

**STD CONTROL BRANCH  
LOCAL HEALTH JURISDICTION CONTACT INFORMATION**

<b>ORGANIZATION</b>	This is the information that will appear on your grant cover page.		
	<b>Federal Tax Identification Number</b>	<u>95-6002748</u>	
	<b>Legal Name of the Organization</b>	<u>County of San Bernardino</u>	
	<b>Mailing Address</b>	<u>351 North Mountain View, San Bernardino CA 92415</u>	
	<b>Street Address (If Different)</b>	<u></u>	
	<b>County</b>	<u>San Bernardino</u>	

<b>GRANT SIGNATORY</b>	The Grant Signatory is the individual who has the authority to sign the grant cover page (CDPH 1229).			
	<b>Name</b>	<u>Curt Hagman</u>		
	<b>Title</b>	<u>Chairman, Board of Supervisors</u>		
	<b>Mailing Address</b>	<u>385 North Arrohead Avenue, Fifth Floor, San Bernardino CA 92415</u>		
	<b>Street Address (If Different)</b>	<u></u>		
	<b>Telephone Number</b>	<u>909-387-4866</u>	<b>Fax Number</b>	<u></u>
	<b>Email</b>	<u></u>		

**PROJECT DIRECTOR**

The Project Director is the individual who is responsible for the oversight of the grant and is responsible for the day-to-day activities of the project and for seeing that all grant requirements are met. This person will be in contact with State STD Control Branch staff and will receive all programmatic, budget, and accounting documents for the project and will be responsible for the proper dissemination of program information.

**Name** Susan Strong, NP

**Title** Program Manager

**Mailing Address** 351 North Mountain View, San Bernardino CA 92415

**Street Address (If Different)** \_\_\_\_\_

**Telephone Number** 909-387-6797 **Fax Number** 909-387-6377

**Email** [sstrong@dph.sbcounty.gov](mailto:sstrong@dph.sbcounty.gov)

**CASHIER/FISCAL REPRESENTATIVE**

The Cashier/Fiscal Representative is the individual who is responsible for submitting invoices and receiving the invoice payments. The mailing address is where the payments will be mailed.

**Name** Paul Chapman

**Title** Administrative Manager

**Mailing Address** 172 W. 3rd Street, 6th Floor, San Bernardino 92415-0010

**Street Address (If Different)** \_\_\_\_\_

**Telephone Number** 909-387-6630 **Fax Number** 909-387-6886

**Email** [paul.chapman@dph.sbcounty.gov](mailto:paul.chapman@dph.sbcounty.gov)

**Exhibit A**  
**Scope of Work**

**1. Service Overview**

The Grantee will implement public health activities to monitor, investigate, and prevent Sexually Transmitted Diseases (STD) within the local health jurisdiction. California Department of Public Health (CDPH) STD surveillance data indicate that over the past five years, there were continued increases in infectious syphilis, congenital syphilis, gonorrhea, and chlamydia trachomatis infection across the state. The increases in syphilis among women, including pregnant women, and the devastating impact of congenital syphilis is of particular concern. Local health jurisdictions should use these funds to augment local funding for comprehensive STD prevention and control activities.

Key strategic targets for STD prevention and control are: implementation of case-based surveillance; assurance of timely access to quality clinical services; verification of appropriate STD treatment; investigation of reported cases, unusual diseases, or outbreaks; identification of a STD patient's sexual and social network contacts and referral for examination and/or treatment to prevent further disease transmission or complications; and health education and health promotion activities to prevent STDs and enhance awareness of individuals at risk for STD, medical providers, and other service providers within the community.

**2. Service Location**

The services shall be performed at applicable facilities in the **San Bernardino County**.

**3. Service Hours**

The services shall be primarily provided Monday through Friday, from 8:00 a.m. to 5:00 p.m. and include evenings, weekends, and holidays as needed.

**4. Services to be Performed: Core STD Program Management**

**Part I: Surveillance: Assure quality case-based surveillance.**

Activities	Performance Indicators/Deliverables	Timeline
A. Assure completeness and accuracy of key data variables through review of laboratory and provider reports, surveillance system documentation, and public health follow-up of early syphilis cases.	Key population specific variables are as follows: For females – all stages of syphilis: <ul style="list-style-type: none"><li>• Proportion of early syphilis cases with complete data for the following key variables:<ul style="list-style-type: none"><li>➤ Pregnancy status (females ages 12-44)</li><li>➤ Estimated Date of Delivery (EDD), if pregnant</li><li>➤ Treatment date, stage-appropriate medication and dosage</li><li>➤ HIV status</li></ul></li></ul>	07/01/19 – 06/30/24

**Submit****GOVERNMENT AGENCY TAXPAYER ID FORM**

The principal purpose of the information provided is to establish the unique identification of the government entity.

**Instructions:** You may submit one form for the principal government agency and all subsidiaries sharing the same TIN. Subsidiaries with a different TIN must submit a separate form. Fields bordered in red are required. Please print the form to sign prior to submittal. You may email the form to: [GovSuppliers@cdph.ca.gov](mailto:GovSuppliers@cdph.ca.gov) or fax it to (916) 650-0100, or mail it to the address above.

Principal  
Government  
Agency Name

County of San Bernardino

Remit-To  
Address (Street  
or PO Box)

351 N. Mountain View Avenue

City:

San Bernardino

State: CA

Zip Code+4: 92415-0010

Government  
Type:☐ City☒ County☐ Special District☐ Federal☐ Other (Specify)Federal  
Employer  
Identification  
Number  
(FEIN)

95-6002748

List other subsidiary Departments, Divisions or Units under your principal agency's jurisdiction who share the same FEIN and receives payment from the State of California.

