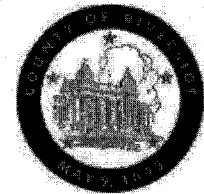


**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**ITEM
3.5
(ID # 8645)**

MEETING DATE:

Tuesday, January 15, 2019

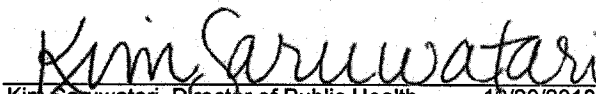
FROM : RUHS-PUBLIC HEALTH:

SUBJECT: RIVERSIDE UNIVERSITY HEALTH SYSTEM – PUBLIC HEALTH: Ratify and Approve Amended Grant Agreement Number 16-10729 A01 Awarded by the California Department of Public Health to County of Riverside Public Health for Core STD Program Management Funds for Fiscal Year 2018/2019, All Districts. [\$103,500 - 100% State Funds]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify and approve the Amended Grant Agreement Number 16-10729 A01 awarded by the California Department of Public Health to County of Riverside Department of Public Health (Amended Agreement) for Core STD Program Management that increases the amount of funding by \$103,500 for fiscal year 2018/2019 for a total contract amount of \$344,681;
2. Authorize the Chairman of the Board of Supervisors to execute the Amended Agreement on behalf of the County; and
3. Authorize the Director of Public Health, or designee, to take all steps necessary to implement the Amended Agreement including, but not limited to, signing subsequent amendments that do not change the substantive terms of the agreement, and signing all certifications, assurances, reports, or other related documents required by the California Department of Public Health, subject to County Counsel approval.


ACTION: Policy


Kim Saruwatari, Director of Public Health 12/20/2018

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt
Nays: None
Absent: None
Date: January 15, 2019
xc: Public Health

Kecia Harper
Clerk of the Board
By: 
Deputy

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

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ 103,500	\$ 0	\$ 103,500	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: 100% State Funds			Budget Adjustment: No	
			For Fiscal Year: 2018/19	

C.E.O. RECOMMENDATION: Approve

BACKGROUND: (Continued)

Summary

On May 23, 2017, in Minute Order 3.38, the Board of Supervisors approved Grant Number 16-10729 between the California Department of Public Health (CDPH), Sexually Transmitted Disease (STD) Control Branch, and the County of Riverside Department of Public Health (County) for Core STD Program Management (Program) in the amount of \$241,181 for a term commencing July 1, 2016 through June 30, 2019 to support expanded STD control activities (Original Agreement). The Amended Agreement, attached hereto, increases the funding by \$103,500 for a total award amount of \$344,681. The changes made by CDPH to the Original Agreement are noted in bold underline and as strike through text. County Counsel has approved the Amended Agreement as to form.

Additionally, the Amended Agreement provides increased funding for STD Clinical Surveillance and Investigation Activities. Key strategic targets for STD prevention and control under this Program include: 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.

Staff recommends that the Board ratify and approve the attached Amended Agreement, authorize the Chairman of the Board to execute the Amended Agreement, and authorize the Director of Public Health, or designee, to take all steps necessary to implement the Amended Agreement including, but not limited to, signing subsequent amendments that do not change the substantive terms of the agreement, and signing all certifications, assurances, reports, or other related documents required by the California Department of Public Health, subject to County Counsel approval.

Impact on Residents and Businesses

The increased funding will allow the Program to continue expanding access to high-quality screening and clinical services for STD clients and broaden partner evaluation, treatment and

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

counseling services. The Program also will continue working towards decreasing STD transmission through enhanced surveillance and investigation activities, ensuring treatment, identification and notification of partners, and providing STD prevention education.

SUPPLEMENTAL:

Additional Fiscal Information

	Original Amount	Amendment 01	Total Amount
Awarded Amount	\$241,181	\$103,500	\$344,681

ATTACHMENT:

- Amended Grant Agreement Number 16-10729 A01


Melissa Noone, Associate Management Analyst

1/8/2019


Gregory V. Prietas, Director County Counsel

1/4/2019

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

RESOLUTION

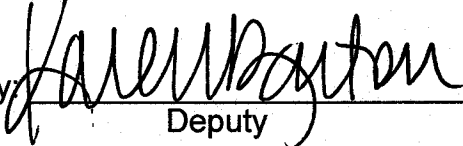
BE IT RESOLVED by the Board of Supervisors of the County of Riverside, State of California, in regular session assembled on Tuesday, January 15, 2019, that Kevin Jeffries, the Chairman is authorized and directed to execute on behalf of said County the Standard Agreement No. 16-10729, Amendment No. 1 between Riverside County and California Department of Public Health providing: for Core STD Program Management Funds.

Roll Call:

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt
Nays: None
Absent: None

The foregoing is certified to be a true copy of a resolution duly adopted by said Board of Supervisors on the date therein set forth.

