

404



**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

FROM: Community Health Agency/Department of Public Health

SUBMITTAL DATE:
January 20, 2011

SUBJECT: Ratify the Fifth Amendment between San Bernardino County, Department of Public Health and the County of Riverside Department of Public Health HIV Program for HIV Medical Care, Medical Case Management, Mental Health, Outreach, and Pharmacy Services (Contract 08-438, A-5).

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify the Fifth Amendment (08-438, A-5) between San Bernardino County, Department of Public Health and the County of Riverside Department of Public Health, HIV/AIDS Program for a reduction of \$21,336.
2. Authorize the Chairperson to sign four (4) originals of said Amendment, Contract 08-438, A-5, on behalf of the County.

BACKGROUND:

Continues on page 2

Susan D. Harrington

Susan Harrington, Director of Public Health

VJB/aml/ys

FINANCIAL DATA	Previous F.Y. Total Cost: 09/10	\$21,336	In Current Year Budget:	YES
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	NO
	Annual Net County Cost:	\$ 0	For Fiscal Year:	10/11

SOURCE OF FUNDS: 100% funded by the Ryan White CARE Act through San Bernardino County	Positions To Be Deleted Per A-30	<input checked="" type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

Debra Cournoyer
BY: Debra Cournoyer

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Ashley, seconded by Supervisor Buster and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Buster, Tavaglione, Stone, Benoit and Ashley
 Nays: None
 Absent: None
 Date: February 8, 2011
 xc: CHA-Public Health

Kecia Harper-Ihem
Clerk of the Board

By: *[Signature]*
Deputy

3.17

Prev. Agn. Ref.: 6/08/10 Item 3.1A ATTACHMENTS FILED District: Agenda Number:

WITH THE CLERK OF THE BOARD

FORM APPROVED COUNTY COUNSEL
 BY: NEAL R. KIPNIS DATE: 1/24/11
 Departmental Concurrence
 Dept Recomm.: Consent Policy
 Per Exec. Ofc.: Consent Policy

FORM 11
Page 2 of 2

SUBJECT: Ratify the Fifth Amendment between San Bernardino County, Department of Public Health and the County of Riverside Department of Public Health, HIV/AIDS Program for HIV Medical Care, Medical Case Management, Mental Health, Outreach, and Pharmacy Services (Contract 08-438, A-5).

BACKGROUND: (Continued)

The Ryan White Comprehensive AIDS Resource Act (RWCA) was enacted in 1990 to provide federal funding for comprehensive health and social services for persons living with the Human Immunodeficiency Virus (HIV) or Acquired Immunodeficiency Syndrome (AIDS).

As the payer of last resort, the RWCA is invaluable in filling the gaps in health care and social services for people living with HIV/AIDS. Funds from the RWCA are used to provide HIV care services, including medical and dental care, mental health care and treatment and HIV medications enabling people living with HIV/AIDS to live a longer and healthier life. The funds from this agreement will be used to continue HIV medical, mental health and pharmacy services at the Riverside Neighborhood Health Clinic, the Perris Family Care Center and the Indio Family Care Center.

This amendment will reduce the award by \$21,336 for a new total of \$997,848 for the period of March 1, 2010 - February 28, 2011. The funding reduction is a result of a decrease in the final federal award to the San Bernardino County and Riverside County region and will not affect the current level of service provision. This reduction is a result of changes to service categories made by the Inland Empire HIV Planning Council.

FINANCIAL DATA: This agreement has no financial impact on the County of Riverside.

08/09 Original Award 08-438	Amendment 1 08-438, A-1	09/10 Award Amendment 2 08-438, A-2	Amendment 3 08-438, A-3	F10/11 Award Amendment 4 08-438, A-4	Amendment 5 08-438, A-5
\$1,302,458	(\$ 243,229)	\$1,243,127	(\$ 54,624)	\$1,019,184	(\$ 21,336)
7/29/08; Item 3.22	2/3/09; Item 3.11	5/19/09; Item 3.15	2/9/2010; Item 3.14	6/08/10; Item 3.19	



FOR COUNTY USE ONLY

County of San Bernardino

F A S

STANDARD CONTRACT

<input type="checkbox"/> New	Vendor Code	SC	Dept.	PHL	Contract Number	
<input checked="" type="checkbox"/> Change	COUNTYO930				08-438 A-5	
<input type="checkbox"/> Cancel						
County Department			Dept.	Orgn.	Contractor's License No.	
Department of Public Health			PHL	PHL		
County Department Contract Representative			Telephone		Total Contract Amount	
Jeri Quick			(909)388-0255		\$3,245,580	
Contract Type						
<input type="checkbox"/> Revenue <input checked="" type="checkbox"/> Encumbered <input type="checkbox"/> Unencumbered <input type="checkbox"/> Other:						
If not encumbered or revenue contract type, provide reason:						
Commodity Code		Contract Start Date	Contract End Date	Original Amount	Amendment Amount	
95200		06/01/08	02/28/11	\$1,302,458	-\$21,336	
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No	Amount
AAA	PHL	3715	200	2445		-\$21,336
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount
						\$
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.	Amount
						\$
Project Name			Estimated Payment Total by Fiscal Year			
Part A Medical Care			FY	Amount	I/D	FY
and Support Services			10/11	\$21,336	D	

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, Department of Public Health, hereinafter called the County, and

Name
 County of Riverside, Department of Public Health hereinafter called Contractor
 Address
 P.O. Box 7600
 Riverside, CA 92503
 Telephone Federal ID No. or Social Security No.
 (951) 358- 5307

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 5

It is hereby agreed to amend Contract No. 08-438 between the County and Contractor as follows:

SECTION II. CONTRACTOR SERVICE RESPONSIBILITIES

Paragraph A is amended to read as follows:

- A. Services shall be provided as set forth in Attachment A-Scope of Work, Attachment A1-Scope of Work, Attachment A2-Scope of Work, and Attachment I-Program Service Definitions. In addition, Contractor shall develop and deliver program services in accordance with the most current standards of care approved by the Inland Empire HIV Planning Council (IEHPC). Copies of these standards are available at www.IEHPC.org. With regards to Ryan White services, cost effectiveness shall not be defined as simply a lower cost per unit.

Auditor/Controller-Recorder Use Only

<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By

FEB 08 2011

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SECTION V. FISCAL PROVISIONS

Paragraph A is amended to read as follows:

- A. The total contract amount is \$3,245,580, which is available for expenditure in accordance with the service provided, unless changed by the budget/contract amendment process, and is 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 is reduced. The County will notify the Contractor in writing of its determination. The consideration to be paid to the Contractor as provided herein shall be in full payment for all of the Contractor's services and expenses in the performance hereof, including travel and per diem. The maximum amount is a total dollar amount; it includes the original contract amount and all subsequent amendments, and is broken down as follows:

Original Contract	\$ 1,302,458	June 1, 2008 through February 28, 2009
Amendment 1	\$ 243,229 decrease	June 1, 2008 through February 28, 2009
Amendment 2	\$ 1,243,127	March 1, 2009 through February 28, 2010
Amendment 3	\$ 54,624 decrease	March 1, 2009 through February 28, 2010
Amendment 4	\$ 1,019,184	March 1, 2010 through February 28, 2011
Amendment 5	\$ 21,336 decrease	March 1, 2010 through February 28, 2011

Paragraph B is amended to read as follows:

- B. Payment to the Contractor shall be contingent upon the submission by the Contractor, and approval by the County, of the required reports and invoices. Expenditures for services submitted by the Contractor to the County for reimbursement must be consistent with the approved program budget that is attached hereto and incorporated herein by this reference as Attachment B-Budget, Attachment B1-Budget, and Attachment B2-Budget.

ATTACHMENT A2 – SCOPE OF WORK: Replace with Attachment A2 dated October 2010.

ATTACHMENT B2 – BUDGET: Replace with Attachment B2 dated October 2010.

All other terms and conditions remain in full force and effect.