FI\$Cal ID#  
(if known)Dept/Division/Unit  
Name

Public Health

Complete  
Address351 N. Mountain View Avenue  
San Bernardino, CA 92415-0010FI\$Cal ID#  
(if known)Dept/Division/Unit  
NameComplete  
AddressFI\$Cal ID#  
(if known)Dept/Division/Unit  
NameComplete  
AddressFI\$Cal ID#  
(if known)Dept/Division/Unit  
NameComplete  
Address

Contact Person

Paul Chapman

Title

Administrative Manager

Phone number

909-387-6630

E-mail address

[paul.chapman@dph.sbcounty.gov](mailto:paul.chapman@dph.sbcounty.gov)

Signature

Date

10/10/2018

**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
	<p>For syphilis-exposed neonates:</p> <ul style="list-style-type: none"> <li>Proportion of congenital syphilis cases with appropriate classification documented on the Congenital Syphilis Case Report Form</li> </ul> <p>For males – early syphilis (primary, secondary, early latent):</p> <ul style="list-style-type: none"> <li>Proportion of early syphilis cases with complete data for the following key variables: <ul style="list-style-type: none"> <li>➤ Treatment date, stage-appropriate medication/dosage</li> <li>➤ HIV status</li> <li>➤ Gender of sex partners</li> </ul> </li> </ul>	
B. Ensure client-level interactions for syphilis cases are integrated with HIV, including assessing HIV testing and care status using HIV surveillance data prior to client follow-up to inform opportunities for testing, Pre-exposure prophylaxis (PrEP), and linkage or re-engagement to HIV care.	<ul style="list-style-type: none"> <li>Description in the End-of-Year report of efforts to actively verify or match syphilis and HIV data to inform comprehensive client interaction, detailing operational problems encountered and overcome.</li> </ul>	07/01/19 – 06/30/24
C. Utilize STD surveillance data for syphilis, gonorrhea and chlamydia to inform public health program action or interventions.	<ul style="list-style-type: none"> <li>Description of one example of data informed program activity or intervention in the End-of-Year report.</li> </ul>	07/01/19 – 06/30/24
D. Ensure all staff with access to STD data complete the CDPH required confidentiality and data security training and maintain on file the associated confidentiality agreements.	<ul style="list-style-type: none"> <li>Confidentiality and data security training agreements are maintained in the LHJ.</li> </ul>	07/01/19 – 06/30/24

**Exhibit A**  
Scope of Work

**Part II: Disease Intervention: Conduct disease intervention and partner services to prevent further transmission (community and mother-child).**

Activities	Performance Indicators/Deliverables	Timeline
<p>A. Ensure timely investigation of all reported reactive serologic tests for syphilis (reactors):</p> <ol style="list-style-type: none"> <li>1. Process syphilis reports using the Syphilis Reactor Alert System (SRAS) Guide to identify priority reactors for investigation, including reactors among females of reproductive age (12-44 years old), all reactors among neonates and children, reactors with titers of 1:32 and above regardless of gender or age, and all primary and secondary syphilis cases reported regardless of gender or age.</li> <li>2. Conduct record search on all incoming syphilis reactors regardless of gender or age, including searching the surveillance registry to determine history of syphilis, verify adequate treatment status at appropriate intervals including appropriate intervals between doses among females, and assess post-treatment titer levels.</li> <li>3. Obtain data from medical providers or electronic medical record searches to verify patient's diagnosis, signs and symptoms at time of exam, syphilis tests, and stage-appropriate treatment for priority reactors as determined by the SRAS.</li> </ol>	<ul style="list-style-type: none"> <li>• Using template provided by CDPH STD Control Branch, indicate LHJ priorities for public health follow-up of syphilis reactors.</li> <li>• Proportion of all early syphilis cases that are treated appropriately within 7 days of initial report to local health department.</li> </ul>	<p>07/01/19 – 06/30/24</p>

**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
<p>4. Initiate priority syphilis reports for field investigation, interview, and partner services for the following: patients with untreated or inadequately treated syphilis, new cases of syphilis for interview and partner services, and inadequate titer response requiring reassessment.</p>		
<p>B. Facilitate congenital syphilis prevention:</p> <ol style="list-style-type: none"> <li>1. Ensure that all pregnant and other females of reproductive age with syphilis (all stages) receive: <ul style="list-style-type: none"> <li>• timely and stage appropriate syphilis treatment, according to CDC STD Treatment Guidelines;</li> <li>• referrals to prenatal care, family planning services and/or HIV testing, as needed;</li> <li>• comprehensive interview, including contact tracing/partner elicitation.</li> </ul> </li> <li>2. Ensure that sexual and needle sharing partners of female syphilis cases receive: <ul style="list-style-type: none"> <li>• notification of exposure or risk for syphilis;</li> <li>• timely syphilis testing and appropriate treatment, according to CDC STD Treatment Guidelines;</li> <li>• timely testing for HIV and linkage to HIV care as needed;</li> <li>• comprehensive interview, including contact tracing/partner elicitation, for those diagnosed as syphilis cases.</li> </ul> </li> </ol>	<p>For females of reproductive age with syphilis (all stages), stratified by pregnancy status:</p> <ul style="list-style-type: none"> <li>• Proportion of pregnant female cases linked to timely and stage-appropriate treatment within within 7 days of initial report to the health department.</li> <li>• Proportion of non-pregnant female cases linked to timely and stage-appropriate treatment within within 7 days of initial report to the health department.</li> <li>• Proportion of pregnant females who are previously HIV-positive or have a documented HIV test within 30 days before or 14 days after her syphilis diagnosis.</li> </ul> <p>For partners of pregnant female syphilis cases (all stages):</p> <ul style="list-style-type: none"> <li>• Proportion of early syphilis cases among females of reproductive age with at least one partner treated within 30 days before or after index client specimen collection.</li> </ul> <p>For female partners of male early syphilis cases:</p> <ul style="list-style-type: none"> <li>• Proportion of male early syphilis cases who report female sex partners with at least 1 female partner treated within 30 days before or after specimen collection of the index case.</li> </ul>	<p>07/01/19 – 06/30/24</p>



