



HEALTH SERVICES AGENCY  
ADMINISTRATION

# COUNTY OF SANTA CRUZ 297

## HEALTH SERVICES AGENCY

P.O. BOX 962, 1080 EMELINE AVENUE  
SANTA CRUZ, CA 95061  
(408) 454-4066 FAX: (408) 454-4770  
TDD: (408) 454-4123

October 27, 1998

AGENDA: November 10, 1998

BOARD OF SUPERVISORS  
Santa Cruz County  
701 Ocean Street  
Santa Cruz, CA 95061

RE: ACCEPT UNANTICIPATED REVENUE FOR THE AIDS OUTREACH PROGRAM

Dear Board Members:

The Health Services Agency has been notified that it will receive an additional \$90,000 in FY 1998-99 from the State Office of AIDS for the HIV testing outreach program. This funding will provide for the purchase of a van to conduct mobile HIV testing services, the addition of a new 0.50 FTE testing coordinator position, support for an existing Program Coordinator position, and an increase in the existing outreach service agreement with the Santa Cruz AIDS Project. The attached resolution accepts this new revenue and also makes minor revisions to the AIDS program budget to reflect updated State funding allocations from other sources. The total new revenue, including the minor revisions, comes to \$91,245.

This letter also requests authorization for a revenue transfer between the AIDS program and the Disease Control unit and requests a new 0.50 FTE Program Coordinator position in Disease Control. As explained below, the additional AIDS revenue will allow HSA to shift grant funds to support the new position and to consolidate case reporting and epidemiology activities in the Disease Control unit.

### Neighborhood Intervention High-Risk Testing Program

For several years, HSA has received \$50,000 annually from the State Office of AIDS for HIV test-linked outreach services through the Neighborhood Intervention High-Risk Testing (NIHT) program. These services have been provided via a contract with the Santa Cruz AIDS Project (\$45,000), with a portion (\$5,000) of the funding used to offset HSA administrative costs. On August 25, 1998, your Board approved a proposal to augment these services and authorized HSA to submit a funding request to the State. The proposal has been approved (see attached letter) for \$90,000 in additional continued annual funding, bringing the total NIHT funding to \$140,000 for this fiscal year. These new funds will be used as follows:

- **Van Purchase, Retrofit and Related Operating Expenses (\$37,460):** a van will be purchased and retrofitted to accommodate HIV counseling and testing operations focusing on areas of south county, Davenport, and the San Lorenzo Valley. It is anticipated that the van will be used four days per week, including some week-end days and evening hours. The van purchase and retrofit are estimated at \$32,000. Funds are also included to cover the van's maintenance and repair (\$4,660) plus the purchase and monthly services charges for a cellular phone to facilitate communications during operating hours (\$800). The van purchase and retrofit are one-time funds; maintenance and other service charges are on-going.
- **Santa Cruz AIDS Project contract (\$25,495):** the existing outreach testing contract with the Santa Cruz AIDS Project (SCAP) is being augmented by \$25,495 to a new total of \$70,495. The additional funding is aimed at supporting outreach activities which better inform Medical eligible women of childbearing age at high risk for HIV about the benefits of HIV counseling, testing, and early drug treatment therapy. This funding augmentation is on-going and will be continued in future years.
- **HSA Staffing (\$27,045):** a new 0.50 FTE Health Program Specialist position (\$14,976) will serve as the HIV outreach testing mobile van team leader and van driver coordinating testing services. In addition, 0.30 FTE of an existing Program Coordinator position (\$12,069) in the AIDS program will be covered by the new NIHT program funding. This position will oversee expansion of the NIHT program and provide on-going supervision of program staff and resources. Staff funding is on-going and will be continued in future years. The amounts indicated above are pro rated for six months in the current fiscal year.

#### Disease Control Program

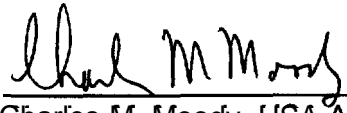
HSA is requesting the creation of a new 0.50 FTE Program Coordinator position in the Disease Control unit. The additional NIHT funding will allow HSA to re-direct \$12,114 in Block Grant funds, currently supporting the 0.30 FTE AIDS Program Coordinator referenced in the preceding paragraph, to the Disease Control unit for this new position. Block Grant funds are intended for HIV case reporting and related activities, which will now be handled by the Disease Control program. The 0.20 FTE balance will be funded by State Immunization Assistance grant revenue already included in the adopted County budget. There is no increase in net County cost as a result of this new position and no new County funds are required or requested. The attached resolution contains the Block Grant revenue transfer as well as some minor budget revisions that reflect updated funding allocations from other AIDS program sources.