KECIA R. HARPER, Clerk of said Board

By  Deputy

CALIFORNIA SEXUALLY TRANSMITTED DISEASES PROGRAM
Awarded By
THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter "Department"
TO
County of Riverside Department of Public Health, hereinafter "Grantee"
Implementing the project "Core STD Program Management," hereinafter "Project"

AMENDED GRANT AGREEMENT NUMBER 16-10729 A01

The Department amends this grant and the Grantee accepts and agrees to use the grant funds as follows:

AUTHORITY: The Department has authority to grant funds for the Project under Health and Safety Code Section 131085(a).

PURPOSE: The purpose of the grant amendment is to increase the funding by \$103,500. These funds were appropriated in the Governor's Fiscal Year 2018/2019 budget to support sexually transmitted disease outreach, screening, and other core services by enhancing STD prevention services already provided by the local health jurisdiction.

Amendments are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).

AMENDED GRANT AMOUNT: This amendment is to increase the grant by \$103,500 and is amended to read: ~~\$241,484~~ **\$344,681** (~~Two Hundred Forty-One Thousand, One Hundred Eighty-One~~ **Three Hundred Forty-Four Thousand, Six Hundred Eighty-One** Dollars).

Exhibit A, Scope of Work is hereby replaced in its entirety and amended to read Exhibit A, A01, Scope of Work.

PROJECT REPRESENTATIVES: The Project Representatives during the term of this grant will be:

California Department of Public Health	Grantee: County of Riverside Department Of Public Health
Name: Biomil Sevilla <u>May Otow</u> Grant Manager	Name: Carelyn Lieber <u>Lea Morgan</u> Program Director <u>Chief</u>
Address: P.O. Box 997377, MS 7320	Address: 4065 County Circle Drive
City, Zip: Sacramento, CA 95899-7377	City, Zip: Riverside, CA 92503
Phone: (916) 552-9794 <u>9788</u>	Phone: (951) 358-5307 <u>7234</u>
Fax: (916) 552-9777 <u>636-6458</u>	Fax: (951) 358-5407
Email: Biomil.Sevilla@cdph.ca.gov <u>May.Otow@cdph.ca.gov</u>	Email: Clieber@rivcocha.org <u>LeaMorgan@rivcocha.org</u>

Direct all inquiries to:

California Department of Public Health STD Control Branch	Grantee: County of Riverside Department Of Public Health
Attention: May Otow STD Control Branch	Name: Richard Lee Administrative Services Assistant
Address: P.O. Box 997377, MS 7320	Address: 4065 County Circle Drive, #207
City, Zip: Sacramento, CA 95899-7377	City, Zip: Riverside, CA 92503
Phone: (916) 552-9794 9788	Phone: (951) 358-7205
Fax: (916) 552-9777 636-6458	Fax: (951) 358-5407
Email: <u>Biomil.Sevilla@cdph.ca.gov</u> <u>May.Otow@cdph.ca.gov</u>	Email: <u>RILee@rivcocha.org</u>

Either party may change its Project Representative upon written notice to the other party.

All other terms and conditions of this grant shall remain the same.

All payments from CDPH to the Grantee shall be sent to the following address:

Grantee: County of Riverside Department of Public Health Attention "Cashier:" Richard Lee Address: P.O. Box 7600 City, Zip: Riverside, CA 92513 Telephone: (951) 358-7205 Fax: (951) 358-5407 Email: <u>rilee@rivcocha.org</u>

ATTEST:
KECIA HARPER-IHEM, Clerk
By 
DEPUTY

FORM APPROVED COUNTY COUNSEL
BY: 
AMRIT P. DHILLON
1/3/2019
DATE

IN WITNESS THEREOF, the parties have executed this Grant on the dates set forth below.

Executed By:

Date: JAN 15 2019


KEVIN JEFFRIES
CHAIRMAN, BOARD OF SUPERVISORS

Date: 2/13/19


Marshay Gregory, Chief
Contracts Management Unit
California Department of Public Health
1616 Capitol Avenue, Suite 74.262
P.O. Box 997377, MS 1800-1804
Sacramento, CA 95899-7377

Exhibit A
Scope of Work

1. Service Overview

The Grantee will implement evidence-based public health activities to proactively address Sexually Transmitted Diseases (STD) within the local health jurisdiction. Particular emphasis should be placed on the prevention and control of infectious syphilis, congenital syphilis (**CS**), gonorrhea (GC), and chlamydia trachomatis (CT) infection.

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.

Funding for the grantees are from a one-time Fiscal Year 2016/2017 appropriation which can be expended or encumbered until June 30, 2019 per 4265-111-0001, Provision 6 of the Budget Act 2016/2017, Senate Bill 826, Chapter 23. **The additional one-time augmentation funds for the grantees are from a one-time Fiscal Year 2018/2019 appropriation which can be expended or encumbered until June 30, 2019 per 4265-111-0001, Provision 5 of the Budget Act 2018/2019, Senate Bill 840, Chapter 29. These funds must be used to enhance STD prevention services already provided and cannot be used to replace existing services and monies appropriated at the local level for these services.**

2. Service Location

The services shall be performed at applicable facilities in the County of Riverside.

