will document educating clients on links available on FAP website in ARIES

CARES Act Award - Scope of Work

Use Separate Scope of Work for Each Proposed Grant and Service

Contract Number:	
Contractor:	Foothill AIDS Project
Grant and Period:	X CARES Act Fund Contract 4/1/2020 – 02/28/2021
Service Category:	Early Intervention Services - <i>Prepare</i>
Service Goal:	To enhance readiness, training and services to respond to COVID-19 for people with HIV
Service Outcome:	Improve Foothill AIDS Project infrastructure to respond to COVID 19

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
To purchase equipment such as laptop, desktop, printers, and cost of equipment to enhance remote telehealth services	1,2,3,4,5,6	4/1/2020 – 02/28/2021	Invoice of equipment purchased and paid cost of other equipment will be submitted to Ryan White grantee.

CARES Act Award - Scope of Work

Use Separate Scope of Work for Each Proposed Grant and Service

Contract Number:	
Contractor:	Foothill AIDS Project
Grant and Period:	X CARES Act Fund Contract 4/1/2020 – 02/28/2021
Service Category:	Early Intervention Services - <i>Respond</i>
Service Goal:	To enhance readiness, training and services to respond to COVID-19 for People with HIV
Service Outcome:	Improve Foothill AIDS Project infrastructure to respond to COVID 19

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
To provide Personal Protective Equipment (PPE) to staff to reduce the potential spread of COVID 19	1,2,3,4,5,6	4/1/2020 – 02/28/2021	Invoice will be submitted to Ryan White grantee.
To provide dis-infecting activities to include contracting with professional cleaning company and purchase of EPA grade cleaning supplies	1,2,3,4,5,6	4/1/2020 – 02/28/2021	Service will be provided at all FAP locations. Invoice will be submitted to Ryan White grantee
To provide financial accounting training for Program Income and Assistance on COVID 19 Response and Action Plan for the response.	1,2,3,4,5,6	4/1/2020 – 02/28/2021	Training log will document provision of training. Invoice will be submitted to Ryan White grantee
To provide COVID 19 kits to include facemasks, sanitizer, get etc.. to at least 500 clients for 2 months for essential business purposes such medical appointments, trips to pharmacy, grocery store <ul style="list-style-type: none"> Staff will distribute kits to clients when coming to services at FAP 	1,2,3,4,5,6	4/1/2020 – 02/28/2021	Staff will document in ARIES distribution of COVID 19 kits to clients

SCOPE OF WORK – MAI

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED GRANT AND SERVICE

Contract Number:	
Contractor:	Foothill AIDs Project
Grant & Period:	Part A Contract March 1, 2020 – February 28, 2021
Service Category:	Early Intervention Services (MAI)
Service Goal:	Quickly link HIV African-American and Hispanic/Latino infected individuals to testing services, core medical services, and support services necessary to support treatment adherence and maintenance in medical care. Decreasing the time between acquisition of HIV and entry into care will facilitate access to medications, decrease transmission rate, and improve health outcomes.
Service Health Outcomes:	<ul style="list-style-type: none"> • If RW-funded test: maintain 1.1% positivity rate or higher (targeted testing) • Link newly diagnosed HIV+ medical care in 30 days or less • Improve retention in care (at least 1 medical visit in each 6 month period) • Improve viral suppression rate

Black/African-American	SA1	SA2	SA3	SA4	SA5	SA6	FY 20/21	FY	
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert			TOTAL
Number of Clients	0	0	0	10	130	10		150	300
Number of Visits = Regardless of number of transactions or number of units	0	0	0	50	300	50		400	750
Number of Units = Transactions or 15 min encounters	0	0	0	50	1400	50		1500	3600

Hispanic/Latino	SA1	SA2	SA3	SA4	SA5	SA6	FY 20/21	FY	
	West Riv	Mid Riv	East Riv	San B West	San B East	San B Desert			TOTAL
Number of Clients	0	0	0	25	250	25		300	540
Number of Visits = Regardless of number of transactions or number of units	0	0	0	25	500	25		550	1080
Number of Units	0	0	0	100	3200	100		3400	5230

= Transactions or 15 min encounters										
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TOTAL MAI (sum of two tables above)										
	SA1	SA2	SA3	SA4	SA5	San	SA6	San	FY 20/21	FY 19/20
	West Riv	Mid Riv	East Riv	San B West	B East		B Desert		TOTAL	TOTAL

Number of Clients	0	0	0	35	380	35			450	840
Number of Visits = Regardless of number of transactions or number of units	0	0	0	75	800	75			950	1830
Number of Units = Transactions or 15 min encounters	0	0	0	150	5100	150			5 400	8830

Planned Service Delivery and Implementation Activities	Service Area	Timeline	Process Outcomes
<ul style="list-style-type: none"> One-on-one, in-depth encounters 	4,5,6	3/1/2020 -2/28/2021	Client file will evidence encounters in case notes entered in ARIES and on outreach logs
<ul style="list-style-type: none"> Coordination with local HIV Prevention Programs 	4,5,6	3/1/2020 -2/28/2021	FAP maintain collaboration with Riverside and San Bernardino DPH and other local prevention

			programs to coordinate outreach activities. Documentation of outreach activities and attendance to prevention meetings is kept in program binder and entered in the ARIES ACE dashboard.
<ul style="list-style-type: none"> Identify and problem-solve barriers to care 	4,5,6	3/1/2020 -2/28/2021	Client file will evidence in case note entered in ARIES identification of barriers to care and plan to problem-solve such barriers.
<ul style="list-style-type: none"> Referrals to testing, medical care, and support services 	4,5,6	3/1/2020 -2/28/2021	Client file will evidence referrals to medical care and support services via the Referral Tracking Plan. Referrals to medical and support services along with their outcome will be documented in ARIES. Referrals to testing will be documented in outreach log and sign-in sheet.
<ul style="list-style-type: none"> Utilize the Navigation approach to reconnect those that have fallen out of care 	4,5,6	3/1/2020 -2/28/2021	FAP follow-up/no contact protocol includes mail, community, home visit, and phone contact. Client file will evidence attempts to contact, education and support provided to address barriers to care. Attempts and contact with client will be documented in ARIES.
<ul style="list-style-type: none"> Establish and maintain formal linkages with traditional (prisons, homeless shelters, treatment centers, etc.) and non-traditional (faith-based organizations, community centers, hospitals, etc.) entry points 	4,5,6	3/1/2020 -2/28/2021	Memoranda of Understanding (MOU) are kept at Administration. Staff maintain a List of Collaborators (traditional and non-traditional) which depicts the name of the agency collaborating, the target population, the type and frequency of outreach activity to be provided at the site.

<ul style="list-style-type: none"> Provide education/information regarding availability of testing and HIV care services to HIV+ those affected by HIV, and caregivers. Activities that are exclusively HIV prevention education are prohibited. 	4,5,6	3/1/2020 -2/28/2021	<p>Client file will evidence education of the HIV system of care in case note entered in ARIES. Sign-in sheets document location as well as attendees information for outreach activities.</p> <p>HIV testing and counseling activities will be documented in individual records including test result.</p>
<ul style="list-style-type: none"> Utilize standardized, required documentation to record encounters, progress 	4,5,6	3/1/2020 -2/28/2021	<p>Client will file evidence use of standardized, required documentation to include Bridge/EIS Consent form, Enrollment form and Progress report form among others.</p>
<ul style="list-style-type: none"> Maintain update, quantifiable, required documentation to accommodate reporting and evaluation. 	4,5,6	3/1/2020 -2/28/2021	<p>Encounters are documented in ARIES. Referrals and their outcome are documented in ARIES. Outreach activities are documented in sign-in sheets and outreach logs.</p>
<ul style="list-style-type: none"> If MAI-funded, develop and implement specific evidence-based activities proven effective for African-American and Hispanic populations 	4,5,6	3/1/2020 -2/28/2021	<p>FAP uses Targeted Outreach to identify targeted African-American and Hispanic populations.</p>
<ul style="list-style-type: none"> Eligibility worker will collaborate with EIS case manager to conduct eligibility certification and re-certification every six months. 	4,5,6	3/1/2020 -2/28/2021	<p>Client file will evidence documents supporting eligibility for services according to the Inland Empire HIV Planning Council Standards.</p>
<ul style="list-style-type: none"> Services are provided based on established C&L Competency Standards 	4,5,6	3/1/2020 -2/28/2021	<p>Staff education on FAP cultural competency plan as well as other cultural competency trainings is tracked and documented in agency Training Binder. Staff providing direct services to clients should be culturally and linguistically competent, aware and appreciative of the needs of PLWHA.</p> <p>Client file will document preferred language as</p>

			well as any other pertinent information in order to provide culturally and linguistically competent services.
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RYAN WHITE PART A/MAI PROGRAM BUDGET AND ALLOCATION PLAN

