

CALIFORNIA SEXUALLY TRANSMITTED DISEASES PROGRAM

STD Program Management

Awarded By

THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter “Department”

TO

County of Fresno, hereinafter “Grantee”

Implementing the “STD Program Management and Collaboration Project,” hereinafter
 “Project”

AMENDED GRANT AGREEMENT NUMBER 19-10960, A01

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

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

PURPOSE FOR AMENDMENT: The purpose of the Grant amendment is to: Increase the Grant amount for Fiscal Year (FY) 2021 (07/01/2021-06/30/2022); to allow the Grantee to continue performing more of the same services as identified in Exhibit A and to reimburse the Grantee accordingly.

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

AMENDED GRANT AMOUNT: This amendment is to increase the grant for **FY 2021** by **\$163,998** and is amended to read: The maximum amount payable under this Grant shall not exceed ~~Nine Hundred Seventy Two Thousand, Seven Hundred Fifty Five Dollars (\$972,755)~~ **One Million, One Hundred Thirty-Six Thousand, Seven Hundred Fifty-Three Dollars (\$1,136,753).**

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

| | |
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| California Department of Public Health | Grantee: County of Fresno |
| Name: Karlo Estacio <u>Alexia McGonagle</u> Chief, Business Operations Support Section | Name: Jena Adams Supervising CDC Specialist |
| Address: P.O. Box 997377, MS 7320 | Address: 1221 Fulton Street |
| City, ZIP: Sacramento, Ca 95899-7377 | City, ZIP: Fresno, CA 93775 |
| Phone: (916) 552-9820 | Phone: (559) 600-3042 |
| Fax: (916) 440-5106 | Fax: N/A |
| E-mail: Karlo.Estacio@cdph.ca.gov Alexia.McGonagle@cdph.ca.gov | E-mail: jadams@fresnocountyca.gov |

Direct all inquiries to:

| | |
|---|--|
| California Department of Public Health, STD Control Branch | Grantee: County of Fresno |
| Attention: Christine Johnson <u>Adriana Cervantes</u> Grant Manager | Attention: Jena Adams Supervising CDC Specialist |
| Address: P.O. Box 997377, MS 7320 | Address: 1221 Fulton Street |
| City, Zip: Sacramento, Ca 95899-7377 | City, ZIP: Fresno, CA 93775 |
| Phone: (916) 552-9796 <u>(916) 552-9788</u> | Phone: (559) 600-3042 |
| Fax: (916) 636-6454 <u>(916) 636-6755</u> | Fax: N/A |
| E-mail: Christine.Johnson@cdph.ca.gov Adriana.Cervantes@cdph.ca.gov | E-mail: jadams@fresnocountyca.gov |

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

| Remittance Address |
|--|
| Grantee: County of Fresno |
| Attention "Cashier": Bruna Chavez |
| Address: Address: PO Box 11800 <u>P.O. Box 11867</u> |
| City, ZIP: Fresno, CA 93775 |
| Phone: (559) 600-6415 |
| Fax: N/A |
| E-mail: dphboap@fresnocountyca.gov |

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

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

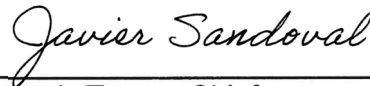
Executed By:

Date: 6/21/22



~~Ernest Buddy Mendes, Chairman~~
Brian Pacheco, Chairman of the Board of Supervisors of the County of Fresno
Board of Supervisors
County of Fresno
2281 Tulare Street
Fresno, CA 93721

Date: 6-29-22



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

ATTEST:

BERNICE E. SEIDEL
Clerk of the Board of Supervisors
County of Fresno, State of California

By Nyoni Gomez
Deputy

Exhibit A Scope of Work

1. Service Overview

The Grantee will implement public health activities to monitor, investigate, and prevent Sexually Transmitted Diseases (STD) in collaboration with community-based organizations (CBOs)¹ within the local health jurisdiction. California Health and Safety Code (H&SC) Section 120551 requires that the department allocate funds to local health jurisdictions for innovative and impactful STD prevention and control activities, including, but not limited to the following: voluntary screening for STDs among inmates and wards of county adult and juvenile correctional facilities; technology, telehealth, and digital platforms and applications to enhance immediate access to screening, testing and treatment; state-of-the-art testing modalities that ensure swift and accurate screening for and diagnosis of STDs; and community-based testing and disease investigation. Local health jurisdictions should use these funds to enhance activities already provided for STD prevention and control, and should not replace existing activities.