**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
<p>3. Ensure that female sexual and needle sharing partners of male early syphilis cases receive:</p> <ul style="list-style-type: none"> <li>• notification of exposure or risk for syphilis;</li> <li>• timely syphilis testing and stage-appropriate treatment, according to CDC STD Treatment Guidelines;</li> <li>• referrals to prenatal care or family planning services, as needed;</li> <li>• timely testing for HIV and linkage to HIV care, as needed;</li> <li>• comprehensive interview, including contact tracing/partner elicitation, for those newly diagnosed.</li> </ul>		
<p>C. Facilitate congenital syphilis case management:</p> <ol style="list-style-type: none"> <li>1. Document birth outcomes for all pregnant females with syphilis.</li> <li>2. Ensure that all neonates exposed to syphilis receive a comprehensive medical evaluation for evidence of congenital syphilis, per CDC STD Treatment Guidelines.</li> </ol>	<ul style="list-style-type: none"> <li>• Proportion of pregnant female syphilis cases (all stages) with documentation of birth outcome on the Congenital Syphilis Case Report Form.</li> <li>• Proportion of pregnant female syphilis cases (all stages) who did not deliver a baby with congenital syphilis (Congenital Syphilis Prevention Ratio).</li> <li>• Proportion of neonates exposed to any stage of syphilis with appropriate infant medical evaluation and treatment per CDC recommendations, including neonates that are classified as congenital syphilis stillbirths, confirmed cases, probable cases, and non-cases.</li> </ul>	<p>07/01/19 – 06/30/24</p>
<p>D. Facilitate HIV prevention:</p> <ol style="list-style-type: none"> <li>1. Ensure that all early syphilis cases receive: <ul style="list-style-type: none"> <li>• testing for HIV or confirmation of HIV-positive status;</li> <li>• comprehensive interview, including integrated partner elicitation for syphilis and HIV;</li> </ul> </li> </ol>	<p>For early syphilis cases:</p> <ul style="list-style-type: none"> <li>• Proportion of early syphilis cases with HIV negative or unknown status who are tested for HIV, within 30 days of initial report of local health department.</li> <li>• Proportion of HIV-negative early syphilis cases, referred to PrEP.</li> </ul>	<p>07/01/19 – 06/30/24</p>



**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
<ul style="list-style-type: none"> <li>linkage or re-engagement to HIV care for HIV-positive syphilis cases;</li> <li>referral to HIV PrEP for HIV-negative syphilis cases.</li> </ul> <p>2. Ensure that all sexual and needle sharing partners receive:</p> <ul style="list-style-type: none"> <li>notification of exposure and risk for syphilis and HIV;</li> <li>linkage to testing and treatment, including presumptive treatment for syphilis;</li> <li>linkage to HIV testing or confirmation of HIV status;</li> <li>linkage to HIV care for individuals newly HIV-positive;</li> <li>re-engagement with care for HIV-positive cases no longer in HIV care;</li> <li>linkage to HIV PrEP if HIV-negative;</li> <li>comprehensive interview, including contact tracing/partner elicitation, for those newly diagnosed.</li> </ul>	<ul style="list-style-type: none"> <li>Proportion of early syphilis cases with new HIV diagnosis linked to HIV care within 30 days of HIV test.</li> <li>Proportion of early syphilis cases who are previously HIV positive and out of care who are linked to care within 30 days of interview.</li> </ul> <p>For partners of early syphilis cases:</p> <ul style="list-style-type: none"> <li>Proportion of partners tested or treated for syphilis within 14 days of index case interview.</li> <li>Proportion of HIV-negative/unknown partners tested for HIV within 14 days of index case interview.</li> <li>Proportion of HIV negative partners who are referred to HIV PrEP.</li> <li>Proportion of partners with new HIV diagnosis linked to care within 30 days of HIV test.</li> <li>Proportion of partners who are previously HIV positive and out of care who are linked to care within 30 days of interview.</li> </ul>	
<p>E. Coordinate and participate in cluster and outbreak detection and response activities related to syphilis clusters, suspected gonorrhea treatment failure or report of reduced drug susceptibility, and other relevant conditions such as lymphogranuloma venereum or ocular syphilis.</p>	<ul style="list-style-type: none"> <li>Description of process and outcomes of activities in the End-of-Year report, including: <ul style="list-style-type: none"> <li>➤ Identification of cluster, outbreak, suspected drug resistance</li> <li>➤ Enhanced surveillance and interview of index cases</li> <li>➤ Sexual and social network investigation</li> <li>➤ Field investigation, community outreach and screening events</li> </ul> </li> </ul>	<p>07/01/19 – 06/30/24</p>

**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
<b>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</b>  <input type="checkbox"/> F. Subcontract with community-based or other organizations to ensure success of core STD program functions (check box if conducting this activity).	Subcontract with community or other organizations, if needed.	