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. Project Representatives

A. The project representatives during the term of this agreement will be:

California Department of Public Health	County of Riverside Department of Public Health
Matt Ayson Karlo Estacio Chief, Business Operations Support Section STD Control Branch Telephone: (916) 552-9849 9820 Fax: (916) 440-5106 Email: Matt.Ayson@cdph.ca.gov Karlo.Estacio@cdph.ca.gov	Garelyn Lieber Lea Morgan Program Director Chief County of Riverside Department of Public Health Telephone: (951) 358-5307 7234 Fax: (951) 358-5407 Email: Glieber@rivcocha.org LeaMorgan@rivcocha.org

Exhibit A
Scope of Work

B. Direct all inquiries to:

California Department of Public Health STD Control Branch Attention: Biomil Sevilla <u>May Otow</u> , Grant Manager 1616 Capitol Avenue, MS 7320 P.O. Box 997377 Sacramento, CA 95899-7377 Telephone: (916) 552-9794 <u>9788</u> Fax: (916) 552-9777 <u>636-6458</u> Email: <u>Biomil.Sevilla@cdph.ca.gov</u> <u>May.Otow@cdph.ca.gov</u>	County of Riverside Department of Public Health Carolyn Lieber <u>Richard Lee</u> Program Director <u>Administrative Services Assistant</u> County of Riverside Department of Public Health 4065 County Circle Drive, <u>#207</u> Riverside, CA 92503 Telephone: (951) 358-5307 <u>7205</u> Fax: (951) 358-5407 Email: <u>CLieber@rivcocha.org</u> <u>rilee@rivcocha.org</u>
--	--

C. All payments from CDPH to the Grantee shall be sent to the following address:

<p style="text-align: center;"><u>Remittance Address</u></p> <p><u>County of Riverside Department of Public Health</u> <u>Attention "Cashier:" Richard Lee</u> <u>P.O. Box 7600</u> <u>Riverside, CA 92513</u> <u>Telephone: (951) 358-7205</u> <u>Fax: (951) 358-5407</u> <u>Email: <u>rilee@rivcocha.org</u></u></p>

G. D. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement. Subgrantees must comply with the State Contracting Manual Volume I, 3.17.2.D.

Exhibit A
Scope of Work

5. Services to be Performed

Goal: To provide local assistance funding to local health jurisdictions (LHJs) to build local infrastructure and workforce capacity to conduct STD surveillance and implement evidence-based, effective interventions to reduce the transmission and negative health effects of sexually transmitted infections. Core STD program management is focused on the prevention of CT, GC, and syphilis through health education; promotion and outreach; assurance of quality local STD clinical services; disease investigation; and policy development and communication.

Part I: Core STD Program Management Assure quality case-based surveillance for syphilis, GC, and CT.

The Grantee is responsible for completing the activities that have been selected by the placement of an "X" in the check box. A number of these activities are mandatory requirements for funding, indicated with an "X". Other activities are optional, based upon local program need and resources. Please indicate which of these additional activities your local health jurisdiction will pursue by placing an "X" in the appropriate check box. End-of-Year reports should be submitted to STDLHJContracts@cdph.ca.gov by July 31 following the end of each fiscal year during the term of this contract. The report for the period of July 1, 2016 through June 30, 2019 will be due on June 30, 2019.

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
I. Assure quality case-based surveillance for syphilis, GC, and CT.		
<input checked="" type="checkbox"/> A. Adhere to all data security standards and guidelines in accordance with state and federal guidance. (Required activity).	Data security standards and guidelines are in compliance with state and federal guidance.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> B. Provide case-based data to the California Department of Public Health (CDPH) through the use of the California Reportable Disease Information Exchange (CalREDIE). <i>If CalREDIE is not available, provide case-based data through other means per agreement between the local STD Control Officer and the STD Control Branch (STDCB) Chief of the Surveillance and Epidemiology Unit. (Required activity).</i>	Completion and closure of syphilis, GC and CT cases diagnosed in January – June by August 30 of that year in CalREDIE* <u>in surveillance system within 45 days after the lab or provider case report is first received by the local health department. Reports will be reviewed monthly by the 15th of the following month</u> Completion and closure of syphilis, GC, and CT cases diagnosed in July – December by February 28 of that year in CalREDIE.	7/1/16 - 6/30/19 <u>Case closures due monthly</u> Semi-annual case closure