H&SC Section 120511 also requires that no less than 50 percent of the funds allocated to the LHJs shall be provided to one or more CBOs for purposes consistent with this section, provided that there are CBOs in the jurisdiction that provide these activities and demonstrate the ability to identify priority target populations, satisfactorily describe outreach protocols and include/describe community resources for prevention and control activities. If the Contractor determines that no CBOs existing within the local health jurisdiction meet the criteria specified in H&SC Section 120511, then the Contractor shall submit written documentation demonstrating this fact to CDPH, which CDPH will review on a case-by-case basis.

California Department of Public Health (CDPH) STD surveillance data indicate that over the past five years, there were continued increases in infectious syphilis, congenital syphilis, gonorrhea, and chlamydia trachomatis infection across the state. The increases in syphilis among women, including pregnant women, and the devastating impact of congenital syphilis is of particular concern.

Key strategic targets for STD prevention and control are: enhancement of surveillance and case follow up for syphilis cases; testing, treatment, partner services, and referrals to services for vulnerable and underserved clients at high risk for STD; and implementation of community-based services through partnerships between public health and CBOs.

2. Service Location

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

3. Service Hours

The services shall be primarily provided Monday through Friday, from 8:00 a.m. to 5:00 p.m. and include evenings, weekends, and holidays as needed.

¹ A CBO is defined as a private entity that is a nonprofit corporation [Int. Rev Code Section 501(c)] operating at the local level with extensive experience serving persons living with or at risk for STDs. CBOs may include community health centers, syringe service programs, and non-profit drug treatment programs.

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4. Services to be Performed: Collaboration with CBOs to implement core STD prevention and control

Part I: Supplement to Core STD Public Health Services – Surveillance and Disease Intervention

LHJs are required to participate in all required activities (A through D), as well as at least one of the optional activities listed (E or F). Place a checkmark in the box for the optional activity you plan to participate in and complete the SOW Narrative section. All program activities, including innovative projects, should support the outcome measures of increased screening, treatment and linkage to care.

Please complete the SOW Narrative section indicating whether the LHJ or a subcontracted CBO will complete activities E or F in this section.

| Activities | Performance Indicators/Deliverables | Timeline |
|---|---|----------------------|
| A. Assure completeness and accuracy of key data variables through review of laboratory and provider reports, local surveillance system documentation (e.g., CalREDIE), and public health follow-up of early syphilis cases. | <ul style="list-style-type: none"> • Percent of female syphilis cases (all stages) with complete data for the following: <ul style="list-style-type: none"> ○ Pregnancy status (females ages 12-44) ○ Estimated Date of Delivery (EDD), if pregnant ○ Treatment date, stage-appropriate medication and dosage ○ HIV status • Percent of neonates exposed to syphilis with documented birth outcome and appropriate classification on the Congenital Syphilis Case Report Form. • Percent of male primary and secondary syphilis cases with complete data for the following: treatment date, stage-appropriate medication/dosage, HIV status and gender of sex partners. | 7/1/2019 – 6/30/2024 |
| B. Ensure all staff with access to STD data complete the CDPH required confidentiality and data security training and maintain on file the associated confidentiality agreements. | <ul style="list-style-type: none"> • Confidentiality and data security training agreements are maintained in the LHJ. | 7/1/2019 – 6/30/2024 |

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| Activities | Performance Indicators/Deliverables | Timeline |
|--|---|----------------------|
| C. Establish a local protocol for conducting case follow up on newly reported cases of syphilis, including reports on neonates, women of childbearing age, and early syphilis among men. | <ul style="list-style-type: none"> • Syphilis case follow-up protocol submitted to CDPH within 90 days of award. | 7/1/2019 – 6/30/2020 |
| D. Ensure timely investigation of all reported reactive serologic tests for syphilis according to local protocol and CDPH recommendations. | <ul style="list-style-type: none"> • Percent of neonates exposed to syphilis with appropriate infant medical evaluation and treatment per CDC recommendations. • Percent of early syphilis cases among prioritized population (pregnant women, men who have sex with women, MSM) with at least one partner treated within 30 days before or after index client specimen collection. | 7/1/2019 – 6/30/2024 |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input checked="" type="checkbox"/> E. Use technology, telehealth, and digital platforms and applications to enhance immediate access to partner notification and treatment.</p> | <ul style="list-style-type: none"> • Number of syphilis cases for which digital platforms are used for partner notification. • Number and percent of partners notified of exposure to STD. | 7/1/2020 – 6/30/2024 |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> F. Additional innovative and impactful activity you plan to undertake. Complete the SOW Narrative section, ensuring all program activities, including innovative projects, support the outcome measures of increased screening, treatment and linkage to care. (Please describe below.)</p> | Please propose indicators, deliverables and outcomes of success. | 7/1/2019 – 6/30/2024 |

