



August 27, 2009

AGENCY ADMIN. & FINANCE
1000 San Leandro Blvd, Suite 300
San Leandro, CA 94577
Tel: (510) 618-3452
Fax: (510) 351-1367

The Honorable Board of Supervisors
County Administration Building
1221 Oak Street
Oakland, Ca 94612

Dear Board Members:

SUBJECT: Acceptance of East Oakland HIV/STD Prevention Project Grant for Public Health Department, Office of AIDS Administration

RECOMMENDATION:

1. Accept the Notice of Grant Award No. 1H75PS002089-01 from the Department of Health and Human Services, Centers for Disease Control and Prevention in the amount of \$190,000 for the period of September 01, 2009 through August 31, 2010 to reduce and prevent HIV and STD infection among high-risk women and youth in East Oakland with a primary focus on African Americans and Latinos;
2. Approve In Principle to contract with Allen Temple (Principal: Verdell Brooks, Location: Oakland, CA) in the amount of \$171,000 for the period September 1, 2009 to August 31, 2010 to implement different activities in East Oakland for reducing and preventing HIV and STD infection among high-risk women between the ages of 18-44 and high-risk youth between the ages of 12-24; and
3. Authorize the Auditor-Controller to increase appropriation and revenue in the amount of \$190,000 in Organization #350900, Fund #22405 as outlined in the attached Financial Recommendations.

SUMMARY/DISCUSSION/FINDINGS:

The Public Health Department, Office of AIDS Administration has received a Grant Award from the Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) in the amount of \$190,000 to reduce and prevent HIV and STD infection among high-risk women and youth in East Oakland with a primary focus on African Americans and Latinos for the period September 1, 2009 through August 31, 2010.

Of the total award amount, Office of AIDS Administration will award \$171,000 to Allen Temple Baptist Church in Oakland to help implement the East Oakland HIV/STD Prevention Projection by providing the following:

- Street outreach;
- Mobile testing and counseling;
- Mass media campaign;
- Town hall meetings; and
- Transition of HIV-positive individuals into care.


SELECTION CRITERIA PROCESS:

East Oakland has the highest incidence of HIV/AIDS cases among African American and Latino women and youth in Alameda County. For the past few years, Allen Temple Baptist Church has provided prevention education, and promoted the eradication of HIV/AIDS in this area of our community. The Office of AIDS and the Allen Temple Baptist Church were instrumental in identifying and securing this funding from the Center for Disease Control and Prevention. The Allen Temple Baptist Church is the most competent CBO in terms of serving the needs of the African American and Latino women and youth in the East Oakland area because there are no other CBOs that are based in this area and that serve this specific target population.

FINANCING:

Funding of this grant is not included in the FY 2009-10 adopted budget. Therefore, budget adjustments are necessary to align the County budget with funding. There is no change in net County cost.

Very truly yours,



Alex K. Briscoe, Acting Director
Health Care Services Agency

AKB:mms

cc: Auditor Controller
County Counsel

East Oakland HIV-STD Prevention Project Grant
350900 PHG09HA61900

FINANCIAL RECOMMENDATION

AGENDA DATE: 09/15/2009

Subject of Board Letter: Acceptance of East Oakland HIV / STD Prevention Project Grant for Public Health Department, Office of AIDS Administration

BY: 2010 ORG #350200 **FUND:** 10000

The use of Designations, as follows:

| NAME OF DESIGNATION | ORG | AMOUNT |
|---------------------|-----|--------|
| | | |

The increase (decrease) in anticipated revenue, as follows:

| <i>Informational</i> | | | | |
|----------------------|--------|-------|---------|------------|
| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
| 350201 | 469990 | 00000 | | \$0 |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$0 |

| <i>Informational</i> | | | | |
|----------------------|------|------|---------|------------|
| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
| | | | | |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$0 |

GRAND TOTAL ANTICIPATED REVENUE **\$0**

The increase (decrease) in appropriations, as follows:

| <i>Informational</i> | | | | |
|----------------------|--------|-------|---------|------------|
| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
| 350200 | 600000 | 00000 | | (\$19,000) |
| | 610000 | 00000 | | \$19,000 |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$0 |

| <i>Informational</i> | | | | |
|----------------------|------|------|---------|------------|
| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
| | | | | |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$0 |

GRAND TOTAL APPROPRIATION **\$0**

FINANCIAL RECOMMENDATION

AGENDA DATE: 10/14/2008

Subject of Board Letter: Acceptance of East Oakland HIV / STD Prevention Project Grant for Public Health Department, Office of AIDS Administration

BY: 2010 **ORG #** 350900 **FUND:** 22405

The use of Designations, as follows:

| NAME OF DESIGNATION | ORG | AMOUNT |
|---------------------|-----|--------|
| | | |

The increase (decrease) in anticipated revenue, as follows:

Informational

| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
|------------------|--------|-------|--------------|------------------|
| 350900 | 456120 | 00000 | PHG09HA61900 | \$190,000 |
| | | | | |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$190,000 |