FORM APPROVED COUNTY COUNSEL
BY: Neal R. Kipnis DATE 1/24/11

COUNTY OF SAN BERNARDINO
By Gary C. Ovitt
Gary C. Ovitt, Chairman, Board of Supervisors
Dated DEC 07 2010

County of Riverside
(Print or type name of corporation, company, contractor, etc.)
By Bob Buster
(Authorized signature - sign in blue ink)

Name BOB BUSTER
(Print or type name of person signing contract)
Title Chairman, Board of Supervisors
(Print or Type)
Dated FEB 08 2011

Address P.O. Box 7600
Riverside, CA 92503

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD
Laura H. Welch
Clerk of the Board of Supervisors of the County of San Bernardino.

By Jennifer Chino
Deputy

ATTEST:
KECIA HARPER-IHEM, Clerk
By Kecia Harper-Ihem
DEPUTY

Approved as to Legal Form
By Kristina Robb
Kristina Robb, Deputy County Counsel
Date 11/10/10

Reviewed by Contract Compliance
By Lory Klopfer
Lory Klopfer, HS Contracts Unit
Date 11/13/10

Presented to BOS for Signature
By Allan Rawland
Allan Rawland, Acting Director
Date 11/17/10



**RYAN WHITE PROGRAM
Scope of Work**

RW PART A: MARCH 1, 2010 – FEBRUARY 28, 2011														
CONTRACT NUMBER:	08-438													
CONTRACTOR:	Riverside County Department of Public Health –HIV/AIDS Program													
SERVICE CATEGORY:	Medical Case Management Services (including treatment adherence)													
SERVICE GOAL:	To ensure a continuum of high quality care which is client focused, client collaborative, and culturally appropriate, cost-effective, efficient and accessible to all eligible persons with HIV/AIDS throughout the TGA as required to support the clients participation in HIV medical care.													
SERVICE HEALTH OUTCOME(S):	<ul style="list-style-type: none"> Improved or maintained CD4 Cell count for consumers Improved or maintained CD4 cell count as a % of total lymphocyte cell count Improved or maintained viral load Ability to self-manage healthcare and support services 													
Planned Services to Clients by service area of residence	1	2	3	4	5	6	Total	1	2	3	4	5	6	Total
	Riv W	Riv C	Riv E	SB WW	SB EV	SB D		Riv W	Riv C	Riv E	SB WW	SB EV	SB D	
Total # Unduplicated CLIENTS to be Served	35	19	6	0	0	0	59	35	19	6	0	0	0	59
Caucasian/White	11	6	2	0	0	0	19	11	6	2	0	0	0	19
African American/Black	7	4	1	0	0	0	12	7	4	1	0	0	0	12
Latino/a	14	8	2	0	0	0	24	14	8	2	0	0	0	24
Women	9	5	2	0	0	0	16	9	5	2	0	0	0	16
Infants	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Youth	4	2	1	0	0	0	7	4	2	1	0	0	0	7
Planned Client Utilization by service area of residence : (15 Min Units)	1	2	3	4	5	6	Total	1	2	3	4	5	6	Total
	Riv W	Riv C	Riv E	SB WW	SB EV	SB D		Riv W	Riv C	Riv E	SB WW	SB EV	SB D	
Total # Service UNITS to be delivered	568	284	95	0	0	0	947	568	284	95	0	0	0	947
Caucasian/White	170	85	29	0	0	0	284	170	85	29	0	0	0	284
African American/Black	114	57	19	0	0	0	190	114	57	19	0	0	0	190
Latino/a	227	114	38	0	0	0	379	227	114	38	0	0	0	379
Women	142	71	24	0	0	0	237	142	71	24	0	0	0	237
Infants	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Youth	57	28	10	0	0	0	95	57	28	10	0	0	0	95



**RYAN WHITE PROGRAM
Scope of Work**

Planned Client Utilization by service area of residence: (Visit Per day)	1						Total
	Riv W	Riv C	Riv E	SB W V	SB E V	SB D	
Total # Of VISITS to be delivered	172	86	29	0	0	0	287
Caucasian/White	52	26	9	0	0	0	87
African American	34	17	6	0	0	0	57
Latino/a	69	34	12	0	0	0	115
Women	43	21	7	0	0	0	71
Infants	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0
Youth	17	9	3	0	0	0	29



**RYAN WHITE PROGRAM
Scope of Work**

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #1: Initial and ongoing assessment of the client's service needs</p> <p>Implementation Activity 1-1 The HIV/AIDS Branch Chief and Clinic Manager will hire a full-time Medical Case Manager (MCM) to provide Medical Case Management Services to clients at risk of falling out of care (e.g., active substance use, mental health issues, homelessness, and/or lack of support), African American and post-incarcerated clients..</p> <p>Implementation Activity 1-2 The MCM will be trained based on RW Standards of Care and Services for Medical Case Management Services.</p> <p>Implementation Activity 1-3 The MCM will conduct an initial assessment during the client's intake process. The assessment will include gathering information on demographics, disease process, health history, medical, psycho-social, mental health issues, substance use/abuse history, financial management capabilities; income medical and dental health insurance coverage; long term/short-term benefits needed/available, support systems, employment history and eligibility for enrollment in medical case management services.</p> <p>Implementation Activity 1-4 The assessment includes the client's individual needs, inclusive of the assessment of the client's awareness or perceived need of the HIV/AIDS disease spectrum, safe/safer sex activities, HIV/AIDS treatment modalities, medication adherence, wellness options, proper nutrition and self-management techniques.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Assessment form ▪ Documentation in client's chart ▪ Documentation in ARIES
<p>Service Delivery Element #2: Development of a comprehensive, individualized service plan in collaboration with the client.</p> <p>Implementation Activity 2-1 Based on client's intake and assessment, the MCM will determine specific objectives, goals, and actions designed to meet the client's individual needs.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Documentation in client's chart ▪ Documentation in ARIES



**RYAN WHITE PROGRAM
Scope of Work**

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Implementation Activity 2-2 The MCM will develop a comprehensive individualized service plan that will be action-oriented, time specific, appropriate to the level of medical case management service, and involve the active participation and collaboration of the client.</p> <p>Implementation Activity 2-3 A signed comprehensive individualized service plan by both the MCM and the client will be maintained in client's chart.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Documentation in client's chart ▪ Documentation in ARIES
<p>Service Delivery Element #3: Coordination of services required to implement the plan Implementation Activity 3-1</p> <p>Utilizing the comprehensive individualized service plan the MCM will identify, secure, and tailor the resources necessary to accomplish the goals and objectives identified in the plan.</p> <p>Implementation Activity 3-2 The MCM will follow-up on referrals and ensure client is receiving ongoing medical care and support services.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Referral forms ▪ Documentation in client's chart ▪ Documentation in ARIES
<p>Service Delivery Element #4: Client monitoring to assess the efficacy of the plan Implementation Activity 4-1</p> <p>The MCM on an ongoing basis will gather sufficient information from all relevant sources about the implementation and appropriateness of the Plan and its resulting activities which will enable the MCM to determine the comprehensive service plan's effectiveness.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Documentation in client's chart. ▪ Documentation in ARIES
<p>Service Delivery Element #5: Periodic re-evaluation and adaptation of the plan as necessary Implementation Activity 5-1</p> <p>The MCM will review the comprehensive individualized service plan on a quarterly basis to determine the Plan's effectiveness in enabling achievement of desired goals and outcomes.</p> <p>Implementation Activity 5-2 Based on information gathered, the MCM may modify or change the comprehensive individualized service plan, in its entirety or in any of its component parts. Both MCM and client will sign revised plan.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Documentation in client's chart. ▪ Documentation in ARIES



