



COUNTY OF SANTA CRUZ

HEALTH SERVICES AGENCY

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January 25, 2000

AGENDA: February 8, 2000

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

RE: APPROVAL OF FUNDING APPLICATION FOR AN HIV PREVENTION PROJECT

Dear Board Members:

The Health Services Agency is requesting approval of the attached proposal to the State Office of AIDS to fund a youth HIV prevention drop-in center in the Watsonville area. The \$330,195 funding application covers the period March 1, 2000 through June 30, 2001. Due to the short turnaround time and need to coordinate with other local agencies, HSA submitted the application subject to your Board's approval.

The proposed center is a collaborative project involving HSA, the Santa Cruz AIDS Project (SCAP), and the HIV Prevention Project for Injection Drug Users. The project will focus primarily on at-risk Latino youth and provide services through a drop-in center located in Watsonville. Services to be offered include community-based outreach, harm reduction counseling, risk reduction workshops, HIV testing, prevention case management for HIV positive or high-risk youth, and Medi-Cal outreach and eligibility assistance services.

The proposal requests \$80,973 for the initial start-up period beginning March 1, 2000, and \$249,222 for FY 2000-01. While there is no required County match, the application includes some in-kind contributions to make the proposal more competitive. These in-kind contributions consist of existing HSA staff costs. No new County funds are requested or required. The County is also able to recover overhead costs amounting to ten percent of personnel expenses.

HSA will serve as the administrative and fiscal agent for the project through its HIV Prevention Program. HSA staff from the Homeless Persons Health Project and the HIV Prevention Program will also provide services and participate in drop-in center activities. In addition, the County will develop drop-in center service contracts with SCAP and the HIV Prevention Project for Injection Drug Users. If the proposal is successful, HSA will return to your Board to accept the funding award and for approval of the State revenue agreement and the related outside agency service agreements.

0238

1. Approve the attached \$330,195 proposal for an HIV prevention drop-in center project in Watsonville and authorize its submission to the State **Office** of AIDS.

Sincerely,

RamaHallsasaPhP.D.DH.SASAdAndnististrator

RECOMMENDED:

Susan A. Mauriello

County Administrative Officer

cc: County Administrative Office

Auditor-Controller
County Counsel
HSA Administration

Santa Cruz AIDS Project

HIV Prevention Project for Injection Drug Users



1. APPLICATION COVER SHEET

Agency Name: County of Santa Cruz
Address: 1070 Emeline Avenue, Santa Cruz, CA 95060
Telephone number: 831 454-4313
Fax Number: 831 454-5048
Contact Person: Pat Ellerby
Program category: Youth
The undersigned hereby affirms that the statements contained in the Technical Proposal and the Budget are true and complete to the best of the applicant's knowledge and accepts as a condition of a Contract the obligation to comply with the applicable state requirements, policies, standards, 2nd regulations. The undersigned recognizes that this is a public document and open to public inspections'.
Signature:
Name 2nd Title: Patricia Ellerby, MPH, MPA

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ATTACHMENTS

REOUIRED FORMS:

- A. Agency Information Sheet
- B. Resumes
- C. Subcontractor Budgets and Budget Justifications
- D. Definitions
- E. Letters of Support

3. Executive Summary

The Santa Cruz County Health Services Agency is applying for State Office of AIDS funds to develop and implement a new youth HIV prevention drop-in center program in the area of Watsonville located in the southern portion of the county. The center will operate on the client-centered, public health based Harm Reduction Model and will target homeless, runaway and street-based young people, primarily Latinos ages 12-24.

The County Health Services Agency will serve as primary administrative and fiscal agent for the project, assuming overall responsibility for development and operation of the program through its HIV Prevention Program. The new center will be organized as a collaborative project between three well-established programs in the community. Two community based agencies, Santa Cruz AIDS Project (SCAP) and HIV Prevention Project for Injection Drug Users (HPPIDU), and a program of the Health Services Agency, the Homeless Persons Health Project (HPHP), will collaborate together under an MOU to accomplish the proposed activities and produce the deliverables specified in a shared Scope of Work for the center. In implementing the program, funds will be allocated through annual subcontracts between the Health Services Agency and SCAP and HPPIDU, and through an inter-program agreement between the HIV Prevention Program and HPHP.

The Watsonville Drop-In Center will be located in a small, store-front style building on a thoroughfare in the downtown area of Watsonville. The building selected will be remodeled to accommodate the various services and activities to take place at the center. Services to be offered at the center include: community-based outreach, harm reduction counseling, drop-in center model risk reduction activities (workshops linked to recreation, entertainment, art projects, etc.), HIV testing, prevention case management for HIV+ or high-risk youth, Medi-Cal outreach and eligibility assistance services, pretreatment groups on alcohol and drug use, and others.

The County Health Services Agency, through its HIV Prevention Program, has more than 15 years of experience both providing direct prevention and education services to at-risk populations in the community, and in arranging for the effective delivery of services through contracts with community based organizations. The HSA HIV Prevention Program has provided a range of HIV prevention services, most recently including a Q&A Youth Peer Education Program, psycho-educational groups for HIV+ MSM populations, and a series of education and prevention sessions at both women's and juvenile detention facilities. The County HIV Prevention Program also operates a community outreach van-based HIV testing program through a collaboration wifh the same agencies proposing to the develop the new Watsonville Drop-In Center. The HIV Prevention Program has collaborated with and supported SCAP and HPPIDU, in the development of the successful Santa Cruz Drop-In Center.

The three agencies/programs coming together to plan and develop the proposed Watsonville Drop-In Center also have very established track records in developing innovative prevention interventions and services for at-risk populations, and in securing funding for new projects and reliably managing them according to work plans and contracts. SCAP has received Office of AIDS funding for a range of successful projects since 1988, and HPPIDU has managed a number of projects funded through university collaborations and through community foundations, such as the California Endowment. HPHP has successfully implemented programs for over thirteen years through grant contracts with HRSA, HUD and community agencies. Outreach services and harm reduction interventions for Latinos, homeless and runaway youth and IDUs have been an integral element of services provided throughout the county in the last four to five years.

Santa Cruz County is very fortunate to have staff involved in the development of this project, (from SCAP and HPPIDU) who have had immediate experience in the development of a successful Drop-In Center in Santa Cruz. Based on their experiences, Heather Meshery of HPPIDU, and Timothy Maroni of SCAP authored a manual to guide the development of other centers, "Drop-In Center Model: An HIV Prevention Intervention for Street-Based Populations." Both will play lead roles with HPHP staff, most closely familiar with the local community, to adapt the successful model for the Watsonville youth population.

Collaborators in the project are hopeful that the project will be selected for participation in one of the UARP evaluation projects. Based on the previous involvement in UARP evaluation projects by HPPIDU and SCAP, a UARP sponsored evaluation of the Watsonville Drop-In Center would be beneficial.

4. Agency Capability

Histories of Collaborating Agencies, Past Accomplishments and Current Projects

The new Watsonville Drop-In Center will be developed and operated through a collaboration of three organizations: Santa Cruz AIDS Project (SCAP), a community based HIV service organization, HIV Prevention Project for Injection Drug Users (HPPIDU), a community based organization providing harm reduction services to IDUs and their families, and Santa Cruz County Homeless Persons Health Project (HPHP), a program of the County Health Services Agency. All three organizations provide services throughout the county of Santa Cruz. An MOU established between these three agencies/programs and the HSA HIV Prevention Program will guide the collaboration. SCAP and HPPIDU will be subcontracted by the County Health Services Agency, and HPHP will operate through an inter-program agreement within HSA.

The Santa Cruz AIDS Project (SCAP), established in 1985, is the only comprehensive community based HIV/AIDS service organization in Santa Cruz County. The agency was founded by a group of dedicated volunteers and community leaders in an attempt to mount a local response to the growing AIDS crisis of the mid- 1980's. SCAP is currently comprised of fifteen experienced care and prevention staff, nine board members, and 200 volunteers.

SCAP has maintained a constant commitment to ensure that care and services reach the Latino community since its inception. The first large source of formal grant funding that the agency received was a private foundation grant in 1986 to establish an HIV prevention program for Latinos in the county. The agency has been successful in maintaining private funding for focused programming targeted to the Latino population of the county to the present. Latino based program components have included risk reduction services of migrant workers, gay and bisexual men, youth, injection drug users and prevention case management for persons living with HIV/AIDS.