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<input checked="" type="checkbox"/> C. Assure completeness and accuracy of key variables through local review of surveillance reports and provider follow-up of select GC and early syphilis cases. (Required activity).	Proportion of GC and early syphilis cases with complete data for the following key variables in CalREDIE: <ul style="list-style-type: none"> • Treatment Date* • Medication and Dosage* • Race/Ethnicity* • Patient Address* • Provider Name and Address* • Gender of Sex Partners* • HIV Status* • Partner Treatment* Proportion of female syphilis cases with complete provider-confirmed pregnancy status*.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> D. Assure provider reporting of syphilis and GC cases in accordance with state regulations. (Required activity).	Case reporting by providers within 14 days of specimen collection for syphilis and GC*.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> E. Utilize case-based surveillance data through, at a minimum, routine examination of rates and trends by age, gender, race/ethnicity, and other key variables. (Required activity).	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> F. Conduct enhanced surveillance for all priority syphilis cases using medical record data and case interviews as necessary. (Required activity).	Completed interview records for enhanced surveillance on priority syphilis cases: <ul style="list-style-type: none"> • Early syphilis* • Congenital syphilis* Completion and closure of cases as described in I.B.	7/1/16 - 6/30/19 Semi-annual case closure
<input checked="" type="checkbox"/> G. Conduct enhanced surveillance on GC cases as part of an investigation of a strain with resistance or decreased susceptibility to antibiotics. (Required activity).	Completed interview records for CA-GISP assigned GC cases*. Completion and closure of cases as described in I.B.	7/1/16 - 6/30/19 Semi-annual case closure

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>Optional Activity</p> <p><input type="checkbox"/> H. G. Conduct enhanced surveillance on GC cases as part of an outbreak or unusual occurrence investigation and/or as part of a geo-targeted assessment and intervention.</p>	<p>Completed interview records for GC cases*.</p> <p>Completion and closure of cases as described in I.B.</p>	<p>7/1/16 - 6/30/19</p> <p>Semi-annual case closure</p>
<p>Optional Activity</p> <p><input type="checkbox"/> I. H. Conduct enhanced surveillance on GC cases as part of the California Gonorrhea Surveillance System (CGSS 2.0).</p>	<p>Completed timely and CalREDIE-entered interview records for CGSS-sampled GC cases*.</p> <p>Completion and closure of cases as described in I.B.</p>	<p>7/1/16 - 6/30/19</p> <p>Semi-annual case closure</p>
<p>Optional SOW Narrative: LHJ has new or innovative tasks that are not part of current Section I 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.</p> <p>Not applicable.</p>		

Part II: Conduct health promotion activities for youth at risk of STDs to increase STD/sexual health awareness and conduct primary prevention.

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>H. Conduct health promotion activities for youth at risk of STDs to increase STD/sexual health awareness and conduct primary prevention.</p>		
<p><input checked="" type="checkbox"/> A. Utilize STD data to define local priority populations and/or geographic areas for targeting health promotion efforts, with an emphasis on youth and underserved populations. (Required activity).</p>	<p>Description of activities will be included in the End-of-Year report.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<input checked="" type="checkbox"/> B. Describe existing community resources and identify potential gaps related to STD prevention and education. (Required activity).	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19 Report due annually by 7/31 <u>6/30/19</u>
<p>Optional Activity</p> <input type="checkbox"/> C. Provide technical assistance, training, resources, and referrals to <u>school districts and other school-based partners</u> on delivering quality sexual health education and confidential sexual health services in accordance with state regulations. [†]	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19 Report due annually by 7/31 <u>6/30/19</u>
<p>Optional Activity</p> <input type="checkbox"/> D. Provide technical assistance and training for building capacity among <u>youth-serving community-based organizations</u> to ensure youth have access to medically accurate information, prevention tools, and sexual and reproductive health clinical services. [†]	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19 Report due annually by 7/31 <u>6/30/19</u>
<p>Optional Activity</p> <input type="checkbox"/> E. Act as a local resource to plan and implement the California Youth Risk Behavioral Survey (YRBS) in CDC-selected schools (selection by CDC to be determined). Examples of this include contacting local school districts to encourage participation, promoting the survey with parent and teacher groups, or having local staff trained to administer the survey in selected schools.	Proportion of local schools participating in YRBS among schools selected for YRBS (number and locations vary between survey cycles, which occur every other year beginning in 2016).	Every other year, beginning in 2016. 7/1/16 - 6/30/19
<input type="checkbox"/> F. Act as a local resource for school districts, partnering with CDPH on the Division of Adolescent Sexual Health (DASH) funded activities.	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19 Report due annually by 7/31