Informational

| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
|------------------|------|------|---------|------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$0 |

GRAND TOTAL ANTICIPATED REVENUE \$190,000

The increase (decrease) in appropriations, as follows:

Informational

| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
|------------------|--------|-------|--------------|------------------|
| 350900 | 600000 | 00000 | PHG09HA61900 | \$19,000 |
| | 610000 | 00000 | PHG09HA61900 | \$171,000 |
| | | 00000 | | |
| | | | | |
| ORG TOTAL | | | | \$190,000 |

Informational

| ORG | ACCT | PROG | PROJ/GR | AMOUNT |
|------------------|------|------|---------|------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| ORG TOTAL | | | | \$0 |

GRAND TOTAL APPROPRIATION \$190,000

any requests involving funding issues must include an itemized budget and a narrative justification of the request.

Prior approval is required but is not limited to the following types of requests: 1) Use of unobligated funds from prior budget period (Carryover); 2) Lift funding restriction, withholding, or disallowance, 3) Redirection of funds, 4) Change in Contractor/Consultant; 5) Supplemental funds; 6) Response to Technical Review, or 7) Change in Key Personnel.

Note 10: KEY PERSONNEL . In accordance with 45 Part 74, CDC recipients shall obtain prior approval from CDC for (1) Change in the project director or principal investigator or other key persons specified in the application or award document, and (2) the absence for more than three months, or a 25 percent reduction in time devoted to the project, by the approved project director or principal investigator.

Note 11: INVENTIONS: Acceptance of grant funds obligates recipients to comply with the standard patent rights clause in 37 CFR 401.14.

Note 12: PUBLICATIONS: Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, such as: This publication (journal article, etc.) was supported by the Cooperative Agreement Number above from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

Note 13: CONFERENCE DISCLAIMER AND USE OF LOGOS:

Disclaimer: Where a conference is funded by a grant or cooperative agreement, a subgrant or a contract the recipient must include the following statement on conference materials, including promotional materials, agenda, and Internet sites: Funding for this conference was made possible (in part) by the cooperative agreement award number above from the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government

Logos: Neither the HHS nor the CDC logo may be displayed if such display would cause confusion as to the source of the conference or give the false appearance of Government endorsement. A non-federal entities unauthorized use of the HHS name or logo is governed by U.S.C. 1320b-10, which prohibits the misuse of the HHS name and emblem in written communication. The appropriate use of the HHS logo is subject to the review and approval of the Office of the Assistant Secretary for Public Affairs (OASPA). Moreover, the Office of the Inspector General has authority to impose civil monetary penalties for violations (42 C.F.R. Part 1003). Neither the HHS nor the CDC logo can be used on conference materials, under a grant, cooperative agreement, contract or co-sponsorship agreement without the expressed, written consent of either the Project Officer or the Grants Management Officer. It is the responsibility of the grantee (or recipient of funds under a cooperative agreement) to request consent for the use of the logo in sufficient detail to assure a complete depiction and disclosure of all uses of the Government logos, and to assure that in all cases of the use of Government logos, the written consent of either the Project Officer or the Grants Management Officer has been received.

Note 14: EQUIPMENT AND PRODUCTS: To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. CDC defines equipment as Tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of more than one year AND an acquisition cost of \$5,000 or more per unit. However, consistent with recipient policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organizations policy.

Note 15: TRAFFICKING IN PERSONS. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term and condition, go to:
http://www.cdc.gov/od/pgo/funding/grants/Award_Term_and_Condition_for_Trafficking_in_Persons.shtm

NOTE 16: ACKNOWLEDGMENT OF FEDERAL SUPPORT. When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.

Note 17: INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hstips@oig.hhs.gov or by mail to:

Office of the Inspector General
Department of Health and Human Services
Attention: HOTLINE
330 Independence Ave., SW
Washington DC 20201

Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General Contact information cited in previous notice of award.

Note 18: PAYMENT INFORMATION:

Automatic Drawdown

Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS is administered by the Division of Payment Management, Program Support Center, HHS. PMS will forward the DHHS Manual for Recipients Financed Under the Payment Management System (PMS), PMS-270 and PMS-272 forms.

a. PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, P.O. Box 6021, Rockville, MD 20852.

b. If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, Rockwall Building #1, Suite 700, 11400 Rockville Pike, Rockville, MD 20852.

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

For more information and to obtain your agency's point of contact at the Payment Management System, visit the following website: http://www.dpm.psc.gov/contacts/dpm/dpm.aspx?cms_branchevent=/contacts/dpm/univ_nonprofit/univ_nonprofit.object.