AGENCY NAME: Foothill AIDS Project

Fiscal Year March 1, 2020-February 28, 2021

SERVICE: Early Intervention Services

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Personnel			
EIS Case Manager Per Year Allocated			
VACANT x 1.00 FTE = \$ 45,000 (\$45,000/12 FTE x 5.4 months) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services.	\$0.00	\$20,250.00	\$20,250.00
EIS Case Manager Per Year Allocated			
D. Flye x 1.00 FTE = \$ 47,000 25% (0.75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.	\$0.00	\$11,750.00	\$11,750.00
EIS Case Manager Per Year Allocated			
R. Middleton x 1.00 FTE = \$ 43,000 25% (0.75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.	\$0.00	\$10,750.00	\$10,750.00
EIS Case Manager Per Year Allocated			
Vacant x 1.00 FTE = \$ 43,000 10%	\$38,700.00	\$4,300.00	\$43,000.00

(0.90 allocated to Private Programs) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services.			
EIS Case Manager	Per Year	Allocated	
M. Gomez x 1.00 FTE =	\$ 43,000	25%	
(0.75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.	\$0.00	\$10,750.00	\$10,750.00
Director of Programs	Per Year	Allocated	
M. Francois x 1.00 FTE =	\$ 83,288	10%	
Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Responsible for identifying community partners that provide services to populations that may have less access to care such as i.e. prisons, homeless shelters, etc. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Service Categories not related to this service category. Salary is split between multiply other RW Service Categories not related to this service category.	\$0.00	\$8,328.80	\$8,328.80
Total Fringe Benefits at a rate of:	21%	\$8,127.00	\$13,887.05
TOTAL PERSONNEL		\$46,827.00	\$80,015.85
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$600.00	\$0.00	\$600.00
		\$600.00	\$600.00

<p>Program Supplies: Cost of program supplies such as educational materials, workbooks for client utilizations during treatment sessions, reference materials and other related program specific supplies. Based on prior year expenses and FTE allocation, estimated cost per year of:</p>	\$421.00	\$121.00	\$300.00	\$421.00
<p>Medical Supplies: HIV Testing kits 1 cases 100 tests per case (approx. \$500/ea.). Lancets 5 bxs, 100 per box (approx. \$20 ea.) 1 control boxes, (\$25.00/ea.) =</p>	\$625.00	\$0.00	\$625.00	\$625.00
<p>Postage / Medical Waste Pick-Up: Cost of mailing registration packets to clients and other documents on behalf of clients enrolled in program. Bio waste pick up from testing supplies. Based on prior year direct expenditures and/or FTE, estimated cost:</p>	\$500.00	\$0.00	\$500.00	\$500.00
<p>Consultant: Service to oversee the implementation of counseling and testing activities which will be provided by Dr. Ricks at a rate of \$3,000 per month x 12 months for a total of \$36,000. Of this amount, approximately 25% is allocated to this program. Total budgeted amount equals:</p>	\$9,000.00	\$0.00	\$9,000.00	\$9,000.00
<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$250.00	\$0.00	\$250.00	\$250.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost:</p>	\$2,462.00	\$0.00	\$2,462.00	\$2,462.00
<p>Training: Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.</p>	\$450.00	\$0.00	\$450.00	\$450.00

Postage: Mail appointment reminder cards, referrals and/or certification eligibility.	\$21.08	\$0.00	\$21.08	\$21.08
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:	\$900.00	\$0.00	\$900.00	\$900.00
Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:	\$10,000.00	\$0.00	\$10,000.00	\$10,000.00
Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:	\$1,200.00	\$0.00	\$1,200.00	\$1,200.00
Total Other		\$121.00	\$26,308.08	\$26,429.08
SUBTOTAL (Total Personnel and Total Other)		\$46,948.00	\$106,323.93	\$153,271.93
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).		\$150.00	\$11,379.07	\$11,529.07
TOTAL BUDGET (Subtotal & Administration)		\$47,098.00	\$117,703.00	\$164,801.00

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 5,700
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$20.65
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE: Emergency Financial Assistance

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Personnel			
Emergency Financial Assistance			
Per Year			
Allocated			
7			
100%			
Emergency payments to assist clients in both clients with utilities for one time or short term payments no more than 3 months (water, electric and gas)	\$0.00	\$7,000.00	\$7,000.00
TOTAL OTHER	\$0.00	\$7,000.00	\$7,000.00
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$0.00	\$0.00	\$0.00
TOTAL BUDGET (Subtotal & Administration)	\$0.00	\$7,000.00	\$7,000.00

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 7
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$1,000.00
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE:
FOOD

	A	B	C						
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost						
Personnel									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Client Eligibility Worker</td> <td style="width: 20%; text-align: right;">Per Year</td> <td style="width: 20%; text-align: right;">Allocated</td> </tr> <tr> <td>D. Castillo x 1.00 FTE =</td> <td style="text-align: right;">\$ 42,000</td> <td style="text-align: right;">10%</td> </tr> </table> <p>Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category.</p>	Client Eligibility Worker	Per Year	Allocated	D. Castillo x 1.00 FTE =	\$ 42,000	10%	\$0.00	\$4,200.00	\$4,200.00
Client Eligibility Worker	Per Year	Allocated							
D. Castillo x 1.00 FTE =	\$ 42,000	10%							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Program Support</td> <td style="width: 20%; text-align: right;">Per Year</td> <td style="width: 20%; text-align: right;">Allocated</td> </tr> <tr> <td>J. Romero x 1.00 FTE =</td> <td style="text-align: right;">\$ 43,500</td> <td style="text-align: right;">20%</td> </tr> </table> <p>15 FTE allocated to Case Management & .65 FTE allocated Private Programs) process client food cards for distribution to ensure eligibility according to different funding sources, disburse payments and communicate with Case Managers on behalf of eligibility. Salary is split between other RW Part A Service Categories.</p>	Program Support	Per Year	Allocated	J. Romero x 1.00 FTE =	\$ 43,500	20%	\$28,275.00	\$8,700.00	\$36,975.00
Program Support	Per Year	Allocated							
J. Romero x 1.00 FTE =	\$ 43,500	20%							

Program Support	Per Year	Allocated			
A. Cespedes x 1.00 FTE =	\$ 47,133	22%			
10 FTE allocated to FOOD & .68 FTE allocated to Private Programs) process client food cards for distribution to ensure eligibility according to different funding sources, disburse payments and communicate with Case Managers on behalf of eligibility. Salary is split between other RW Part A Service Categories.			\$32,050.45	\$10,369.26	\$42,419.71
Total Fringe Benefits at a rate of:	22.5%		\$13,573.23	\$5,235.58	\$18,808.81
TOTAL PERSONNEL			\$73,898.68	\$28,504.84	\$102,403.52
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)					
Food Assistance: Monthly provision of 23,520 cards @ \$10, in Staters Bros. food cards with a minimum 326 unduplicated clients residing in Service Areas 1, 2, 4, 5, & 6 to supplement their financial ability to maintain continuous access to adequate caloric intake and balance nutrition sufficient to maintain optimal health in the face of compromised health status due to HIV infection.		\$287,200.00	\$52,000.00	\$235,200.00	\$287,200.00
Total Other			\$52,000.00	\$235,200.00	\$287,200.00
SUBTOTAL (Total Personnel and Total Other)			\$125,898.68	\$263,704.84	\$389,603.52
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).			\$11,700.00	\$28,743.16	\$40,443.16
TOTAL BUDGET (Subtotal & Administration)			\$137,598.68	\$292,448.00	\$430,046.68

- Total Number of Ryan White Units to be Provided for this Service Category: 23,520**
- Total Ryan White Budget (Food Assistance) Divided by Total RW Units to be Provided: \$10.00**
- Total Ryan White Budget (Personnel) Divided by Total RW Units to be Provided: \$ 1.21**
- Total Ryan White Budget (Administration) Divided by Total RW Units to be Provided: \$ 1.22**
- Total Ryan White Budget Divided by Total RW Units to be Provided: \$ 12.43**
(This is your agency's RW cost for care per unit)

<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$225.00	\$0.00	\$225.00	\$225.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$2,300 per year.</p>	\$2,000.00	\$0.00	\$2,000.00	\$2,000.00
<p>Training: Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.</p>	\$800.00	\$0.00	\$800.00	\$800.00
<p>Postage: Mail appointment reminder cards, referrals and/or certification eligibility. Housing vouchers payments</p>	\$615.00	\$0.00	\$615.00	\$615.00
<p>Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$460.00	\$0.00	\$460.00	\$460.00
<p>Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$19,560.00	\$560.00	\$19,000.00	\$19,560.00
<p>Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$2,000.00	\$0.00	\$2,000.00	\$2,000.00
Total Other		\$158,560.00	\$100,100.00	\$258,660.00
SUBTOTAL (Total Personnel and Total Other)		\$511,553.30	\$151,283.00	\$662,836.30