**Optional SOW Narrative:** LHJ has new or innovative tasks that are not part of current Part II activities. Describe the specific methods and approaches that will be used to complete the activities selected for this objective. Briefly describe the anticipated scope of the proposed activities, deliverables, and a projected timeline, including the approximate beginning and ending month and year for each major activity.

Activities	Performance Indicators/Deliverables	Timeline

**Part III: Clinical Services: Assure high quality STD screening and treatment services.**

Activities	Performance Indicators/Deliverables	Timeline
A. Conduct an assessment of available STD screening and treatment services to support access to quality STD clinical services in the local health jurisdiction.	<ul style="list-style-type: none"> <li>Description of the following activities in the End-of-Year Report:               <ul style="list-style-type: none"> <li>➤ STD clinical assessment activities, including name(s) of key community clinics or medical providers and annual clinic census and hours of operation for health department STD clinics.</li> <li>➤ Activities and partnerships to enhance availability or quality of STD clinical services.</li> </ul> </li> </ul>	07/01/19 – 06/30/24

**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
<p><b>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</b></p> <p><input checked="" type="checkbox"/> B. Enhance quality of STD care among providers in high volume clinics serving high morbidity areas or priority STD patients through activities such as provider detailing or clinical quality improvement.</p>	<ul style="list-style-type: none"> <li>Proportion of early syphilis cases receiving first-line recommended treatment.</li> <li>Proportion of gonorrhea cases receiving recommended treatment.</li> <li>Description of activities and corresponding indicators in the End-of-Year Report.</li> </ul> <p><b>Provider detailing to 25 providers in high morbidity areas. Indicator is comparison of positive tests reported before and after two-three months and six months from detail visit.</b></p>	07/01/19 – 06/30/24
<p><b>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</b></p> <p><input checked="" type="checkbox"/> C Enhance STD screening and treatment for vulnerable populations in settings such as jail, juvenile detention centers, and other high prevalence non-clinical settings; mobile testing among homeless encampments and other geographic hot spots; or online via the I Know program.</p>	<ul style="list-style-type: none"> <li>Description of activities and corresponding indicators in the End-of-Year Report.</li> </ul> <p><b>Mobile STD testing among the homeless and other geographic hotspots.</b></p> <p><b>Number of tests given</b> <b>Number of positives found</b> <b>Number of treatments achieved</b></p>	07/01/19 – 06/30/24
<p><b>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</b></p> <p><input type="checkbox"/> D. Subcontract with community-based or other organizations to ensure success of core STD program functions (check box if conducting this activity).</p>	Subcontract with community or other organizations, if needed.	07/01/19 – 06/30/24

**Exhibit A**  
Scope of Work

**Optional SOW Narrative:** LHJ has new or innovative tasks that are not part of current Part III activities. Describe the specific methods and approaches that will be used to complete the activities selected for this objective. Briefly describe the anticipated scope of the proposed activities, deliverables, and a projected timeline, including the approximate beginning and ending month and year for each major activity.

Activities	Performance Indicators/Deliverables	Timeline

**Part IV: Health Promotion: Increase STD/sexual health awareness and primary prevention.**

Activities	Performance Indicators/Deliverables	Timeline
<b>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</b>  <input type="checkbox"/> A. Collect and review data to understand root causes of disparities in the local community; develop a plan to address disparities among African American and Latino/a populations.	<ul style="list-style-type: none"> <li>• Description of activities in the End-of-Year Report, including:             <ul style="list-style-type: none"> <li>➤ description of local disparities</li> <li>➤ number of collaborator sites</li> <li>➤ activities to address disparities</li> <li>➤ other relevant program outcomes</li> </ul> </li> </ul>	07/01/19 – 06/30/24
<b>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</b>  <input type="checkbox"/> B. Provide technical assistance to school districts and other school-based partners regarding confidential sexual health services and education in accordance with state regulations.	<ul style="list-style-type: none"> <li>• Description of activities in the End-of-Year Report, including:             <ul style="list-style-type: none"> <li>➤ number of collaborator sites</li> <li>➤ technical assistance activities</li> <li>➤ other relevant program outcomes</li> </ul> </li> </ul>	07/01/19 – 06/30/24

**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
<p><b>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</b></p> <p><input type="checkbox"/> C. Support local implementation of health promotion activities for adolescents and young adults; gay bisexual and other men who have sex with men; transgender individuals; racial/ethnic groups with high rates of infection; and other priority populations as defined by risk or geography.</p>	<ul style="list-style-type: none"> <li>• Description of activities in the End-of-Year Report, including: <ul style="list-style-type: none"> <li>➤ description of priority population or area</li> <li>➤ number of collaborator sites</li> <li>➤ health promotion activities</li> <li>➤ other relevant program outcomes</li> </ul> </li> </ul>	07/01/19 – 06/30/24
<p>D. Promote the presence, relevancy, and accuracy of STD prevention messaging on webpage(s) and other social media.</p>	<ul style="list-style-type: none"> <li>• Local health department website with: <ul style="list-style-type: none"> <li>➤ local STD data</li> <li>➤ health alerts and provider resources</li> <li>➤ sexual and reproductive health education materials</li> <li>➤ links to clinical services</li> </ul> </li> <li>• Description of other social media outreach in the End-of-Year Report.</li> </ul>	07/01/19 – 06/30/24
<p><b>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</b></p> <p><input type="checkbox"/> E. Subcontract with community-based or other organizations to ensure success of core STD program functions (check box if conducting this activity).</p>	Subcontract with community or other organizations, if needed.	07/01/19 – 06/30/24

**Exhibit A**  
Scope of Work

**Optional SOW Narrative:** LHJ has new or innovative tasks that are not part of current Part IV activities. Describe the specific methods and approaches that will be used to complete the activities selected for this objective. Briefly describe the anticipated scope of the proposed activities, deliverables, and a projected timeline, including the approximate beginning and ending month and year for each major activity.