It is therefore RECOMMENDED that your Board:


1. Adopt the attached resolution accepting and appropriating \$91,245 in State revenue for the AIDS Neighborhood Intervention High-Risk Testing (NIHT) program and including other minor revisions to the AIDS program budget; and
2. Authorize the Health Services Agency Administrator to sign the amendment to the AIDS Master Grant Agreement and related amendment to the Memorandum of Understanding for the NIHT program when received.
3. Authorize creation of a 0.50 FTE Health Program Specialist in the AIDS Program and a 0.50 FTE Program Coordinator in the Disease Control program, and refer to County Personnel for classification.

4. Approve the fixed asset purchase and retrofit of a van for the NIHT program in the approximate amount of \$32,000.

Sincerely,

  
 Charles M. Moody, HSA Administrator

RECOMMENDED:

  
 Susan A. Mauriello  
 County Administrative Officer

cc: County Administrative Office  
 Auditor-Controller  
 County Counsel  
 County Personnel  
 HSA Personnel  
 HSA Administration  
 SEIU

**DEPARTMENT OF HEALTH SERVICES**

714/744 P STREET  
P.O. BOX 942732  
SACRAMENTO, CA 94234-7320  
(916) 323-4314

**SEP - 8 1998**

George Wolfe, M.D., M.P.H.  
Health Officer  
Santa Cruz County  
P.O. Box 962  
Santa Cruz, CA 95060

Dear Dr. Wolfe:

This letter is to notify you that the total FY 1998/99 Neighborhood Intervention Geared to High Risk Testing (NIGHT) Outreach Program allocation for the County of Santa Cruz is \$140,000.00. This total allocation includes \$62,000.00 to be used for outreach to presumptive high-risk Medicaid-eligible women and their partners.

Though we have an approved scope of work that specifies your program, the total allocation has changed from the budget that was submitted. Therefore, before the County of Santa Cruz receives an amendment to the MOU, an updated budget must be submitted. If this also causes your scope of work to change, please submit a revised scope of work at the same time.

Please mail the revised 5-line item budget and budget justification to your respective contract monitor at: **Department of Health Services, Office of AIDS, P.O. Box 942732, 830 S Street, Sacramento, CA, 94234-7320.**

As soon as the revised 5-line item budget and justification are received, your Memorandum of Understanding amendment package will be forwarded to you under separate cover with instructions for completion. If you have any questions regarding your NIGHT allocation, please contact your contract monitor.

Sincerely,

A handwritten signature in black ink, appearing to read "Harold Rasmussen".

Harold Rasmussen, Chief  
HIV Education and Prevention  
Services Branch

cc: See next page.

BEFORE THE BOARD OF SUPERVISORS  
OF THE COUNTY OF SANTA CRUZ, STATE OF CALIFORNIA

RESOLUTION NO. \_\_\_\_\_

On the motion of Supervisor \_\_\_\_\_  
duly seconded by Supervisor \_\_\_\_\_  
the following resolution is adopted: \_\_\_\_\_

**RESOLUTION ACCEPTING UNANTICIPATED REVENUE**

WHEREAS, the County of Santa Cruz is a recipient of funds from State of California for AIDS program; and

WHEREAS, the County is recipient of funds in the amount of \$ 91,245 which are either in excess of ~~those anticipated~~ or are not specifically set forth in the current fiscal year budget of the County; and

WHEREAS, pursuant to Government Code Section 29130(c)/29064(b), such funds may be made available for specific appropriation by a four-fifths vote of the Board of Supervisors;

NOW, THEREFORE, BE IT RESOLVED AND ORDERED that the Santa Cruz County Auditor-Controller accept funds in the amount of \$ 91,245 into

Department Health Services Agency

T/C	Index Number	Revenue Subobject Number	Account Name	Amount
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- SEE ATTACHED SHEET -

and that such funds be and are hereby appropriated as follows:

T/C	Index Number	Expenditure Subobject Number	PRJ/UCD	Account Name	Amount
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- SEE ATTACHED SHEET -

DEPARTMENT HEAD I hereby certify that the fiscal provisions have been researched and that the Revenue(s) (has been) (will be) received within the current fiscal year.