Exhibit A
 Scope of Work

| Activities | Performance Indicators/Deliverables | Timeline |
|--|---|-----------------------------|
| <p>Optional:</p> <p><input type="checkbox"/> G. Place a checkmark in the box if Grantee plans to subcontract any activities from Part I.</p> <p>SOW Narrative: Specify whether the LHJ or a subcontracted CBO will complete the activities and deliverables listed above under Part I Activities E or F by placing a checkmark in the appropriate box under each activity. Describe the approach that will be used to complete the activities selected for this objective, including the approximate beginning and ending month and year for each major activity.</p> <p>Provide the name of the subcontractor if known; otherwise indicate “TBD” for the name of the subcontractor.</p> | | |
| <p>E – Use technology, telehealth, and digital platforms and applications. (OPTIONAL)</p> <p><input type="checkbox"/> Activity will not be conducted <input checked="" type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Determine and implement a digital platform to increase access to telehealth treatment and partner notification.</p> <p>Name of subcontractor, if applicable:</p> | <p>7/1/2020 – 6/30/2024</p> |
| <p>F – Additional innovative and impactful activity (OPTIONAL)</p> <p><input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Name of subcontractor, if applicable:</p> | |

Part II: STD testing, treatment, and referral to other services among vulnerable and underserved clients at high risk for STD

LHJs are required to participate in all required activities (I through K), as well as at least one of the optional activities listed (A through H). Place a checkmark in the box for the optional activity you plan to participate in and complete the SOW Narrative section. All program activities, including innovative projects, should support the outcome measures of increased screening, treatment and linkage to care.

Please complete the SOW Narrative section indicating whether the LHJ or a subcontracted CBO will complete the activities in this section.

Exhibit A
 Scope of Work

| Activities | Performance Indicators/Deliverables | Timeline |
|---|--|-----------------------------|
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity</p> <p><input type="checkbox"/> A. Conduct or ensure the provision of routine, universal testing for gonorrhea and chlamydia among people who are incarcerated in county juvenile correctional facilities, as close to booking as possible.</p> | <p>Per juvenile correctional facility:</p> <ul style="list-style-type: none"> • Number of people booked. • Number who were tested for STDs. • Number and percent of people who tested that were diagnosed with chlamydia, gonorrhea, or syphilis, by STD (Target: at least 2% for any STD). • Number and percent of people who tested positive that received CDC recommended treatment, by STD (Target: at least 90%). • Number of EPT doses dispensed. | <p>7/1/2019 – 6/30/2024</p> |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity</p> <p><input type="checkbox"/> B. Conduct or ensure the provision of routine, universal testing for syphilis among people who are incarcerated in county jails with a positivity of 2% or more, as close to booking as possible.</p> | <p>Per county jail facility:</p> <ul style="list-style-type: none"> • Number of people booked. • Number and percent of people who received STD testing (Target: 80%). • Number and percent of people who tested that were diagnosed with chlamydia, gonorrhea, or syphilis, by STD (Target: at least 2% for any STD). • Number and percent of people who tested positive that received CDC recommended treatment, by STD (Target: at least 90%). • Number of EPT doses dispensed. | <p>7/1/2019 – 6/30/2024</p> |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> C. Use technology, telehealth, and digital platforms and applications to enhance immediate access to screening, testing, and treatment.</p> | <p>Description of digital platforms submitted to CDPH.</p> <ul style="list-style-type: none"> • Number of people receiving STD tests via platform. • Number and percent of people diagnosed with chlamydia, gonorrhea, or syphilis, by STD (Target: at least 2% for any STD). • Number and percent of people with positive tests that received CDC- | <p>7/1/2019 – 6/30/2024</p> |