Activities	Performance Indicators/Deliverables	Timeline

**Part V: Policy and Communication: Assure effective communication and policy development to support STD prevention.**

Activities	Performance Indicators/Deliverables	Timeline
A. Identify and leverage opportunities to educate community partners, policy makers, and the media.	<ul style="list-style-type: none"> <li>Description of activities will be included in the End-of-Year Report.</li> </ul>	07/01/19 – 06/30/24
B. Participate in statewide STD prevention forums, working groups, and web meetings to build capacity and enhance cross-jurisdictional communication.	<ul style="list-style-type: none"> <li>Number of attendees at the annual in-person California STD/HIV Controllers Association membership meeting</li> <li>Number of monthly Executive Committee teleconferences attended</li> <li>Number of Local Capacity Building webinars attended, as hosted by CDPH STD Control Branch.</li> <li>Number of staff attending statewide stakeholder conferences hosted by CDPH STD Control Branch.</li> <li>Description of additional activities in the End-of-Year Report.</li> </ul>	07/01/19 – 06/30/24

**Exhibit A**  
Scope of Work

Activities	Performance Indicators/Deliverables	Timeline
C. Collaborate with health department and external partners to leverage systems for addressing congenital syphilis, HIV prevention, and correctional health.	<ul style="list-style-type: none"> <li>Description of collaborations with health department partners (e.g., Maternal Child and Adolescent Health program, Public Health Nursing, HIV program) and external partners (e.g., community-based organizations, correctional facilities and contractors) in End-of-Year Report.</li> </ul>	07/01/19 – 06/30/24
<p><b>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</b></p> <p><input type="checkbox"/> C. Subcontract with community-based or other organizations to ensure success of core STD program functions (check box if conducting this activity).</p>	Subcontract with community or other organizations, if needed.	07/01/19 – 06/30/24

**Optional SOW Narrative:** LHJ has new or innovative tasks that are not part of current Part V activities. Describe the specific methods and approaches that will be used to complete the activities selected for this objective. Briefly describe the anticipated scope of the proposed activities, deliverables, and a projected timeline, including the approximate beginning and ending month and year for each major activity.

Activities	Performance Indicators/Deliverables	Timeline



**Exhibit A**  
Scope of Work

**5. Summary of Required Reports and Data**

<b>Frequency</b>	<b>Timeframe</b>	<b>Deadline</b>	<b>Activities</b>	<b>Report Recipient</b>
Annual	07/01/2019 – 06/30/2024	06/30/2020 06/30/2021 06/30/2022 06/30/2023 06/30/2024	Part II – V	<a href="mailto:STDLHJContracts@cdph.ca.gov">STDLHJContracts@cdph.ca.gov</a>
Ongoing	7/01/2019 – 6/30/2024	Ongoing, within 45 days of report to the LHJ	STD Case Closure	CalREDIE data system, or by other means per agreement between the local STD Control Officer and the STDCB.

**Exhibit B, Attachment I  
Budget  
Year 1  
July 1, 2019 – June 30, 2020**

**PERSONNEL**

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
<b>Total Personnel</b>				<b>\$136,267</b>
Fringe Benefits @	51.51%			\$70,191
<b>Total Personnel &amp; Benefits</b>				<b>\$206,458</b>

**OPERATING EXPENSES**

General Office Expense (paper, pens, pencils)	\$2,920
Communications	\$2,917
Special Department Expense	\$0
Postage	\$250
Printing	\$761
<b>Total Operating Expenses</b>	<b>\$6,848</b>

**MAJOR EQUIPMENT** (If >\$50K, please itemize) **\$0**

**TRAVEL** (meetings, site visits) **\$2,828**

**SUBCONTRACTORS**

Name of subcontractor or service to be performed **\$0**

**Total Subcontractors** **\$0**

**OTHER COSTS** **\$0**

**INDIRECT COSTS (14.628% OF PERSONNEL AND BENEFITS)** 14.628% **\$30,201**



**Exhibit B Attachment I - Schedule 1**  
**Subcontractor Budget**  
**Year 1**  
**July 1, 2019 - June 30, 2020**

**Name of Subcontractor:**

**Expense Category**

Personnel

General Expense

Travel

Subcontracts

Indirect Costs (XX% of Personnel)

**Totals**

\$

\$

\$

\$

\$

**Total Costs**

**\$0**

**Name of Subcontractor:**

**Expense Category**

Personnel

General Expense

Travel

Subcontracts

Indirect Costs (XX% of Personnel)

**Totals**

\$

\$

\$

\$

\$

**Total Costs**

**\$0**

**Exhibit B, Attachment I  
Subcontractor Budget  
Name of Subcontractor  
Year 1  
July 1, 2019 – June 30, 2020**

**PERSONNEL**

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months</u>	<u>Budget</u>
Position Title/Classification	\$0	0.00	12	\$0
Position Title/Classification	\$0	0.00	12	\$0
Position Title/Classification	\$0	0.00	12	\$0
<b>Total Personnel</b>				<b>\$0</b>
Fringe Benefits @	0%			\$0
<b>Total Personnel &amp; Benefits</b>				<b>\$0</b>