By Charles M. Moody Department Head

Date 10/26/98

COUNTY ADMINISTRATIVE OFFICER

☒ Recommended to Board☐ Not Recommended to Board

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Cruz,  
State of California, this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_  
by the following vote (requires three-fifths vote for approval):

AYES: SUPERVISORS

NOES: SUPERVISORS

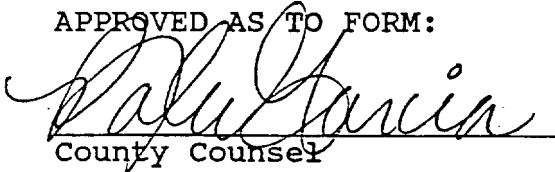
ABSENT: SUPERVISORS

\_\_\_\_\_  
CHAIR OF THE BOARD

ATTEST:

\_\_\_\_\_  
Clerk of the Board

APPROVED AS TO FORM:

  
County Counsel

APPROVED AS TO ACCOUNTING DETAIL:

 10/27/98  
Auditor-Controller/

Distribution:

Auditor-Controller  
County Council  
County Administrative- Officer  
Originating Department

HEALTH SERVICES AGENCY  
AUD-60 ATTACHMENT  
AIDS PROGRAM

FISCAL YEAR 1998199

ESTIMATED REVENUES:

T/C	Index Number	Revenue Subobject Number	Account Name	Amount
001	362700	0665	ST AID - STREET OUTREACH	\$ 89,500
001	362700	0872	ST AID - MANDATED COST REIMB	545
001	362610	0664	ST AID - EPIDEMIOLOGY	13,314
002	362700	0664	ST AID - EPIDEMIOLOGY	(12,114)
Total				\$ <u>91,245</u>

APPROPRIATIONS:

T/C	Index Number	Expenditure Subobject Number	PRJ/UCD	Account Name	Amount
021	362610	3100		REGULAR PAY	\$ 10,181
021	362610	3150		FICA	779
021	362610	3155		PERS	1,328
021	362610	3160		INSURANCE	1,026
021	362700	3100		REGULAR PAY	11,452
021	362700	3150		FICA	876
021	362700	3155		PERS	1,494
021	362700	3160		INSURANCE	1,154
021	362700	<b>3493</b>		SUPPLIES	800
021	362700	3665		PROFESSIONAL & OTHER SERVICES	25,495
021	362700	4175		SERVICE CENTER CHARGES	4,660
021	362700	8404		EQUIPMENT	32.000
Total					\$ <u>91,245</u>

COUNTY OF SANTA CRUZ  
REQUEST FOR APPROVAL OF AGREEMENT

0 304

TO: Board of Supervisors  
County Administrative Officer  
County Counsel  
Auditor-Controller

FROM: **HEALTH SERVICES AGENCY**

(Dept.)

(Signature) 10/26/98 (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

1. Said agreement is between the COUNTY OF SANTA CRUZ (Health Services Agency) (Agency)  
and SANTA CRUZ AIDS PROJECT, PO Box 557, Santa Cruz, CA 95061-0557 (Name & Address)

2. The agreement will provide an HIV outreach and testing program (Neighborhood Intervention High-Risk Testing/NIHT program) funded by the AIDS Master Grant Agreement. Amendment deleting existing Scope of Work and replacing it with a revised Scope and payment provision.

3. The agreement is needed to provide for the above services.

4. Period of the agreement is from July 1, 1998 to June 30, 1999

5. Anticipated cost is \$ additional \$25,495 (~~Fixed amount~~; ~~Monthly~~; ~~Not to exceed~~)

6. Remarks: Encumber an additional \$25,495 for a new contract total of \$70,495 for FY 1998-99.

7. Appropriations are budgeted in 362700 (Index#) 3665 (Subject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered. Contract No. 81327A Date 10/27/98  
are not will be

GARY A. KNUTSON, Auditor - Controller

By Linda T. Chou Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the HSA Administrator to execute the same on behalf of the County of Santa Cruz

Health Services Agency (Agency).