The <u>HIV Prevention Project for Injection Drug Users (HPPIDU)</u> was established in 1996 following seven years of grass roots street-based outreach to IDU. The organization was formed with the primary goal of slowing the spread of HIV and hepatitis among injection drug users and their families through the creation and distribution of educational materials, safer injecting supplies, and safer sex supplies and through interventions to increase awareness among IDU regarding transmission, risk and prevention.

Through a paid staff of 6 full time employees and a volunteer team of approximately twenty-five, HPPIDU conducts a street outreach program to IDU and sex industry workers. Through the collaboratively operated Santa Cruz Drop-In Center, HPPIDU offers IDU-specific programming seven days a week. Other services offered include a Wellness Program for IDU, sex industry workers and Hepatitis testing and vaccination for people 29 and under. In addition, staff and volunteers provide referrals to health care, social services, drug treatment, and advocacy around legal issues

The Homeless Persons Health Project (HPHP) was established in 1988 as a program of the County Health Services Agency through new funding from the HRSA Health Care for the Homeless Program and County matching support. Now in its thirteenth year, HPHP provides street and community-based outreach and case management services to a very diverse population of homeless individuals and families in locations throughout the county. An experienced staff of public health nurses, social workers and outreach workers meet individuals on their own turf, and assist them in assessing and making plans and decisions about how to address their immediate and longer-range health risks and health care needs. Nurses provide hands-on care when appropriate, and a range of over-the-counter treatments for conditions common among those who are living on the streets, camping, in squats, or in group settings, doubled up, or in shelters.





Qualifications of Collaborating Organizations to Undertake Development of a New Youth Drop-In Center

Successful accomplishments demonstrating <u>SCAP's</u> qualifications and experience in undertaking projects similar to the proposed new Drop-In Center include: creation and publication of the first ever guide to establishing an HIV prevention intervention in Public Sex Environments, in 1990; the establishment of an HIV prevention resource Drop-In Center in 1988, (now the Santa Cruz Drop-In Center with a youth focus) and a Young Men's Empowerment Project, in 1991. The Public Sex Environment program at SCAP is still in existence, and the manual is currently being published in a revised and expanded third edition. The Santa Cruz Drop-In Center has been relocated to a new, larger collaborative space for over three years, and the Young Men's Empowerment Project, now called Equinox, is in its tenth successful year.

Currently SCAP coordinates its Community Health Outreach Project with the HIV Prevention Project for Injection Drug Users (HPPIDU) and collaborates with the Health Services Agency to achieve the goals and objectives of the HIV Testing Outreach Van Project. SCAP has been receiving SOA Education and Prevention funds since 1988 and SOA NIGHT funds since 1996. Finally, SCAP has successfully implemented collaborative prevention programs with four other regional AIDS Service Organizations and community clinics as part of the Central Coast HIV Prevention Network during the last three years.

Successful accomplishments demonstrating <u>HPPIDUs</u> qualifications and experience in undertaking projects of similar scope and size include, the collaborative development of the Santa Cruz Drop-In Center with SCAP, as well as participation in a 1999 UCSF/UARP sponsored study of hepatitis among young injectors under the age of 29, and collaboration in a continuing California Endowment sponsored Central Coast HIV Prevention Network, a project with a multi-county, Latino community and harm reduction focus. HPPIDU has also collaborated with researchers at UC Santa Cruz in a University-wide AIDS Research Project evaluating local interventions targeting injections drug users.

Examples of prior work demonstrating <u>HPHP's</u> ability to collaborate in the development of a Watsonville Drop-In Center include involvement in a HUD HOPWA funded project with SCAP serving homeless multi-diagnosed individuals with HIV; development of a HUD Homeless Continuum of Care shared outreach and case management program with a local community based homeless services agency, development of outreach programs through collaboration with local shelters and feeding programs, community assistance programs and church organizations.

HPHP currently maintains active relationships with over 35 community and government agencies and programs in order to ensure that program participants have success in accessing and coordinating services to reduce their risks, improve their health and safety, and work towards goals for stable housing. HPHP will be able to utilize these existing relationships, especially among organizations serving youth and in the Watsonville area, to help establish the new center.

In 1996, HPHP established a program component targeting specific outreach, case management and services to the growing population of homeless, runaway and street-linked youth and younger adults. As part of this effort, HPHP staff began collaborating with SCAP to provide outreach and services to youth at the Santa Cruz Drop-In Center. The program also began a number of weekly outreach sessions that paralleled syringe exchange conducted by volunteers at sites in the Santa Cruz, Watsonville and San Lorenzo Valley areas. HPHP continues as a collaborating program in the delivery of services to youth at the Santa Cruz Drop-In Center, able to engage at-risk youth at the center by addressing their immediate health needs and concerns.

HPHP staff are particularly qualified and experienced in assisting individuals to establish eligibility for Medi-Cal and any other health or other community or government assistance programs. Staff has years of experience in successfully linking homeless youth and young adults to care and services at clinics, mental health programs, alcohol and drug treatment programs and a broad range of other community assistance programs. HPHP will coordinate with HSA's Medi-Cal Outreach Program to help all eligible participants to establish Medi-Cal eligibility. A Medi-Cal eligibility worker will be stationed at the new center at lease one day per week.



Unique Added Contributions to Be Made By SCAP and HPPIDU as Subcontracting Organizations

As described throughout this application, SCAP and HPPIDU, as members of a three-way collaboration with the HSA Homeless Health Project will play critical roles in the development and operation of the proposed new center for Watsonville. Staff from both contracting agencies bring to this project their experience in developing the established successful youth Drop-In Center in Santa Cruz. Based on that experience, they developed and authored a manual to guide the development of other centers, "A Drop-In Center Model: An HIV Prevention Intervention for Street-Based Populations." Specifically, HPPIDU brings its outstanding knowledge and experience in reaching the target population through the development of creative, youth specific harm reduction services, and SCAP brings its excellent experience and resources in recruiting and training volunteers and in creating ground breaking outreach interventions for specific high risk populations. The Scope of Work further delineates roles each agency will play in delivery of specific services at the center.



5. Statement of Need

General Description of Need and Justification for a Watsonville Youth Drop-In Center

The proposed Drop-In Center will be located in Watsonville, a city in the southern part of Santa Cruz County with a population of approximately 37,514. Watsonville has a Latino population of over 73%, with youth ages 12-24 making up approximately 43% of this population.

Although the Watsonville area of the county is only 18 miles to the south of the city of Santa Cruz, where a very successful Drop-In Center reaching high-risk youth has been established for four years, for cultural, ethnic, economic, historic, and sociological reasons, Watsonville has developed as its own distinct community. It is a small, closely-knit, now predominantly Latino, agricultural community with multiple generations of immigrant families, most recently from small rural towns in northern Mexico.

The reality is, programs and services available in the city of Santa Cruz are rarely accessed by significant numbers of any population from Watsonville. Particularly in the case of a storefront Drop-In Center intervention to reach street-based populations, it is critical that the targeted population experience the center as "their own." There is no question that at-risk youth and younger adults from Watsonville need a Drop-In Center *in Watsonville*. This reality, combined with the documented HIV risk among the county's young Latino street-based population concentrated in the Watsonville area, is the primary reason why funds are requested in this application for a new youth Drop-In Center within our local health jurisdiction.

Watsonville is a community currently stressed by a struggling local agriculturally-based economy and a range of other factors related to social change in the community. Recent years in the community have seen a dramatic rise in the number of gang-involved youth, currently estimated by the Watsonville Police Department to be 410. Watsonville Police also document that of the two primary gangs, the Surenos tent to use heroin and the Nortenos tend to use speed. Juvenile Hall 1999 data for the county documents 869 Latino youth, ages 10-17 booked into the Hall during the year, and of all juveniles detained during this year, 52.9% were Latino, while Latinos represent only 32.6% of the youth population in the county. These statistics help validate anecdotal information provided by HIV outreach workers regarding a growing population of at-risk street-based Latino youth in the county, particularly concentrated in the Watsonville area.