**OPERATING EXPENSES**

General Office Expense	\$0
[Insert Line Item Name]	\$0
[Insert Line Item Name]	\$0
[Insert Line Item Name]	\$0
<b>Total Operating Expenses</b>	<b>\$0</b>

**EQUIPMENT** (If >\$50K, please itemize) **\$0**

**TRAVEL** **\$0**

**SUBCONTRACTORS** (If >\$50K, itemize on subcontractor budget template)

Name of subcontractor \$0  
Name of subcontractor \$0

**Total Subcontractors** **\$0**

**OTHER COSTS** **\$0**

**INDIRECT COSTS (XX% OF PERSONNEL AND BENEFITS)** **\$0**

**BUDGET GRAND TOTAL** **\$0**

**Exhibit B, Attachment I**  
**Budget**  
**Year 2**  
**July 1, 2020 – June 30, 2021**

**PERSONNEL**

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
<b>Total Personnel</b>				<b>\$136,267</b>
Fringe Benefits @	51.51%			\$70,191
<b>Total Personnel &amp; Benefits</b>				<b>\$206,458</b>

**OPERATING EXPENSES**

General Office Expense (paper, pens, pencils)	\$2,920
Communications	\$2,917
Special Department Expense	\$0
Postage	\$250
Printing	\$761
<b>Total Operating Expenses</b>	<b>\$6,848</b>

**MAJOR EQUIPMENT** (If >\$50K, please itemize) **\$0**

**TRAVEL** (meetings, site visits) **\$2,828**

**SUBCONTRACTORS**

Name of subcontractor or service to be performed	\$0
<b>Total Subcontractors</b>	<b>\$0</b>

<b>OTHER COSTS</b>		<b>\$0</b>
<b>INDIRECT COSTS (14.628% OF PERSONNEL AND BENEFITS)</b>	<b>14.628%</b>	<b>\$30,201</b>
<b>BUDGET GRAND TOTAL</b>		<b>\$246,335</b>



**Exhibit B, Attachment I**  
**Budget**  
**Year 3**  
**July 1, 2021 – June 30, 2022**

**PERSONNEL**

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
<b>Total Personnel</b>				<b>\$136,267</b>
Fringe Benefits @	51.51%			\$70,191
<b>Total Personnel &amp; Benefits</b>				<b>\$206,458</b>

**OPERATING EXPENSES**

General Office Expense (paper, pens, pencils)	\$2,920
Communications	\$2,917
Special Department Expense	\$0
Postage	\$250
Printing	\$761
<b>Total Operating Expenses</b>	<b>\$6,848</b>

**MAJOR EQUIPMENT** (If >\$50K, please itemize) **\$0**

**TRAVEL** (meetings, site visits) **\$2,828**

**SUBCONTRACTORS**

Name of subcontractor or service to be performed **\$0**

**Total Subcontractors** **\$0**

<b>OTHER COSTS</b>		<b>\$0</b>
<b>INDIRECT COSTS (14.628% OF PERSONNEL AND BENEFITS)</b>	<b>14.628%</b>	<b>\$30,201</b>
<b>BUDGET GRAND TOTAL</b>		<b>\$246,335</b>

**Exhibit B, Attachment I**  
**Budget**  
**Year 4**  
**July 1, 2022 – June 30, 2023**

**PERSONNEL**

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
<b>Total Personnel</b>				<b>\$136,267</b>
Fringe Benefits @	51.51%			\$70,191
<b>Total Personnel &amp; Benefits</b>				<b>\$206,458</b>

**OPERATING EXPENSES**

General Office Expense (paper, pens, pencils)	\$2,920
Communications	\$2,917
Special Department Expense	\$0
Postage	\$250
Printing	\$761
<b>Total Operating Expenses</b>	<b>\$6,848</b>

**MAJOR EQUIPMENT** (If >\$50K, please itemize) **\$0**

**TRAVEL** (meetings, site visits) **\$2,828**

**SUBCONTRACTORS**

Name of subcontractor or service to be performed **\$0**

**Total Subcontractors** **\$0**

<b>OTHER COSTS</b>		<b>\$0</b>
<b>INDIRECT COSTS (14.628% OF PERSONNEL AND BENEFITS)</b>	<b>14.628%</b>	<b>\$30,201</b>
<b>BUDGET GRAND TOTAL</b>		<b>\$246,335</b>

**Exhibit B, Attachment I**  
**Budget**  
**Year 5**  
**July 1, 2023 – June 30, 2024**

**PERSONNEL**

<u>Classification</u>	<u>Monthly Salary</u>	<u>Percent of Time</u>	<u>Months on Project</u>	<u>Budget</u>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
<b>Total Personnel</b>				<b>\$136,267</b>
Fringe Benefits @	51.51%			\$70,191
<b>Total Personnel &amp; Benefits</b>				<b>\$206,458</b>

**OPERATING EXPENSES**

General Office Expense (paper, pens, pencils)	\$2,920
Communications	\$2,917
Special Department Expense	\$0
Postage	\$250
Printing	\$761
<b>Total Operating Expenses</b>	<b>\$6,848</b>