Remarks: ES (Analyst)

County Administrative Officer  
By Eh Schuy Date 10/30/98

Agreement approved as to form. Date \_\_\_\_\_

Distribution:  
Bd. of Supv. • White  
Auditor-Controller • Blue  
County Counsel • Green \*  
Co. Admin. Officer • Canary  
Auditor-Controller • Pink  
Originating Dept. • Goldenrod

\*To Orig. Dept. if rejected.

State of California )  
County of Santa Cruz ) ss

I \_\_\_\_\_ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,  
State of California, do hereby certify that the foregoing request for approval of agreement was approved by  
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered  
in the minutes of said Board on \_\_\_\_\_ County Administrative Officer

\_\_\_\_\_ 19 \_\_\_\_ By \_\_\_\_\_ Deputy Clerk



**Contract No.:** 81327A  
**Account:** 362700  
**Subobject:** 3665

Santa Cruz County Health Services Agency

**HIV Test-Linked Street Outreach**

**AMENDMENT TO AGREEMENT**

The parties hereto agree to amend that certain agreement dated July 1, 1998, by and between the COUNTY OF SANTA CRUZ and THE SANTA CRUZ AIDS PROJECT by deleting the existing Exhibits C, C-I, D, and D-i and replacing them with the attached revised Exhibits C (Rev1) , C-I (Rev I), D (Rev 1) and D-I (Rev 1). All of the revised Exhibits are effective from July 1, 1998.

All other provisions of said contract shall remain in full force and effect.

CONTRACTOR

COUNTY OF SANTA CRUZ

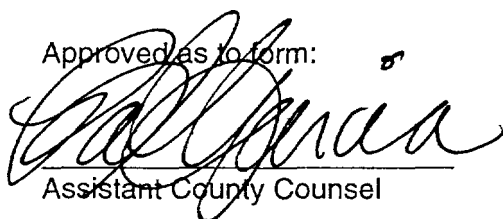
By: \_\_\_\_\_

By: \_\_\_\_\_  
HSA Administrator

Santa Cruz AIDS Project  
Address: PO Box 557  
Santa Cruz, CA 95061-0557

Date:

Approved as to form:

  
Assistant County Counsel

Distribution:

Auditor-Controller  
County Counsel  
HSA Administration  
Santa Cruz AIDS Project

1. CONTRACTOR INFORMATION.

N a m e : Santa Cruz AIDS Project (SCAP)  
Address: PO Box 557  
Santa Cruz, CA 95061-0557  
Telephone: 427-3900  
Contact: George Hurd, Executive Director  
Tax ID Number: 77-0129193

2. DUTIES OR SERVICES PROVIDED. CONTRACTOR agrees to conduct an HIV testing outreach program as described in Exhibit C-I (Rev 1), which by this reference is made part of this agreement.

All work provided under this Agreement shall be accomplished in accordance with the 1998-99 State Master Grant Agreement , which by this reference is made part of this Agreement.

CONTRACTOR: COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY  
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## SCOPE OF WORK

### NEIGHBORHOOD INTERVENTION HIGH-RISK TESTING PROGRAM [NIHT] JULY 1, 1998 TO JUNE 30, 1999

**GOAL 1:** The HIV Street Outreach Program provides outreach services to refer the following priority populations to HIV testing: men who have sex with men (MSM - this category includes some MSM who also inject drugs); injection drug users (IDU) and their sexual partners (this and the SU category will include people who trade sex for money, drugs or survival); other substance users (SU) and their sexual partners; at-risk People of Color (POC) and their sexual partners; and Medicaid-eligible high-risk women of child-bearing age, and their sex-and/or needle-sharing partners.

**Objective 1:** By 6/30/99, a minimum of 750 men who have sex with men (MSM) will be referred for HIV testing.

**Objective 2:** By 6/30/99, a minimum of 150 at-risk MSM will present incentive referrals for testing at events (e.g., Pride, quarterly Men's Testing Nights), at Alternative Test Sites (ATS), to a field test counselor, or the county's Mobile Van.

**Objective 3:** By 6/30/99, a minimum of 500 injection drug users (IDU) and their sexual partners will be referred for HIV testing.

**Objective 4:** By 6/30/99, a minimum of 150 at-risk IDU and their sexual partners will present incentive referrals for testing at events, Alternative Test Sites, to a field test counselor or the county's Mobile Van.

**Objective 5:** By 6/30/99, a minimum of 1,000 substance users (SU) and their sexual partners will be referred for HIV testing.

