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**Contract Number**

20-1067 A-2

SAP Number

4400015583

Department of Public Health

Department Contract Representative	Lisa Ordaz, HS Contracts
Telephone Number	(909) 388-0222
Contractor	Desert AIDS Project
Contractor Representative	William Van Hemert
Telephone Number	(760) 323-2118
Contract Term	10/28/2020 through 02/28/2025
Original Contract Amount	\$1,917,000
Amendment Amount	\$0
Total Contract Amount	\$1,917,000
Cost Center	9300371000

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 2

It is hereby agreed to amend Contract No. 20-1067, effective December 7, 2021, as follows:

SECTION V. FISCAL PROVISIONS

Paragraph A is amended to read as follows:

- A. The maximum amount of payment under this Contract shall not exceed \$1,917,000, of which \$1,917,000 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 and 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.

Original Contract	\$500,000	October 28, 2020 through February 28, 2022
Amendment No. 1	\$166,750 increase	March 1, 2021 through February 28, 2022
Amendment No. 1	\$1,250,250	March 1, 2022 through February 28, 2025
Amendment No. 2	\$0	

It is further broken down by Program Year as follows:

Program Year	Dollar Amount
October 28, 2020 through February 28, 2021	\$151,000*
March 1, 2021 through February 28, 2022	\$515,750*
March 1, 2022 through February 28, 2023	\$416,750
March 1, 2023 through February 29, 2024	\$416,750
March 1, 2024 through February 28, 2025	\$416,750
Total	\$1,917,000

*This amount includes the carryover amount of \$99,000 from PY2020-21 to PY2021-22.

ATTACHMENTS

ATTACHMENT A – Remove and replace SCOPE OF WORK – ENDING THE HIV EPIDEMIC: A Plan for America for Early Intervention Services for Program Year 2021-22 (revised December 2021)

ATTACHMENT H – Remove and replace PROGRAM BUDGET AND ALLOCATION PLAN for Early Intervention Services for Program Year 2021-22 (revised December 2021)

All other terms and conditions of Contract No. 20-1067 remains in full force and effect.

SAN BERNARDINO COUNTY

Curt Hagman
Curt Hagman, Chairman, Board of Supervisors

Dated: DEC 07 2021

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

Lyn Ha/Monell
Lyn Ha/Monell, Deputy
Deputy
By _____
Deputy



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

By David Brinkman
A59BDAAE37C94E1
(Authorized signature - sign in blue ink)

Name David J. Brinkman
(Print or type name of person signing contract)

Title Chief Executive Officer
(Print or Type)

Dated: November 23, 2021

Address 1695 N. Sunrise Way
Palm Springs, CA 92262

FOR COUNTY USE ONLY

Approved as to Legal Form
Adam Ebright
6FC5599C63614F1
Adam Ebright, County Counsel
Date November 23, 2021

Reviewed or Contract Compliance
Becky Giroux
3A3202F6DC8E488
Becky Giroux, HS Contracts
Date November 23, 2021

Reviewed/Approved by Department
Joshua Dugas
30C7CC0E4C9E4CF
Joshua Dugas, Director
Date November 23, 2021

ATTACHMENT A

SCOPE OF WORK – Ending the HIV Epidemic: A Plan for America

USE A SEPARATE SCOPE OF WORK FOR EACH PROPOSED SERVICE CATEGORY

Contract Number:	Leave Blank
Contractor:	Desert AIDS Project
Grant Period:	March 01, 2021 – February 28, 2022
Service Category:	Early Intervention Services
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. Decrease the time between acquisition of HIV and entry into care and decrease instances of out-of-care to facilitate access to medications, decrease transmission rates, and improve health outcomes.
Service Health Outcomes:	Maintain 1% positivity rate or higher (targeted testing); Link newly diagnosed HIV+ to medical care in 30 days or less; Improve retention in care (at least 1 medical visit within 90 days and 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
Proposed Number of Clients			4,075			453	4,528
Proposed Number of Visits = Regardless of number of transactions or number of units			4,075			453	4,528
Proposed Number of Units = Transactions or 15 min encounters (See Attachment P)			4,502			500	5,002