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>Optional Activity</p> <p><input type="checkbox"/> G- F. Support local implementation and expansion of statewide health promotion activities, such as: implementing the "I Know" project (select LHJs only); recruiting new Condom Access Project (CAP) sites (minimum 3 per LHJ; maximums apply).⁴</p>	<p>Description of activities will be included in the End-of-Year report, including the number of CAP sites and, if applicable, a description of "I Know" promotion activities and outcomes.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p>Optional Activity</p> <p><input type="checkbox"/> H- G. Promote web-based sexual health promotion programs (e.g., Hook Up, Teensource.org, TalkWithYourKids.org) with local schools, parents, providers, community-based organizations, and other key stakeholders serving at-risk populations.⁴</p>	<p>Description of activities will be included in the End-of-Year report, including methods of promoting resources.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p><input type="checkbox"/> I- H. Utilize available promotional materials and outreach opportunities during STD Awareness Month (April) to promote the national Get Yourself Tested (GYT) campaign.⁴</p>	<p>Description of activities will be included in the End-of-Year report.</p>	<p>7/1/16 - 6/30/17</p> <p>Report due annually by 7/31 6/30/19</p>
<p>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</p> <p><input type="checkbox"/> J- I. Subcontract with community-based or other organizations to ensure success of core STD program functions (check box if conducting this activity).⁴</p>	<p>Subcontract with community or other organizations, if needed.</p>	<p>7/1/16 - 6/30/19</p>

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>Optional SOW Narrative: LHJ has new or innovative tasks that are not part of current Section 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.</p> <p>Not applicable.</p>		

Part III: Assure high quality STD screening and treatment services are available in the LHJ.

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>III. Assure high quality STD screening and treatment services are available in the LHJ.</p>		
<p><input checked="" type="checkbox"/> A. Assess major sources of STD clinical care and characterized by patient census, clinic type (reference list to be provided by STDCB), and location and population served to identify potential gaps in access to STD services. (Required activity).</p>	<p>Description of activities will be included in the End-of-Year report.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p>Optional Activity</p> <p><input type="checkbox"/> B. Assess quality of care among providers in high volume clinics or serving high morbidity areas including competency providing services to youth; diverse racial/ethnic groups; and lesbian, gay, bisexual, and transgender (LGBT) patients, as appropriate.</p>	<p>Description of activities will be included in the End-of-Year report.</p> <p>As applicable, description of:</p> <ul style="list-style-type: none"> • STD screening practices • Adherence to STD treatment recommendations • Cultural competency to service at-risk groups 	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p><u>Optional Activity</u></p> <p><input type="checkbox"/> C. Work with the highest level of local clinic leadership for public and private providers in the community to establish policies related to clinical quality improvement (QI) activities focused on expanded screening, diagnosis, and presumptive treatment; public health reporting; timely and effective management; partner treatment; and repeat testing. Provide technical assistance related to implementation of clinical QI activities.</p>	<p>Description of activities will be included in the End-of-Year report, including tools and protocols that may be shared with other LHJs, as applicable.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p><u>Optional Activity</u></p> <p><input type="checkbox"/> D. Work with the highest level of local clinic leadership for public and private providers in the community, including STD clinic settings, to establish policies related to clinical QI activities focused on HIV screening among syphilis and gonorrhea cases.</p>	<p>Proportion of early syphilis cases with known HIV status (positive or tested negative within 30 days of STD diagnosis)*.</p> <p>Proportion of GC cases with known HIV status (positive or tested negative within 30 days of STD diagnosis)*.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p><u>Optional Activity</u></p> <p><input type="checkbox"/> E. Establish protocols and implement provider feedback mechanisms for management of inadequate or delayed treatment.</p>	<p>Develop protocol to monitor provider treatment practices and for targeting interventions at low-performing providers.</p> <p>For GC and early syphilis, proportion with recommended treatment documented in CaIREDIE, and proportion who received recommended treatment within 7 days and within 14 days of specimen collection*.</p>	<p>7/1/16 - 6/30/19</p>
<p><u>Optional Activity</u></p> <p><input type="checkbox"/> F. Implement public health detailing programs targeted to providers in high volume clinics or serving high morbidity areas (e.g., family planning settings, HIV care providers, Federally Qualified Health Centers, school-based health centers, obstetrics/gynecology offices, pediatric offices, family practice</p>	<p>Description of activities will be included in the End-of-Year report.</p> <p>Measures include total number of provider visits/trainings, number and types of providers visited/trained, and number and types of resources disseminated.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
and primary care, and prenatal care providers). Programs may include training, dissemination of resources, and technical assistance. ³		
<p>Optional Activity</p> <p><input type="checkbox"/> G. Monitor quality of local health department STD clinical services including screening rates, treatment, HIV testing of STD cases, partner referral/treatment, epidemiologic treatment of Disease Intervention Specialist (DIS)-referred contacts, and repeat testing rates. (Required activity for local health jurisdictions with health department based STD clinical services.)</p>	<p>Description of activities will be included in the End-of-Year report.</p> <p>Percent of patients diagnosed with GC and early syphilis in STD clinics who were tested for HIV within 30 days prior to or after STD diagnosis*.</p> <p>Percent of those tested (above) who are newly-diagnosed as HIV-infected*.</p> <p>Proportion of GC cases that are retested in 3 months.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p>Optional Activity</p> <p><input type="checkbox"/> H. Monitor quality of local health department STD clinical services, including linkage to HIV care for newly identified patients with HIV and re-engagement in HIV care for those out of care.</p>	<p>Description of activities will be included in the End-of-Year report.</p> <p>Percent of those newly diagnosed (above) who are linked to HIV care within 90 days of the date of HIV test*.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p>Optional Activity</p> <p><input type="checkbox"/> I. Assess availability of and promote or provide patient-delivered partner therapy (PDPT) for patients diagnosed with CT/GC.</p>	<p>Description of activities will be included in the End-of-Year report.</p>	<p>7/1/16 - 6/30/19</p> <p>Report due annually by 7/31 6/30/19</p>
<p>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</p> <p><input type="checkbox"/> J. Subcontract with community-based or other organizations to ensure success of core STD program functions (check box if conducting this activity).⁴</p>	<p>Subcontract with community or other organizations, if needed.</p>	<p>7/1/16 - 6/30/19</p>