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- Objective 6: By 6/30/99, a minimum of 150 at-risk SU and their sexual partners will present incentive referrals for testing at events, Alternative Test Sites, to a field test counselor or the county's Mobile Van.
- Objective 7: By 6/30/99, a minimum of 500 people of color (POC) and their sexual partners will be referred for HIV testing.
- Objective 8: By 6/30/99, a minimum of 150 at-risk POC and their sexual partners will present incentive referrals for testing at events (e.g., Juneteenth, Cinco de Mayo), Alternative Test sites, to a field test counselor or the county's Mobile Van.
- Objective 9: By 6/30/99, a minimum of 500 Medicaid-eligible high-risk women of child-bearing age will be referred for HIV testing.
- Objective 10: By 6/30/99, a minimum of 150 at-risk Medicaid-eligible high-risk women of child-bearing age will present incentive referrals for testing at events, Alternative Test sites, to a field test counselor or the county's Mobile Van.

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GOAL 2: A goal of the HIV Street Outreach Program is to provide high-risk individuals with access to HIV testing.

- Objective 1: By 6/15/99, outreach workers will have distributed a maximum of 1000 testing referrals to members of at-risk populations throughout the county, but focusing on at-risk IDU in the San Lorenzo Valley and Watsonville; at-risk SU in the San Lorenzo Valley; at-risk POC in the Davenport area, Beach Flats and in South County; at-risk MSM at gay events and gathering spots, and at-risk Medicaid-eligible high-risk women of child-bearing age through Women's Hours at the Drop-In Center and in the Beach Flats.

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Objective 2: By 12/31/98, on-site testing will be available two days a week at the Drop-In Center, four days a week via the county's Mobile Van in various areas of the county, monthly on Gay/Bi Men's Testing Nights, and every-other-month during events targeting at-risk People of Color.

Objective 3: By 6/30/99, a minimum of one outreach worker per target population will be trained in HIV-test counseling, Orasure testing and on-the-spot risk assessment skills.

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GOAL 3: A Mobile Van will be used to enhance street outreach activities targeting at-risk populations, especially in difficult to access and under-served geographic locations (e.g., migrant camps, mountainous areas of the San Lorenzo Valley).

Objective 1: By 12/31/98, the Mobile Van will be used in conjunction with outreach services provided by the Homeless Person's Health Project, the Santa Cruz AIDS Project, Salud Para La Gente, the HIV Prevention Project for Injection Drug Users, and other programs targeting at-risk populations.

Objective 2: By 12/31/98, the Mobile Van will be used equitably to reach high-risk populations outlined in Goal 1 (i.e., MSM, IDU and their sexual partners, Substance Users and their sexual partners, at-risk People of Color, and Medicaid-eligible high-risk women of child-bearing age).

Objective 3: By 12/31/98, the Mobile Van will be used for HIV testing four days per week, each outreach shift being 4-6 hours, including some week-end days, during daytime and evening hours. The following tentative schedule has been developed:

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Tuesday: Migrant Camps  
Wednesday: Watsonville Downtown and River Levee  
Thursday: San Lorenzo Valley  
Alternating Friday: Women-Focused Testing in Beach  
Flats, with Sex-Workers, IDU/SU and Partners  
Alternating Saturday: MSM, Gay Events, Bars and other  
Meeting Places, including Public Sex Environments

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## KEY ACTIVITIES

### (A) COORDINATION

Jeri Ross, HSA HIV Test Program Coordinator, and Timothy Riley-Maroni, SCAP Street Outreach Coordinator, are the acting Neighborhood Intervention High-Risk Testing (NIHT) Program Coordinators. Jeri Ross, as the NIHT fiscal agent representative, will be responsible for providing technical assistance to the sub-contractor of outreach services (the Santa Cruz AIDS Project), submitting invoices and progress reports quarterly to the OA and attending OA meetings. Timothy Riley-Maroni, as the sub-contractor representative of NIHT outreach services, will be responsible for coordinating and documenting outreach activities to the targeted at-risk populations countywide. His duties will include recruitment, training and supervision of outreach staff and volunteers, plus attending OA meetings.