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
	N/A	N/A		N/A	N/A					
• N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

ATTACHMENT A

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES;	SERVICE AREA	TIMELINE	PROCESS OUTCOMES
<p>Element #1: HIV Diagnosis. Activities: 1. Conduct HIV testing on-site. 2. Deploy HIV testing mobile unit in Service Areas 3 & 6 to venues accessible to target populations to include neighborhoods, homeless shelters, homeless encampments; community centers; substance use disorder recovery centers; and establishments catering to at-risk populations. 3. Conducting advertising and promotion to targeted populations to make them aware of HIV testing services and HIV educational information digitally and in print tailored for audience age, gender, race/ethnicity/gender/sexual orientation, risk group, immigration status, homeless, substance use. 4. Testing data collection. Client surveys. Testing outcomes assessments</p>	<p>3,6</p>	<p>03/01/21- 02/28/22</p>	<ul style="list-style-type: none"> • Administer 4,000 HIV tests. • Identify 40 newly HIV positive people. • Identify 40 re-engaging in care.
<p>Element #2: Linkage to Care Activities: 1. EIS receives referrals from Testing Counselors. 2. EIS meets with newly diagnosed and re-engaging in care, provides counseling about diagnosis; conducts needs assessment; determines insurance and medical assistance needs, provides benefits navigation and enrollment services; assess clients' readiness for rapid start ART; provide warm-hand off to DAP Central Registration for client intake; warm-hand off to clinician for same day appointments. 3. Central Registration client intake services to include client eligibility and other sources of funding for services; schedules clinician appointment. 4. Data collection</p>	<p>3,6</p>	<p>03/01/21- 02/28/22</p>	<ul style="list-style-type: none"> • Link 32 newly diagnosed and re-to care within 1-4 days. • Link 15 re-engaging in care to care within 1-4 days. • Link 101 newly diagnosed HIV+ and re-engaging to medical care in 30 days or less.

ATTACHMENT A

<p>Element #3: Retention in Care Activities: 1. Track missed appointments and other indicators of poor treatment adherence such as behavioral health concerns in shared electronic health records (EHR) 2. Communication with patients who miss appointments to include phone calls, home visits, contacting emergency contacts and assistance from patients' colleagues. 3. Assess needs; identify and problem-solve barriers to care; treatment adherence counseling. 4. Referrals to medical care, behavioral health, dental care, and support services to include housing placement assistance; grocery voucher and food distribution; medical transportation; job placement assistance; psychosocial support groups; client wellness services.</p>	<p>3,6</p>	<p>03/01/21-02/28/22</p>	<ul style="list-style-type: none"> • 37 newly diagnosed will complete a second medical visit within 90 days. • 105 re-engaging in care will complete a second medical visit within 90 days. • 38 newly diagnosed will complete a second medical visit within 6 months. • 110 re-engaging in care will complete a second medical visit within 6 months.
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ENDING THE HIV EPIDEMIC: A PLAN FOR AMERICA BUDGET AND ALLOCATION PLAN
Fiscal Year March 01, 2021 – February 28, 2022