AGENCY NAME: Foothill AIDS Project

SERVICE: Housing

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Personnel			
<p>Housing Case Manager Riverside Per Year Allocated</p> <p>J. Millan x 1.00 FTE = \$ 45,000 0%</p> <p>Bilingual Responsible for conducting client intakes, assessment of housing needs, and income assessment and verification; developing a housing plan to meet identified needs; monitoring client progress. Assists clients with applications for housing related services, including emergency housing, short-term, utilities, and mortgage housing assistance, and permanent housing placement and other supportive services to remove barriers for stable housing. Refers clients to medical services, assists clients to obtain public benefits, and work training programs and employment. Ensures applications are complete and in compliance with grants requirement.</p> <p>Assists clients with applications and paperwork for other government assistance programs. Advocates for clients with hotel/motel managers, and property owners throughout Riverside to promote effective relationships and housing stability. Conducts monthly, quarterly follow ups with clients including home visits as needed.</p>	\$45,000.00	\$0.00	\$45,000.00
<p>Housing Case Manager San Bernardino Per Year Allocated</p> <p>K. Biling x 1.00 FTE = \$ 42,980 0%</p> <p>Responsible for conducting client intakes, assessment of housing needs, and income assessment and verification; developing a housing plan to meet identified needs; monitoring client progress. Assists clients with applications for housing related services, including emergency housing, short-term, utilities, and mortgage housing assistance, and permanent housing placement and other supportive services to remove barriers for stable housing. Refers clients to medical services, assists clients to obtain public benefits, and work training programs and employment. Ensures applications are complete and in compliance with grants requirement.</p> <p>Assists clients with applications and paperwork for other government assistance programs. Advocates for clients with hotel/motel managers, and property owners throughout San Bernardino and High Desert to promote effective relationships and housing stability. Conducts monthly, quarterly follow ups with clients including home visits as needed.</p>	\$42,980.00	\$0.00	\$42,980.00

Housing Case Manager San Bernardino	Per Year	Allocated			
S. Aceves x 1.00 FTE = Bilingual Responsible for conducting client intakes, assessment of housing needs, and income assessment and verification; developing a housing plan to meet identified needs; monitoring client progress. Assists clients with applications for housing related services, including emergency housing, short-term, utilities, and mortgage housing assistance, and permanent housing placement and other supportive services to remove barriers for stable housing. Refers clients to medical services, assists clients to obtain public benefits, and work training programs and employment. Ensures applications are complete and in compliance with grants requirement. Assists clients with applications and paperwork for other government assistance programs. Advocates for clients with hotel/motel managers, and property owners throughout Riverside to promote effective relationships and housing stability. Conducts monthly, quarterly follow ups with clients including home visits as needed.	\$ 42,300	100%	\$0.00	\$42,300.00	\$42,300.00
Housing Liaison Vacant x 1.00 FTE = Bilingual Responsible Job duties include resource development and advocacy, including developing and maintaining relationships with other community collaborators as related to contracts and housing providers; tenant based program activities including tracking and monitoring tenant based clients, coordinate quarterly tenant based meetings, act as a liaison between agency clients and housing authority; housing information systems including referrals to housing resources and other services such as compliance with tenant obligations, budgeting classes, leases and rental agreements, interpersonal skills to interact successfully with property managers and neighbors, which are designed to achieve housing stability; and provide technical assistance, communication and education provisions for FAP hotel/motel partners, property management staff, owners and other housing entities.	\$ 52,000	0%	\$52,000.00	\$0.00	\$52,000.00
Housing Case Manager San Bernardino L. Pinedo x 1.00 FTE =	\$ 49,750	0%	\$49,750.00	\$0.00	\$49,750.00

<p>Bilingual. Responsible for conducting client intakes, assessment of housing needs, and income assessment and verification; developing a housing plan to meet identified needs; monitoring client progress. Assists clients with applications for housing related services, including emergency housing, short-term, utilities, and mortgage housing assistance, and permanent housing placement and other supportive services to remove barriers for stable housing. Refers clients to medical services, assists clients to obtain public benefits, and work training programs and employment. Ensures applications are complete and in compliance with grants requirement.</p> <p>Assists clients with applications and paperwork for other government assistance programs. Advocates for clients with hotel/motel managers, and property owners throughout San Bernardino and High Desert to promote effective relationships and housing stability. Conducts monthly, quarterly follow ups with clients including home visits as needed</p>									
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Centralized Fund Manager</td> <td style="width: 20%; text-align: center;">Per Year</td> <td style="width: 20%; text-align: center;">Allocated</td> </tr> <tr> <td>L. Evans x 1.00 FTE =</td> <td style="text-align: center;">\$ 47,000</td> <td style="text-align: center;">0%</td> </tr> </table> <p>Responsible for the coordination and provision of HOPWA funded services for clients living in San Bernardino and Riverside counties; conducts program review of housing services internally and at subcontracted agencies, ensure program activities comply with funding contracts and delivery of services guidelines, act as a liaison with government agencies, the community and the public related to funding and delivery of services, initiates resource identification services to develop housing assistance; provide direction and supervision of the program's day to day activities; and assist in long and short term planning and the achievements of programs goals and objectives.</p>	Centralized Fund Manager	Per Year	Allocated	L. Evans x 1.00 FTE =	\$ 47,000	0%	\$47,000.00	\$0.00	\$47,000.00
Centralized Fund Manager	Per Year	Allocated							
L. Evans x 1.00 FTE =	\$ 47,000	0%							
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Housing Coordinator</td> <td style="width: 20%; text-align: center;">Per Year</td> <td style="width: 20%; text-align: center;">Allocated</td> </tr> <tr> <td>L. Evans x 1.00 FTE =</td> <td style="text-align: center;">\$ 55,000</td> <td style="text-align: center;">0%</td> </tr> </table>	Housing Coordinator	Per Year	Allocated	L. Evans x 1.00 FTE =	\$ 55,000	0%	\$55,000.00	\$0.00	\$55,000.00
Housing Coordinator	Per Year	Allocated							
L. Evans x 1.00 FTE =	\$ 55,000	0%							

Responsible for the coordination and provision of HOPWA funded services for clients living in San Bernardino and Riverside counties; conducts program review of housing services internally and at subcontracted agencies, ensure program activities comply with funding contracts and delivery of services guidelines, act as a liaison with government agencies, the community and the public related to funding and delivery of services, initiates resource identification services to develop housing assistance; provide direction and supervision of the program's day to day activities; and assist in long and short term planning and the achievements of programs goals and objectives.			
Total Fringe Benefits at a rate of: 21%	\$61,263.30	\$8,883.00	\$70,146.30
TOTAL PERSONNEL	\$352,993.30	\$51,183.00	\$404,176.30
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Emergency Housing Assistance: Emergency payments to assist approximately 55 clients with up to 90 nights of emergency housing (i.e. motel and rental assistance) total of \$74,000 \$74,000.00	\$0.00	\$74,000.00	\$74,000.00
Tenant Based Housing Assistance: Tenant based housing vouchers to 41 eligible clients in collaboration with SB County Housing Authority. \$35,000.00	\$35,000.00	\$0.00	\$35,000.00
Short Term Rent, Mortgage and Utilities Assistance: Financial assistance to eligible clients in SB/RIV Counties \$70,000.00	\$70,000.00	\$0.00	\$70,000.00
Permanent Housing Placement: Assist eligible clients in SB/RIV Counties with security deposits/move-in costs. \$50,000.00	\$50,000.00	\$0.00	\$50,000.00
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of: \$4,000.00	\$3,000.00	\$1,000.00	\$4,000.00

<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$225.00	\$0.00	\$225.00	\$225.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$2,300 per year.</p>	\$2,000.00	\$0.00	\$2,000.00	\$2,000.00
<p>Training: Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.</p>	\$800.00	\$0.00	\$800.00	\$800.00
<p>Postage: Mail appointment reminder cards, referrals and/or certification eligibility. Housing vouchers payments</p>	\$615.00	\$0.00	\$615.00	\$615.00
<p>Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$460.00	\$0.00	\$460.00	\$460.00
<p>Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$19,560.00	\$560.00	\$19,000.00	\$19,560.00
<p>Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$2,000.00	\$0.00	\$2,000.00	\$2,000.00
Total Other		\$158,560.00	\$100,100.00	\$258,660.00
SUBTOTAL (Total Personnel and Total Other)		\$511,553.30	\$151,283.00	\$662,836.30

<p>Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).</p>	<p>\$2,267.00</p>	<p>\$16,809.00</p>	<p>\$19,076.00</p>
<p>TOTAL BUDGET (Subtotal & Administration)</p>	<p>\$513,820.30</p>	<p>\$168,092.00</p>	<p>\$681,912.30</p>

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of RW Case Management Units to be Provided for this Service Category: 6,375
 Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$ 26.37
 (This is your agency’s RW cost for care per unit)**
- Total Number of RW Nights to be Provided for this Service Category: 1,164**
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$144.41(This is your agency’s RW cost for care per unit)**

²List Other Payers Associated with funding in Column A: HOPWA, Emergency Solutions Grant, Emergency Food and Shelter Program.