An extensive network of outreach sites has been established in Santa Cruz County. In addition, the Street Outreach Coordinator has developed a county-wide map of current outreach sites, which will be used in strategic planning for future sites by key education and prevention agencies in the county. A Drop-In Center site has been established in Downtown Santa Cruz, a collaborative venture involving the Santa Cruz AIDS Project (SCAR), the HIV Prevention Project for Injection Drug Users (HPPIDU) and the Santa Cruz County Health Services Agency (HSA). This Drop-In Center site serves as an anonymous HIV test site where at-risk populations can be tested and can access other support services and referrals. Using the Harm Reduction model, outreach workers and other service providers attempt to develop close working relationships with members of at-risk populations and work with them on developing realistic goals for reducing risky sexual and drug-using behaviors.

### (B) LOGISTICS

There are currently 8 established outreach sites in Santa Cruz County, with outreach being conducted primarily by teams of staff and CHOW volunteers. Frequency of outreach ranges from daily at such sites as the Metro and the levee downtown to bi-weekly in such venues as Watsonville, the Beach Flats and the San Lorenzo Valley. A minimum of 50-100 HIV testing outreach contacts are made per week. The addition of a mobile van for testing and other health promotion activities will increase the visibility of outreach programs throughout the county.

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(C) CONTENT

Each participant contact will be offered various safer sex and safer injection use brochures, materials (e.g., condoms, water-based lubricant, hygiene packs), and HIV testing information (e.g., test site locations, schedules, procedures, phone numbers). In addition, contacts most at-risk and deemed most likely to follow through will receive incentive referral cards, which will not only entitle them to priority HIV test appointments, but will also include gift vouchers if referral cards are redeemed at test sites. The mobile van for testing and other health promotion activities will provide an easier method for outreach workers to store and transport various supplies and incentives.

(D) PROMOTION

Incentives will be used in the form of gift certificates and food vouchers depending upon the target audience. Outreach workers will assess and triage individuals based on risk to identify those persons who qualify for an HIV testing incentive referral card. Incentive referral cards will be redeemed either at the Drop-In Center ATS, to a field test counselor or the county's Mobile Van. Incentives will be tracked via an outreach log completed in the field or at the Drop-In Center ATS. A cumulative log will be maintained at the Center by the Drop-In Center Coordinator. The tracking of individuals will attempt to eliminate anyone being tested more than once every six months. Incentives will not exceed \$15 in value for each client with a \$5 value incentive given out during the risk assessment session and a \$10 value incentive given out during the disclosure session.

(E) IMPLEMENTATION

**Training:** Two-day CHOW trainings are conducted quarterly. Volunteers are required to attend weekly meetings and updates are given on a monthly basis. Topics covered include HIV testing, transmission and prevention, STDs, harm reduction and outreach guidelines. Staff and volunteers are also strongly encouraged to attend such events as the upcoming Harm Reduction workshop regarding HIV prevention among migrant farmworker populations.



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**Client Recruitment:** When outreach workers make initial contact with potentially at-risk individuals in an outreach setting, it is likely that they will already be aware that s/he has many supplies (e.g., , hygiene packs, food, sewing kits, analgesic balms, and safer sex and other materials) with them. Where participants are unaware of the existence of these incentives, the outreach worker will early on offer them as an opening to further discussion and risk assessment. Having these products available usually facilitates future follow-up sessions with repeat at-risk participants. Each outreach worker will have been trained and subsequently will have accompanied and been mentored by experienced outreach workers before they are sent out in the field in teams of two to four workers.

SCAP has an E&P Outreach Contract with SOA. Separate data sheets are maintained for each program to ensure separation of work objectives. **An** outreach worker cannot collect data simultaneously to meet separate contract goals.

**Outreach Assessment:** If the outreach worker does not already know the participant's potential risk category, s/he can gradually introduce the various potential rewards for participating in risk self-assessment, including the incentive referral card and associated subsequent incentives or priority testing slots to determine whether an individual considers him/herself to be in one of the at-risk populations. Failing that, the outreach worker is trained to pick up on non-verbal and verbal cues (e.g., use of such indefinite references as "my friend, they said..." or "me and my homie, we..." as a way of non-disclosing the sex - and perhaps risk group - in describing sexual partners), which might mean that risk assessment eventually happens on the spot; or it may occur in some subsequent outreach session if the participant is not forthcoming immediately.

**Testing:** Orasure will be offered in the field in North and South County (including the Mobile Van) and both Orasure and blood testing will be available at the Drop-In Center.