Currently HIV prevention services are limited in Watsonville, lagging behind the more concentrated development of services in the Santa Cruz area. Salud Para La Gente, a community clinic serving Watsonville and areas south, currently provides limited outreach and offers a support group for gay youth in the area. Salud also provides anonymous HIV testing twice a week at their clinic. The County HIV mobile testing van program provides HIV testing on Wednesday afternoon for three hours in conjunction with outreach provided by the Santa Cruz AIDS Project, Needle Exchange and general health outreach and street-based nurse care provided by the County Homeless Persons Health Project.

However, relative to the size of the population and the need these services are quite limited in total number of hours and accessibility of location. Services are also limited by the fact that they are offered outdoors around a table that is set up in front of a small market, while testing services are offered simultaneously inside the van. Currently, populations accessing this weekly outreach site are limited for the most part to single adult men and some mothers 'with small children.

There is at this time no location in Watsonville where homeless, runaway or street-linked youth and younger adult populations can get off the street, hang out, be themselves, and participate in harm reduction services in a safe environment.



Description of Needs Assessment and Relevant Gaps in Service Identified in County's HIV Prevention Plan

The local HIV Prevention Plan (recently updated in 1999), documents youth in the county as being high risk for HIV infection, especially homeless and/or street youth who may be injecting drugs and/or trading sex for food or shelter. As described in the Plan, a needs assessment that was conducted as part of the Plan update effort found that of 194 survey respondents 45% had ever injected drugs and of those 72% had shared needles. Twenty two percent of the respondents were **Latino** and 38% were between the ages of 12-24. Respondents commented that they wanted more education for youth, a Drop-In Center that was open more hours and more testing hours at the Drop-In Center.

The Plan also states, "While HIV prevention education in schools is necessary, there is a dearth of HIV prevention education targeting the injection drug users still in school. Nine youth included in the sample interviewed in the needs assessment survey conducted for the HIV Prevention Plan expressed the need for "more education." (Santa Cruz County HIV Prevention Plan, 1999, pg.46)

While highest risk factors for HIV among Latinos are similar to those of the White population, i.e. injection drug use and MSM, Latinos at risk for HIV in the Watsonville area face a variety of barriers, from law enforcement, to immigration issues, to homophobia.

Latino IDUs have been observed by outreach workers to be more fearful of using needle exchange services in Watsonville, since law enforcement maintains a presence near the site, elevating fears of arrest by those who come to exchange. By choosing to not exchange needles many injectors may share needles, potentially exposing them to HIV, Hepatitis C and other health issues such as abscesses, etc. The Drop-In Center will provide a safe place for young injectors to receive information about HIV prevention and referrals to needle exchange.

Those Latino youth who are questioning their sexuality are also at very high risk for HIV. "The greatest problems facing this population are due to prevailing cultural attitudes regarding homosexuality, sexuality, and the limited rights of youth. This population is at high-risk for drug and alcohol use, homelessness, dropping out of school, prostitution, sexual experimentation and suicidal depression, all of which are co-factors in high-risk behaviors for HIV infection." (Santa Cruz County HIV Prevention Plan, pg. 3 1). There is one support group offered currently for gay youth in Watsonville. This group meets weekly during the lunch break at the local high school. There are no safe places for youth questioning their sexuality to go in order to get off the streets and hang out.

Summary of Epidemiological and Other Data Supporting a Youth Drop-In Center

The HIV Prevention Plan's Epi-Profile Chapter documents a recent increase of cases of AIDS among youth. Between 1983-1991 and 1992-1998, AIDS cases between the ages of 13-29 increased from 35 cases to 51 cases. To date, in Santa Cruz County there have been 86 cumulative cases of AIDS in youth and younger adults under 29 years of age, the majority of those falling between the ages of 20-29. Fourteen percent of the 467 total AIDS cases in the county have been among the Latino population.

The primary mode of transmission in Santa Cruz is through high-risk sexual behavior between men-who-have-sex-with-men (MSM), and with injection drug use as the second most common mode of transmission. Seventy percent of the AIDS cases in Santa Cruz are among MSM, while 10% are among IDU and 9% are among IDU/MSM. Fifteen percent of the cumulative AIDS cases have occurred in the southern part of the county, where Watsonville is located.

Anonymous HIV test results for 1998 reviewed for the local Plan update show that 13% of all positive HIV test results were among Latinos. Since Jan. 1, 1998 there have been 8 positive HIV tests among youth under the age of 29 years. Of all the positive tests since 1990, 58% were among MSM, 16% were among IDU and almost 9% were among MSM/IDU. Risk for HIV through unprotected sex among Latino youth can be further documented by fact that 38.3% of all teen births in the county occur in the Watsonville area.





6. Scope of Work

March 1, 2000- June 30, 2000

Goal Statement #1:

Create a Drop-In Center in Watsonville through the collaborative efforts of HIV prevention service providers and Homeless Persons Health Project.

Measurable Objective #1:

By 6-30-00, secure and prepare facility that will be used for the Drop-In Center.

Key Activities:	<u>Timeline</u>
1. Look for site/location.	Qtrs. 4
2. Secure lease.	Qtrs. 4
3. Prepare plan for remodel as necessary.	Qtrs. 4
4. Secure contractor for remodel.	Qtrs. 4
5. Remodel.	Qtrs. 4
6. Purchase/receive donations for center; i.e. washer/dryer,	-
daybed, computer, kitchen supplies, furniture, etc.	Qtrs. 4

Evaluation: Documents will be maintained on the lease, remodel plans, contractor hired, and all donations and/or purchases for the Drop-In Center.

Measurable Objective #2:

By 6-30-00, relationships will be developed with key Watsonville leaders and community organizations in order to develop a Drop-In Center.

Key Activities:	Timeline
1. Contact key leaders of the Watsonville community; i.e., City	_
Council, law enforcement, business organizations, schools,	
local youth organizations and neighborhood associations.	Qtrs. 4
2. Arrange meetings with the above groups and present/explain	
Drop-In Center to gain support.	Otrs. 4
3. Work with knowledgeable community members to develop	
strategy on working with gang issues.	Otrs. 4

Evaluation: All notes and agendas from meetings will be maintained on file. Strategic plans on dealing with gang issues will be kept on file.

Measurable Objective #3:

By 6-30-00, locate and visit appropriate agencies that can provide technical assistance on program development for homeless and street youth.

Key Activities:	Timeline
1. Research similar services for homeless, street youth.	Otrs. 4
2. Arrange for a visit of sites, such as Larkin Street Youth Center	
in San Francisco.	Qtrs. 4
3. Visit various sites and interview staff on programming.	Qtrs. 4



- 4. Locate technical assistance on working with gangs.
- 5. Provide training to staff & volunteers on gang-related issues.

Evaluation: Maintain all records and notes on visits to sites and any individuals who provide technical support to the development of the Drop-In Center.

Measurable Objective #4:

By 6-30-00, plan and develop Drop-In Center programming.

Key Activities:	Timeline
1. Research appropriate HIV prevention programming for youth.	Qtrs. 4
2. Create/plan curricula and projects to be implemented during	
youth hours.	Qtrs. 4
3. Coordinate programming with other agencies to be provided	
at Drop in Center.	Qtrs. 4
4. Develop resources binder for referrals.	Qtrs. 4

Evaluation: All curricula developed will be maintained on file. All notes from coordination meetings will be kept on file.

Measurable Objective #5:

By 6-30-00, recruit, hire, and train Drop-In Center Staff and volunteers.

Key Activities:	Timeline
1. Advertise positions throughout the community.	Qtrs. 4
2. Hire staff.	Qtrs. 4
3. Provide training to new staff on program development, leadership,	
computer skills & report writing.	Qtrs. 4
4. Recruit and train volunteers.	Qtrs. 4

Evaluation: Maintain all advertisements on file; all personnel files, and all training curricula for both staff and volunteers.

Measurable Objective #6:

By 6-30-00, conduct on-going meetings to support collaborative efforts of the Drop-In Center.

Key Activities:	<u>Timeline</u>
1. Arrange and conduct monthly meetings with collaborative	
partners on the start-up of the Drop-In Center.	Qtrs. 4

Evaluation: Agendas and minutes from meetings will be kept on file.