AGENCY NAME: Foothill AIDS Project

SERVICE: Medical Case Management

	A	B	C						
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost						
Personnel									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Medical Case Manager</td> <td style="text-align: right;">Per Year</td> <td style="text-align: right;">Allocated</td> </tr> <tr> <td>M. Maher x 1.00 FTE =</td> <td style="text-align: right;">\$ 50,000</td> <td style="text-align: right;">60%</td> </tr> </table> <p>Medical Case Manager: (M. Maher) (Part Time Employee: \$100,000 x 0.50 FTE x12 mos.) (60% of salary allocated to RW Part A Medical-CM, 20% of salary allocated to RW Part A Nutrition & 20% Non RW Funding) Licensed Registered Nurse; Primary service goal is to assist clients in achieving an enhanced level of health and quality of life and maintain wellness and function that will enable them to better self-advocate and make informed healthcare decisions. Responsibilities include coordination of non-RW funded clinic clients' medical care and supportive services, collaborate with medical providers, client and client family members and other non-RW service providers for implementation and development of Individual Service Plans (ISP) that will meet client's needs and goals; locate available resources to achieve goals identified in ISP; and to ensure appropriate access to care for clients in need. Salary is split between other RW Service Categories not related to this service category.</p>	Medical Case Manager	Per Year	Allocated	M. Maher x 1.00 FTE =	\$ 50,000	60%	\$10,000.00	\$30,000.00	\$40,000.00
Medical Case Manager	Per Year	Allocated							
M. Maher x 1.00 FTE =	\$ 50,000	60%							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Medical Case Manager</td> <td style="text-align: right;">Per Year</td> <td style="text-align: right;">Allocated</td> </tr> <tr> <td>K. Dee x 1.00 FTE =</td> <td style="text-align: right;">\$ 65,000</td> <td style="text-align: right;">100%</td> </tr> </table> <p>Licensed Vocational Nurse; Primary service goal is to assist clients in achieving an enhanced level of health and quality of life and maintain wellness and function that will enable them to better self-advocate and make informed healthcare decisions. Responsibilities include coordination of non-RW funded clinic clients' medical care and supportive services, collaborate with medical providers, client and client family members and other non-RW service providers for implementation and development of Individual Service Plans (ISP) that will meet client's needs and goals; locate available resources to achieve goals identified in ISP; and to ensure appropriate access to care for clients in need.</p>	Medical Case Manager	Per Year	Allocated	K. Dee x 1.00 FTE =	\$ 65,000	100%	\$0.00	\$65,000.00	\$65,000.00
Medical Case Manager	Per Year	Allocated							
K. Dee x 1.00 FTE =	\$ 65,000	100%							
Total Fringe Benefits at a rate of:	18.0%	\$1,800.00	\$17,100.00						
TOTAL PERSONNEL	\$11,800.00	\$112,100.00	\$123,900.00						

Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)				
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$500.00	\$0.00	\$500.00	\$500.00
Program Supplies: Cost of program supplies such as educational materials, workbooks for client utilizations during treatment sessions, reference materials and other related program specific supplies. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$250.00	\$0.00	\$250.00	\$250.00
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:	\$300.00	\$0.00	\$300.00	\$300.00
Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$2,500 per year.	\$2,500.00	\$0.00	\$2,500.00	\$2,500.00
Training: Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.	\$250.00	\$0.00	\$250.00	\$250.00
Postage: Mail appointment reminder cards, referrals and/or certification eligibility.	\$15.00	\$0.00	\$15.00	\$15.00
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:	\$250.00	\$0.00	\$250.00	\$250.00
Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:	\$4,755.00	\$0.00	\$4,755.00	\$4,755.00

Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year: \$1,480.00	\$1,480.00	\$0.00	\$1,480.00	\$1,480.00
Total Other		\$0.00	\$10,300.00	\$10,300.00
SUBTOTAL (Total Personnel and Total Other)		\$11,800.00	\$122,400.00	\$134,200.00
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).		\$1,000.00	\$11,661.00	\$12,661.00
TOTAL BUDGET (Subtotal & Administration)		\$12,800.00	\$134,061.00	\$146,861.00

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 2,480
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$54.06
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE: Medical Nutrition
Therapy

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Personnel			
<p>Medical Case Manager Per Year Allocated</p> <p>M. Maher x 1.00 FTE = \$ 50,000 20%</p> <p>Medical Case Manager: (M. Maher) (Part Time Employee: \$100,000 x 0.50 FTE x12 mos.) (60% of salary allocated to RW Part A Medical-CM, 20% of salary allocated to RW Part A Nutrition & 20% Non RW Funding) Licensed Registered Nurse; Primary service goal is to direct medical nutrition therapy program and conduct nutritional screening/assessments and periodic reassessment of client's nutritional status; prepares nutritional care plan and meal plan with client; assists client in improving access and linkages to food sources and health care; monitors and evaluates client progress toward planned goal; plans, coordinates and implements educational workshops; collects and analyzes data regarding client's health outcomes and access to food. Salary is split between other RW Service Categories not related to this service category.</p>	\$10,000.00	\$10,000.00	\$20,000.00
<p>Registered Nutritionist Per Year Allocated</p> <p>L. Cruz x 1.00 FTE = \$ 66,414 88%</p> <p>(88% of salary allocated to RW Part A Nutrition & 12% Non RW Funding)Licensed Vocational Nurse; Primary service goal is to assist clients in achieving an enhanced level of health and quality of life and maintain wellness and function that will enable them to better self-advocate and make informed healthcare decisions. Responsibilities include coordination of non-RW funded clinic clients' medical care and supportive services, collaborate with medical providers, client and client family members and other non-RW service providers for implementation and development of Individual Service Plans (ISP) that will meet client's needs and goals; locate available resources to achieve goals identified in ISP; and to ensure appropriate access to care for clients in need.</p>	\$7,969.68	\$58,444.32	\$66,414.00
Total Fringe Benefits at a rate of: 20%	\$3,593.94	\$13,688.86	\$17,282.80
TOTAL PERSONNEL	\$21,563.62	\$82,133.18	\$103,696.80
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			

<p>Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:</p>	\$250.00	\$0.00	\$250.00	\$250.00
<p>Program Supplies: Cost of program supplies such as educational materials, workbooks for client utilizations during treatment sessions, reference materials and other related program specific supplies i.e. BMI chart adul MUAC, Tanita scales. New program and FTE allocation, estimated cost per year of:</p>	\$7,200.00	\$0.00	\$7,200.00	\$7,200.00
<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$285.00	\$0.00	\$285.00	\$285.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$2,300 per year.</p>	\$2,300.00	\$0.00	\$2,300.00	\$2,300.00
<p>Training: Academy of Nutrition and Dietetics Food and Nutrition conference for registered dietitian nutritionists, nutrition science researchers, policy makers, health-care providers and industry leaders attend the annual meeting on key issues affecting the health of all Americans.</p>	\$525.00	\$75.00	\$450.00	\$525.00
<p>Postage: Mail appointment reminder cards, referrals and/or certification eligibility.</p>	\$15.00	\$0.00	\$15.00	\$15.00
<p>Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$756.82	\$0.00	\$756.82	\$756.82
<p>Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$5,000.00	\$0.00	\$5,000.00	\$5,000.00

<p>Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$1,510.00	\$0.00	\$1,510.00	\$1,510.00
Total Other		\$75.00	\$17,766.82	\$17,841.82
SUBTOTAL (Total Personnel and Total Other)		\$21,638.62	\$99,900.00	\$121,538.62
<p>Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).</p>		\$0.00	\$11,100.00	\$11,100.00
TOTAL BUDGET (Subtotal & Administration)		\$21,638.62	\$111,000.00	\$132,638.62

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 1,605
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$69.16
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE: Medical Transportation

