

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
PHD/CHPEP	San Francisco Public Health Foundation	\$ 9,989,672	\$ 19,622,270	\$ 9,632,598	4/1/2019 - 6/30/2022 (3.25 Years)	4/1/2019 - 6/30/2026 (7.25 Years)	\$ 2,169,434	\$ 2,439,360	\$ 269,926	12.44%	Amendment
<p>Purpose: The requested action is the approval of a contract amendment with the San Francisco Public Health Foundation for the continued management of multiple subcontractors who have been selected to provide services to decrease chronic health issues caused by sugary drink consumption, as a result of funding from the San Francisco Sugary Drink Distributor Tax. The Total Contract Amount with Contingency requested is \$19,622,270, with a new term to reflect from 04/01/2019 through 06/30/2026, for a total of 7.25 years. The San Francisco Public Health Foundation will receive a 10% administrative fee of \$221,760 in FY21/22, with the balance of the funding going towards programmatic costs, which includes direct subcontracting awards, media consultation/campaigns, San Francisco Unified School District (SFUSD) CBO grants, and community engagement activities. The Health Commission previously approved the contract on March 3rd, 2020. Originally, this contract was to be presented to the Board of Supervisors for FY20/21, but was delayed due to COVID. It is being presented to Health Commission at this time in order to present it to the Board of Supervisors with the updated funding levels which include \$300,000 Work Order Funds from the San Francisco Unified School District through the end of the term of the contract. The proposed amendment exercises the options authorized under RFQ 36-2017. Funding will continue to support the Program Administration modality.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$19,622,270, or an increase of \$9,632,598 due to the following changes: (1) an additional amount of \$269,926 for FY21/22; (2) an increased amount of \$300,000 annually for FY22/23 thru FY25/26, or \$1,200,000; (3) an additional amount of \$1,578,500 for FY22/23; (4) an additional amount of \$1,842,500 annually for FY23/24 thru FY25/26, or \$5,527,500; and (5) an additional amount of \$1,056,672 to the 12% Contingency value applied for FY21/22 thru FY25/26. Previous Contingency Amount was \$232,771 and the current Contingency Amount is \$1,289,443.</p> <p>The increased annual amount of \$269,926 reflects additional one-time SDDT funds for FY21/22.</p>											
Target Population:	The target population of the subcontractors that will be receiving SDDT Community-Based grants/funds are those who work with communities that are impacted by health disparities and adverse effects related to high rates of sugary drink consumption, including but not limited to: Black/African-Americans, Asians and Pacific Islanders, Latinx, Native Americans and American Indians, youth and transitional-age youth (particularly adolescent males), pregnant people and others as identified.										
Service Description:	<p>The goal of the San Francisco Sugary Drink Distributor Tax (SDDT) is to prevent diet-sensitive chronic disease in San Francisco by decreasing sugary drink consumption, increasing access to health food and tap water, increasing physical activity, and implementing media campaigns. Therefore, the San Francisco Public Health Foundation will provide program administrative services for SDDT by funding and supporting subcontractor and consultants to implement the work that is related to the goals of the SDDT. In Year 1, the San Francisco Public Health Foundation conducted an RFP (Request for Proposal) that resulted in the selection of various subcontractors and consultants. The following are the services that are currently being provided through this contract:</p> <p>Subcontract Management of Multiple Subcontractors: Management of awardees selected from the RFP process, ensuring adherence to City and County policy and procedures.</p> <p>Program Administration of Multiple Subcontractors: Management of awarded funds ensuring that agencies have Generally Accepted Accounting Principles (GAAP) and preparation and submission of Semi-Annual Summary Reports.</p> <p>Capacity Building/Program Support of Multiple Subcontractors: Management of quality of service, employment management principles and practices, reporting and invoicing, and ensuring that timeline and goals negotiated are met.</p> <p>Coordination and Program Management Services: Includes administration and general infrastructure support (indirect cost).</p>										