Scope of Work

July 1, 2000 - June 30, 2001

Goal Statement #1:

Provide comprehensive HIV prevention services to youth at-risk for HIV at the Watsonville Drop-In Center.

Measurable Objective #1:

By 6-30-01, provide outreach services to 4,000 youth contacts.*

Key Activities:	Timeline
1. Outreach will occur 4 times each week at various sites, i.e. Watsonville	
High School, Main St. Bus Depot, Pajaro, Freedom, Ramsay Park,	
ad hoc sites.	Qtrs. 1-4
2. Stock outreach bags to be used during outreach with supplies such as,	
condoms, lubricant, referrals, literature, HIV Education materials,	
hygiene supplies.	Qtrs. 1-4

Evaluation: Logs will be maintained on demographics of all outreach contacts, topics discussed and supplies provided.

Measurable Objective #2:

By 6-30-01, provide harm reduction counseling to 500 youth.*

Key Activities:	Timeline
1. Develop relationships with high-risk youth.	Otrs. 1-4
2. Provide referrals to high-risk youth.	Qtrs. 1-4
3, Conduct risk reduction dialogue with at-risk youth.	Qtrs. 1-4
4. Make phone calls to services providers in order to facilitate	
services for youth.	Qtrs. 1-4
5. Conduct follow-up discussions with youth in order to ensure	
appropriate services received and any further assistance	
needed.	Otrs. 1-4

Evaluation: Maintain documentation on all youth that have received harm reduction counseling and all referrals provided and services received. Demographics will be kept on all services provided.

Measurable Objective #3:

By 6-30-01, develop and provide Drop-In Center services to 3,000 youth.

Key Activities:	Timeline
1. Implement curricula on HIV prevention; Hepatitis prevention, STD's	Qtrs. 1-4
2. Scheduled youth hours will take place.	Qtrs. 1-4
3. Provide recreation, entertainment, food, projects, arts, crafts and referrals.	Otrs. 1-4

Footnote: See Attachment D, Definitions





Evaluation: Logs will be maintained on all youth that utilize the Drop-In Center services and calendars will be kept on all activities provided during youth hours.

Measurable Objective #4:

By 6-30-01, provide HIV testing and counseling to 260 youth.

Key Activities:	Timeline
1. Coordinate testing shifts with other Drop-In Center Programming.	Qtrs. 1-4
2. Provide anonymous HIV testing and counseling.	Otrs. 1-4

Evaluation: Maintain documentation on number of tests conducted and demographics of youth tested.

Measurable Objective #5:

By 6-30-01, provide prevention case management services to 40 HIV positive or high-risk negative vouth.*

Key Activities:	Timeline
1. Develop relationship with targeted youth.	Qtrs. 1-4
2. Meet regularly with targeted youth (2 times per week).	Qtrs. 1-4
3. Provide risk reduction services to targeted youth.	Otrs. 1-4

Evaluation: Maintain documentation of counseling sessions and outcome of case management services through records kept on all youth whom receive case management services.

Measurable Objective #6

By 6-30-01, conduct 250 high-risk youth will attend support groups.

Key Activities:	Timeline
1. Support groups such as substance use management, (Fenix Services, Inc.),	
12-step gay youth groups, etc. will be held at the Drop-In Center	Qtrs. 1-4

Evaluation: Documentation will kept on file of all groups held and demographics of youth who participate.

Measurable Objective #7:

By 6-30-01, a Medical eligibility worker will be stationed at Drop-In Center once a week.

Timeline
Qtrs. 1 and 3
Qtrs. 1-4

Footnote: See Attachment D. Definitions

Measurable Objective #8:

By 6-30-01, 750 referrals will be provided to high-risk youth who participate at the Drop-In Center.

Key Activities:	Timeline
1; Maintain and update referral binder with contact names.	Qtrs. 1-4
2. Assist youth with necessary referrals, such as STD, family planning,	
drug treatment, employment and legal services	Qtrs. 1-4
3Follow-up with youth in order to provide more support and/or	
different referrals.	Qtrs. 1-4

Evaluation: Maintain log of referrals provided and actual referrals that are utilized.

Measurable Objective #9:

By 6-30-01, 24 workshops will be provided to high-risk youth participants.

Key Activities:	Timeline
1. Collaborate with other agencies in order to provide workshops	
such as, wellness, civil rights, sexual abuse, parenting, violence	
prevention, basic reproductive health, CPR, overdose prevention.	Qtrs. 1-4
2. Advertise workshops at Drop-In Center and in other venues.	Qtrs. 1-4
3. Conduct workshops.	Qtrs. 1-4
4. Have participants evaluate workshops.	Qtrs. 1-4

Evaluation: Maintain log of all workshops conducted, number and demographics of participants. Keep all participant evaluations.

Measurable Objective #10:

By 6-30-01, Homeless Youth Public Health Nurse will see 520 youth during Drop-In Center hours.

Key Activities:	<u>Timeline</u>
1. Youth will be referred to nurse.	Qtrs. 1-4
2. Nurse will provide youth low thresh hold medical care.	Qtrs. 1-4
3. Nurse will provide referrals to youth when necessary.	Qtrs. 1-4

Evaluation: Log will be maintained of youth seen and care issues addressed.

Measurable Objective #11:

By 6-30-01, conduct on-going meetings with agency staff in order to better collaborate and plan programming.

Key Activities:	Timeline
1. Conduct monthly meetings with all Drop-In Center staff.	Qtrs. 1-4
2. Coordinate programming and problem-solve.	Qtrs. 1-4
3. Conduct in-services for staff and volunteers.	Qtrs. 1-4

Evaluation: Maintain agendas and minutes of all meetings on file.



Measurable Objective #12:

By 6-30-01, conduct volunteer trainings 4 times each year.

Key Activities:	<u>Timeline</u>
1. Develop curriculum for training.	Qtrs. 1
2. Advertise training at a variety of venues in South County.	Qtrs. 1-4
3. Conduct training.	Qtrs. 1-4
4. Have participants complete evaluation on training.	Qtrs. 1-4

Evaluation: Maintain curriculum on file; maintain all evaluations completed by volunteers and sign-in from training.

Scope of Work

July 1, 2000 - June 30, 2001

Goal Statement #2:

Maintain positive relationships with community and individuals to promote a supportive environment for the Drop-In Center.

Measurable Objective #1:

By 6-30-01, conduct on-going meetings with community leaders such as, law enforcement, business associations, neighborhood associations, city council and other agencies.

K	ey Activities:	Timeline
1.	Conduct meetings in order to educate and/or problem-solve	_
	issues as they arise.	Qtrs. 1-4

Evaluation: Maintain all meeting notes and decisions.

Measurable Objective #2:

By 9-30-00, host an open house at the Drop-In Center and invite community and participants.

Key Activities:	Timeline
1. Choose date for open house.	Qtrs. 1
2. Advertise open house in a variety of venues, such as flyers	
in community, mailings, etc.	Qtrs. 1
3. Host open house for community members, service providers	
and participants.	Qtrs. 1

Evaluation: Maintain records of flyers, date of open house and other documentation of open house.

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7. Management Plan

In order to ensure that the planning and implementation of the new Watsonville Drop-In Center is both well-managed and truly effective in reaching and impacting the targeted population of high-risk youth, the proposed center is being organized as a collaborative between three well-established programs in the county. Each program or agency has its own area in which it particularly excels with regards to HIV prevention and related work with the targeted population of at-risk youth. The leadership and management structure of the new center is designed to bring together the best that each program or agency has to offer. Among other things, the Santa Cruz AIDS Project (SCAP) is particularly strong in innovative community based HIV prevention program development. The HIV Prevention Project for Injection Drug Users (HPPIDU), with it's trained volunteer peer outreach workers has more experience than any single agency in the county in building trust and effective relationships with injection drug users. The County Homeless Persons Health Project (HPHP) has the most developed experience in working with the primarily Latino homeless, runaway and street-linked youth and young adult population in the Watsonville community, having provided street health outreach and street-based care in the area for over thirteen years.