	A	B	C												
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost												
Personnel															
Transportation Assistance by Van-Connect include cost of driver, mobility coordinator, and van expenses	\$35,000.00	\$0.00	\$35,000.00												
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Client Eligibility Worker</th> <th style="text-align: right; border-bottom: 1px solid black;">Per Year</th> <th style="text-align: right; border-bottom: 1px solid black;">Allocated</th> </tr> </thead> <tbody> <tr> <td>D. Castillo x 1.00 FTE =</td> <td style="text-align: right;">\$ 42,000</td> <td style="text-align: right;">20%</td> </tr> <tr> <td colspan="3"> Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category. </td> </tr> <tr> <td></td> <td style="text-align: right;">\$0.00</td> <td style="text-align: right;">\$8,400.00</td> </tr> </tbody> </table>	Client Eligibility Worker	Per Year	Allocated	D. Castillo x 1.00 FTE =	\$ 42,000	20%	Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category.				\$0.00	\$8,400.00			\$8,400.00
Client Eligibility Worker	Per Year	Allocated													
D. Castillo x 1.00 FTE =	\$ 42,000	20%													
Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category.															
	\$0.00	\$8,400.00													
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Program Support</th> <th style="text-align: right; border-bottom: 1px solid black;">Per Year</th> <th style="text-align: right; border-bottom: 1px solid black;">Allocated</th> </tr> </thead> <tbody> <tr> <td>A. Cespedes x 1.00 FTE =</td> <td style="text-align: right;">\$ 47,133</td> <td style="text-align: right;">10%</td> </tr> <tr> <td colspan="3"> .22 allocated to FOOD & .68 allocated to Private Programs) process client food cards for distribution to ensure eligibility according to different funding sources, disburse payments and communicate with Case Managers on behalf of eligibility. Salary is split between other RW Part A Service Categories. </td> </tr> <tr> <td></td> <td style="text-align: right;">\$32,050.45</td> <td style="text-align: right;">\$4,713.30</td> </tr> </tbody> </table>	Program Support	Per Year	Allocated	A. Cespedes x 1.00 FTE =	\$ 47,133	10%	.22 allocated to FOOD & .68 allocated to Private Programs) process client food cards for distribution to ensure eligibility according to different funding sources, disburse payments and communicate with Case Managers on behalf of eligibility. Salary is split between other RW Part A Service Categories.				\$32,050.45	\$4,713.30			\$36,763.75
Program Support	Per Year	Allocated													
A. Cespedes x 1.00 FTE =	\$ 47,133	10%													
.22 allocated to FOOD & .68 allocated to Private Programs) process client food cards for distribution to ensure eligibility according to different funding sources, disburse payments and communicate with Case Managers on behalf of eligibility. Salary is split between other RW Part A Service Categories.															
	\$32,050.45	\$4,713.30													
Total Fringe Benefits at a rate of: 20%	\$13,410.09	\$2,622.66	\$16,032.75												
TOTAL PERSONNEL	\$80,460.54	\$15,735.96	\$96,196.50												

Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Transportation Assistance: Transportation Assistance: Annual provision of 410 bus passes at \$30, 23,459 gas at \$10 card, and 3 taxi vouchers at \$30 to approximately 480 of unduplicated clients used to provide emergency medical transportation to enhance clients' access to healthcare and/or supportive services. Client disbursement may varies based on number of medical appointments not to exceed \$40 per month.	\$55,570.00	\$191,374.47	\$246,944.47
Mileage: Cost of providing van transportation to eligible clients residing in the High Desert, specifically Lucerne Valley and Barstow, estimated at an average of:	\$2,952.44	\$3,275.37	\$6,227.81
Total Other	\$58,522.44	\$194,649.84	\$253,172.28
SUBTOTAL (Total Personnel and Total Other)	\$138,982.98	\$210,385.80	\$349,368.78
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$13,000.00	\$23,376.20	\$36,376.20
TOTAL BUDGET (Subtotal & Administration)	\$151,982.98	\$233,762.00	\$385,744.98

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 13,710**
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$17.05**
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE: Mental Health

	A	B	C						
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost						
Personnel									
Dir. of Mental Health/Substance Abuse: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: right;">Per Year</td> <td style="text-align: right;">Allocated</td> </tr> <tr> <td>S. Marshall x 1.00 FTE =</td> <td style="text-align: right;">\$ 74,880</td> <td style="text-align: right;">75%</td> </tr> </table> <p>(25% allocated to RW Part A SA) Licensed Marriage Family Therapist; Provides counseling services to address substance abuse problems in an outpatient setting. Services conducted in a group or individual setting. General responsibilities include coordinating and conducting psychiatric referrals, evaluations and assessments; creating treatment plans; and participating in case conferences. Salary is split between other RW Service Categories not related to this service category.</p>		Per Year	Allocated	S. Marshall x 1.00 FTE =	\$ 74,880	75%	\$0.00	\$56,160.00	\$56,160.00
	Per Year	Allocated							
S. Marshall x 1.00 FTE =	\$ 74,880	75%							
Case Manager <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: right;">Per Year</td> <td style="text-align: right;">Allocated</td> </tr> <tr> <td>Vacant x 1.00 FTE =</td> <td style="text-align: right;">\$ 72,488</td> <td style="text-align: right;">68%</td> </tr> </table> <p>(\$72,488/12 FTE x 8.16 months) Registered Marriage Family Therapist; Provides HIV specific psychological treatment and counseling services to individuals with a diagnosed mental illness with a primary goal of improving and sustaining clients' quality of life. Services are conducted in a group or individual setting, and provided by a licensed mental health professional. General responsibilities include coordinating and conducting individual therapy, group therapy, mental health intakes and assessments; creating treatment plans; referrals to psychiatrists; crisis intervention; and participating in case conferences..</p>		Per Year	Allocated	Vacant x 1.00 FTE =	\$ 72,488	68%	\$0.00	\$49,291.84	\$49,291.84
	Per Year	Allocated							
Vacant x 1.00 FTE =	\$ 72,488	68%							
Mental Health Clinician <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: right;">Per Year</td> <td style="text-align: right;">Allocated</td> </tr> <tr> <td>J. Hynes x 1.00 FTE =</td> <td style="text-align: right;">\$ 68,959</td> <td style="text-align: right;">95%</td> </tr> </table> <p>(.05% allocated to Private Programs) - Licensed Marriage Family Therapist; Provides HIV specific psychological treatment and counseling services to individuals with a diagnosed mental illness with a primary goal of improving and sustaining clients' quality of life. Services are conducted in a group or individual setting, and provided by a licensed mental health professional. General responsibilities include coordinating and conducting individual therapy, group therapy, mental health intakes and assessments; creating treatment plans; referrals to psychiatrists; crisis intervention; and participating in case conferences.</p>		Per Year	Allocated	J. Hynes x 1.00 FTE =	\$ 68,959	95%	\$3,447.95	\$65,511.05	\$68,959.00
	Per Year	Allocated							
J. Hynes x 1.00 FTE =	\$ 68,959	95%							

Mental Health Clinician	Per Year	Allocated			
V. McCall x 1.00 FTE = (\$61,800/12 FTE x 10.20 months) Registered Marriage Family Therapist; Provides HIV specific psychological treatment and counseling services to individuals with a diagnosed mental illness with a primary goal of improving and sustaining clients' quality of life. Services are conducted in a group or individual setting, and provided by a licensed mental health professional. General responsibilities include coordinating and conducting individual therapy, group therapy, mental health intakes and assessments; creating treatment plans; referrals to psychiatrists; crisis intervention; and participating in case conferences..	\$ 61,800	85%	\$0.00	\$52,530.00	\$52,530.00
M. Maynard x 1.00 FTE = Marriage Family Therapist Intern; Provides HIV specific psychological treatment and counseling services to individuals with a diagnosed mental illness with a primary goal of improving and sustaining clients' quality of life. Services are conducted in a group or individual setting, and provided by a licensed mental health professional. General responsibilities include coordinating and conducting individual therapy, group therapy, mental health intakes and assessments; creating treatment plans; referrals to psychiatrists; crisis intervention; and participating in case conferences.	\$ 56,000	100%	\$0.00	\$56,000.00	\$56,000.00
Total Fringe Benefits at a rate of:	21%		\$724.07	\$58,693.51	\$59,417.58
TOTAL PERSONNEL			\$4,172.02	\$338,186.40	\$342,358.42
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)					
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$1,687.05		\$0.00	\$1,687.05	\$1,687.05
Program Supplies: Cost of program supplies such as educational materials, workbooks for client utilizations during treatment sessions, reference materials and other related program specific supplies. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$2,250.00		\$750.00	\$1,500.00	\$2,250.00

<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$500.00	\$0.00	\$500.00	\$500.00
<p>Group Expenses: Cost of group support therapy such as refreshments and snacks, incentives and other costs associated with facilitating group therapy.</p>	\$23,465.00	\$23,465.00	\$0.00	\$23,465.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost:</p>	\$3,000.00	\$0.00	\$3,000.00	\$3,000.00
<p>Training: Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.</p>	\$1,000.00	\$0.00	\$1,000.00	\$1,000.00
<p>Postage: Mail appointment reminder cards, referrals and/or certification eligibility.</p>	\$21.25	\$0.00	\$21.25	\$21.25
<p>Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$500.00	\$0.00	\$500.00	\$500.00
<p>Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$20,060.00	\$560.00	\$19,500.00	\$20,060.00