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>Optional SOW Narrative: LHJ has new or innovative tasks that are not part of current Section 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.</p> <p>The LHJ is proposing to subcontract with two community-based organizations (Desert AIDS Project and Planned Parenthood) to provide syphilis medication (BIC-LA) and laboratory services to ensure that individuals seeking syphilis screening and treatment at services at those agencies receive them and are never turned away due to an inability to pay or the CBO's lack of BIC-LA. The Contractor will establish /update MOUs with each CBO and developing policies and procedures to supply each CBO with BIC-LA and to pay lab fees for syphilis screening/conformatory blood samples processed through the Riverside County Public Health Laboratory.</p> <p>Deliverables will include a report of the number of individuals screened/confirmed and number of doses of BIC-LA used per month by each CBO.</p> <p>The projected timeline is 7/1/16 – 6/30/19 with funds adjusted annually based on usage. If the need is less than initially anticipate, additional CBOs may be included.</p> <p><u>The LHJ is proposing a partnership with the Riverside University Health System Medical Center to collaborate and provide STD screening and treatment via a mobile clinic unit to serve clients living in high morbidity areas. The LHJ STD Program will utilize Epidemiologic data to ensure that the geographic areas with the highest STD morbidity within the county is serviced.</u></p> <p><u>Deliverables:</u> <u>The LHJ will provide an End-of-Year report describing the geographic locations targeted, the number of clients screened, the type of test(s) performed, results of tests, and the number of patients treated.</u></p> <p><u>Timeline:</u> <u>The LHJ will offer mobile STD testing October 2018 through June 2019. Testing will occur every two weeks.</u></p>		

Exhibit A
Scope of Work

Part IV: Conduct disease intervention activities, including partner services, for priority STDs to prevent further transmission in the community or from mother-to-child.

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
IV. Conduct disease intervention activities, including partner services, for priority STDs to prevent further transmission in the community or from mother-to-child.		
<input checked="" type="checkbox"/> A. Process incoming syphilis reactors to determine prioritization for public health action, conduct record searching, and data entry. (Required activity).	Median number of days between report and initiation of reactors, stratified by priority alert value.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> B. <i>For priority syphilis reactors (Alert codes red and orange):</i> Contact providers and patients, as needed, to verify diagnosis and treatment and refer untreated patients to care. For females of child-bearing age (ages 15-44) with reactive serological tests, determine pregnancy status and assure timely and appropriate treatment. (Required activity).	Proportion of early syphilis cases, stratified by gender, treated within 14 days of specimen collection*. Proportion of female syphilis cases with complete provider-confirmed pregnancy status*. Proportion of pregnant females with syphilis treated greater than 30 days prior to delivery*.	<u>7/1/16 - 6/30/19</u>
<input checked="" type="checkbox"/> C. <i>For early syphilis cases with unknown or negative HIV status:</i> Conduct confirmation of HIV status or facilitation of HIV testing and linkage or re-engagement to care. (Required activity).	Proportion of early syphilis cases with documented HIV test within 30 days before or after syphilis diagnosis*. Of those early syphilis cases tested and newly diagnosed with HIV from above, proportion with a confirmed HIV care medical visit within 90 days of HIV test*.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> D. <i>For early syphilis cases that are HIV-infected:</i> Confirm engagement in HIV care or facilitate re-engagement to care. (Required activity).	Proportion of early syphilis/HIV co-infected cases with confirmation of current HIV medical care visit*. Of patients who are known to be HIV-infected and are out of HIV care, proportion who are re-engaged in care through confirmed HIV care medical visit within 90 days of STD diagnosis*.	7/1/16 - 6/30/19