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| Activities | Performance Indicators/Deliverables | Timeline |
|---|--|-----------------------------|
| | <p>recommended treatment, by STD. (Target: at least 90%).</p> <ul style="list-style-type: none"> • Number of EPT doses dispensed | |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> D. Use state-of-the-art testing modalities that ensure swift and accurate screening for, and diagnosis of, STDs.</p> | <p>Description of testing modalities used submitted to CDPH.</p> <ul style="list-style-type: none"> • Number of people receiving STD testing via modality • Number and percent of people diagnosed with chlamydia, gonorrhea, or syphilis, by STD (Target: at least 2% for any STD). • Number and percent of people with positive tests that received CDC-recommended treatment, by STD. (Target: at least 90%). • Number of EPT doses dispensed. | <p>7/1/2019 – 6/30/2024</p> |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input checked="" type="checkbox"/> E. Conduct community-based, data-driven testing among populations at risk for chlamydia, gonorrhea, and/or syphilis. Priority populations include people who are African American/Black; lesbian, gay, bisexual, or transgender (LGBT); and people who can become pregnant who are at risk of syphilis.</p> | <p>Description of community-based testing submitted to CDPH, including populations prioritized for screening, STD tests offered, and anatomic sites being tested.</p> <ul style="list-style-type: none"> • Number of people receiving community-based testing for STDs. • Number and percent of people diagnosed with chlamydia, gonorrhea, or syphilis, by STD (Target: at least 2% for any STD). • Number and percent of people with positive tests that received CDC-recommended treatment, by STD (Target: at least 90%). • Number of EPT doses dispensed. | <p>7/1/2019 – 6/30/2024</p> |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> F. Conduct STD screening among people who are homeless or unstably housed, including referrals/linkage to family planning, preconception, or prenatal care for pregnant people experiencing homelessness.</p> | <p>Description of outreach and testing submitted to CDPH.</p> <ul style="list-style-type: none"> • Number of people receiving STD testing. • Number and percent of people diagnosed with chlamydia, gonorrhea, or syphilis, by STD (Target: at least 2%). • Number and percent of people diagnosed with STDs that received | <p>7/1/2019 – 6/30/2024</p> |

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 Scope of Work

| Activities | Performance Indicators/Deliverables | Timeline |
|---|---|----------------------|
| | treatment, by STD. (Target: at least 90%). <ul style="list-style-type: none"> Number of EPT doses dispensed. | |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> G. Provide comprehensive case management for pregnant people diagnosed with syphilis, including referrals to prenatal care, housing, drug treatment, syringe exchange programs, transportation, and/or social services.</p> | <ul style="list-style-type: none"> Description of case management submitted to CDPH. Number of pregnant people diagnosed with syphilis provided referrals. | 7/1/2019 – 6/30/2024 |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> H. Additional innovative and impactful activity you plan to undertake, and complete the SOW Narrative section. All program activities, including innovative projects, should support the outcome measures of increased screening, treatment and linkage to care. (Please describe below in SOW narrative.)</p> | Please propose indicators, deliverables and outcomes of success. | 7/1/2019 – 6/30/2024 |
| <p>I. Assess HIV status of people tested for STDs and link to HIV testing, HIV PrEP or HIV care, as appropriate.</p> | Description of process for integrating HIV prevention into STD testing and outreach activities submitted to CDPH. | 7/1/2019 – 6/30/2024 |

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| Activities | Performance Indicators/Deliverables | Timeline |
|---|--|----------------------|
| J. Facilitate HIV prevention among STD cases. | Indicators measured via CalREDIE: <ul style="list-style-type: none"> • Number and percent of early syphilis cases newly diagnosed with HIV, among those not HIV-positive. • Number and percent of early syphilis cases/partners with new HIV diagnosis that were linked to HIV care within 30 days of HIV test. • Number and percent of HIV-negative early syphilis cases/partners, referred to PrEP. | 7/1/2019 – 6/30/2024 |
| <p>Optional:</p> <p><input checked="" type="checkbox"/> K. Place a checkmark in the box if Grantee plans to subcontract any activities from Part II.</p> <p>SOW Narrative: Specify whether the LHJ or a subcontracted CBO will complete the activities and deliverables listed above under Part II by placing a checkmark in the appropriate box under each activity. Describe the approach that will be used to complete the activities selected for this objective, including the approximate beginning and ending month and year for each major activity.</p> <p>Provide the name of the subcontractor if known; otherwise indicate “TBD” for the name of the subcontractor.</p> | | |
| A – Provision of routine, universal testing for gonorrhea and chlamydia for incarcerated youth (OPTIONAL) <input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity | Name of subcontractor, if applicable: | |
| B – Provision of routine, universal testing for syphilis for incarcerated people (OPTIONAL) <input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity | Name of subcontractor, if applicable: | |