**MAJOR EQUIPMENT** (If >\$50K, please itemize) **\$0**

**TRAVEL** (meetings, site visits) **\$2,828**

**SUBCONTRACTORS**

Name of subcontractor or service to be performed **\$0**

**Total Subcontractors** **\$0**

OTHER COSTS		\$0
INDIRECT COSTS (14.628% OF PERSONNEL AND BENEFITS)	14.628%	\$30,201
BUDGET GRAND TOTAL		\$246,335

County of San Bernardino

PERSONNEL			Percent of Time	Months	Budget	DESCRIPTION OF EXPENSE
Classification	Monthly Salary					
Accountant III	\$5,293	5%	12	\$3,176		Duties and Responsibilities: Provide fiscal support for contract
Health Education Specialist II	\$4,806	5%	12	\$2,883		Duties and Responsibilities: Maintain department website with STD-related data, provider resources, educational materials, quarterly newsletter, assist with provider visits, monitor grant and write annual report.
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310		Duties and Responsibilities: Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310		Duties and Responsibilities: Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452		Duties and Responsibilities: Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
Public Service Employee	\$2,376	36.00%	12	\$10,265		Duties and Responsibilities: Process CAIREDIE, paper and faxed labs to assist CDIs with investigation.
Public Health Epidemiologist	\$2,393	10%	12	\$2,871		Duties and Responsibilities: Maintain STD data, run morbidity reports, act as lead for HSAs, presentations to providers, support grant reports
BENEFITS		Total Personnel		\$136,267		
Benefits						
		51.51%		\$70,191		The benefit rate is based on prior year actual costs (51.51%)
OPERATING EXPENSES						
General Office Expense					\$2,920	Program's share of office expense, i.e. paper, envelopes, pencils, copy services, etc.
Communications					\$2,917	Email Accounts
Special Department Expense					\$400	Color Printer
Postage					\$250	To mail education materials
Printing					\$761	Print syphilis toolkits for provider
		Total Operating		\$7,248		
EQUIPMENT						





California Department  
STD Control  
Fiscal Year:

Local Health Jurisdiction:

County of San Bernardino

<b>PERSONNEL</b>				
Classification	Monthly Salary	Percent of Time	Months	Budget
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
		<b>Total Personnel</b>		<b>\$136,267</b>
<b>BENEFITS</b>				
Benefits		51.51%		<b>\$70,191</b>
<b>OPERATING EXPENSES</b>				
General Office Expense				\$2,920
Communications				\$2,917
Special Department Expense				
Postage				\$250
Printing				\$761
		<b>Total Operating</b>		<b>\$6,848</b>
<b>EQUIPMENT</b>				
<b>TRAVEL</b>				
				\$2,828
		<b>Total Travel</b>		<b>\$2,828</b>

<b>SUBCONTRACTORS</b>				
Subcontractor Name				
		<b>Total Subcontractor</b>		
<b>OTHER COSTS</b>				
<b>INDIRECT COSTS</b>				
		14.628%		<b>\$30,201</b>
<b>Budget Total</b>				<b>\$246,335</b>

**NOTES:**

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on the budget and budget justifications.

Department of Public Health  
 County of Branch  
 2020/2021

DESCRIPTION OF EXPENSE
<b>Duties and Responsibilities:</b> Provide fiscal support for contract
<b>Duties and Responsibilities:</b> Maintain department website with STD-related data, provider resources, educational materials, quarterly newsletter, assist with provider visits, monitor grant and write annual report.
<b>Duties and Responsibilities:</b> Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
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<b>Duties and Responsibilities:</b> Maintain STD data, run morbidity reports, act as lead for HSAs, presentations to providers, support grant reports
The benefit rate is based on prior year actual costs (51.51%)
Program's share of office expense, i.e. paper, envelopes, pencils, copy services, etc.
Email Accounts
To mail education materials
Print syphilis toolkits for provider
Attendance at the California STD/HIV Controllers Association annual meeting for 3 staff and other statewide conferences for congenital syphilis, surveillance and disease intervention, etc.

Indirect costs(14.628% of personnel and benefits)

an annual basis. A copy of the current rates is included in the email with your templates for use in

California Department  
STD Control  
Fiscal Year:

Local Health Jurisdiction:

County of San Bernardino

<b>PERSONNEL</b>				
Classification	Monthly Salary	Percent of Time	Months	Budget
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
Communicable Disease Investigator I	\$4,538	100.00%	12	\$54,452
Public Service Employee	\$2,376	36.00%	12	\$10,265
Public Health Epidemiologist	\$2,393	10%	12	\$2,871
		<b>Total Personnel</b>		<b>\$136,267</b>
<b>BENEFITS</b>				
Benefits		51.51%		<b>\$70,191</b>
<b>OPERATING EXPENSES</b>				
General Office Expense				\$2,920
Communications				\$2,917
Special Department Expense				
Postage				\$250
Printing				\$761
		<b>Total Operating</b>		<b>\$6,848</b>
<b>EQUIPMENT</b>				
<b>TRAVEL</b>				
				\$2,828
		<b>Total Travel</b>		<b>\$2,828</b>

<b>SUBCONTRACTORS</b>				
Subcontractor Name				
		<b>Total Subcontractor</b>		
<b>OTHER COSTS</b>				
<b>INDIRECT COSTS</b>				
		14.628%		<b>\$30,201</b>
<b>Budget Total</b>				<b>\$246,335</b>

**NOTES:**

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on the budget and budget justifications.