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<input checked="" type="checkbox"/> E. For <u>all</u> early syphilis cases: Conduct client interview and case management including collection of medical information and client risk information; risk reduction counseling; elicitation of sexual and social network partners; and referral for other services as relevant. (Required activity).	Proportion of early syphilis cases interviewed within 14 and 30 days of specimen collection*. Proportion of early syphilis cases interviewed with at least one partner initiated for notification of exposure*.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> F. For partners of <u>all</u> early syphilis cases: Assure testing and appropriate treatment of sexual and social network partners including notification of exposure to syphilis and HIV and facilitate STD and HIV testing, treatment and linkage or re-engagement to HIV care, as relevant. (Required activity).	Proportion of initiated partners of early syphilis cases that are: <ul style="list-style-type: none"> • Newly tested for syphilis (among initiated partners)*. • Preventative/prophylactic treated within 14 days of test (among syphilis tested above with negative test and recent exposure)*. • Newly diagnosed with syphilis (among syphilis tested above)*. • Confirmed syphilis treatment within 14 days of syphilis test (among newly diagnosed above)*. • Newly tested for HIV (among initiated partners)*. • Newly identified HIV positive (among HIV tested above)*. • Confirmed HIV medical care visit within 90 days of HIV test (among newly diagnosed with HIV)*. • Re-engaged in care through confirmed HIV care medical visit within 90 days of STD test/diagnosis (among initiated partners known to be HIV-infected and out of HIV care)*. 	<u>7/1/16 - 6/30/19</u>
<input checked="" type="checkbox"/> G. For early syphilis cases among females of child-bearing age (ages 15-49): In addition to interview and case management, provide partner services to assure testing and appropriate treatment of partners. (Required activity).	Proportion of female syphilis cases ages 15-49 with at least one partner who was: <ul style="list-style-type: none"> • Preventative/prophylactic treated within 14 days of test (among syphilis tested above with negative test and recent exposure)*. • Treated as a new case of syphilis within 30 days before or after specimen collection of the original patient*. 	7/1/16 - 6/30/19

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<input checked="" type="checkbox"/> H. <i>For congenital syphilis cases:</i> Contact provider to assure needed clinical evaluation, case reporting, and correct treatment. Involve subject matter experts, as needed. (Required activity).	Proportion with appropriate case management documentation (e.g., congenital syphilis case report) and documented treatment, where appropriate*. Proportion of confirmed and probable congenital syphilis cases where neonate was <ul style="list-style-type: none"> • Appropriately medically evaluated within 14 days • Appropriately treated within 14 days* 	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> I. <i>Conduct follow-up for suspected drug-resistant GC cases:</i> Known or suspected treatment failures and/or decreased susceptibility to treatment (i.e., high MIC). (Required activity).	Number and proportion of cases with suspected treatment failures that were interviewed. Number and proportion of cases with high MICs that were interviewed and brought to care for test-of-cure.	7/1/16 - 6/30/19
<p><u>Optional Activity</u></p> <input type="checkbox"/> J. <i>Conduct follow up for selected GC cases:</i> Persons with increased risk of transmission (e.g., repeat cases, HIV- infected cases) and/or pregnant females.	Proportion of GC cases that are retested in 3 months. Number and proportion of GC cases with documented GC testing and/or appropriate treatment for at least one partner. Proportion of initiated partners of GC/HIV co-infected cases that are: <ul style="list-style-type: none"> • Newly tested for HIV • Newly identified HIV positive • Confirmed linkage to HIV care within 90 days of HIV-positive test* 	7/1/16 - 6/30/19
<p><u>Optional Activity</u></p> <input type="checkbox"/> K. <i>Conduct follow-up for selected GC cases:</i> Persons located in geo-targeted areas with concentrated morbidity.	Number and proportion of GC cases interviewed from geo-targeted locations. Number and proportion of GC cases with at least one partner <u>that</u> was tested and/or treated appropriately for GC.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> L. <i>Conduct disease investigation for clusters or outbreaks of less common STDs, such as chancroid or lymphogranuloma venereum (LGV).</i> (Required activity).	Description of activities will be included in the End of Year Report.	7/1/16 - 6/30/19 as needed Report due annually by 7/31 <u>6/30/19</u>

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<input checked="" type="checkbox"/> M. Ensure data entry in CalREDIE to reflect disease intervention and partner services activities for syphilis, GC, and other STDs determined a priority for public health action. <ol style="list-style-type: none"> 1. Enter client level demographic, laboratory, clinical, and case investigation activities on relevant CalREDIE systems tabs <u>to ensure they are recorded.</u> 2. Enter client interview records with enhanced surveillance data, including syphilis interview record and CGSS provider report and patient interview forms. 3. Enter congenital syphilis case report forms, according to guidance and algorithm. 4. Enter sexual and social network partner information and investigation/notification outcomes. (Required activity). 	Completion and closure of case report forms, interview records, and partner investigation outcomes in CalREDIE.*	7/1/16 - 6/30/19 Ongoing data entry Case closures as described in I.B.
<p>Optional: Place a checkmark in the box only if Grantee plans to subcontract.</p> <input type="checkbox"/> N. 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.	7/1/16 - 6/30/19
<p>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.</p> <p>The LHJ is proposing to use one-time funds to lease an automobile for use by DIS in the conduct of field investigations and other STD program activities. Riverside County is challenged in conducting efficient syphilis investigations by the geographic size of the county. An individual DIS may travel 500 – 1,000 miles per month. DIS and supervisory staff also work from two separate locations 65 miles apart posing a challenge to bringing staff together for meetings and trainings. Currently all DIS and supervisory staff use their own vehicles to conduct STD activities. A problem with a personal vehicle can halt field activities for an investigator and cause delays in case closures. The availability of a leased vehicle will provide an alternative means of conducting field activities, decrease mileage reimbursements and expand opportunities for staff collaborations. The vehicle will be leased starting in December 2016 then for the duration of the funding period.</p>		

Exhibit A
Scope of Work

Part V: Assure that local STD policies and communications are effective.