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| Activities | Performance Indicators/Deliverables | Timeline |
|--|--|-----------------------------|
| <p>C – Use technology, telehealth, and digital platforms and applications (OPTIONAL)</p> <p><input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Name of subcontractor, if applicable:</p> | |
| <p>D – Use state-of-the-art testing modalities (OPTIONAL)</p> <p><input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Name of subcontractor, if applicable:</p> | |
| <p>E – Community-based, data-driven testing among populations at risk for chlamydia, gonorrhea, and/or syphilis (OPTIONAL)</p> <p><input type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input checked="" type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity: Partner with CBO to increase STD screenings among vulnerable populations via mobile units or increased clinic operations.</p> <p>Name of subcontractor, if applicable:</p> <p>TBD through RFP in Summer 2020</p> | <p>7/1/2020 – 6/30/2024</p> |
| <p>F – STD screening among homeless or unstably housed people (OPTIONAL)</p> <p><input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Name of subcontractor, if applicable:</p> | |
| <p>G – Comprehensive case management for pregnant people diagnosed with syphilis (OPTIONAL)</p> <p><input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Name of subcontractor, if applicable:</p> | |

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| Activities | Performance Indicators/Deliverables | Timeline |
|---|---|----------------------|
| H – Additional innovative and impactful activity (OPTIONAL) <input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity | Brief description of activity: Name of subcontractor, if applicable: | |
| I - HIV status of people tested for STDs and linkage to HIV testing, HIV PrEP or HIV care (REQUIRED) <input checked="" type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity | Name of subcontractor, if applicable: | 7/1/2019 – 6/30/2024 |
| J – Facilitate HIV prevention among STD cases (REQUIRED) <input checked="" type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity | Name of subcontractor, if applicable: | 7/1/2019 – 6/30/2024 |

Part III: Partnerships: Increase community-level capacity to deliver STD screening, testing, treatment and linkages to services for vulnerable and underserved clients at high risk for STD

LHJs are required to participate in all required activities (A and B). Place a checkmark in the box for the optional activity (C) to propose an innovative evidence-based practice. All program activities, including innovative projects, should support the outcome measures of increased screening, treatment and linkage to care. Please complete the SOW Narrative section indicating whether the LHJ or a subcontracted CBO will complete the activities in this section.

| Activities | Performance Indicators/Deliverables | Timeline |
|---|--|----------------------|
| A. Develop and maintain local (and, where relevant, regional) partnerships with stakeholders such as public and private health plans, federally qualified health centers, rural health clinics, Indian health organizations, hospitals, labor and | Summary of barriers identified and strategies developed and implemented through new and existing partnerships, coalitions, task forces, and/or work groups and outcome of those partnerships in improving STD prevention, screening, | 7/1/2019 – 6/30/2024 |

Exhibit A
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| Activities | Performance Indicators/Deliverables | Timeline |
|---|--|-----------------------------|
| <p>delivery, prenatal, and family planning settings, laboratories, pharmacies, substance use and behavioral health treatment programs, syringe exchange programs, housing services programs, HIV/HCV programs, people from populations at risk of STD, correctional partners, and other partners to assess barriers and develop and implement strategies for improving the accessibility of STD prevention, screening, diagnosis, navigation, linkages to care, and treatment for vulnerable and underserved individuals.</p> | <p>diagnosis, linkages to care, and treatment for vulnerable and underserved individuals.</p> | |
| <p>B. Collaborate with programs providing services to people who are pregnant (e.g., Maternal/Child Health Programs, prenatal and labor and delivery providers, outreach programs) to increase access to and engagement with prenatal care for pregnant people at risk for syphilis (e.g., those experiencing homelessness, using drugs, or who are incarcerated).</p> | <p>Summary of barriers identified and strategies developed and implemented to increase engagement with prenatal care for pregnant people at risk for syphilis.</p> | <p>7/1/2019 – 6/30/2024</p> |
| <p>OPTIONAL ACTIVITY: Place a checkmark in the box only if Grantee plans to participate in this activity.</p> <p><input type="checkbox"/> C. Additional innovative and impactful activity you plan to undertake, and complete the SOW Narrative section. All program activities, including innovative projects, should support the outcome measures of increased screening, treatment and linkage to care. (Please describe below.)</p> | <p>Please propose indicators, deliverables and outcomes of success.</p> | <p>7/1/2019 – 6/30/2024</p> |