<p>Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$3,000.00	\$0.00	\$3,000.00	\$3,000.00
Total Other		\$24,775.00	\$30,708.30	\$55,483.30
SUBTOTAL (Total Personnel and Total Other)		\$28,947.02	\$368,894.70	\$397,841.72
<p>Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).</p>		\$2,267.00	\$40,988.30	\$43,255.30
TOTAL BUDGET (Subtotal & Administration)		\$31,214.02	\$409,883.00	\$441,097.02

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 19,630
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$20.88
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE: Psychosocial Case Management

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Personnel			
Psychosocial Case Manager			
Per Year Allocated			
L. Mendoza x 1.00 FTE =	\$ 44,500	100%	
Bilingual. General responsibilities include providing support and counseling activities; conducting HIV support groups, client assessments, and one-on-one sessions; coordinating care plans with medical case manager; participating in case conference sessions; providing referrals to mental health professionals.	\$0.00	\$44,500.00	\$44,500.00
Client Eligibility Worker			
Per Year Allocated			
D. Castillo x 1.00 FTE =	\$ 43,500	10%	
Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category.	\$0.00	\$4,350.00	\$4,350.00
Director of Programs			
Per Year Allocated			
M. Francois x 1.00 FTE =	\$ 83,288	10%	
	\$0.00	\$8,328.80	\$8,328.80

Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Responsible for identifying community partners that provide services to populations that may have less access to care such as i.e. prisons, homeless shelters, etc. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Service Categories not related to this service category.			
Total Fringe Benefits at a rate of: 22.5%	\$0.00	\$12,865.23	\$12,865.23
TOTAL PERSONNEL	\$0.00	\$70,044.03	\$70,044.03
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of: \$491.00	\$0.00	\$491.00	\$491.00
Program Supplies: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and / or FTE, estimated cost per year of: \$300.00	\$0.00	\$300.00	\$300.00
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of: \$300.00	\$0.00	\$300.00	\$300.00
Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost of: \$1,900.00	\$0.00	\$1,900.00	\$1,900.00

Training: Integrated Case Management in the New Millennium: Development and Documentation of Client Contact, Individual Service Plans, and Client Follow-up. Skill development in understanding professional roles to include ethical issues and boundaries, acuity level reduction. Based on prior year expenditures and FTE allocation, estimated	\$540.00	\$0.00	\$540.00	\$540.00
Postage: Mail appointment reminder cards, referrals and/or certification eligibility.	\$24.97	\$0.00	\$24.97	\$24.97
Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:	\$100.00	\$0.00	\$100.00	\$100.00
Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:	\$5,800.00	\$0.00	\$5,800.00	\$5,800.00
Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:	\$1,500.00	\$0.00	\$1,500.00	\$1,500.00
Total Other		\$0.00	\$10,955.97	\$10,955.97
SUBTOTAL (Total Personnel and Total Other)		\$0.00	\$81,000.00	\$81,000.00
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).		\$0.00	\$9,000.00	\$9,000.00
TOTAL BUDGET (Subtotal & Administration)		\$0.00	\$90,000.00	\$90,000.00

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category:** 5.263
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided:** \$17.10 (This is your

agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

AGENCY NAME: Foothill AIDS Project

SERVICE: Non-Medical Case Management

	A	B	C													
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost													
Personnel																
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Case Manager</td> <td style="width: 20%; text-align: right;">Per Year</td> <td style="width: 20%; text-align: right;">Allocated</td> </tr> <tr> <td>A. Estrada x 1.00 FTE =</td> <td style="text-align: right;">\$ 50,000</td> <td style="text-align: right;">100%</td> </tr> <tr> <td colspan="3"> Riverside Certified bilingual case manager and Prevention for Positives Spanish case manager. Certified bilingual case manager and Prevention for Positives Spanish case manager. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM works closely with Riverside Neighborhood Clinic to help clients maintain connection to HIV medical care. </td> </tr> <tr> <td></td> <td style="text-align: center;">\$0.00</td> <td style="text-align: center;">\$50,000.00</td> <td style="text-align: center;">\$50,000.00</td> </tr> </table>	Case Manager	Per Year	Allocated	A. Estrada x 1.00 FTE =	\$ 50,000	100%	Riverside Certified bilingual case manager and Prevention for Positives Spanish case manager. Certified bilingual case manager and Prevention for Positives Spanish case manager. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM works closely with Riverside Neighborhood Clinic to help clients maintain connection to HIV medical care.				\$0.00	\$50,000.00	\$50,000.00			
Case Manager	Per Year	Allocated														
A. Estrada x 1.00 FTE =	\$ 50,000	100%														
Riverside Certified bilingual case manager and Prevention for Positives Spanish case manager. Certified bilingual case manager and Prevention for Positives Spanish case manager. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM works closely with Riverside Neighborhood Clinic to help clients maintain connection to HIV medical care.																
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Case Manager	Per Year	Allocated														
J. Romero x 1.00 FTE =	\$ 42,500	15%														
San Bernardino. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM works closely with Perris Neighborhood Clinic to help clients maintain connection to HIV medical care.																
	\$0.00	\$6,375.00	\$6,375.00													
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Case Manager	Per Year	Allocated														
L. Velasquez x 1.00 FTE =	\$ 44,000	100%														
	\$0.00	\$44,000.00	\$44,000.00													

<p>Hesperia. Bilingual. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM is co-located at Public Health Department in Hesperia one day per week..</p>			
<p>Case Manager Per Year Allocated</p> <hr/> <p>S. Zamorz x 1.00 FTE = \$ 44,000 100%</p> <p>San Bernardino. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM works closely with Perris Neighborhood Clinic to help clients maintain connection to HIV medical care.</p>	\$0.00	\$44,000.00	\$44,000.00
<p>Case Manager Per Year Allocated</p> <hr/> <p>F. Gonzales x 1.00 FTE = \$ 44,500 100%</p> <p>San Bernardino. Coordinate an array of services which will improve clients' health outcomes and facilitate clients' self-sufficiency; determining eligibility for services; conducting intakes, comprehensive assessments and reassessments; developing individual service plans (ISPs); implementing ISPs and monitoring progress; advocacy and client education; providing crisis intervention; monitoring clients for medical compliance; maintaining contact with medical and social services. CM works closely with Perris Neighborhood Clinic to help clients maintain connection to HIV medical care.</p>	\$0.00	\$44,500.00	\$44,500.00
<p>Client Eligibility Worker Per Year Allocated</p> <hr/> <p>D. Castillo x 1.00 FTE = \$ 43,500 40%</p>	\$0.00	\$17,400.00	\$17,400.00

<p>Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category.</p>									
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Director of Programs</td> <td style="width: 20%; text-align: right;">Per Year</td> <td style="width: 20%; text-align: right;">Allocated</td> </tr> <tr> <td>M. Francois x 1.00 FTE =</td> <td style="text-align: right;">\$ 83,288</td> <td style="text-align: right;">20%</td> </tr> </table> <p>Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Responsible for identifying community partners that provide services to populations that may have less access to care such as i.e. prisons, homeless shelters, etc. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Service Categories not related to this service category.</p>	Director of Programs	Per Year	Allocated	M. Francois x 1.00 FTE =	\$ 83,288	20%	\$0.00	\$16,657.60	\$16,657.60
Director of Programs	Per Year	Allocated							
M. Francois x 1.00 FTE =	\$ 83,288	20%							
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Total Fringe Benefits at a rate of:</td> <td style="width: 20%; text-align: right;">21.0%</td> <td></td> </tr> </table>	Total Fringe Benefits at a rate of:	21.0%		\$0.00	\$46,815.85	\$46,815.85			
Total Fringe Benefits at a rate of:	21.0%								
TOTAL PERSONNEL	\$0.00	\$269,748.45	\$269,748.45						
<p>Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)</p>									
<p>Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:</p>	\$2,000.00	\$0.00	\$2,000.00						

<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$536.55	\$0.00	\$536.55	\$536.55
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$2,300 per year.</p>	\$3,000.00	\$0.00	\$3,000.00	\$3,000.00
<p>Training: Integrated Case Management in the New Millennium: Development and Documentation of Client Contact, Individual Service Plans, and Client Follow-up. Skill development in understanding professional roles to include ethical issues and boundaries, acuity level reduction. Based on prior year expenditures and FTE allocation, estimated</p>	\$1,165.00	\$0.00	\$1,165.00	\$1,165.00
<p>Postage: Mail appointment reminder cards, referrals and/or certification eligibility.</p>	\$50.00	\$0.00	\$50.00	\$50.00
<p>Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$300.00	\$0.00	\$300.00	\$300.00
<p>Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$23,000.00	\$0.00	\$23,000.00	\$23,000.00
<p>Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$3,500.00	\$0.00	\$3,500.00	\$3,500.00
Total Other		\$0.00	\$33,551.55	\$33,551.55

SUBTOTAL (Total Personnel and Total Other)	\$0.00	\$303,300.00	\$303,300.00
Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).	\$300.00	\$33,700.00	\$34,000.00
TOTAL BUDGET (Subtotal & Administration)	\$300.00	\$337,000.00	\$337,300.00

Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- **Total Number of RW Case Management Units to be Provided for this Service Category: 1 8.550**
Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$ 18.17
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: HOPWA, Emergency Solutions Grant, Emergency Food and Shelter Program.