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**Follow-Up Services:** Due to the sometimes transient nature of many contacts made at outreach sites, follow-up is often difficult, if not impossible. If appropriate rapport has been established between the outreach worker and the participant, it is relatively easy to determine on subsequent meetings whether the individual has followed up with the test and/or test results, based on the individual's voluntary disclosure of such to the outreach worker. Confidential testing vs. anonymous testing is offered at street-based sites, including the Mobile Van, in order to facilitate follow-up for giving test results. The Confidential HIV Testing Consent Form that is signed by the client being tested permits HSA testing staff to access those agencies listed in the Consent Form as potential sources of information for locating no show clients.

**Other Referral Services:** Drop-In Center staff and volunteers collaborate with medical, housing/shelter, food, legal, mental health, alcohol and drug treatment programs, MSM high-risk-negative support groups, and other social service programs throughout the county. They are each trained in appropriate information and referral techniques. The CHOW program also maintains relationships with staff and volunteers at various other service organizations to facilitate the referral process.

CONTRACTOR;

COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY

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**PROCESS EVALUATION****(A) TRACKING THROUGH THE HIV4 SYSTEM**

Number "03" of the Client Information sheet, under sub-category "Client was Referred by: OA Outreach Incentive/Referral" will be circled by the I-ISA HIV testing staff when it has been determined during the risk assessment session that the client was referred by an OLT-funded outreach worker. HSA testing staff will be trained and reminded during on-going performance evaluations and staff meetings to complete this section according to the above guidelines.

**(B) QUARTERLY DATA SHEETS**

Data sheets will be completed for contacts and referrals by the sub-contractor (SCAR) and submitted to the fiscal agent (HSA) with quarterly reports. Data for these reports will be collected from NIHT statistics and Drop-In Center Outreach Logs completed by outreach workers and Drop-In Center staff. The Drop-In Center Coordinator will review these log sheets on a weekly basis and resolve any discrepancies or missing information at the weekly volunteer meetings. HIV testing data sheets and follow-up services will be completed by the HSA HIV Test Program Coordinator and submitted with the OA quarterly reports. Data for these reports will be collected from the HIV4 System.

**Quarterly Report Timeline for Sub-Contractor (SCAP)**

<b><u>Proeress Report</u></b>	<b><u>Period</u></b>	<b><u>Due Date</u></b>
First Quarter	7/1/98 - 9/30/98	10/15/98
Second Quarter	10/1/98 - 12/31/98	1/15/99
Third Quarter	1/1/99 - 3/31/99	4/15/99
Fourth Quarter	4/1/99 - 6/30/99	7/15/99

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SCAP BUDGET NARRATIVEPERSONNEL

**IDU Outreach Coordinator.** Twenty hours per week of the IDU Outreach Coordinator's time is funded through the NIHT contract. In conjunction with outreach throughout Santa Cruz County, this staff person responsible for conducting Women's Hours at the Drop-In Center.

**Drop-In Center Coordinator.** Thirty hours per week of the Drop-In Center Coordinator's time is funded through the NIHT contract. In addition to having responsibility for programming, data collection, supplies and maintenance at the Drop-In Center, this staff person is responsible for conducting Youth Hours at the Center and is significantly involved in programs for at-risk women and testing services for MSM.

**Street Outreach Coordinator.** Ten hours per week of the Street Outreach Coordinator's time is funded through the NIHT contract. In addition to supervising Drop-In Center staff and providing outreach within communities of color, this staff person is responsible for quarterly NIHT reporting, plus recruitment, training and supervision of volunteers.

**Benefits.** SCAP's fringe benefits rate is 21 per cent.

**Indirect Costs.** SCAP includes a 10 per cent indirect cost rate, based on the personnel lines in the budget.

OPERATING EXPENSES

**Supplies.** This line provides funds for safer sex and other educational materials, as well as for such items as hygiene supplies and sewing kits.

**Incentives.** Based on the outcome of ongoing needs assessments in the area of incentives, this will pay for either food or clothing gift certificates. In addition, safer sex incentive packages will be developed and distributed.

**Capital Expenditures.** As outreach expands to serve more participants, there is more documentation required. Computers/printers and communication devices such as faxes, photocopiers and answering machines will be purchased and/or upgraded to support NIHT Scope of Work activities.