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| Activities | Performance Indicators/Deliverables | Timeline |
|--|--|-----------------------------|
| <p>Optional:</p> <p><input type="checkbox"/> D Place a checkmark in the box if Grantee plans to subcontract for any activities in Part III.</p> <p>SOW Narrative: Specify whether the LHJ or a subcontracted CBO will complete the activities and deliverables listed above under Part II by placing a checkmark in the appropriate box for each activity. Describe the approach that will be used to complete the activities selected for this objective, including the approximate beginning and ending month and year for each major activity.</p> <p>Provide the name of the subcontractor if known; otherwise indicate “TBD” for the name of the subcontractor.</p> | | |
| <p>A – Local/regional partnerships with stakeholders (REQUIRED)</p> <p><input checked="" type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> | <p>7/1/2019 – 6/30/2024</p> |
| <p>B – Collaborate with programs providing services to people who are pregnant (REQUIRED)</p> <p><input checked="" type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> | <p>7/1/2019 – 6/30/2024</p> |
| <p>C – Additional innovative and impactful activity (OPTIONAL)</p> <p><input checked="" type="checkbox"/> Activity will not be conducted <input type="checkbox"/> LHJ will conduct this activity <input type="checkbox"/> CBO will conduct this activity</p> | <p>Brief description of activity:</p> <p>Name of subcontractor, if applicable:</p> | |

Part IV: Fund Community-Based Organizations for STD prevention activities

LHJs are required to subcontract out no less than 50 percent of the funds to one or more CBOs, provided that there are CBOs in the jurisdiction that provide these activities and demonstrate the ability to identify priority target populations, satisfactorily describe outreach protocols and include/describe community resources for prevention and control activities. If the Grantee determines that no CBOs existing within the local health jurisdiction meet the criteria specified in H&SC Section 120511, then the Grantee shall submit written documentation demonstrating this fact to CDPH, which CDPH will review on a case-by-case basis.

Exhibit A
 Scope of Work

| Activities | Performance Indicators/Deliverables | Timeline |
|--|--|----------------------|
| A. Develop a mechanism for selecting and funding CBO(s) with capacity to reach priority target populations, satisfactorily describe outreach protocols, and include community resources for prevention and control activities. | <ul style="list-style-type: none"> Selection method submitted to CDPH in writing. | 7/1/2019 – 6/30/2020 |
| B. Develop and implement a program evaluation plan to monitor CBO performance. Collect data on required metrics, monitor performance, and provide quality assurance and quality improvement assistance where needed. | <ul style="list-style-type: none"> Program evaluation plan developed and submitted to CDPH. LHJs must demonstrate that the CBO has (1) identified and reached priority target populations, (2) satisfactorily described its outreach protocols, and (3) included community resources for prevention and control activities. | 7/1/2019 – 6/30/2020 |

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Scope of Work

5. Summary of Required Reports and Data

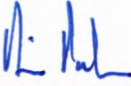
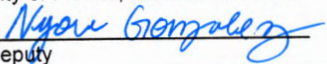
| Frequency | Timeframe | Deadline | Activities | Report Recipient |
|---|--|--|-------------------|---|
| Semi-Annual (Narrative summary reports) | Fiscal Year 1 07/01/19 – 12/31/19 01/01/20 – 06/30/20 | Fiscal Year 1 07/31/20 | Part I - IV | STDLHJContracts@ cdph.ca.gov |
| | Fiscal Year 2 07/01/20 – 12/31/20 01/01/21 – 06/30/21 | Fiscal Year 2 01/31/21 07/31/21 | | |
| | Fiscal Year 3 07/01/21 – 12/31/21 01/01/22 – 06/30/22 | Fiscal Year 3 12/31/21 07/31/22 | | |
| | Fiscal Year 4 07/01/22 – 12/31/22 01/01/23 – 06/30/23 | Fiscal Year 4 12/31/22 07/31/23 | | |
| | Fiscal Year 5 07/01/23 – 12/31/23 01/01/24 – 06/30/24 | Fiscal Year 5 12/31/23 6/30/24 | | |
| Quarterly (Aggregate client services data reports) | Year 1 03/01/20 – 06/30/20 | Year 1 07/31/20 | Part II | Secure file transfer protocol; CalREDIE |
| | Year 2 07/01/20 – 09/30/20 10/01/20 – 12/31/20 01/01/21 – 03/31/21 04/01/21 – 06/30/21 | Year 2 10/31/20 01/31/21 04/30/21 07/31/21 | | |
| | Year 3 07/01/21 – 09/30/21 10/01/21 – 12/31/21 01/01/22 – 03/31/22 04/01/22 – 06/30/22 | Year 3 10/31/21 12/31/21 04/15/22 07/31/22 | | |
| | Year 4 07/01/22 – 09/30/22 10/01/22 – 12/31/22 01/01/23 – 03/31/23 04/01/23 – 06/30/23 | Year 4 10/31/22 12/31/22 04/15/23 07/31/23 | | |
| | Year 5 07/01/23 – 09/30/23 10/01/23 – 12/31/23 01/01/24 – 03/31/24 04/01/24 – 06/30/24 | Year 5 10/31/23 12/31/23 04/15/24 06/30/24 | | |