AGENCY NAME: Foothill AIDS Project

SERVICE: Substance Abuse Services

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Personnel			
<p>Dir. of Mental Health/Substance Abuse: Per Year Allocated</p> <p>S. Marshall x 1.00 FTE = \$ 74,880 25%</p> <p>(75% allocated to RW Part A MH) Licensed Marriage Family Therapist; Provides counseling services to address substance abuse problems in an outpatient setting. Services conducted in a group or individual setting. General responsibilities include coordinating and conducting psychiatric referrals, evaluations and assessments; creating treatment plans; and participating in case conferences. Salary is split between other RW Service Categories not related to this service category.</p>	\$0.00	\$18,720.00	\$18,720.00
<p>Substance Abuse Counselor: Per Year Allocated</p> <p>J. Chan x 1.00 FTE = \$ 51,500 100%</p> <p>Bilingual. CADAC 1 Certified, Primary goal is to maintain and increase participation in medical care, maximize the effectiveness of HIV-related medical care and treatment through cessation or reduction of substance abuse. Provide counseling to address substance abuse problems in an outpatient setting, conducting substance abuse screenings, crisis intervention services, group counseling and support groups, developing substance abuse plan w/ client, and maintaining involvement in aftercare plan to ensure goals and needs are met.</p>	\$0.00	\$51,500.00	\$51,500.00
<p>Substance Abuse Counselor: Per Year Allocated</p> <p>J. Richardson x 1.00 FTE = \$ 24,250 100%</p> <p>Bilingual CAADE Certified. Primary goal is to maintain and increase participation in medical care, maximize the effectiveness of HIV-related medical care and treatment through cessation or reduction of substance abuse. Provide counseling to address substance abuse problems in an outpatient setting, conducting substance abuse screenings, crisis intervention services, group counseling and support groups, developing substance abuse plan w/ client, and maintaining involvement in aftercare plan to ensure goals and needs are met.</p>	\$0.00	\$24,250.00	\$24,250.00

Substance Abuse Counselor:	Per Year	Allocated			
K. Swarzer x 1.00 FTE = (\$47,600/12 FTE x 9.60 months) Certified, Primary goal is to maintain and increase participation in medical care, maximize the effectiveness of HIV-related medical care and treatment through cessation or reduction of substance abuse. Provide counseling to address substance abuse problems in an outpatient setting, conducting substance abuse screenings, crisis intervention services, group counseling and support groups, developing substance abuse plan w/ client, and maintaining involvement in aftercare plan to ensure goals and needs are met.	\$ 47,600	80%	\$0.00	\$38,080.00	\$38,080.00
M. Laura Loewen x 1.00 FTE = (\$47,600/12 FTE x 9.60 months) Certified, Primary goal is to maintain and increase participation in medical care, maximize the effectiveness of HIV-related medical care and treatment through cessation or reduction of substance abuse. Provide counseling to address substance abuse problems in an outpatient setting, conducting substance abuse screenings, crisis intervention services, group counseling and support groups, developing substance abuse plan w/ client, and maintaining involvement in aftercare plan to ensure goals and needs are met.	\$ 47,600	80%	\$0.00	\$38,080.00	\$38,080.00
Total Fringe Benefits at a rate of:	22%		\$0.00	\$37,538.60	\$37,538.60
TOTAL PERSONNEL			\$0.00	\$208,168.60	\$208,168.60
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)					
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$1,501.70		\$0.00	\$1,501.70	\$1,501.70
Program Supplies: Cost of program supplies such as educational materials, workbooks for client utilizations during treatment sessions, reference materials and other related program specific supplies. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$1,800.00		\$0.00	\$1,800.00	\$1,800.00
Group Expenses: Cost of group support therapy such as refreshments and snacks, incentives and other costs associated with facilitating group therapy:	\$10,000.00		\$10,000.00	\$0.00	\$10,000.00

<p>Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:</p>	\$200.00	\$0.00	\$200.00	\$200.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost:</p>	\$1,000.00	\$0.00	\$1,000.00	\$1,000.00
<p>Training: Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.</p>	\$1,561.59	\$0.00	\$1,561.59	\$1,561.59
<p>Postage: Mail appointment reminder cards, referrals and/or certification eligibility.</p>	\$20.61	\$0.00	\$20.61	\$20.61
<p>Staff Mileage: Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$200.00	\$0.00	\$200.00	\$200.00
<p>Facility Rent: Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$18,000.00	\$0.00	\$18,000.00	\$18,000.00
<p>Telephone/Communications: Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$4,000.00	\$0.00	\$4,000.00	\$4,000.00
Total Other		\$10,000.00	\$28,283.90	\$38,283.90
SUBTOTAL (Total Personnel and Total Other)		\$10,000.00	\$236,452.50	\$246,452.50

<p>Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).</p>	<p>\$150.00</p>	<p>\$26,272.50</p>	<p>\$26,422.50</p>
<p>TOTAL BUDGET (Subtotal & Administration)</p>	<p>\$10,150.00</p>	<p>\$262,725.00</p>	<p>\$272,875.00</p>

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 18,000**
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$14.60**
(This is your agency's RW cost for care per unit)

²List Other Payers Associated with funding in Column A: 340B Program Funds.

RYAN WHITE PART A/MAI PROGRAM BUDGET AND ALLOCATION PLAN

Fiscal Year March 1, 2020 – February 28, 2021

AGENCY NAME: Foothill AIDS Project

SERVICE: MAI Services

	A	B	C								
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost								
Personnel											
<table border="0"> <tr> <td>EIS Case Manager</td> <td>Per Year</td> <td>Allocated</td> <td></td> </tr> <tr> <td>D. Flye x 1.00 FTE =</td> <td>\$ 47,000</td> <td>75%</td> <td></td> </tr> </table> <p>(0.25 FTE & .75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.</p>	EIS Case Manager	Per Year	Allocated		D. Flye x 1.00 FTE =	\$ 47,000	75%		\$0.00	\$35,250.00	\$35,250.00
EIS Case Manager	Per Year	Allocated									
D. Flye x 1.00 FTE =	\$ 47,000	75%									
<table border="0"> <tr> <td>EIS Case Manager</td> <td>Per Year</td> <td>Allocated</td> <td></td> </tr> <tr> <td>R. Middleton x 1.00 FTE =</td> <td>\$ 43,000</td> <td>75%</td> <td></td> </tr> </table> <p>(0.25 FTE & .75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.</p>	EIS Case Manager	Per Year	Allocated		R. Middleton x 1.00 FTE =	\$ 43,000	75%		\$0.00	\$32,250.00	\$32,250.00
EIS Case Manager	Per Year	Allocated									
R. Middleton x 1.00 FTE =	\$ 43,000	75%									
<table border="0"> <tr> <td>EIS Case Manager</td> <td>Per Year</td> <td>Allocated</td> <td></td> </tr> <tr> <td>Vacant x 1.00 FTE =</td> <td>\$ 43,000</td> <td>25%</td> <td></td> </tr> </table> <p>(0.25 FTE & .75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.</p>	EIS Case Manager	Per Year	Allocated		Vacant x 1.00 FTE =	\$ 43,000	25%		\$0.00	\$10,750.00	\$10,750.00
EIS Case Manager	Per Year	Allocated									
Vacant x 1.00 FTE =	\$ 43,000	25%									
<table border="0"> <tr> <td>EIS Case Manager</td> <td>Per Year</td> <td>Allocated</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	EIS Case Manager	Per Year	Allocated						\$0.00	\$32,250.00	\$32,250.00
EIS Case Manager	Per Year	Allocated									

M. Gomez x 1.00 FTE =	\$ 43,000	75%			
(0.25 FTE & .75 FTE allocated to MAI) Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Salary is split between other RW Service Categories not related to this service category.					
Client Eligibility Worker	Per Year	Allocated			
D. Castillo x 1.00 FTE =	\$ 43,500	20%			
Collect and verify required eligibility documentation for receipt of services, review program requirements and procedures including eligibility criteria; conduct home visit to collect documentation for the purpose of obtaining and verifying information; educating clients of eligibility requirements, advising clients of deadlines, timeframes, and necessary actions to be taken, working with clients who need assistance in gathering appropriate documentation, document eligibility requirements in database as required, regularly review and update case files and database to ensure appropriate documentation is in place and eligibility is met according to policies; conduct periodic review of data entry of services versus individual eligibility met. Salary is split between other RW Service Categories not related to this service category.			\$0.00	\$8,700.00	\$8,700.00
Director of Programs	Per Year	Allocated			
M. Francois x 1.00 FTE =	\$ 83,288	10%			
Counseling individuals with respect to HIV/AIDS; testing, referrals; ensuring individuals who are out of care/unaware of their HIV positive status are identified of their status, referred into care, and linked to care. Collaborate with Medical Case Manager, to ensure timely access to medical and supportive services. Responsible for identifying community partners that provide services to populations that may have less access to care such as i.e. prisons, homeless shelters, etc. Facilitate services to clients with multiple barriers and complex issues. Salary is split between other RW Service Categories not related to this service category.			\$0.00	\$8,328.80	\$8,328.80
Total Fringe Benefits at a rate of:	21%		\$0.00	\$26,781.05	\$26,781.05
TOTAL PERSONNEL			\$0.00	\$154,309.85	\$154,309.85

Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)				
Office Supplies: Cost of office supplies necessary to the program such as classification folders, copy paper, files, etc. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$1,967.00	\$467.00	\$1,500.00	\$1,967.00
Program Supplies: Cost of program supplies such as educational materials, workbooks for client utilizations during treatment sessions, reference materials and other related program specific supplies. Based on prior year expenses and FTE allocation, estimated cost per year of:	\$1,821.95	\$367.00	\$1,454.95	\$1,821.95
Medical Supplies: HIV Testing kits 4 cases 100 tests per case (approx. \$1,000/ea.). One cases 50 tests per case (approx. \$500/ea.). Alcohol prep pads, 3 bxs (approx. \$9 ea.) Lancets 8 bxs, 100 per box (approx. \$10 ea.) 4 control boxes, (\$25.00/ea.) = \$4,707	\$4,707.00	\$0.00	\$4,707.00	\$4,707.00
Postage / Medical Waste Pick-Up: Cost of mailing registration packets to clients and other documents on behalf of clients enrolled in program. Bio waste pick up from testing supplies. Based on prior year direct expenditures and/or FTE, estimated cost is \$1,435	\$1,435.00	\$0.00	\$1,435.00	\$1,435.00
Consultant: Service to oversee the implementation of counseling and testing activities which will be provided by Dr. Moony at a rate of \$3,000 per month x 12 months for a total of \$36,000. Of this amount, approximately 25% is allocated to EIS and 75% MAI.	\$27,000.00	\$0.00	\$27,000.00	\$27,000.00
Printing/Duplication: Cost of printing and duplication services associated with the contract such as printing of appointment cards for clients, program materials, and other handouts to be given out to clients. Based on prior year direct expenditures and/or FTE, estimated cost per year of:	\$610.00	\$210.00	\$400.00	\$610.00

<p><u>Equipment Lease/Purchase/Maintenance:</u> Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, cost of purchasing desktops/laptops and/or printers for staff use on RW services. Based on prior year expenditures and FTE allocation, estimated cost is \$2,300 per year.</p>	\$2,989.00	\$489.00	\$2,500.00	\$2,989.00
<p><u>Training:</u> Ethical Awareness & Practice, counselors will gain strategies to perform clinical assessment to distinguish SUD from other MHD and inform the clinician's choice of treatment interventions for specialized populations to improve the efficacy of group therapy outcomes.</p>	\$450.00	\$0.00	\$450.00	\$450.00
<p><u>Postage:</u> Mail appointment reminder cards, referrals and/or certification eligibility.</p>	\$21.20	\$0.00	\$21.20	\$21.20
<p><u>Staff Mileage:</u> Mileage reimbursement for program staff when conducting home-visits, accompanying clients to public benefit offices, etc. At a rate of approximately total cost estimated cost per year:</p>	\$1,200.00	\$0.00	\$1,200.00	\$1,200.00
<p><u>Facility Rent:</u> Cost of facility rent for office dedicated for RW services, based on prior year plus increased rates for current year, total cost estimated cost per year:</p>	\$16,000.00	\$0.00	\$16,000.00	\$16,000.00
<p><u>Telephone/Communications:</u> Direct cost of telephone and communication expenses. This includes conducting client follow ups when clients miss appointments and conducting crisis intervention when needed; internet and text messaging system used to remind clients of appointments/groups, and other announcements. Based on prior year expenditures and FTE allocation, total cost estimated cost per year:</p>	\$4,500.00	\$0.00	\$4,500.00	\$4,500.00
Total Other		\$1,533.00	\$61,168.15	\$62,701.15
SUBTOTAL (Total Personnel and Total Other)		\$1,533.00	\$215,478.00	\$217,011.00
<p><u>Administration</u> (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).</p>		\$150.00	\$23,719.00	\$23,869.00

TOTAL BUDGET (Subtotal & Administration)	\$1,683.00	\$239,197.00	\$240,880.00
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¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 5,400**
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$44.30**
(This is your agency's RW cost for care per unit)

² **List Other Payers Associated with funding in Column A: 340B Program Funds.**

CARES ACT PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2020 – February 28, 2021

AGENCY NAME: Foothill AIDS Project

SERVICE: Care ACT

	A	B	C
Budget Category	Non RW Part A Funds	RW Part A Cost	Total Cost
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer, equipment, etc. can be added below)			
Personal Protective Equipment (PPE): Equipment to be used: eye protection, gloves, facemasks, sanitizer gal, etc.. PPE will help to reduce the potential spread of infections, and other potentially dangerous substances including COVID-19. Estimated cost per year of: \$8,000.00	\$3,000.00	\$5,000.00	\$8,000.00
Respiratory Hygiene Supplies: Personal "COVID-19 Client Kits" to include: gloves, facemasks, sanitizer gal, etc., distributed to 500 clients for 2 months for essential business purposes; public transportation, doctor's appointment and or public administration matters. COVID-19 kits will assists in limiting client's exposure to potentially dangerous substances including COVID-19. Estimated cost per year of \$8,750.00	\$1,750.00	\$7,000.00	\$8,750.00
Disincentive Supplies: Bi-Weekly professional disinfecting services to help combat the spread of COVID-19. Utilizing hospital-grade chemicals, high touch-point wipe down and deep cleaning disinfecting services to ensure safe and clean environment for both staff and clients. Using hospital-grade disinfectants rated by the Environmental Protection Agency (EPA) Against SARS-CoV-2, the virus that causes COVID-19. \$10,120.00	\$4,320.00	\$5,800.00	\$10,120.00
Training: Financial Accounting for Program Income and Assistance on COVID-19 Response and Action Plan for the Workplace, designed to help employers prepare and respond to exposure and illness caused by COVID-19. \$1,000.00	\$0.00	\$1,000.00	\$1,000.00

RYAN WHITE PART A/MAI PROGRAM BUDGET AND ALLOCATION PLAN
Fiscal Year April 1, 2020 – February 28, 2021

<p>Website/Media: Develop interactive website that provides accurate information in a timely manner to increase client and community interaction with website and social media-social by actively sharing information ensuring current and correct messaging from a trusted sources, with a prioritized focus on COVID-19 Prevention and Preparedness. This includes, but not limited to: • Disseminate educational materials via internet-based media on precautions to prevent, contain, or mitigate COVID-19 and other respiratory illnesses for people with HIV. • Promoting behavioral health and coping strategies for people with HIV during the COVID-19 pandemic. • Enhance website and social media feeds to include client self-assessment tools and facilitate access to telemedicine visits.</p>	\$30,000.00	\$5,000.00	\$25,000.00	\$30,000.00
<p>Equipment Lease/Purchase/Maintenance: Cost of equipment lease for copy machines (inclusive of number of copies allowed per month) and postage meter. And if applicable, desktops/laptops with mobile charts and printers, Body Temperature Measurement System desktop acrylic sneeze guards with plexi-glass barrier for staff use on RW services. Estimated cost per year:</p>	\$20,000.00	\$3,266.00	\$16,734.00	\$20,000.00
Total Other		\$17,336.00	\$60,534.00	\$77,870.00
SUBTOTAL (Total Personnel and Total Other)		\$17,336.00	\$60,534.00	\$77,870.00
<p>Administration (limited to 10% of total service budget) Includes cost of administrative salaries for program administration such as Executive Director and Grants Manager. Cost of payroll services, professional and liability expenses, and other costs not allowed under direct program expenses (i.e. equipment maintenance, postage, conferences and trainings).</p>		\$7,000.00	\$6,726.00	\$13,726.00
TOTAL BUDGET (Subtotal & Administration)		\$24,336.00	\$67,260.00	\$91,596 .00

¹ Total Cost = Non-RW Cost (Other Payers) + RW Cost (A+B)

- Total Number of Ryan White Units to be Provided for this Service Category: 1.070**
- Total Ryan White Budget (Column B) Divided by Total RW Units to be Provided: \$62.86**
(This is your agency's RW cost for care per unit)

² **List Other Payers Associated with funding in Column A: 340B Program Funds.**