The three programs will coordinate together under an MOU to accomplish the activities and produce the deliverables specified in a shared Scope of Work for the center. For each objective and/or deliverable identified in the shared Scope of Work, one of the three collaborating programs is identified as lead and responsible for ensuring that activities are accomplished according to agreed upon timelines. Each program has a coordinator/director-level staff member dedicated to leadership, management and oversight of the collaborative project, with responsibility for ensuring that services and interventions, including evaluation activities are planned and implemented effectively and according to timelines and other specifics in the Scope of Work. Each program also has a lead on-site staff member involved in day-to-day management of services and operations of the center, including training, coordination, and supervision of paid and volunteer staff.

The Health Services Agency (HSA), as a department within the County of Santa Cruz local government structure, is required to follow specific and detailed fiscal and budget monitoring policies and procedures as set down by the County Auditor-Controller's Office. All fiscal transactions of county agency programs and projects, such as the one proposed, are processed through HSA's Fiscal Division and through the Auditor-Controller's Office. This process provides a series of checks and reviews to ensure that all HSA transactions have been approved through appropriate channels, that funds are available and being expended according to an approved budget, and that all transactions are processed and documented according to strict procedures outlined by the auditor's office. Accordingly, all contracts, personal service agreements, purchase orders, purchase of equipment or supplies, and reimbursement of claims are approved and processed through the HSA Fiscal Division and the Auditor-Controller's Office.

Should the proposed project be funded, funds will be received through the County Health Service Agency HIV Prevention (E&P) Program, with overall responsibility for fiscal management and oversight resting with the Senior Health Services Manager over that program, Patricia Ellerby, MPH, MPA. In implementing the project, funds will be further allocated through annual contracts and/or agreements between HSA HIV Prevention Program, SCAP, HPPIDU and HPHP. Each of these three collaborating agencies/programs has designated a project manager responsible for day-to-day budget and project management, and for ensuring that funds received through contracts are expended according to budgets and scopes of work incorporated into formal contracts/agreements with the HSA HIV Prevention Program.

Since 1985, HSA has directly provided exceptional education and prevention services to populations at risk for HIV in Santa Cruz County. Over the years, HSA has executed over thirty successful contracts with the Office of AIDS, demonstrating responsible fiscal management and the ability to provide services and deliverables on time and according to negotiated Scopes of Work and other types of agreements. Examples include contracts through the HIV Prevention Program, the HIV Testing Programs, the Epidemiology and Surveillance Program, as well as contracts funding our local HIV S&-vices Consortium.

More specifically related to the development of the proposed new Drop-In Center for Watsonville, the HSA HIV Prevention Program has collaborated since 1996 with the Santa Cruz AIDS Project and the HIV

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Prevention Project for IDUs in the development of a very similar Drop-In Center established in the downtown area of Santa Cruz. Excellent collaborative relationships have been developed through a great deal of hard work over the years.

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8. Project Personnel

Hiring Procedures:

The three collaborating agencies, HPPIDU, SCAP and HSA each have agency personnel policies in place to ensure that all hiring is based on equal employment opportunity with no discrimination on the basis of, at a minimum, sex, race, creed, color, religion and sexual orientation. All three agencies established recruitment and hiring procedures advertise for available positions to the community through a range of channels such as the print media, flyers posted at service providers and announcements made during community meetings.

Interviews are conducted with two or more individuals present and hiring is based on ability and experience of candidates. The three agencies all make final staff selections after assessing a number of areas including cultural competency, experience working with targeted populations, and demonstrated knowledge of HIV prevention and harm reduction interventions. All newly hired staff will receive appropriate training in order to provide services, All staff that will be hired for the proposed South County Drop-In Center will be bilingual and an emphasis will be placed on recruiting bi-cultural candidates.

Job Responsibilities:

During the four-month start-up period of the project the expertise of SCAP's Harm Reduction Services Team Leader, Timothy Maroni and HPPIDUs Executive Director, Heather Meschery will be essential. These two individuals have worked closely together in the development and operation of the successful Drop-In Center in the city of Santa Cruz. Their combined experience in operating a Drop-In Center will assist in the set-up and oversight of the new, proposed center in Watsonville. Christine Sippl, HPHP Health Services Manager will also be an asset in working with local community leaders to gain support for the Center and in educating the community about the how the Drop-In Center will operate and whom it will serve.

This project is a collaborative effort between HPPIDU, SCAP, and HSA. All three agencies will have an equal voice in decision-making. Decisions will be made during the monthly Drop-In Center collaborative meetings and on an ad hoc basis as necessary. The three staff who will be primarily responsible for the Drop-In Center's functioning during the full fiscal year are the HPHP Homeless Youth Specialist, HPPIDU Youth Program Coordinator, and SCAP Drop-In Center Coordinator. A half-time outreach worker'will conduct outreach and in-bringing of youth to the center.

Expenditures in the projects overall budget will be split equally between all three agencies, with HSA serving as the fiscal agent. Each agency, at a minimum will support one full-time staff person at the Drop-In Center and supplies, rent and care of the facility will be evenly divided among all agencies. Budgets submitted reflect this agreed upon arrangement.

Each agency has committed to provide additional in-kind support to the Drop-In Center from their own agency or program. HSA's HPHP will provide supervision and administrative support for the HPHP Homeless Youth Specialist and augment the participant outreach supplies to be used at the Drop-In Center. Four hours per week of Homeless Youth Public Health Nurse services will also be provided during youth hours, and two hours per week of clerical support from HSA's HIV Prevention Program will be added in order to assist all services provided at the Center.

SCAP will additionally contribute to the project in two ways; through the provision of general expenses, such as, through the use of SCAP's current office space for the two SCAP staff until a site has been established and later when tasks need to be conducted in Santa Cruz. SCAP will also provide additional educational materials and supplies to the south county Drop-In Center and provide in-kind support through travel to south county from Santa Cruz.

HPPIDUs in-kind contribution during the start-up period will include six hours per week of Heather Meschery's time for oversight and development of the Drop-In Center, four hours per week of the Program Administrator's time

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for fiscal management and general expenses such as office supplies, educational materials and office space for the Youth Program Coordinator until the south county facility is operational.

Volunteers will contribute an essential component in ensuring the Drop-In Center's success. Volunteers will be recruited from throughout the community. Venues such as the south county community college campus, the local high school, the University of California at Santa Cruz and other local organizations will be tapped for volunteers. Two-day volunteer trainings will be conducted four times each year. Volunteers will be offered a variety of jobs such as outreach, working at the center during youth hours, organizing art and craft projects and recreational games. Volunteers will be trained in areas such as, HIV/AIDS and Drugs 101, overdose prevention counseling skills, confidentiality, outreach do's and don'ts, and harm reduction.

Staffing Patterns:

Staffing for the Drop-In Center is listed below along with salary schedules and a brief job description. Names are provided when possible. Staffing is provided for the full fiscal year, July 1, 2000 to June 30,200 1. In-kind support during the start-up period are delineated in the budgets for both the Health Services Agency and the subcontractors.

- 1. Drop-In Center Coordinator; SCAP: \$25,000 /year @ 100% time. Duties include; locating donations, i.e. furniture, food; maintaining documentation on donations, development of resource binder for referrals, participate in monthly collaborative meetings, taking minutes at meetings, recruit, hire and retain volunteers, coordinate HIV testing shifts, develop relationships with youth, meet regularly with youth during prevention case management, document counseling sessions with youth, convene monthly Drop-In Center meetings, coordinate in-services for staff and volunteers, advertise quarterly volunteer trainings, assist with trainings. Bilingual required and two years HIV experience or equivalent.
- 2. Homeless Youth Specialist; HPHP, Linda Valdez,: \$41,267/year @ 100% time. Responsible for shared direction and coordination of activities planned for the development and opening of the new youth center and program. Under the guidance of HPHP Health Services Manager, works with coordinator and outreach staff from collaborating agencies to make decisions and implement on-site and outreach services. Develops systems for collecting data and tracks and reports completion of activities and deliverables as specified in scope of work. Participates in building, counseling and education, with particular emphasis on helping participants to identify alcohol and treatment goals and gain access to programs and services.
- **3. Youth Program Coordinator; HPPIDU; \$25,000/year** @ 100% time. Duties include: program development for youth, locating outside technical assistance, participate in collaborative activities related to Drop-In Center, working closely with outreach worker to coordinate services, implement risk-reduction workshops, participate in all collaborative trainings for volunteers and community leaders. Bilingual required.
- **4. Outreach Worker;** SCAP: \$22,000/year @ 50% time. Duties include: participate in monthly collaborative meetings, train volunteers, conduct four outreach sessions each week, maintain orders and stocks outreach supplies, maintain contact logs on outreach contacts, assist with trainings, training evaluations and sign-in from trainings. Bilingual required and one year HIV experience or equivalent.
- **5. Homeless Youth Public Health Nurse; HPHP, HSA;** \$57,928/year @ 15% time (10% in-kind). Provides health outreach services to participants, including health and risk assessments, hands on care, teaching methods for self-care and risk reduction and assisted referral into medical care, mental health services, or arrange other community services as appropriate.
- **6. Harm Reduction Services Team Leader; SCAP, Timothy Maroni;** \$33,000 /year @ 25% time. Duties include: secure and prepare facility for Drop-In Center, plan and develop Center programming, recruit, hire and train staff, coordinate programming and problem-solving among agency staff, conduct quarterly volunteer trainings. Responsible for oversight of Drop-In Center. Bilingual required and three years HIV experience or equivalent.
- **7. Executive Director, HPPIDU, Heather Meschery;** \$48,459/year @ 30% FTE. Duties include: development of relationships with community, development of appropriate programming, participation in all required collaborative meetings, recruit, hire and train new staff, supervision of HPPIDU staff and oversight of Drop-In Center operation.