RYAN WHITE PROGRAM
Scope of Work

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #6: Client-specific advocacy and/or review of utilization of services</p> <p>Implementation Activity 6-1 The MCM staff will have the major function of an advocate for services for the client with particular emphasis on self-sufficiency in the community and avoidance of premature or unnecessary hospitalization.</p> <p>Implementation Activity 6-2 The MCM staff may participate in the development of the continuum of care and in community efforts to bring attention to the problems associated with the lack of services.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Documentation in client's chart ▪ Documentation in ARIES
<p>Service Delivery Element #7: Coordination and follow-up of medical treatments</p> <p>Implementation Activity 7-1 The MCM on an ongoing basis will coordinate health care services and support services for the client. As the client's needs changes, the MCM will access or refer additional or new resources that may be more appropriate for the client at a particular point in the disease process.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Documentation in client's chart. ▪ Documentation in ARIES
<p>Service Delivery Element #8: Provide or refer clients for advice, support, counseling on topics surrounding HIV disease, treatments, medications, treatment adherence education and education, caregiver bereavement support, dietary/nutrition advice and education, and terms and information needed by the client to effectively participate in his/her medical care</p> <p>Implementation Activity 8-1 The MCM based on intake information and assessment outcome, will provide referrals to support services and other community resources. MCM will also follow-up on referrals and document in client's chart.</p> <p>Implementation Activity 8-2 The MCM will attend monthly State Parole Board Meetings to increase awareness and access to care for post-incarcerated population.</p> <p>Implementation Activity 8-3 The MCM will participate with the Outreach Community Care Van to link newly diagnosed HIV + individuals with care.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Referral forms ▪ Documentation in client's chart. ▪ Documentation in ARIES



**RYAN WHITE PROGRAM
Scope of Work**

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Implementation Activity 8-4 The MCM will provide treatment adherence education and counseling and assist and support the client in establishing self-management goals.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Comprehensive Individualized Service Plan ▪ Referral forms ▪ Documentation in client's chart. ▪ Documentation in ARIES
<p>Service Delivery Element #9: Includes all types of case management including face-to-face, phone contact and any other forms of communication.</p> <p>Implementation Activity 9-1 MCM will contact clients during medical care visits involving face-to-face contact, follow- with phone and/or other forms of communication to maintain ongoing contact with clients.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Documentation in client's chart. ▪ Documentation in ARIES
<p>Implementation Activity 9-2 All contacts with client will be documented in client's chart and ARIES</p> <p>Service Delivery Element #10: Services are provided based on established Cultural and Linguistic Competency Standards.</p> <p>Implementation Activity 10-1 Clinic Manager, Lead Nurse and Senior CDS will ensure that clinical staff at all levels and across all disciplines receive ongoing education and training in C&L service delivery to ensure that clients receive effective, respectful care compatible with client's cultural, health beliefs, practices, preferred language and in a manner that reflects and respects the gender and sexual diversity of community served.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish
<p>Implementation Activity 10-2 HIV Branch Chief and Clinic Manager will implement strategies to recruit, retain, and promote at all levels of organization who are representative of the demographic characteristics of the service area.</p> <p>Implementation Activity 10-3 Clinic Manager and Senior CDS will conduct cultural competency organizational self-assessment and develop a plan to address deficiencies.</p>			



**RYAN WHITE PROGRAM
Scope of Work**

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Implementation Activity 10-4 HIV Branch Chief, Clinic Manager, RN Supervisor, and Senior CDS will develop and implement a written plan that outlines goals, policies, operational plans, and mechanisms for management oversight to provide C&L appropriate services.</p> <p>Implementation Activity 10-5 Clients receiving services are provided with language assistance with existing bilingual and bi-cultural staff.</p> <p>Implementation Activity 10-6 All client-related materials and posted signage are provided in languages of commonly encountered groups (monolingual Spanish speaking community).</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish
<p>Service Delivery Element #11: Integrate and utilize ARIES to incorporate core data elements.</p> <p>Implementation Activity 11-1 Information will be entered into ARIES. The ARIES reports will be used by the Quality Management team to identify quality service indicators and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend “best practices.”</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ ARIES Reports
<p>Implementation Activity 11-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. <p>Service Delivery Element #12: Ensure clients are informed of the availability of HIV Partner Counseling and Referral Services (PCRS)</p> <p>Implementation Activity 12-1 Clinical staff will provide all clients seeking services with information packets that will include PCRS information and where to access this service.</p> <p>Implementation Activity 12-2 Clinical staff will have client sign an acknowledgement form that PCRS was offered.</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ PCRS Brochure ▪ Acknowledgement Sheet



**RYAN WHITE PROGRAM
Scope of Work**

RW PART A: MARCH 1, 2010 – FEBRUARY 28, 2011										
CONTRACT NUMBER:	08-438									
CONTRACTOR:	Riverside County Department of Public Health –HIV/AIDS Program									
SERVICE CATEGORY:	Mental Health									
SERVICE GOAL:	To have services available throughout the TGA to minimize crisis situations and stabilize clients; mental health status, in order to maintain in the care system.									
SERVICE HEALTH OUTCOME(S):	<ul style="list-style-type: none"> Improved or maintained CD4 cell count for consumers Improved or maintained CD4 cell count as a % of total lymphocyte cell count Improved or maintained viral load Decreased level of depression post 12 individual sessions Decreased level of anxiety post 12 individual sessions Clinically significant increase in their Global Assessment of Functioning score post 12 individual sessions. 									
Planned Services to Clients by service area of residence	1	2	3	4	5	6	Total	1	2	3
Total # Unduplicated CLIENTS to be Served	Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total	Riv W	Riv C	Riv E
Caucasian/White	29	14	5	0	0	0	48	9	4	2
African American/Black	6	3	1	0	0	0	10	12	6	2
Latino/a	7	4	2	0	0	0	13	0	0	0
Women	0	0	0	0	0	0	0	0	0	0
Infants	0	0	0	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0	3	1	1
Youth	3	1	1	0	0	0	5	1	2	3
Planned Client Utilization by service area of residence : (15 Min Units)	1	2	3	4	5	6	Total	Riv W	Riv C	Riv E
Total # Service UNITS to be delivered	Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total	Riv W	Riv C	Riv E
Caucasian/White	461	230	78	0	0	0	769	138	69	23
African American/Black	92	46	16	0	0	0	154	184	92	31
Latino/a	115	58	20	0	0	0	193	0	0	0
Women	0	0	0	0	0	0	0	0	0	0
Infants	0	0	0	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0	46	23	8
Youth	46	23	8	0	0	0	77			



**RYAN WHITE PROGRAM
Scope of Work**

Planned Client Utilization by service area of residence: (Visit Per day)	1 Riv W	2 Riv C	3 Riv E	4 SB W V	5 SBE V	6 SBD	Total
Total # Of VISITS to be delivered	171	85	29	0	0	0	285
Caucasian/White	51	26	9	0	0	0	86
African American	34	17	6	0	0	0	57
Latino/a	68	34	12	0	0	0	114
Women	43	21	7	0	0	0	71
Infants	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0
Youth	17	8	3	0	0	0	28



**RYAN WHITE PROGRAM
Scope of Work**

PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #1: Initial Individual Mental Health Assessment Implementation Activity 1-1 Clinically driven Mental Health Services will be staffed by a full-time Clinical Therapist licensed or certified by the Board of Behavioral Services (Licensed MFT or a Licensed Clinical Social Worker and part-time Psychiatrist to expand on-site mental health services for clients receiving Outpatient/Ambulatory Medical Care.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Implementation Activity 1-2 Clinical therapists will provide services based on RW Standards of Care and Service for Mental Health Services.</p> <p>Implementation Activity 1-3 The clinical therapist will conduct an initial clinical assessment during the intake process. The clinical assessment will involve the gathering of information from the client on the presenting problem, current living environment, mental health and substance abuse history, mental status exam, current mental health needs, support system, history or current abuse and clients goals related to mental health treatment.</p> <p>Implementation Activity 1-4 The clinical therapist will have the client complete all necessary forms that inform the patient regarding the mental health services they are to receive, confidentiality, and their commitment to treatment.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan
<p>Service Delivery Element #2: Development of Care/Treatment Plan Implementation Activity 2-1 Based on the clients' psycho-social assessment, the clinical therapist will develop a Treatment Plan in collaboration with the client.</p> <p>Implementation Activity 2-2 Licensed Clinical Therapists will determine a DSM-IV-TR Diagnosis and develop a treatment plan signed by both therapist and client.</p> <p>Service Delivery Element #3: Individual Counseling Session Implementation Activity 3-1 The clinical therapist will conduct an initial clinical assessment during the intake process. The clinical assessment will involve the gathering of information from the client on the presenting problem, current living environment, mental health and substance abuse history, mental status exam, current mental health needs, support system, history or current abuse and clients goals related to mental health treatment.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES



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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Implementation Activity 3-2 The clinical therapist will have the patient complete all necessary forms that inform the client regarding the mental health services they are to receive, confidentiality, and their commitment to treatment.</p> <p>Implementation Activity 3-3 Based on clinical assessment, the clinical therapist will determine a DSM-IV-TR Diagnosis and develop a treatment plan signed by both therapist and client, which will include individual and/or group counseling sessions.</p> <p>Implementation Activity 3-4 The clinical therapist will have the client complete all necessary forms that inform the client regarding the mental health services they are to receive, confidentiality, and their commitment to treatment.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #4: Group Counseling Session</p> <p>Implementation Activity 4-1 The clinical therapist will conduct an initial clinical assessment during the intake process. The clinical assessment will involve the gathering of information from the client on the presenting problem, current living environment, mental health and substance abuse history, mental status exam, current mental health needs, support system, history or current abuse and clients goals related to mental health treatment.</p> <p>Implementation Activity 4-2 The clinical therapist will have the client complete all necessary forms that inform the client regarding the mental health services they are to receive, confidentiality, and their commitment to treatment.</p> <p>Implementation Activity 4-3 Based on clinical assessment, the clinical therapist will determine a DSM-IV-TR Diagnosis and develop a treatment plan signed by both therapist and client, which will include individual and/or group counseling sessions.</p> <p>Implementation Activity 4-4 The clinical therapist will have the client complete all necessary forms that inform the patient regarding the mental health services they are to receive, confidentiality, and their commitment to treatment.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES



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<p>Service Delivery Element #5: Case Conferencing Session Implementation Activity 5-1 Clinical team will meet weekly to discuss client's treatment plans and how to further assist the client in reaching their goals and objectives.</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ Documentation in Client's Chart on case conferencing
<p>Service Delivery Element #6: Psychiatric Assessment/Evaluation Session Implementation Activity 6-1 Clients are referred by the physician or clinical therapist for Psychiatric assessment and evaluation if clients' present with a mental health issue that may require psychiatric evaluation and medication, (e.g., bi-polar, schizophrenia, depression, etc).</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #7: Psychiatric Medications Management Session Implementation Activity 7-1 The psychiatrist will prescribe a medication regimen based on the psychiatric assessment and manage the client's psychiatric diagnosis and in conjunction with the multi-disciplinary team.</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #8: Referral to other Mental Health Professionals Implementation Activity 8-1 The mental health counseling process will include referrals from clinical staff which may include, but is not limited to medical providers, psychiatrist, nurses, social workers, nutritionist, medical case manager, health education and health service assistants.</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ Client Assessment ▪ Treatment Plan ▪ Referrals ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Implementation Activity 8-2 A thorough crisis assessment will be completed identifying the level of severity of the crisis and providing interventions such as a 5150 to stabilize the client.</p>			
<p>Service Delivery Element #9: Services are provided based on established Cultural and Linguistic Competency Standards Implementation Activity 9-1 Clinic Manager, RN Supervisor and Senior CDS will ensure that clinical staff at all levels and across all disciplines receive ongoing education and training in C&L service delivery to ensure that clients receive effective, respectful care compatible with client's cultural, health beliefs, practices, preferred language and in a manner that reflects and respects the gender and sexual diversity of community served.</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish ▪ Documentation in ARIES



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<p>Implementation Activity 9-2 HIV Branch Chief and Clinic Manager will implement strategies to recruit, retain, and promote at all levels of organization who are representative of the demographic characteristics of the service area.</p> <p>Implementation Activity 9-3 Clinic Manager and Senior CDS will conduct cultural competency organizational self-assessment and develop a plan to address deficiencies.</p> <p>Implementation Activity 9-4 HIV Branch Chief, Supervisor, RN Supervisor, and Senior CDS will develop and implement a written plan that outlines goals, policies, operational plans, and mechanisms for management oversight to provide C&L appropriate services.</p> <p>Implementation Activity 9-5 Clients receiving services are provided with language assistance with existing bilingual and bi-cultural staff.</p> <p>Implementation Activity 9-6 All client-related materials and posted signage are provided in languages of commonly encountered groups (monolingual Spanish speaking community).</p> <p>Service Delivery Element #10: Integrate and utilize ARIES to incorporate core data elements.</p> <p>Implementation Activity 10-1 Information will be entered into ARIES. The ARIES reports will be used by the Quality Management team to identify quality service indicators and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend "best practices."</p> <p>Implementation Activity 10-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. 	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish ▪ Documentation in ARIES
<p>Implementation Activity 10-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. 	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ ARIES Reports



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<p>Service Delivery Element #11: Ensure clients are informed of the availability of HIV Partner Counseling and Referral Services (PCRS) Implementation Activity 11-1 Clinical staff will provide all clients seeking services with information packets that will include PCRS information and where to access this service.</p> <p>Implementation Activity 11-2 Clinical staff will have client sign an acknowledgement form that PCRS was offered.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ PCRS Brochure ▪ Acknowledgement Sheet
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PLANNED GROUP SERVICE UTILIZATION (FOR ANY ACTIVITIES PROVIDED IN GROUP SETTINGS)								
Group Name/Description	SA of Service Delivery	Targeted Population	Open/Closed	Expected Avg. Attend Per Session	Session Length	Sessions Per Week	Group Duration	Outcome Measures
<p>Group Name #1 *Women's Support Group</p>	<p>1</p>	<p>Women</p>	<p>Closed</p>	<p>Six</p>	<p>2 Hours</p>	<p>One Session every other week.</p>	<p>Ongoing</p>	<p>75% of clients will demonstrate a clinically significant increase in their Global Assessment Functioning as measured by the Axis V.</p>

* All support groups are facilitated by a licensed clinical therapist. A DSM-IV-TR Diagnosis is determined and a treatment plan is developed prior to participation in support groups..



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		RW PART A: MARCH 1, 2010 – FEBRUARY 28, 2011						
CONTRACT NUMBER:	08-438							
CONTRACTOR:	Riverside County Department of Public Health –HIV/AIDS Program							
SERVICE CATEGORY:	Outreach Services							
SERVICE GOAL:	To ensure persons living with HIV/AIDS or members of high-risk communities in the TGA are linked to HIV testing and medical services, including follow-up and support to ensure maintenance in HIV medical care.							
SERVICE HEALTH OUTCOME(S):	<ul style="list-style-type: none"> Improved or maintained CD4 Cell count for consumers Improved or maintained CD4 cell count as a % of total lymphocyte cell count Improved or maintained viral load Entry and maintenance in HIV medical care system 							
Planned Services to Clients by service area of residence		1	2	3	4	5	6	Total
		Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total
Total # Unduplicated CLIENTS to be Served		38	19	6	0	0	0	63
Caucasian/White		11	6	2	0	0	0	19
African American/Black		6	4	2	0	0	0	12
Latino/a		15	8	2	0	0	0	25
Women		10	5	2	0	0	0	17
Infants		0	0	0	0	0	0	0
Children		0	0	0	0	0	0	0
Youth		10	4	2	0	0	0	6
Planned Client Utilization by service area of residence :		1	2	3	4	5	6	Total
(15 Min Units)		Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total
Total # Service UNITS to be delivered		115	57	19	0	0	0	191
Caucasian/White		35	17	6	0	0	0	58
African American/Black		23	11	4	0	0	0	38
Latino/a		46	23	8	0	0	0	77
Women		29	14	5	0	0	0	48
Infants		0	0	0	0	0	0	0
Children		0	0	0	0	0	0	0
Youth		12	6	2	0	0	0	20