AGENCY NAME: Desert AIDS Project

SERVICE: Early Intervention Services

	A	B	C
Budget Category	Non- Ending the HIV Epidemic: A Plan for America Cost (Other Payers) ²	Ending the HIV Epidemic: A Plan for America Cost	Total Cost ¹
Personnel			
<u>Community Health Educator/Testing Counselor(s):</u> (DeLaCruz, J. \$53,153 x 0.25 FTE=\$13,288); (Diaz De Leon, R \$40,384 x 0.25 FTE=\$10,096); (Gonzalez, A \$35,890 x 0.25 FTE=\$8,973; (Ruiz, N \$35,890 x 0.25 FTE=\$8,973)): Delivers comprehensive, innovative on-site and off-site HIV testing activities to identify unaware populations and link them to care. Develops strategies and educational programs to encourage regular testing and support early intervention among unaware, out-of-care, newly diagnosed and other populations at high risk of poor health outcomes and transmitting the disease. Conducts pre- and post-test counseling on risk and risk reduction strategies. Makes referrals for linkage to additional testing and medical care as needed. Conducts preliminary assessment of program eligibility. Provides care coordination with clinical services staff and case managers as needed.	123,987	41,330	165,317
<u>Community Health Educator/Early Intervention Services Counselor(s):</u> (Franco, Y., \$47,175 x 0.25 FTE=\$11,794); (Moore, J., I \$46,104 x 0.25 FTE=\$11,526); (Herrera, J., \$40,000 x 0.25 FTE=\$10,000); (Ward, J \$42,640 x 0.25 FTE=\$10,660); Delivers early intervention activities including outreach and support to current clients who have fallen out of care, testing among unaware, out-of-care, newly diagnosed and other populations at high risk of poor health outcomes and transmitting the disease. Provides health literacy assessments for high risk populations. Directly provides early intervention services including counseling unaware and unmet need individuals with respect to HIV/AIDS risk, testing and care, links clients to testing to confirm HIV and the extent of immune deficiency, intensive support and work to assess need, reduce barriers and link HIV positive to medical care. Provides care coordination with clinical services staff and case managers. Assists clients with referrals to community agencies, government entities and homeless shelters and other programs to reduce barriers to linkage.	131,939	43,980	175,919

ATTACHMENT H

<p>Community Health Testing and Outreach Manager / CH Early Intervention Manager: (Cruz, A \$55,827 x 0.10 FTE=\$5,583); (Ramos, G \$55,827 x 0.10 FTE=\$5,583) Provides HIV Care Continuum for HIV Testing and EIS service delivery oversight to/for HIV newly diagnosed, unaware and out of care clients. Develops and directs the delivery of EIS targeted at populations for the agency. Identifies and arranges testing locations within the communities of the Coachella Valley, coordinates with community organizations to have a presence at community programs, health fairs, walks, concerts, etc. for the purposes of linking unaware and out of care to testing and services. Establishes and maintains relationship with community entities and organizations such as other clinic settings who may have contact with demographic populations who have been identified to be at a disproportionate risk for HIV infection to ensure continuity of care.</p>	100,488	11,166	111,654
<p>Community Health Events & Partnership Manager: (Allen, J \$58,240 x 0.10 FTE=\$5,824) Establishes and strengthens relationships with Community Partners to expand participation and contributions for EIS program service delivery. Provides outreach and access to/for HIV high-risk populations who may be unaware or out of care. Recruits, trains and manages community outreach volunteers. Attends and oversight at/of community outreach, testing and EIS events.</p>	52,416	5,824	58,240
<p>Director of Community Health: (Tobe, CJ, \$115,003 X 0.10 FTE=\$11,500). Establishes and maintains relationship with community entities and organizations for integration and/or coordination with community partners, service providers. Participation in community-wide HIV/AIDS continuum of HIV prevention and care. As needed, attends and provides HIV Care Continuum of Care EIS program service delivery activities. Provides professional oversight and directs the delivery of EIS program. Oversees the coordination and certification of staff to ensure compliance with state and federal requirements.</p>	103,503	11,500	115,003
<p>Administrative Support Coordinator & Data Management Specialist: (Roman, F \$42,163 x 0.10 FTE=\$4,216); (Mullen, M \$35,874 x 0.10 FTE=\$3,587): Assists with coordination of EIS program service delivery. Provides data enter into ARIES, LEO and EHR. Maintains program department files and records. Assists with policy and procedure updates.</p>	70,234	7,803	78,037