- **8. Health Services Manager; HPHP, Christine Sippl,**:\$62,254/year @ 5% time in-kind. Provides supervision to Homeless Youth Specialist. Assists in planning for program development. Assists in effort to inform community leaders and representatives of community agencies and programs about plans for Drop-In Center and works to gain their support. Works with HSA HIV Prevention staff to review and track budgeted expenditures and to negotiate and monitor contracts.
- **9. Program Administrator; HPPIDU, Sarah Miller;** \$32,708/year @ 15% in-kind. Duties include: all financial management and grant reporting for funds, all human resources support and maintenance of program insurance and employee benefits.
- 10. Typist Clerk III, HSA; \$28,519/year @ 5% time (in-kind). Duties include; duplicating flyers, agendas, minutes, preparing mailings, preparing on computer all programmatic and fiscal reports for State.

Monitoring of Scope of Work:

Work completed by subcontractors will be monitored through on-going collaborative meetings and quarterly reports submitted to the Health Services Agency HIV Prevention Program. The quarterly reports will refer to the attached scope of work. Each subcontractor is responsible for ensuring that specifically designated objectives are accomplished. There are a few objectives that will be shared equally between agencies. In this case a lead agency will be identified and responsible for tracking and reporting on progress towards completing the objective and on the collaborative effort made with the other agency. Below are the objectives that each agency is responsible for:

March 1 -June 30, 2000

HSA:

• Goal 1, Objectives 2, 4, 5, 6

SCAP:

• Goal 1, Objectives 1, 3

HPPIDU:

· Goal 1, Objectives 2, 3, 4

July 1 -June 30, 2001

HSA:

- Goal 1, Objectives 1, 2, 6, 7, 8
- Goal 2, Objective 1

SCAP:

• Goal 1, Objectives 1, 4, 5, 11, 12

HPPIDU:

- Goal 1, Objectives 3, 10, 12
- · Goal 2, Objectives 1, 2



9. Facilities

The Watsonville Drop-In Center will be located in a small, store-front style building on an active pedestrian thoroughfare near public transportation. The facility will have a floor space of approximately 2,000 square feet and it is anticipated that the facility rental cost will be between \$.95 and \$1.15 per square foot. The entrance of the building will lead immediately into a large, open hang-out and activities space. This space will contain a greeting station, comfortable vinyl chairs and couches for twenty-plus participants, tables for supplies and materials, a television, stereo, displays for educational materials, a phone for participants, a closet and shelves for storage and a bathroom. In the back half of the building will be two offices, a counseling room, medical/day bed area, kitchen, and an additional bathroom. Outside there will be a small garden space and a recreational activities area. Storage closets, cabinets and shelves will be installed throughout the building to allow for easy access to appropriate supplies and ensure that there are adequate reserve supplies always available for outreach and Drop-In Center activities.

Each agency will take a lead on the purchase of different office support services at the facility as reflected in the budget and budget narrative. The South County Drop-In Center will be equipped with three phone lines. One phone line will be for participant and referral usage, one line will be for staff usage and one line will be for fax and Internet services. Two cellular phones will be purchased for outreach purposes. The facility will be equipped with one medium capacity photocopying machine, one printer, and one telefax machine. Both offices will have computer work stations. One computer will be equipped with a modem, and both will have word processing, office system and graphic arts software applications. The Health Services Agency will be contributing in-kind clerical support. Shipping and postage are reflected in the general expense line of the budget.

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Contractor: County of Santa Cruz

Contact: 99-86 115

MOU Number: E&P 99-44

HSA YOUTH DROP-IN CENTER PROGRAM BUDGET Term: March 1, 2000 to June 30, 2000

A.	Personnel				
		Salary	Percent of Time	SOA Amount Requested	Local support
	HPHP Health Svs Manager HPHP Homeless Youth Specialist Typist Clerk III	\$62,254 \$41,267 \$28,519	10% .5 0% 05%	\$ 4,878	\$ 2,075 \$ 475
	Subtotal Salaries			\$6,878	\$ 2,550
	Benefits @ 27%			\$1,857	\$ 689
	Total Personnel Expenses			\$8,735	\$ 3,239
В.	Operating Expenses				
	General Expense Travel/per diem Facilities Operations			\$6,000 \$954 \$10,000	\$ 500
	Total Operating Expenses			\$16,954	\$ 500
C.	Capital Expenditures			-0-	-0-
D.	Other Costs 1. Santa Cruz AIDS Project 2. HIV Prevention Project for IDUs			\$27,210 \$27,200	\$10,127 \$6,391
	Total Other Costs			\$54,410	\$16,518
Е.	Indirect Expenses @ 10%			\$ 874	\$ 324
	Total Budget			\$80,973	\$20,581

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Contractor: County of Santa Cruz

Contact: 99-86115

MOU Number: E&P 99-44

HSA YOUTH DROP-IN CENTER PROGRAM Term: July 1, 2000 -June 30, 2001

A.	Personnel	Salary	Percent of Time	SOA Amount Requested	Local support
	HPHP Health Svs Manager HPHP Youth Specialist HPHP Youth Public Health Nurse Typist Clerk III	\$62,254 \$41,267 \$57,928 \$28,519	05% 100% 15% 05%	\$ 41,267 \$ 2,897	\$ 3,113 \$ 5,793 \$ 1,426
	Subtotal Salaries			\$44,164	\$10,332
	Benefits @ 27%			\$11,924	\$ 2,790
	Total Personnel Expenses			\$56,088	\$13,122
В.	Operating Expenses				
	General Expense Travel/per diem Facilities Operations			\$ 7,616 \$ 2,000 \$12,000	\$ 1,000
	Total Operating Expenses			\$21,616	\$ 1,000
C.	Capital Expenditures			- 0-	-0-
D.	Other Costs 1. Santa Cruz AIDS Project 2. HIV Prevention Project for IDUs			\$83,009 \$82,900	\$ 6,500
	Total Other Costs			\$165,909	\$ 6,500
E.	Indirect Expenses @ 10%			\$ 5,609	\$ 1,312
	Total Budget			\$249,222	\$21,934

HSA Youth Drop-In Center Program Budget Justification March 1, 2000 -June 30, 2000