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Planned Client Utilization by service area of residence:
(Visit Per day)

	1 Riv W	2 Riv C	3 Riv E	4 SBWV	5 SBEV	6 SBD	Total
Total # Of VISITS to be delivered	115	57	19	0	0	0	191
Caucasian/White	35	17	7	0	0	0	59
African American	23	12	2	0	0	0	37
Latino/a	46	23	13	0	0	0	82
Women	29	15	4	0	0	0	48
Infants	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0
Youth	12	7	6	0	0	0	25



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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #1: Outreach Encounter Implementation Activity 1-1 Outreach workers will be trained based on the RW Standards of Care and Service for Outreach Services.</p> <p>Implementation Activity 1-2 Training will be provided to Outreach Workers on RW determination eligibility requirements and ARIES.</p> <p>Implementation Activity 1-3 Outreach Workers will coordinate activities among identified PLWH/A that are out-of-care and to provide HIV/AIDS disease education, education about the medical and support service system, referrals and linkages into testing and system of care</p> <p>Implementation Activity 1-4 Outreach workers will work with prevention education at County of Riverside to identify target outreach locations and identify individuals not in care from targeted communities of color with an emphasis on African Americans.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Outreach schedules and logs ▪ Outreach Forms ▪ ARIES and Outreach Tracking Log
<p>Service Delivery Element #2: Coordination with Local HIV Prevention Programs Implementation Activity 2-1 Outreach workers will work with and coordinate with local HIV prevention programs to identify target outreach locations and identify individuals not in care.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ ARIES and Outreach Tracking Log
<p>Service Delivery Element #3: Services are provided based on established Cultural and Linguistic Competency Standards Implementation Activity 3-1 Clinic Manager, RN Supervisor and Senior CDS will ensure that clinical staff at all levels and across all disciplines receive ongoing education and training in C&L service delivery to ensure that clients receive effective, respectful care compatible with client's cultural, health beliefs, practices, preferred language and in a manner that reflects and respects the gender and sexual diversity of community served.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish



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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Implementation Activity 3-2 HIV Branch Chief and Clinic Manager will implement strategies to recruit, retain, and promote at all levels of organization who are representative of the demographic characteristics of the service area.</p> <p>Implementation Activity 3-3 Clinic Manager and Senior CDS will conduct cultural competency organizational self-assessment and develop a plan to address deficiencies.</p> <p>Implementation Activity 3-4 HIV Branch Chief, Clinic Manager, RN Supervisor, and Senior CDS will develop and implement a written plan that outlines goals, policies, operational plans, and mechanisms for management oversight to provide C&L appropriate services.</p> <p>Implementation Activity 3-5 Clients receiving services are provided with language assistance with existing bilingual and bi-cultural staff.</p> <p>Implementation Activity 3-6 All client-related materials and posted signage are provided in languages of commonly encountered groups (monolingual Spanish speaking community).</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish



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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #4: Integrate and utilize ARIES to incorporate core data elements.</p> <p>Implementation Activity 4-1 Information will be entered into ARIES. The ARIES reports will be used by the Quality Management team to identify quality service indicators and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend "best practices."</p> <p>Implementation Activity 4-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. 	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ ARIES Reports
<p>Service Delivery Element #5: Ensure clients are informed of the availability of HIV Partner Counseling and Referral Services (PCRS)</p> <p>Implementation Activity 5-1 Clinical staff will provide all clients seeking services with information packets that will include PCRS information and where to access this service.</p> <p>Implementation Activity 5-2 Clinical staff will have client sign an acknowledgement form that PCRS was offered.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ PCRS Brochure ▪ Acknowledgement Sheet



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		RW PART A: MARCH 1, 2010 – FEBRUARY 28, 2011						
CONTRACT NUMBER:	08-438							
CONTRACTOR:	Riverside County Department of Public Health –HIV/AIDS Program							
SERVICE CATEGORY:	AIDS Pharmacy Assistance (Local)							
SERVICE GOAL:	To maintain or improve health outcomes of persons living with HIV/AIDS by making available needed HIV/AIDS medications.							
SERVICE HEALTH OUTCOME(S):	<ul style="list-style-type: none"> Improved or maintained CD4 cell count for consumers Improved or maintained CD4 cell count as a % of total lymphocyte cell count Improved or maintained viral load 							
Planned Services to Clients by service area of residence		1	2	3	4	5	6	Total
		Riv W	Riv C	Riv E	SB WV	SB EV	SB D	
Total # Unduplicated CLIENTS to be Served		35	17	6	0	0	0	58
	Caucasian/White	11	5	2	0	0	0	18
	African American/Black	7	3	1	0	0	0	11
	Latino/a	14	7	2	0	0	0	23
	Women	9	4	2	0	0	0	15
	Infants	0	0	0	0	0	0	0
	Children	0	0	0	0	0	0	0
	Youth	4	2	1	0	0	0	7
Planned Client Utilization by service area of residence : (Up to a 30 day supply regardless of \$ amount)		1	2	3	4	5	6	Total
		Riv W	Riv C	Riv E	SB WV	SB EV	SB D	
Total # Service UNITS to be delivered		692	346	115	0	0	0	1153
	Caucasian/White	208	104	35	0	0	0	347
	African American/Black	138	69	23	0	0	0	230
	Latino/a	277	138	46	0	0	0	461
	Women	173	87	29	0	0	0	289
	Infants	0	0	0	0	0	0	0
	Children	0	0	0	0	0	0	0
	Youth	69	35	12	0	0	0	116



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Planned Client Utilization by service area of residence: (Utilization per day)	Total # Of VISITS to be delivered						Total
	1 Riv W	2 Riv C	3 Riv E	4 SB W V	5 SB E V	6 SB D	
	337	168	56	0	0	0	561
Caucasian/White	101	50	17	0	0	0	168
African American	67	34	11	0	0	0	112
Latino/a	135	67	22	0	0	0	224
Women	84	42	14	0	0	0	140
Infants	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0
Youth	34	17	6	0	0	0	57



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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #1: Antiretroviral medication (HIV/AIDS) Implementation Activity 1-1 If client is uninsured, client will be screened by an Insurance Billing Clerk from the Riverside HIV Care Program along with a social worker, to link them to insurance programs, with the goal of obtaining a long-term insurance plan so that the Ryan White Pharmaceutical Assistance Program does not become the permanent fix, but a program of last resort to assist clients in obtaining assistance with medications.</p> <p>Implementation Activity 1-2 After screening, if client is identified in need of pharmaceutical assistance, the RN or LVN will check with the Insurance Billing Clerk to confirm that the client qualifies for Ryan White funds.</p> <p>Implementation Activity 1-3 Once verified that the client has no other means to pay for their HIV medications, the RN and/or LVN obtains verbal consent from the Clinic Supervisor or RN Supervisor to provide medications paid for with Ryan White funds.</p> <p>Implementation Activity 1-4 The RN or LVN will insert one copy of the medication order into the patients chart indicating in the progress note that clients' medications were paid for by Ryan White. The RN documents in the <i>Ryan White Log</i> the patient who received Ryan White Pharmaceutical Assistance, the name of the medication, the cost and the date it was ordered.</p> <p>Implementation Activity 1-5 Client will then be provided with physician's prescription of one 30 day or less supply of antiretroviral medication</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Medication Logs ▪ Client's Chart - ▪ Progress Notes ▪ Documentation in ARIES
<p>Service Delivery Element #2: Services are provided based on established Cultural and Linguistic Competency Standards Implementation Activity 2-1 Clinic Manager, Lead Nurse and Senior CDS will ensure that clinical staff at all levels and across all disciplines receive ongoing education and training in C&L service delivery to ensure that clients receive effective, respectful care compatible with client's cultural, health beliefs, practices, preferred language and in a manner that reflects and respects the gender and sexual diversity of community served.</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish



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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Implementation Activity 2-2 HIV Branch Chief and Clinic Manager will implement strategies to recruit, retain, and promote at all levels of organization who are representative of the demographic characteristics of the service area.</p> <p>Implementation Activity 2-3 Clinic Manager and Senior CDS will conduct cultural competency organizational self-assessment and develop a plan to address deficiencies.</p> <p>Implementation Activity 2-4 HIV Branch Chief, Supervisor, Lead Nurse, and Senior CDS will develop and implement a written plan that outlines goals, policies, operational plans, and mechanisms for management oversight to provide C&L appropriate services.</p> <p>Implementation Activity 2-5 Clients receiving services are provided with language assistance with existing bilingual and bi-cultural staff.</p> <p>Implementation Activity 2-6 All client-related materials and post signage are provided in languages of commonly encountered groups (monolingual Spanish speaking community).</p> <p>Service Delivery Element #3: Integrate and utilize ARIES to incorporate core data elements.</p> <p>Implementation Activity 3-1 Information will be entered into ARIES. The ARIES reports will be used by the Quality Management team to identify quality service indicators and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend "best practices."</p> <p>Implementation Activity 3-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. 	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish
<p>Service Delivery Element #3: Integrate and utilize ARIES to incorporate core data elements.</p> <p>Implementation Activity 3-1 Information will be entered into ARIES. The ARIES reports will be used by the Quality Management team to identify quality service indicators and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend "best practices."</p> <p>Implementation Activity 3-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. 	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ ARIES Reports



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<p>Service Delivery Element #4: Ensure clients are informed of the availability of HIV Partner Counseling and Referral Services (PCRS) Implementation Activity 4-1 Clinical staff will provide all clients seeking services with information packets that will include PCRS information and where to access this service.</p> <p>Implementation Activity 4-2 Clinical staff will have client sign an acknowledgement form that PCRS was offered.</p>	1, 2, & 3	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none">▪ PCRS Brochure▪ Acknowledgement Sheet
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RW PART A: MARCH 1, 2010 – FEBRUARY 28, 2011														
CONTRACT NUMBER:	08-438													
CONTRACTOR:	Riverside County Department of Public Health –HIV/AIDS Program													
SERVICE CATEGORY:	Outpatient/Ambulatory Medical Care													
SERVICE GOAL:	To Maintain or improve the health status of persons living with HIV/AIDS in the TGA. Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institute of Health, American Academy of HIV Medicine (AAHIVM).													
SERVICE HEALTH OUTCOME(S):	<ul style="list-style-type: none"> Improved or maintained CD4 cell count for consumers Improved or maintained CD4 cell count as a % of total lymphocyte cell count Improved or maintained viral load 													
Planned Services to Clients by service area of residence	1	2	3	4	5	6	Total	1	2	3	4	5	6	Total
Total # Unduplicated CLIENTS to be Served	Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total	Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total
Caucasian/White	257	129	43	0	0	0	429	77	39	13	0	0	0	129
African American/Black	51	26	9	0	0	0	86	103	52	17	0	0	0	172
Latino/a	64	32	11	0	0	0	107	0	0	0	0	0	0	0
Women	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Infants	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Youth	26	13	4	0	0	0	43	0	0	0	0	0	0	0
Planned Client Utilization by service area of residence : (15 Min Units)	1	2	3	4	5	6	Total	Riv W	Riv C	Riv E	SB WW	SB EV	SB D	Total
Total # Service UNITS to be delivered	5152	2576	849	0	0	0	8586	1546	773	258	0	0	0	2577
Caucasian/White	1030	515	172	0	0	0	1717	2061	1030	344	0	0	0	3435
African American/Black	1288	644	215	0	0	0	2147	0	0	0	0	0	0	0
Latino/a	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Women	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Infants	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Youth	515	258	86	0	0	0	859							



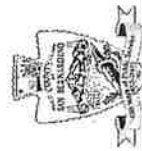
**RYAN WHITE PROGRAM
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Planned Client Utilization by service area of residence: (Visit Per day)	1						Total
	Riv W	Riv C	Riv E	SBW V	SB E V	SB D	
Total # Of VISITS to be delivered	1544	772	257	0	0	0	2573
Caucasian/White	463	232	77	0	0	0	772
African American	309	154	51	0	0	0	514
Latino/a	618	308	103	0	0	0	1029
Women	386	193	64	0	0	0	643
Infants	0	0	0	0	0	0	0
Children	0	0	0	0	0	0	0
Youth	154	77	26	0	0	0	257

**RYAN WHITE PROGRAM
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PLANNED SERVICE DELIVERY AND IMPLEMENTATION ACTIVITIES	SERVICE AREA	TIMELINE	PROCESS OUTCOME
<p>Service Delivery Element #1: Development of Treatment Plan Implementation Activity 1-1 Based on RW Standard of Care continue current intake process including:</p> <ul style="list-style-type: none"> a) Nursing assessment including evaluation health history and presenting problems. Those on HIV medications are evaluated for treatment adherence. b) Collection of blood samples for CD4 Viral load, Hepatitis and other testing c) Perform TB skin test and chest x-ray <p>Implementation Activity 1-2 Based on RW Standard of Care continue current practice of providing initial medical evaluation by physician including:</p> <ul style="list-style-type: none"> a) Completing a medical history b) Conducting a physical examination c) Reviewing lab test results d) Assessing the need for medication therapy e) Development of a Treatment Plan. <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES



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<p>Service Delivery Element #2: Diagnostic Testing Implementation Activity 2-1 <u>Based on RW Standard of Care continue current intake process including:</u> a) Nursing assessment including evaluation health history and presenting problems. Those on HIV medications are evaluated for treatment adherence. b) Collection of blood samples for CD4 Viral load, Hepatitis and other testing c) Perform TB skin test and chest x-ray</p> <p>Implementation Activity 2-2 <u>Based on RW Standard of Care continue current practice of providing initial medical evaluation by physician including:</u> Completing a medical history Conducting a physical examination Reviewing lab test results Assessing the need for medication therapy Development of a Treatment Plan.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #3: Early Intervention and Risk Assessment</p> <p>Implementation Activity 3-1 An assessment of the clients of the current knowledge of HIV and treatment options is conducted by the health education and the clinical team.</p> <p>Implementation Activity 3-2 Health education and counseling is provided to the client in choosing an appropriate health education plan that will include education regarding the reduction of transmission of HIV and to reduce their transmission risk behaviors.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Risk Assessment ▪ Education Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES



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<p>Service Delivery Element #4: Preventive Care and Screening</p> <p>Implementation Activity 4-1 Based on RW Standard of Care continue current intake process including:</p> <ul style="list-style-type: none"> a) Nursing assessment including evaluation health history and presenting problems. Those on HIV medications are evaluated for treatment adherence. b) Collection of blood samples for CD4 Viral load, Hepatitis and other testing c) Perform TB skin test and chest x-ray <p>Implementation Activity 4-2 Based on RW Standard of Care continue current practice of providing initial medical evaluation by physician including: Completing a medical history Conducting a physical examination Reviewing lab test results Assessing the need for medication therapy Development of a Treatment Plan. <i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #5: Practitioner Examination</p> <p>Implementation Activity 5-1 Based on RW Standard of Care continue current practice of providing initial medical evaluation by physician including: Completing a medical history Conducting a physical examination which includes another component of a client's periodic health care assessment through a comprehensive gender appropriate physical examinations and laboratory evaluations. Medical Monitoring is required and follow-up will be provided with a comprehensive physical assessment every six months. Reviewing lab test results Assessing the need for medication therapy Development of a Treatment Plan. <i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES



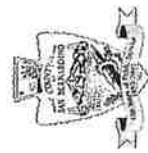
**RYAN WHITE PROGRAM
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<p><u>Service Delivery Element #6: Medical History Taking</u></p> <p>Implementation Activity 6-1 Based on RW Standard of Care continue current practice of providing initial medical evaluation by physician including: Completing a medical history which will include but are not limited to: family medical history, psycho-social history, current medications, and environmental assessment. Diabetes, cardiovascular diseases, renal disease, GI abnormalities, pancreatitis, liver disease, or hepatitis. Conducting a physical examination Reviewing lab test results Assessing the need for medication therapy Development of a Treatment Plan.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010– February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p><u>Service Delivery Element #7: Diagnosis and Treatment of Common Physical and Mental Conditions</u></p> <p>Implementation Activity 7-1 Based on medical history, physical examination and lab-test results, clinician will develop a treatment plan with diagnosis and treatment for common physical conditions such as opportunistic infections related to HIV which may include but are not limited to: candidacies, cervical cancer, herpes simplex, Kaposi's Sarcoma, tuberculosis.</p> <p>Implementation Activity 7-2 Based on psycho-social assessment, the Social Worker (therapist) will develop a treatment plan of common mental conditions such as depression, anxiety, etc.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES



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<p>Service Delivery Element #8: Prescribing and Managing Medication Therapy</p> <p>Implementation Activity 8-1 Based on client's individual treatment and therapy needs, clinician will prescribe accordingly an HIV regimen that will be managed by the physician and multi-disciplinary medical team.</p> <p>Implementation Activity 8-2 Medical services include prescribing and monitoring prophylactic and anti-retroviral therapies when appropriate as well as minor outpatient preventive and therapeutic medical services related to HIV infection.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #9: Education and Counseling on Health Issues</p> <p>Implementation Activity 9-1 An assessment of each client's transmission risk behavior is conducted by the Health Educator or Medical Case Manager and based the identified risk behaviors, education about the transmission risk associated with the behaviors and appropriate behavior change support including referrals, specialized interventions are provided. One-on-one education and counseling will be provided to client based on assessment.</p> <p>Implementation Activity 9-2 Nutritionist will conduct a nutrition assessment of clients every six months at a minimum to determine if client has possible wasting, digestive reaction to medications, or other complications and provide clients with a nutrition plan addressing these health issues.</p> <p>Implementation Activity 9-3 Quarterly community forums will be provided to clients on specific health topics related to treatment.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Risk Assessment ▪ Education Plan ▪ Nutrition Assessment and Nutrition Plan ▪ Documentation in Client's Chart and ARIES ▪ Schedule on Community Forums



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<p>Service Delivery Element #10: Continuing Care and Management of Chronic Conditions Implementation Activity 10-1 Medical care follow-up visits are scheduled for clients a minimum of six months by clinic staff.</p> <p>Implementation Activity 10-2 Clinician will provide treatment and management of chronic conditions as needed based on client's comprehensive health assessment.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #11: Referral to and Provision of Specialty Care Implementation Activity 11-1 Based on client's health assessment, clinician will refer clients to specialty care such as Oncology, Dermatology, and Gastrointestinal Specialist.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Referrals ▪ Documentation in Client's Chart ▪ Documentation in ARIES
<p>Service Delivery Element #12: Treatment Adherence Counseling/Education Implementation Activity 12-1 Health Educator or Medical Case Manager will conduct a formal assessment of client's knowledge base on HIV and treatment.</p> <p>Implementation Activity 12-2 Health Educator or Medical Case Manager will provide counseling and education on the client's specific treatment regimen and support activities to continue treatment adherence.</p> <p>Implementation Activity 12-3 Quarterly community forums are provided to clients on specific health topics related to treatment. Other health education topics covered will also include but will not be limited to stress-reduction, nutrition/diet, exercise, and spirituality.</p> <p><i>*Medical care for the treatment of HIV infection includes the provision of care that is consistent with the United States Public Health Service, National Institutes of Health, and American Academy of HIV Medicine (AAHIVM).</i></p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Client Health Assessment ▪ Lab Results ▪ Treatment Plan ▪ Counseling/Education Provided ▪ Documentation in Client's Chart ▪ Documentation in ARIES



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<p>Service Delivery Element #13: Services are provided based on established Cultural and Linguistic Competency Standards</p> <p>Implementation Activity 13-1 Clinic Manager, Lead Nurse and Senior CDS will ensure that clinical staff at all levels and across all disciplines receive ongoing education and training in C&L service delivery to ensure that clients receive effective, respectful care compatible with client's cultural, health beliefs, practices, preferred language and in a manner that reflects and respects the gender and sexual diversity of community served.</p> <p>Implementation Activity 13-2 HIV Branch Chief and Clinic Manager will implement strategies to recruit, retain, and promote at all levels of organization who are representative of the demographic characteristics of the service area.</p> <p>Implementation Activity 13-3 Clinic Manager and Senior CDS will conduct cultural competency organizational self-assessment and develop a plan to address deficiencies.</p> <p>Implementation Activity 13-4 HIV Branch Chief, Supervisor, Lead Nurse, and Senior CDS will develop and implement a written plan that outlines goals, policies, operational plans, and mechanisms for management oversight to provide C&L appropriate services.</p> <p>Implementation Activity 13-5 Clients receiving services are provided with language assistance with existing bilingual and bi-cultural staff.</p> <p>Implementation Activity 13-6 All client-related materials and posted signage are provided in languages of commonly encountered groups (monolingual Spanish speaking community).</p>	<p>1, 2, & 3</p>	<p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ Training Agenda ▪ Sign-in Sheets ▪ Assessment Plan ▪ Client Materials in Spanish
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**RYAN WHITE PROGRAM
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<p>Service Delivery Element #14: Integrate and utilize ARIES to incorporate core data elements. Implementation Activity 14-1 Information will be entered into ARIES. The ARIES reports will be used by the Quality Management team to identify quality service indicators and provide opportunities for improvement in care and services, improve desired patient outcomes and results can be used to develop and recommend "best practices." Implementation Activity 14-2 ARIES Technical Lead (TL) will:</p> <ul style="list-style-type: none"> ▪ provide and facilitate technical support for agency staff. ▪ participate on the TGA ARIES TL Collaborative to provide input, ▪ participate in training provided by the State Office of AIDS, and will ▪ provide ARIES-specific training to new and existing agency staff. <p>Service Delivery Element #15: Ensure clients are informed of the availability of HIV Partner Counseling and Referral Services (PCRS) Implementation Activity 15-1 Clinical staff will provide all clients seeking services with information packets that will include PCRS information and where to access this service. Implementation Activity 15-2 Clinical staff will have client sign an acknowledgement that PCRS was offered.</p> <p>Service Delivery Element #16: Evaluation of the Administrative Mechanism (EAM) Implementation Activity 16-1: Work with the Planning Council in developing and administering the evaluation process.</p>	<p>1, 2, & 3</p> <p>1, 2, & 3</p> <p>1, 2, & 3</p> <p>Not Applicable</p>	<p>March 1, 2010 – February 28, 2011</p> <p>March 1, 2010 – February 28, 2011</p> <p>March 1, 2010 – February 28, 2011</p> <p>March 1, 2010 – February 28, 2011</p>	<ul style="list-style-type: none"> ▪ ARIES Reports ▪ ARIES Reports ▪ PCRS Brochure ▪ Acknowledgement Sheet • Identify a 3rd (neutral) party to conduct the EAM. • Ensure a report is drafted and submitted to the Grantee regarding recommendations and timelines.
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RYAN WHITE PROGRAM Scope of Work

ATTACHMENT A2

<p>Service Delivery Element 17: Epi Support</p> <p>Implementation Activity 17-1: Work with the PC to establish Data Sets to be used for PSRA process and for the preparation of the Part A/MAI Grant.</p>	Not Applicable	March 1, 2010 – February 28, 2011	<ul style="list-style-type: none">• Ensure gathering of PC-identified Data Sets.• Analyze and synthesize various Data Sets to provide the PC the necessary data to conduct PSRA process.• Present findings to the PC to inform PSRA process.• Coordinate all aspects of PSRA Data Summit/Meetings.• Ensure that Grantee receives PSRA outcomes
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Ryan White Program Part A
Provider: County of Riverside- DOPH, HIV/AIDS Program
Service Category: Medical Case Management
Riverside/San Bernardino, California TGA
March 1, 2010- February 28, 2011