**EXHIBIT D - FISCAL AND PAYMENT PROVISIONS (REV 1)**

1. COMPENSATION. In consideration for CONTRACTOR accomplishing the result described in Exhibits C (Rev1) and C-I (Rev 1, Scope of Work), COUNTY agrees to pay as follows: **an amount not to exceed \$70,495** to be paid in accordance with the attached budget (Exhibit D-I, Rev 1), which by this reference is made part of this agreement. Total contract amount is based on and limited to the availability of funding via the 1998-99 State Master Grant Agreement. If Master Grant Agreement funding is reduced or eliminated, the amount available for services under this agreement will likewise be reduced or eliminated.
2. PARTIAL PERFORMANCE. In the event less than all services are performed in a proper and timely manner, CONTRACTOR shall be paid only the reasonable cost for the services performed for the payment period as determined by COUNTY's Administrator.
3. BUDGET CONTROL. With prior written approval of COUNTY, CONTRACTOR may adjust cost among budget line items shown on Exhibit D-I (Rev 1), or add, delete, or modify line items as long as the total amount of the contract is not exceeded.
4. MONTHLY PAYMENT. CONTRACTOR may elect to receive compensation advanced in monthly installments of 1/12th of the maximum contract amount **as** shown in Paragraph D(1) above. CONTRACTOR assures that a cash advance is needed each month in order to provide the contracted services. Payment may be less than the above 1/12th amounts if there is a cash carry-over from the prior month which indicates that CONTRACTOR does not need the full advance amount to support the program's cash flow during the month. CONTRACTOR may be allowed a carry-over amount from month to month, not to exceed the 1/12th monthly allocation, upon COUNTY approval. Any unused funds exceeding the carry-over base shall be offset against the next months advance. No single monthly payment shall exceed 1/12th of the Maximum Allocation unless there have been payments of less than 1/12th of such amount for any prior month of the agreement term. To the extent that there have been such lesser payments, the resultant savings may be used to pay monthly billings which exceed 1/12th of the Maximum Allocation, Justification to COUNTY shall be required for advance in excess of these amounts prior to approval of claim for such excess. The cash advance will not be used to provide working capital for non-County programs, and when possible the advance will be deposited in an interest bearing account, and the interest used to reduce program costs.
5. EQUIPMENT. Notwithstanding, the provisions of Exhibit B, Paragraph 18, all nonexpendable or sensitive equipment or furniture purchased under this Agreement must be inventoried and accounted for in accordance with State requirements contained in the 1998-99 Master Grant Agreement. Nonexpendable equipment or furniture is defined in the Master Grant Agreement as any movable item with a unit cost of \$500 or more and a life expectancy of at least four years. Sensitive equipment or furniture is defined as any highly desirable portable item (e.g., calculators, typewriters, dictaphones, microscopes, etc.) regardless of cost. Receipts for the purchase of items of property that meet the preceding definition must be submitted to COUNTY and must accompany the budget expenditure report for the period in which the item was purchased. Receipts must include the make, model, serial number, actual cost, check number, and date the item was purchased. A copy of the required State Office of AIDS form entitled "Equipment Purchased with State Funds" (attached to this Agreement as Exhibit D-2) must also be submitted with the receipts.
6. STATE RECORD RETENTION REQUIREMENTS. Notwithstanding the provisions of Exhibit A, Paragraph 10, CONTRACTOR agrees to maintain and preserve, until three years after termination of this agreement and final payment from the State, and to permit the State or any duly authorized representative, including the Comptroller of the United States, to have access to or audit any pertinent books, documents, papers and records related to this agreement.

NEIGHBORHOOD INTERVENTION HIGH-RISK TESTING PROGRAM.				SCAP BUDGET			
PERSONNEL			Annualized	NIHT Hours	NIHT FTE	NIHT Budget	
	IDU Outreach Coordinator		19760	20 hrs/wk	0.5	9,880	
	Drop-In Center Coordinator		21,195	27 hrs/wk	0.675	14,241	
	Street Outreach Coordinator		29,271	10 hrs/wk	0.25	7,318	
	<b>Subtotal Salary</b>					31439	
	Benefits @21%					6,602	
	SCAP Indirect @10%					3,804	
	<b>Total Personnel</b>					41845	
OPERATING EXPENSES							
	Supplies					13400	
	Incentive Vouchers					11,250	
	Capital Expenditures					4000	
	<b>Subtotal Operating Expenses</b>					26650	
<b>TOTAL SUB-CONTRACTED BUDGET</b>						70495	