ATTACHMENT H

Senior Data Analyst: (TBD / Garcia, R \$61,800 x 0.10 FTE=\$6,180). Performs client level data entry in electronic health record(s) directly related to delivery of EIS to support and improve ongoing care and treatment of patient. Analyzes client level data used by program staff to improve the quality of Ryan White service delivery in alignment with clinical quality management plans. Performs as the Ryan White Program ARIES Technical Lead (TL).	55,620	6,180	61,800
Eligibility/ Registration Specialist: (Nicasio, Y \$35,360 x 0.0 FTE=\$0); (Pichardo, A \$37,113 x 0.0 FTE=\$0); (Zahn, V \$47,220 x 0.0 FTE=\$0). Serves as the first point of contact for new clients to review, update and assist in establishing eligibility for Ryan White-funded services and other available state, county and local programs to assess payer of last resort, reviews income and residency eligibility and other general issues of compliance with the Standards of Care. Perform bi-annual eligibility recertification with clients. Performs data entry related to client eligibility recertification.	119,693	-0-	119,693
Social Media Specialist: (Lowes, S \$66,950 x 0.10 FTE = \$6,695). Under the supervision of the Director of Brand Marketing, creates content and updates for DAP websites and social media channels; works with Marketing Manager to manage and execute marketing-related projects and campaigns. Will create content publicizing Ending the HIV Epidemic (EHE) HIV Care Continuum on social media platforms (FB, Instagram, Twitter) and track social media metrics.	60,255	6,695	66,950
Sub-Total Personnel (w/o Benefits)		134,478	
Sub-Total Fringe Benefits: 25% of Sub-Total Personnel Costs		33,620	
Quality & Program Monitor: (Terramagra, J \$63,000 x 0.05 FTE=\$3,150). Develops and directs Clinical Quality Improvement/Management program in compliance with Ryan White National Monitoring Standards, federal, state and local regulatory bodies, Ryan White Local Policies & Procedures and IEHPC Standards of Care. Assists with the Ryan White Program Quality Management and QM Technical Lead mechanisms.	59,850	3,150	63,000
Total Personnel (w/o Benefits)		137,628	
Total Fringe Benefits: 25% of Total Personnel Costs		34,407	
TOTAL PERSONNEL	\$0	\$172,035	\$0
Other (Other items related to service provision such as supplies, rent, utilities, depreciation, maintenance, telephone, travel, computer)			

ATTACHMENT H

Office Supplies/Small Tools & Equipment: Standard office supplies, tools and minor equipment (i.e.: paper, related copy supplies, pens, pencils, tablets, paper clips, desk/office supplies, and misc. items), calculators, printers, scanners, keyboards, mouse, etc. No item cost exceeds \$4,999.	1,000	5,000	6,000
Computer Software & Hardware: Projected costs for computer software and hardware equipment and systems necessary to document client and program service delivery, treatment plans, track compliance with treatment, health outcomes, test results and other information necessary to provide EIS, medical and program services. Includes the annual software license renewals and maintenance contracts. No item cost exceeds \$4,999.	10,000	10,000	20,000
Medical Supplies: Projected costs for medical supplies (such as band aids, gloves, gauze, portable scales, alcohol, tongue depressors) and other HIV diagnostic/confirmatory testing supplies required to provide care services to the unaware and unmet need populations for EIS Linkage to Care, as well as serving current patient population. No item cost exceeds \$4,999.	32,000	18,000	50,000
Outreach and Stigma Reduction: Costs for communications and advertising related to reaching the unaware and unmet need populations and linking them to EIS as well as serving current patients.	1,000	74,000	75,000
Travel/: mileage and/or gas reimbursement for staff travel and/or agency mobile unit for the delivery or improvement of EIS at IRS determined mileage rates. (current IRS rate is applicable)	5,000	10,000	15,000
Incentives: Items purchased such as gas gift cards/vouchers and/or Lyft/Uber to motivate unaware individuals to engage in HIV testing, EIS Linkage to Care and Retention in Care.	4,444	15,556	20,000
TOTAL OTHER	\$0	\$132,556	\$0
SUBTOTAL (Total Personnel and Total Other)	\$0	\$304,591	\$0
Administration (limited to 10% of total service budget)		20,559	
TOTAL BUDGET (Subtotal & Administration)	\$0	\$325,150	\$0

¹ Total Cost = Ending the HIV Epidemic: A Plan for America (Other Payers) + Ending the HIV Epidemic: A Plan for America (A+B)

- **Total Number of Ending the HIV Epidemic: A Plan for America Units to be Provided for this Service Category: 5,002**
- **Total Ending the HIV Epidemic: A Plan for America (Column B) Divided by Total Ending the HIV Epidemic: A Plan for America Units to be Provided: 65.00**
(This is your agency's Ending the HIV Epidemic: A Plan for America cost for care per unit)