Contractor Certification Clauses

CCC 04/2017

CERTIFICATION

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY that I am duly authorized to legally bind the prospective Contractor to the clause(s) listed below. This certification is made under the laws of the State of California.

| | | |
|---|--|-------------------|
| Contractor/Bidder Firm Name (Printed) | | Federal ID Number |
| County of Fresno | | |
| By (Authorized Signature) | ATTEST: | |
|  | BERNICE E. SEIDEL Clerk of the Board of Supervisors County of Fresno, State of California | |
| Printed Name and Title of Person Signing | By  Deputy | |
| Brian Pacheco, Chairman of the Board of Supervisors of the County of Fresno | | |
| Date Executed | Executed in the County of | |
| 6/21/22 | Fresno | |

CONTRACTOR CERTIFICATION CLAUSES

1. **STATEMENT OF COMPLIANCE:** Contractor has, unless exempted, complied with the nondiscrimination program requirements. (Gov. Code §12990 (a-f) and CCR, Title 2, Section 11102) (Not applicable to public entities.)

2. **DRUG-FREE WORKPLACE REQUIREMENTS:** Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:

a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.

b. Establish a Drug-Free Awareness Program to inform employees about:

1) the dangers of drug abuse in the workplace;

2) the person's or organization's policy of maintaining a drug-free workplace;

3) any available counseling, rehabilitation and employee assistance programs; and,

4) penalties that may be imposed upon employees for drug abuse violations.

c. Every employee who works on the proposed Agreement will:

1) receive a copy of the company's drug-free workplace policy statement; and,

2) agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: the Contractor has made false certification, or violated the certification by failing to carry out the requirements as noted above. (Gov. Code §8350 et seq.)

3. NATIONAL LABOR RELATIONS BOARD CERTIFICATION: Contractor certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Contractor within the immediately preceding two-year period because of Contractor's failure to comply with an order of a Federal court, which orders Contractor to comply with an order of the National Labor Relations Board. (Pub. Contract Code §10296) (Not applicable to public entities.)

4. CONTRACTS FOR LEGAL SERVICES \$50,000 OR MORE- PRO BONO REQUIREMENT: Contractor hereby certifies that Contractor will comply with the requirements of Section 6072 of the Business and Professions Code, effective January 1, 2003.

Contractor agrees to make a good faith effort to provide a minimum number of hours of pro bono legal services during each year of the contract equal to the lessor of 30 multiplied by the number of full time attorneys in the firm's offices in the State, with the number of hours prorated on an actual day basis for any contract period of less than a full year or 10% of its contract with the State.

Failure to make a good faith effort may be cause for non-renewal of a state contract for legal services, and may be taken into account when determining the award of future contracts with the State for legal services.

5. EXPATRIATE CORPORATIONS: Contractor hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of Public Contract Code Section 10286 and 10286.1, and is eligible to contract with the State of California.