A. Personnel

HPHP Homeless Youth Specialist: Responsible for shared direction and coordination of activities planned for the development and opening of the new youth center and program. Under the guidance of HPHP Manager, works with coordinator and outreach staff from collaborating agencies to make decisions and implement on-site and outreach services. Develops systems for collecting data and tracks and reports completion of activities and deliverables as specified in scope of work. Participates in building, counseling and education, with particular emphasis on helping participants to identify alcohol and treatment goals and gain access to programs and services. \$41,267 @ SO FTE

particip	and solvices.	\$6,878
Benefit	s: Full health, dental and vision benefits @ 27%	\$1,857
В.	Total Personnel Operating Expenses	\$8,735
	1 Expenses: Program start-up expenses including the purchase of 2 computers, er, 2 cellular phones, 1 photocopier, 1 fax machine, phone system and office s.	\$6,000
	Per Diem: Travel related expense at .24/cents per mile and per diem e related to trainings.	\$ 954
	es: Rent @ approximately 2,000 square feet @ \$.95-\$1.15; s, maintenance, and remodeling of facility.	\$10,000
	Total Operating Expenses	\$16,954
C.	Capital Expenditures	-0-
D.	Other Costs	
	a. Santa Cruz AIDS Project, see attached budget and justificationb. HIV Prevention Project for IDUs, see attached budget and justification	\$27,210 \$27,200
	Total Other Costs	\$54,410
E.	Indirect Expenses @ 10%	
	Indirect expense at 10% of personnel in order to cover administrative and program costs related to implementation of Drop-In Center.	\$ 874
Total	Budget	\$80,973

HSA Youth Drop-In Center Program Budget Justification July 1, 2000 -June 30, 2001

A. Personnel

HPHP Homeless Youth Specialist; Responsible for shared direction and coordination of activities planned for the youth drop-in center. Under the guidance of HPHP Health Services Manager, works with Drop-In Center coordinator and outreach staff from collaborating agencies to make decisions and implement on-site and outreach services. Develops systems for collecting data and tracks and reports completion of activities and deliverables as specified in scope of work. Participates in building, counseling and education, with particular emphasis on helping participants to identify alcohol and treatment goals and gain access to programs and services.

\$41,267 @ 100% FTE \$4 1,267

Homeless Youth Public Health Nurse; Provides health outreach services to participants, including health and risk assessments, hands on care, teaching methods for self-care and risk reduction and assisted referral into medical care, mental health services, or arrange other community services as appropriate. \$57,519/year@5% FTE \$2,897

Benefits: Full health, dental and vision benefits @ 27% \$11,924

Total \$56,088

B. Operating Expenses

General Expenses: office supplies; participant outreach/engagement supplies, includes personal hygiene and risk reduction supplies, i.e. soap, shampoo, combs, brushes, razors, deodorant, sun screen, chap stick, oral hygiene supplies; over-the-counter medications, includes a broad range of products for treatment of minor ailments, i.e. medications for lice, scabies and fungal infections, cold, headache, and stomach upset remedies, supplies for care of minor wounds; participant incentives, includes items such as cold or wet weather clothing, shoes, backpacks; educational materials, including print materials, videos, etc.; office equipment maintenance contracts, copier, fax, phone system etc.

\$7\$, 6\$1\$6

	expense related to trainings. Facilities: Rent, utilities, and maintenance expense for the Drop-In Center.	\$2,000 \$12,000
	Total Operating Expenses	\$21,616
C.	Capital Expenditures	- 0-
D.	Other Costs a. Santa Cruz AIDS Project, see attached budget and justification b. HIV Prevention Project for IDUs, see attached budget and justification	\$83,009 \$82,900
	Total Other Costs	\$165,909
	Indirect Expenses @ 10% oct expense at 10% in order to cover administrative and program costs and to implementation of Drop-In Center.	\$ 5,609
7	Total Budget	\$249,222

Travel/Per Diem: Travel related expense at 24/cents per mile and per diem

AGENCY INFORMATION SHEET

Agency Name:	County of Santa Cruz	

Agericy D	Agericy Director:					
Name:	Rhama Khalsa	Telephone:	831	454-4066		
Title:	Administrator	Fax	831	454-4770		
Address:	1080 Emeline Avenue Santa Cruz, CA 95060	e-mail:				

Agency Fi	scal Officer:		
Name:	David McCollom	Telephone:	831 454-4324
Title:	Fiscal Officer	Fax:	831 454-4770
Address:	1080 Emeline Avenue Santa Cruz, CA 95060	e-mail:	

Project Di	Project Director (if none, agency contact regarding application):					
Name:	Leslie Goodfriend	Telephone:	831 454-4313			
Title:	Senior Health Educator	Fax:	831 454-5048			
Address:	1070 Emeline Avenue Santa Cruz, CA 95060	e-mail:	lgoodfri@health.co. santa-cruz.ca.us			

Contractor: County of Santa Cruz Contact: 99-86 I 15 MOU Number: E&P 99-44

Term: SCAP BUDGET March 1, 2000 to June 30, 2000

A.	Personnel	Salary	Percent	SOA	Local
		•	of Time	Amount Requested	support
	Drop-In Center Coord. Outreach Worker Harm Reduction Svs Team Leader	\$25,000 \$22,000 \$33,000	75% 18.75% 25%	\$ 6,250 \$ 1,375	\$ 2,750
	Subtotal Salaries			\$ 7,625	\$ 2,750
	Benefits @ 2 1%			\$ 1,601	\$ 578
	Total Personnel Expenses			\$ 9,226	\$ 3,328
В.	Operating Expenses				
	General Expense Travel/per diem Facilities Operations			\$ 8,000 \$ 600 \$ 8,000	\$ 6,000 \$ 300
	Total Operating Expenses			\$16,600	\$ 6,300
C.	Capital Expenditures			-0-	-O-
D.	Other Costs			-O-	-0-
E.	Indirect Expenses @ 15%			\$ 1,384	\$ 499
	Total Budget			\$27,210	\$10,127

SCAP NARRATIVE: MARCH 1, 2000 - JUNE 30, 2000

A. Personnel

Drop-In Center Coordinator: The Drop-In Center Coordinator is responsible for the smooth operation of the DIC facility. The DIC Coordinator facilitates the operation and coordination of all youth programming at the DIC. The DIC Coordinator works with the other service providers during programming hours and maintains strong relationships to the youth served at the center. The DIC Coordinator is responsible for providing and reporting all activities related to the Prevention Case Management program and reports to the Harm Reduction Services Team Leader. The DIC Coordinator position is full-time and has a hire date of April 1. \$25,000/yr @ 75% FTE \$6.250

Outreach Worker: The Outreach Worker is responsible for providing and reporting on all activities related to the Youth Outreach Program. The Outreach Worker maintains, orders and stocks all the HIV prevention materials for the DIC and for outreach. The Outreach Worker position is half-time and is supervised by the Harm Reduction Services Team Leader and has a hire date of April 1. \$22,000/yr @ 18.75% FTE \$ 1,375

Benefits: Full health, dental and vision coverage @ 21%. \$ 1,601

Total Personnel Expenses

\$ 9, 226

B. Operating Expense

General Expense: Program expense including office, safer sex, sports equipment/activities supplies and other furnishings such as; TV/VCR, refrigerator, microwave, couch, day bed, chairs, kitchen equipment; misc. participant vouchers.

§ 8,000

Travel/Per Diem: Travel related expense @ .24 and per diem expense related to trainings. \$ 600

Facilities: Rent, remodel expense, utilities and maintenance expense for the Drop-In Center. \$ 8,000

Total Operating Expense

\$16,600

C. Capital Expenditures

-0-

D. Other Costs

-0-

E. Indirect Expenses

Indirect expenses at 15% which help cover administrative and program costs related to program implementation at the Santa Cruz AIDS Project.