Note 19: AUDIT REQUIREMENT: An organization that expends \$500,000 or more in a year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of OMB Circular A-133, Audit of States, Local Governments, and Non-Profit Organizations. The audit must be completed along with a data collection form, and the reporting package shall be submitted within the earlier of 30 days after receipt of the auditor's report(s), or nine months after the end of the audit period. The audit report must be sent to:

Federal Audit Clearing House
Bureau of the Census
1201 East 10th Street
Jeffersonville, IN 47132

Should you have questions regarding the submission or processing of your Single Audit Package, contact the Federal Audit Clearinghouse at: (301) 763-1551, (800) 253-0696 or email: govs.fac@census.gov

Weaknesses: No weakness was identified with the applicant's program goals and objectives.

Criteria #3: Appropriateness to Interventions

Does the applicant describe how the proposed priority interventions and services are culturally competent, sensitive to issues of sexual orientation, developmentally appropriate, linguistically-specific, and educationally appropriate? Yes

Do the proposed priority intervention(s) appear to be culturally competent, sensitive to issues of sexual orientation, developmentally appropriate, linguistically-specific, and educationally appropriate? Yes

Strengths: The applicant and each of the project partners are well established and ingrained into the target population. The proposed interventions address the HIV intervention needs of the target population. The components of their proposed program will address HIV intervention at the individual, small group, and community level. HIV education and HIV rapid testing will also be included to ensure a comprehensive approach in meeting the needs of their target population.

Weaknesses: No weakness was identified regarding appropriateness of interventions.

Criteria #4: Plan of Operation

Is the plan adequate to carry out the proposed objectives? Yes

How complete and comprehensive is the applicant's plan for conducting the proposed activities? The applicant's plans for carrying out the proposed objectives were detailed and clearly described. They provided information about each component of their proposed program and the activities that will be conducted to and for their target population.

What is the potential effectiveness of the proposed activities in meeting the program objectives? The applicant's proposed activities will incorporate the use of the DEBI "SISTA, Community Youth Ambassadors which is a small group intervention for high risk-youth, community-wide outreach, education events, and mobile HIV rapid testing.

Strengths: The applicant's plan of operation was very detailed and specified all aspects of how, where, intervention materials and, prevention curricula proposed for implementation of the project.

Weaknesses: No weaknesses were identified.

Criteria #5: Scientific, theoretical, conceptual, or program experience foundation for proposed activities

Does the applicant provide a detailed description of the scientific, theoretical, conceptual, or program experience foundation on which the proposed activities are based and which support the potential effectiveness of these activities for addressing the stated need?

Yes

Does the foundation for the proposed activities appear to be sound and appropriate?

Yes

Strengths: The applicant indicated that the proposed activities and intervention components were determined as a result of thorough research and review of effective means of reducing HIV risky behaviors, attitudes, and beliefs of their target population. Their selected proposed intervention components and activities are known to be proven effective for their target population.

Weaknesses: No weakness was identified.

Criteria #6: Collaboration, Linkages, and Coordination

Are collaboration and coordination plans with other organizations appropriate? Does the applicant describe the collaboration or coordination plans and include signed memoranda of agreement for each agency with which collaborative activities are proposed, and other evidence of collaboration that describe previous, current, as well as future collaboration plans? Yes

Strengths: The applicant provided detailed descriptions of collaboration, linkages, and coordination. They described the methods they will incorporate to ensure the appropriate partnerships are maintained. They identified the programs and individuals that they will work with and who in their program will be responsible for ensuring collaboration, linkages, and coordination activities and implemented and sustained

Weaknesses: No weakness was identified.

Criteria #7: Timeline

Is the timeline specific and realistic? Yes

Strengths: The grantee provided a month by month timeline that detailed who is responsible for proposed activities.

Weaknesses: No weakness was identified.

Criteria #8: Staffing Plan

Are staff roles clearly defined? Yes

Is the staffing pattern for the proposed project appropriate? Yes

Do the staff members have appropriate experience? Yes

Strengths: The applicant provided detailed staff job descriptions and resumes for all proposed staff. Included in the information was staff salary, summary of essential duties and responsibilities and FTE for each position. The resumes of proposed staff reflected appropriate levels of knowledge skills and abilities to perform HIV intervention programmatic activities effectively.

Weaknesses: No weaknesses identified.

Criteria #9: Quality Assurance and Program Evaluation Plan including Performance

Measures

Does the evaluation plan describe when and how evaluation activities will be implemented by the applicant? Yes

Is the evaluation plan realistic and feasible, considering the applicant's unique needs, resources, capabilities, and priorities? Yes

Does the plan described have the potential to guide the collection of data for improving HIV prevention efforts and informing stakeholders of the progress made in HIV prevention? Yes

Strengths: The applicant described their evaluation plan and will use both process and outcome monitoring measures. Their quality assurance manager will provide technical oversight ensuring each program component is carried out. The applicant will collect and enter data into their organization's data base system and will analyze and provide analysis summaries on a quarterly basis to appropriate stakeholders.

Weaknesses: No weakness identified.

Criteria #10: Budget and Justification

Is the budget and justification appropriate for the proposed project? Yes

Strengths:

The applicant provided a detailed budget and budget justification with narrative information that supported an appropriate distribution of funding to effectively accomplish goals and objectives.

Weaknesses: No weakness identified.