6. SWEATFREE CODE OF CONDUCT:

a. All Contractors contracting for the procurement or laundering of apparel, garments or corresponding accessories, or the procurement of equipment, materials, or supplies, other than procurement related to a public works contract, declare under penalty of perjury that no apparel, garments or corresponding accessories, equipment, materials, or supplies furnished to the state pursuant to the contract have been laundered or produced in whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California Department of Industrial Relations website located at www.dir.ca.gov, and Public Contract Code Section 6108.

b. The contractor agrees to cooperate fully in providing reasonable access to the contractor's records, documents, agents or employees, or premises if reasonably

required by authorized officials of the contracting agency, the Department of Industrial Relations, or the Department of Justice to determine the contractor's compliance with the requirements under paragraph (a).

7. DOMESTIC PARTNERS: For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.3.

8. GENDER IDENTITY: For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.35.

DOING BUSINESS WITH THE STATE OF CALIFORNIA

The following laws apply to persons or entities doing business with the State of California.

1. CONFLICT OF INTEREST: Contractor needs to be aware of the following provisions regarding current or former state employees. If Contractor has any questions on the status of any person rendering services or involved with the Agreement, the awarding agency must be contacted immediately for clarification.

Current State Employees (Pub. Contract Code §10410):

1). No officer or employee shall engage in any employment, activity or enterprise from which the officer or employee receives compensation or has a financial interest and which is sponsored or funded by any state agency, unless the employment, activity or enterprise is required as a condition of regular state employment.

2). No officer or employee shall contract on his or her own behalf as an independent contractor with any state agency to provide goods or services.

Former State Employees (Pub. Contract Code §10411):

1). For the two-year period from the date he or she left state employment, no former state officer or employee may enter into a contract in which he or she engaged in any of the negotiations, transactions, planning, arrangements or any part of the decision-making process relevant to the contract while employed in any capacity by any state agency.

2). For the twelve-month period from the date he or she left state employment, no former state officer or employee may enter into a contract with any state agency if he or she was employed by that state agency in a policy-making position in the same general subject area as the proposed contract within the 12-month period prior to his or her leaving state service.

If Contractor violates any provisions of above paragraphs, such action by Contractor shall render this Agreement void. (Pub. Contract Code §10420)

Members of boards and commissions are exempt from this section if they do not receive payment other than payment of each meeting of the board or commission, payment for preparatory time and payment for per diem. (Pub. Contract Code §10430 (e))

2. LABOR CODE/WORKERS' COMPENSATION: Contractor needs to be aware of the provisions which require every employer to be insured against liability for Worker's Compensation or to undertake self-insurance in accordance with the provisions, and

Contractor affirms to comply with such provisions before commencing the performance of the work of this Agreement. (Labor Code Section 3700)

3. AMERICANS WITH DISABILITIES ACT: Contractor assures the State that it complies with the Americans with Disabilities Act (ADA) of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA. (42 U.S.C. 12101 et seq.)

4. CONTRACTOR NAME CHANGE: An amendment is required to change the Contractor's name as listed on this Agreement. Upon receipt of legal documentation of the name change the State will process the amendment. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment.

5. CORPORATE QUALIFICATIONS TO DO BUSINESS IN CALIFORNIA:

a. When agreements are to be performed in the state by corporations, the contracting agencies will be verifying that the contractor is currently qualified to do business in California in order to ensure that all obligations due to the state are fulfilled.

b. "Doing business" is defined in R&TC Section 23101 as actively engaging in any transaction for the purpose of financial or pecuniary gain or profit. Although there are some statutory exceptions to taxation, rarely will a corporate contractor performing within the state not be subject to the franchise tax.

c. Both domestic and foreign corporations (those incorporated outside of California) must be in good standing in order to be qualified to do business in California. Agencies will determine whether a corporation is in good standing by calling the Office of the Secretary of State.

6. RESOLUTION: A county, city, district, or other local public body must provide the State with a copy of a resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement, authorizing execution of the agreement.

7. AIR OR WATER POLLUTION VIOLATION: Under the State laws, the Contractor shall not be: (1) in violation of any order or resolution not subject to review promulgated by the State Air Resources Board or an air pollution control district; (2) subject to cease and desist order not subject to review issued pursuant to Section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.

8. PAYEE DATA RECORD FORM STD. 204: This form must be completed by all contractors that are not another state agency or other governmental entity.

**Amendment A-01 to Agreement Between the County of Fresno and
California Department of Public Health**

Name: Sexually Transmitted Disease (STD) Program Management and Collaboration
Project Grant Amendment to Agreement (No. 19-10960, A-01)

Fund/Subclass: 0001/10000
Organization #: 56201661
Revenue Account #: 3530