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
V. Assure that local STD policies and communications are effective.		
<input checked="" type="checkbox"/> A. Promote the presence, relevancy, and accuracy of webpage(s) on health department website with data, links to provider resources, and sexual and reproductive health education materials. (Required activity).	Presence on website, social media, etc.	7/1/16 - 6/30/19
<input checked="" type="checkbox"/> B. Identify and respond to opportunities to educate community partners, policy makers, and the media. (Required activity).	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19 Report due annually by 7/31 <u>6/30/19</u>
<input checked="" type="checkbox"/> C. Participate in relevant community coalitions focused on sexual health. (Required activity).	Description of activities will be included in the End-of-Year report.	7/1/16 - 6/30/19 Report due annually by 7/31 <u>6/30/19</u>
Optional: Place a checkmark in the box only if Grantee plans to subcontract.	Subcontract with community or other organizations, if needed.	7/1/16 - 6/30/19
<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).		

Exhibit A
Scope of Work

Activities	Performance Indicators/Deliverables * = CDPH will provide biannual reports with indicator	Timeline
<p>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.</p> <p>One-time funds will be used to support the Contractor's STD webpage development and maintenance. Funds will support 0.3 FTE of web developer time. Web developer will ensure all information on the STD webpage is kept up-to-date and that all links are active. They will also work with staff to develop innovative content that encourages interaction with the information.</p>		

* The Grantee may use funds to print or duplicate posters, brochures, pamphlets, and other materials to promote STD awareness, testing, and treatment of at risk populations.

6. Summary of Required Reports and Data

Frequency	Time Frame	Deadline	Program	Report Recipient
Once	7/01/16 – 6/30/19	6/30/19	Core STD Program Management	STDLHJContracts@cdph.ca.gov
Biannual Monthly	7/1/16 – 12/31/16 1/1/17 – 6/30/17 7/1/17 – 12/31/17 1/1/18 – 6/30/18 7/1/18 – 12/31/18 1/1/19 – 6/30/19	2/28/17 8/31/17 2/28/18 8/31/18 2/28/19 6/30/19	STD Case Closure	CalREDIE data system, or Denise.Gilson@cdph.ca.gov
	<u>7/1/2018 – 7/31/2018</u> <u>8/1/18 – 08/31/18</u> <u>9/1/18 – 9/30/18</u> <u>10/1/18 – 10/31/18</u> <u>11/1/18 – 11/30/18</u> <u>12/1/18 – 12/31/18</u> <u>1/1/19 – 1/31/19</u> <u>2/1/19 – 2/28/19</u> <u>3/1/19 – 3/31/19</u> <u>4/1/19 – 4/30/19</u> <u>5/1/19 – 5/31/19</u> <u>6/1/19 – 6/30/19</u>	<u>08/15/18</u> <u>09/15/18</u> <u>10/15/18</u> <u>11/15/18</u> <u>12/15/18</u> <u>1/15/19</u> <u>2/15/19</u> <u>3/15/19</u> <u>4/15/19</u> <u>5/15/19</u> <u>6/15/19</u> <u>6/30/19</u>		

Pursuant to Public Contract Code section 2010, a person that submits a bid or proposal to, or otherwise proposes to enter into or renew a contract with, a state agency with respect to any contract in the amount of \$100,000 or above shall certify, under penalty perjury, at the time the bid or proposal is submitted or the contract is renewed, all of the following:

1. **CALIFORNIA CIVIL RIGHTS LAWS:** For contracts executed or renewed after January 1, 2017, the contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and
2. **EMPLOYER DISCRIMINATORY POLICIES:** For contracts executed or renewed after January 1, 2017, if a Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the Unruh Civil Rights Act (Section 51 of the Civil Code) or the Fair Employment and Housing Act (Section 12960 of the Government Code).

CERTIFICATION

FORM APPROVED COUNTY COUNSEL
 BY APRIL P. DHILLON DATE 1/3/2017

I, the official named below, certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		<i>Federal ID Number</i> 95-6000930
<i>Proposer/Bidder Firm Name (Printed)</i> County of Riverside		
<i>By (Authorized Signature)</i> _____		
<i>Printed Name and Title of Person Signing</i> _____		
<i>Date Executed</i> _____	<i>Executed in the County and State of</i> Riverside California	