Budget Category	Budget Amount
Personnel	
HEALTH CARE SOCIAL WORKER: (Darlene Debayona .85 FTE X \$53,581 Annual Salary) Provides patient services and case management for three health care centers.	\$47,430
SUBTOTAL PERSONNEL	\$47,430
Fringe Benefits (44% of Total Personnel Costs)	\$20,039
TOTAL PERSONNEL	\$67,469
Other	
Travel: Travel to support staff in attending training, conferences, and providing medical case management services at three health care centers.	\$1,175
Supplies: Office supplies and equipment to facilitate provision of new medical case management services to PLWH/A at three medical health centers	\$1,829
Rent: Allocated cost service space	\$2,000
Utilities:	
Telephone: lease of equipment and monthly service charge to support patient care needs.	\$754
Repair/Maintenance:	
Insurance: Cost of liability insurance for staff	\$0
Training(s)/Workshops: Training and conferences attended by HIV medical case management staff to support the provision of services and as required by the Ryan White program	\$0
Dues/Subscriptions:	
Educational Training & Reference Materials: Materials to support the provision of HIV medical case management services	\$0
Printing/Reproduction:	
Postage:	
Recruiting:	
TOTAL OTHER	\$5,758
SUBTOTAL (Personnel and Other)	\$73,227
Administration (limited to 10% of total service budget)	\$8,136
TOTAL BUDGET (Subtotal and Administration)	\$81,363

Ryan White Program Part A
Provider: County of Riverside- DOPH, HIV/AIDS Program
Service Category: Mental Health Services
Riverside/San Bernardino, California TGA
March 1, 2010- February 28, 2011

Budget Category	Budget Amount
Personnel	
LIC. CLINICAL THERAPIST II: (VILAYPHONE KAO) (0.39FTE X \$ 66,040 Annual Salary) perform therapeutic assignments related to the field of mental or behavioral health services and psychiatric social work, including the design and implementation of personalized treatment plans, individual and group psychotherapy, evaluations and investigations, and professional counseling.	\$26,000
SUBTOTAL PERSONNEL	\$26,000
Fringe Benefits (43.05% of Total Personnel Costs)	\$11,194
TOTAL PERSONNEL	\$37,194
Other	
Travel: Funds needed to cover the cost of travel to provide Menal Health services at three clinics	\$1,500
Supplies: Needed to cover the cost of office supplies	\$791
Rent: Neded to cover the cost of rent	\$1,500
Utilities:	
Telephone:	
Repair/Maintenance:	
Insurance:	
Training(s)/Workshops:	
Dues/Subscriptions:	
Educational Training & Reference Materials:	
Printing/Reproduction:	
Postage:	
Recruiting:	
Contractual	
TOTAL OTHER	\$3,791
SUBTOTAL (Personnel and Other)	\$40,985
Administration (limited to 10% of total service budget)	\$4,553
TOTAL BUDGET (Subtotal and Administration)	\$45,538

Ryan White Program Part A
Provider: County of Riverside- DOPH, HIV/AIDS Program
Service Category: Outreach Services
Riverside/San Bernardino, California TGA
March 1, 2010- February 28, 2011

Budget Category	Budget Amount
Personnel	
SENIOR COMMUNICABLE DISEASE SPECIALIST: (MANESSAH NWAIGWE) (0.20 FTE X \$53,893 Annual Salary Provides support for HIV infected patients to ensure entry into the HIV medical care system and provide ongoing support to patients to ensure retention into care.	\$10,778
SUBTOTAL PERSONNEL	\$10,778
Fringe Benefits (42.68% of Total Personnel Costs)	\$4,600
TOTAL PERSONNEL	\$15,378
Other	
Travel: Funds needed to cover the cost of travel to three HIV clinics and to patients homes for follow-up	\$1,452
Supplies:	
Rent:	
Utilities:	
Telephone:	
Repair/Maintenance:	
Insurance:	
Training(s)/Workshops:	
Dues/Subscriptions:	
Educational Training & Reference Materials:	
Printing/Reproduction:	
Postage:	
Recruiting:	
Contractual:	
TOTAL OTHER	\$1,452
SUBTOTAL (Personnel and Other)	\$16,830
Administration (limited to 10% of total service budget)	\$1,869
TOTAL BUDGET (Subtotal and Administration)	\$18,699

Ryan White Program Part A
Provider: County of Riverside- DOPH, HIV/AIDS Program
Service Category: AIDS Pharmaceutical Assistance (Local)
Riverside/San Bernardino, California TGA
March 1, 2010- February 28, 2011

ATTACHMENT B2

Budget Category	Budget Amount
Personnel	
No personnel cost associated with this program	\$0
SUBTOTAL PERSONNEL	\$0
Fringe Benefits (% of Total Personnel Costs)	\$0
TOTAL PERSONNEL	\$0
Other	
Other: Pharmaceuticals. Will provide 50 HIV/AIDS patients (average 3 per month) with 100 units of service at an average cost of \$390 per client at three health care centers.	\$39,515
TOTAL OTHER	\$39,515
SUBTOTAL (Personnel and Other)	\$39,515
Administration (limited to 10% of total service budget)	\$4,390
TOTAL BUDGET (Subtotal and Administration)	\$43,905

Ryan White Program Part A
Provider: County of Riverside- DOPH, HIV/AIDS Program
Service Category: Outpatient/Ambulatory Medical Care
Riverside/San Bernardino, California TGA
March 1, 2010- February 28, 2011

Budget Category	Budget Amount
Personnel	
HEALTH CARE SOCIAL SERVICES SUPERVISOR: (DANIELLE HUNTSMAN) (0.75 FTE X \$75,858 Annual Salary) Provides direct supervision to clinical staff for three health care centers.	\$58,465
REGISTERED NURSE IV: (D. Hexum) (0.90 FTE X \$68,390 Annual Salary) Provides nursing support, medical care, and case management for three health care centers.	\$61,551
PHYSICIAN IV: (Nguyen,) (.80 FTE X \$154,357 Annual Salary) Provides medical support, medical care and management for three health care centers.	\$123,485
HEALTH SERVICES ASSISTANT: (G. Ramirez,) (1.0 FTE X \$33,925 Annual Salary) Provides patient work up, front office and assist nursing staff for three health care centers.	\$33,925
LICENSE VOCATIONAL NURSE II: (Huggins) (1.0 FTE X \$43,846 Annual Salary) Provides nursing support for three health care centers.	\$43,846
HEALTH CARE SOCIAL WORKER: (Severe) (0.4536 FTE X \$50,731 Annual Salary) Provides patient services and case management for three health care centers.	\$23,014
OFFICE ASSISTANT III: (V. Arreola) (1.0 FTE X \$32,988 Annual Salary) Provides clerical support to clinic staff for three health care centers.	\$32,989
Public Health Program Chief (V. Jauregui Burns) (.20 FTE X \$108,760 Annual Salary) Provides overall management for the HIV Care Clinic	\$21,216
SUBTOTAL PERSONNEL	\$398,491
Fringe Benefits (40.71% of Total Personnel Costs)	\$162,228
TOTAL PERSONNEL	\$560,719
Other	
Travel: Travel to required meetings, associated with providing medical care at three health care centers, Indio, Perris and Riverside facilities.	\$10,000
Supplies: Office and medical supplies to support daily activities of three health care centers.	\$15,000
Rent: Allocated cost for three health care centers	\$0
Utilities:	
Telephone Telephone equipment and service to support patient care at three health care centers.	\$5,000
Insurance: Cost of liability insurance for staff annually.	\$2,000
Educational Training & Reference Materials: Materials to support the education and client awareness of HIV.	\$5,591
Postage:	\$10,000
Recruiting:	
Contractual: Evaluation of the Administrative Mechanism (EAM) Activities	\$2,500
Epi Support: Epi support for the Priority Setting and Resource Allocation Summit (PSRA)	\$25,000
Laboratory Services: Services to support medical care of HIV clients at three health care centers.	\$91,753
TOTAL OTHER	\$166,844
SUBTOTAL (Personnel and Other)	\$727,563
Administration (limited to 10% of total service budget)	\$80,840
TOTAL BUDGET (Subtotal and Administration)	\$808,403