Department of Public Health  
 County of Branch  
 2021/2022

DESCRIPTION OF EXPENSE
<b>Duties and Responsibilities:</b> Provide fiscal support for contract
<b>Duties and Responsibilities:</b> Maintain department website with STD-related data, provider resources, educational materials, quarterly newsletter, assist with provider visits, monitor grant and write annual report.
<b>Duties and Responsibilities:</b> Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
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<b>Duties and Responsibilities:</b> Maintain STD data, run morbidity reports, act as lead for HSAs, presentations to providers, support grant reports
The benefit rate is based on prior year actual costs (51.51%)
Program's share of office expense, i.e. paper, envelopes, pencils, copy services, etc.
Email Accounts
To mail education materials
Print syphilis toolkits for provider
Attendance at the California STD/HIV Controllers Association annual meeting for 3 staff and other statewide conferences for congenital syphilis, surveillance and disease intervention, etc.

Indirect costs(14.628% of personnel and benefits)

an annual basis. A copy of the current rates is included in the email with your templates for use in

**California Department  
STD Control  
Fiscal Year:**

**Local Health Jurisdiction:**

**County of San Bernardino**

<b>PERSONNEL</b>				
<b>Classification</b>	<b>Monthly Salary</b>	<b>Percent of Time</b>	<b>Months</b>	<b>Budget</b>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
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Public Health Epidemiologist	\$2,393	10%	12	\$2,871
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<b>BENEFITS</b>				
Benefits		51.51%		<b>\$70,191</b>
<b>OPERATING EXPENSES</b>				
General Office Expense				\$2,920
Communications				\$2,917
Special Department Expense				
Postage				\$250
Printing				\$761
		<b>Total Operating</b>		<b>\$6,848</b>
<b>EQUIPMENT</b>				
<b>TRAVEL</b>				
				\$2,828
		<b>Total Travel</b>		<b>\$2,828</b>

<b>SUBCONTRACTORS</b>				
Subcontractor Name				
		<b>Total Subcontractor</b>		
<b>OTHER COSTS</b>				
<b>INDIRECT COSTS</b>				
		14.628%		<b>\$30,201</b>
<b>Budget Total</b>				<b>\$246,335</b>

**NOTES:**

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on the budget and budget justifications.

Department of Public Health  
 County of Branch  
 2022/2023

DESCRIPTION OF EXPENSE
<b>Duties and Responsibilities:</b> Provide fiscal support for contract
<b>Duties and Responsibilities:</b> Maintain department website with STD-related data, provider resources, educational materials, quarterly newsletter, assist with provider visits, monitor grant and write annual report.
<b>Duties and Responsibilities:</b> Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
<b>Duties and Responsibilities:</b> Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
<b>Duties and Responsibilities:</b> Investigate assigned disease reports, educate cases on transmission of disease, verify treatment, educate providers on reporting and current treatment guidelines, follow up on partners, act as a resource for community and providers.
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The benefit rate is based on prior year actual costs (51.51%)
Program's share of office expense, i.e. paper, envelopes, pencils, copy services, etc.
Email Accounts
To mail education materials
Print syphilis toolkits for provider
Attendance at the California STD/HIV Controllers Association annual meeting for 3 staff and other statewide conferences for congenital syphilis, surveillance and disease intervention, etc.

Indirect costs(14.628% of personnel and benefits)

an annual basis. A copy of the current rates is included in the email with your templates for use in

**California Department  
STD Control  
Fiscal Year:**

**Local Health Jurisdiction:**

**County of San Bernardino**

<b>PERSONNEL</b>				
<b>Classification</b>	<b>Monthly Salary</b>	<b>Percent of Time</b>	<b>Months</b>	<b>Budget</b>
Accountant III	\$5,293	5%	12	\$3,176
Health Education Specialist II	\$4,806	5%	12	\$2,883
Communicable Disease Investigator I	\$4,538	57.50%	12	\$31,310
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		<b>Total Personnel</b>		<b>\$136,267</b>
<b>BENEFITS</b>				
Benefits		51.51%		<b>\$70,191</b>
<b>OPERATING EXPENSES</b>				
General Office Expense				\$2,920
Communications				\$2,917
Special Department Expense				
Postage				\$250
printing				\$761
		<b>Total Operating</b>		<b>\$6,848</b>
<b>EQUIPMENT</b>				
<b>TRAVEL</b>				
				\$2,828
		<b>Total Travel</b>		<b>\$2,828</b>

<b>SUBCONTRACTORS</b>				
Subcontractor Name				
		<b>Total Subcontractor</b>		
<b>OTHER COSTS</b>				
<b>INDIRECT COSTS</b>				
		14.628%		<b>\$30,201</b>
<b>Budget Total</b>				<b>\$246,335</b>

**NOTES:**

1. The Indirect Cost Rate is negotiated between CDPH and the local health jurisdiction and CDPH on the budget and budget justifications.



ent of Public Health  
ol Branch  
2023/2024

DESCRIPTION OF EXPENSE
<b>Duties and Responsibilities:</b> Provide fiscal support for contract
<b>Duties and Responsibilities:</b> Maintain department website with STD-related data, provider resources, educational materials, quarterly newsletter, assist with provider visits, monitor grant and write annual report.
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The benefit rate is based on prior year actual costs (51.51%)
Program's share of office expense, i.e. paper, envelopes, pencils, copy services, etc.
Email Accounts
For Education Materials
Print syphilis toolkits for provider
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Indirect costs(14.628% of personnel and benefits)

an annual basis. A copy of the current rates is included in the email with your templates for use in