\$1,384

Total Budget

\$27, 210

SCAP NARRATIVE: JULY 1, 2000 -JUNE 30, 2001

Α. Personnel

Drop-In Center Coordinator: The Drop-In Center Coordinator is responsible for the smooth operation of the DIC facility. The DIC Coordinator facilitates the operation and coordination of all youth programming at the DIC. The DIC Coordinator works with the other service providers during programming hours and maintains strong relationships to the youth served at the center. The DIC Coordinator is responsible for providing and reporting all activities related to the Prevention Case Management program and reports to the Harm Reduction Services Team Leader. The DIC Coordinator position is full-time position. \$26,000/yr @ 100% FTE \$26,000

Outreach Worker: The Outreach Worker is responsible for providing and reporting on all activities related to the Youth Outreach Program. The Outreach Worker maintains, orders and stocks all the HIV prevention materials for the DIC and for outreach. The Outreach Worker position is half-time and is supervised by the Harm Reduction Services Team Leader. \$23,000/yr@50% FTE \$11,500

Harm Reduction Services Team Leader: The Harm Reduction Services Team Leader recruits, hires, trains and supervises Santa Cruz AIDS Project staff involved at the DIC. The HRSRL plans and develops DIC programming and leads quarterly collaborative meetings among all collaborative staff for the purpose of coordinating DIC programming. The HRSTL works quarter-time on the project and is supervised by the Executive Director of the \$34,000/yr @ 25% FTE Santa Cruz AIDS Project. \$8,500

Benefits: Full health, dental and vision coverage @ 21%. \$9,660

Total Personnel Expenses

\$55,660

B. **Operating Expense**

General Expense: Program expense including office, safer sex, educational and youth activities supplies and miscellaneous participant vouchers. 6.000

Travel/	Per Diem: Travel related expense @ .24⊄/mile and per diem expense related to trainings.	\$ 1,000
Faciliti	es: Rent, utilities and maintenance expense for the Drop-In Center.	\$12,000
Total	Operating Expense	\$19,000
C.	Capital Expenditures	-0-
D.	Other Costs	-0-
E.	Indirect Expenses: Indirect costs at 15% which help cover administrative and program costs related to program implementation at the Santa Cruz AIDS Project.	\$ 8,349
	Total Budget	\$83,009

0269

Contractor: County of Santa Cruz

Contact: 99-86 115

MOU Number: E&P 99-44

HIV PREVENTION PROJECT FOR INJECTION DRUG USERS Term: March 1, 2000 - June 30, 2000

A. **Personnel** Salary Percent SOA Local of Time Amount support Requested Executive Director. \$48,459 25% \$ 1,615 \$2,423 Youth Program Coord. \$25,000 100% \$ 8,332 Program Administrator \$32,708 10% \$ 1,090 **Subtotal Salaries** \$ 9,947 \$3,513 Benefits @ 25% \$ 2,487 \$ 878 **Total Personnel Expenses** \$12,434 \$4,391 B. **Operating Expenses** General Expense \$ 4,500 \$ 2,000 Travel/per diem 400 Facilities Operations \$ 8,000 **Total Operating Expenses** \$12,900 \$ 2,000 C. **Capital Expenditures** -0--0-D. **Other Costs** -0--0-E. **Indirect Expenses (a)** 15% \$ 1,866 **Total Budget** \$27,200 \$ 6,391

HIV Prevention Project for Injection Drug Users

Budget Justification South County Drop-In Center March 1, 2000 - June 30, 2000

A. Personnel Expenses

The Executive Director: Will be responsible for participation in all collaborative activities required to open the Drop-In Center including the development of relationships with other community organizations and service providers. The Executive Director will also be responsible for the development of Drop-In Center programming and coordination of activities required to establish the Drop-In Center in South Santa Cruz County.

\$48,459/yr@10% FTE

\$1,615

The Youth Program Coordinator: Will work with the Executive Director to develop and implement programming at the South County Drop-In Center in conjunction with collaborating agencies and outreach workers. \$25,000/yr @ 100% FTE

Benefits:

Benefits related expenses will include payroll taxes, payroll processing expenses, and health, dental, and vision insurance for employees @ 25%. \$2,487

Total Personnel Expenses

\$12,434

\$8.332

B. Operating Expenses

General Expenses

General Expenses will include safer injection supplies (not including syringes) for distribution to program participants at each outreach contact. These supplies will include cookers, cottons, distilled water, bleach, alcohol wipes, and antibiotic ointment. Other supplies will be purchased as requests are made. In addition, general expenses will include the purchase of three workstations for the Drop-In Center and vouchers for various services to be distributed to program participants as incentives.

\$4,500

Travel/Per Diem

Travel/Per Diem expenses will include reimbursement for employees travelling from North Santa Cruz County to South Santa Cruz County as required for the development and on-going management of the Drop-In Center. \$400 Facilities

These expenses will include general overhead expenses such as rent, utilities, and general expenses related to the operation of the South County Drop-In Center. Facilities expenses will also include any construction required to the Drop-In Center building to prepare it for operation. \$8,000

Total Operating Expenses

\$12,900

C. Capital Expenditures

D. Other Costs -0-

E. Indirect Personnel Expenses

Indirect expenses will include required program insurance such as worker's compensation, program liability and board of director's insurance as well as other miscellaneous employee related expenses as necessary @ 15%. \$ 1,866

Total Budget \$27,200

Contractor: County of Santa Cruz

Contact: 99-86 115

MOU Number: E&P 99-44

HIV PREVENTION PROJECT FOR INJECTION DRUG USERS

Term: July 1, 2000 -June 30, 2001

Α.	Personnel			
		Salary	Percent of Time	SOA Amount Requested
	Executive Director. Youth Program Coord. Program Administrator	\$48,459 \$25,000 \$32,708	30% 100% 15%	\$14,538 \$25,000 4,906
	Subtotal Salaries			\$44,444
	Benefits @ 25%			\$11,111
	Total Personnel Expenses			\$55,555
В.	Operating Expenses			
	General Expense Travel/per diem Facilities Operations			\$ 6,442 \$ 570 \$12,000
	Total Operating Expenses			\$19,012
C.	Capital Expenditures			-0-
D.	Other Costs			-0-
Е.	Indirect Expenses @ 15%			\$ 8,333
	Total Budget			\$82,900

0272

HIV Prevention Project for Injection Drug Users

Budget Justification South County Drop-In Center July 1, 2000 - June 30, 2001

A. Personnel

The Executive Director: Will be responsible for participation in all collaborative activities required for the on-going operation of the Drop-In Center including support meetings, training and supervision of employees and volunteers, the provision or risk reduction services, and the development and implementation of workshops for high-risk youth.

\$48,459/yr@30% FTE

\$14,538

The Youth Program Coordinator: Will work with the Executive Director to develop and implement programming at the South County Drop-In Center in conjunction with collaborating agencies and outreach workers and will participate in the development and implementation of workshops for high-risk youth. \$25,000/yr@ 100% FTE

\$25,000

The Program Administrator: Will be responsible for all financial management and grant reporting for funds acquired by HPPIDU as well as any human resources related responsibilities for HPPIDU employees. \$32,708/yr @ 15% FTE

\$ 4.906

Benefits:

Benefits related expenses will include payroll taxes, payroll processing expenses, and health, dental, and vision insurance for employees @ 25%. \$11,111

Total Personnel Expenses

\$55,555

B. Operating Expenses

General Expenses

General Expenses will include safer injection supplies (not including syringes) for distribution to program participants at each outreach contact. These supplies will include cookers, cottons, distilled water, bleach, alcohol wipes, and antibiotic ointment. Other supplies will be purchased as requests are made.

\$ 6,442

Travel/Per Diem

Travel/Per Diem @ .24\(\pi\)/mile expenses will include reimbursement for employees travelling from North Santa Cruz County to South Santa Cruz County as required for the development and on-going management of the Drop-In Center.

\$ 570

Facilities

These expenses will include general overhead expenses such as rent, utilities, and maintenance expenses related to the South County Drop-In Center. \$12,000

Total Operating Expenses

\$19,012

C. Capital Expenditures

-0-

D. Other Costs

-0-

E. Indirect Expenses

Indirect expenses will include required program insurance such as worker's compensation, program liability, and board of director's insurance as well as other miscellaneous employee related expenses as necessary @15%.

\$ 8,333

Total Budget

\$82,900

Contractor: County of Santa Cruz Contact: 99-86 115

MOU Number: E&P 99-44

SCAP BUDGET Term: July 1, 2000 to June 30, 2001

A.	Personnel				
		Salary	Percent of Time	SOA Amount Requested	Local support
	Drop-In Center Coord. Outreach Worker Harm Reduction Svs Team Leader	\$26,000 \$23,000 \$34,000	100% 50% 25%	\$26,000 \$11,500 <u>8,500</u>	
	Subtotal Salaries			\$46,000	
	Benefits @ 2 1%			\$ 9,660	
	Total Personnel Expenses			\$55,660	
В.	Operating Expenses				
	General Expense Travel/per diem Facilities Operations			\$ 6,000 \$ 1,000 \$12,000	\$ 6,000 \$ 500
	Total Operating Expenses			\$19,000	\$ 6,500
C.	Capital Expenditures			-0-	-0-
D.	Other Costs			-0-	-0-
E.	Indirect Expenses @ 15%			\$ 8,349	
	Total Budget			\$83,009	\$ 6,500