UOS (annual):	Subcontract Management of 15 subcontractors: \$739,200/180= \$4,106.66 (15 subcontractors x 12 months = 180) Program Administration of 15 subcontractors: \$739,200/180= \$4,106.66 (15 subcontractors x 12 months = 180) Capacity Building/Program Support of 15 subcontractors: \$739,200/180= \$4,106.66 (15 subcontractors x 12 months = 180) Coordination and Program Management Services for SDDT: \$221,760/12 months=\$18,480										
NOC (annual):	N/A										
Funding Source(s):	General Fund Sugary Drink Distribution Tax (SDDT) CBO Awards Funds (Special Revenue) and Work Order Funds from San Francisco Unified School District (SFUSD)										
Selection Type:	RFQ 36-2017 Department of Public Health As Needed Project Based Support Services										
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)										
Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
PHD/CHPEP	San Francisco Public Health Foundation	\$9,359,305	\$20,027,567	\$10,668,262	1/1/2020 - 12/31/2024 (5 Years)	1/1/2020 - 12/31/2024 (5 Years)	\$665,383	\$11,538,794	\$ 10,873,411	94.23%	Amendment

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
<p>Purpose: The requested action is the approval of a contract amendment with the San Francisco Public Health Foundation for the increased management of subcontractors and consultants due to continued COVID 19 community outreach services. The Total Contract Amount with Contingency requested is \$20,027,567. The term of 01/01/2020 through 12/31/2024, 5 years, will remain the same. The San Francisco Public Health Foundation will receive an annual administrative fee of 10% in the amount of \$103,629 for non-COVID funds for FY21/22 and will receive an annual administrative fee of 5% in the amount of \$495,171 for COVID Funds for FY21/22. The balance of the remaining funding will go towards programmatic costs, which includes direct subcontracting and consultant awards as well as community engagement activities. The additional funds will be awarded thru a solicitation process to subcontractors and consultants who can address the current needs of the pandemic. The previous contract was approved by Health Commission on October 6th, 2020. The proposed agreement is authorized under RFQ 36-2017. Funding will continue to support the Program Administration modality.</p>											
<p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$20,027,567, or an increase of \$10,668,262, due to the following changes: (1) an additional amount of \$9,430,050 COVID/FEMA funds for FY21/22; (2) an additional amount of \$779,763 COVID Outreach funds for FY21/22; (3) an additional amount of \$175,000 Work Order funds for FY21/22; (4) an additional amount of \$195,000 Hep C grant funds for FY21/22; (5) an additional amount of \$100,000 General Fund for FY21/22; (6) an additional amount of \$4,667 for CODB (Cost of Doing Business) for FY21/22; (6) a decrease in the amount of \$565,532 for unspent funds in FY20/21; and (6) an increase of \$549,314 to the 12% Contingency Value for FY21/22 thru FY24/25 (funding ends 12/31/24). The Previous Contingency Amount was \$995,033 and the current Contingency Amount is \$1,544,347.</p>											
<p>Target Population:</p>	<p>The existing subcontractor and consultant vendors previously selected will continue to provide services that align with the Community Health Equity & Prevention's community-based primary prevention project goals to prevent illness and premature death and to promote the health of San Francisco's residents. These services include, but are not limited to, senior fall preventions and minor home repairs, pedestrian and traffic safety initiatives, healthy eating/active living, violence prevention initiatives, coordination of End Hep C SF Initiative, and other community capacity building and health promotion work.</p> <p>The target population of the subcontractors that will be receiving the Community-Based grants/funds are those who work with vulnerable San Francisco residents and communities, including but not limited to: African-Americans, Asians and Pacific Islanders, Latinx, Native Americans and American Indians, youth and transitional-age youth, immigrants, as well as seniors, and others as identified.</p> <p>The additional COVID Funds will continue to funds existing subcontractors and vendors selected based on their ability to meet the needs of the current pandemic and will continue to collaborate with the Department of Public Health and the COVID19 Command Center. Any new and/or additional subcontractors and vendors will be selected based on the continued pandemics needs. As needed, the San Francisco Public Health Foundation will develop and manage the Request for Proposals (RFP) process, which has been the vehicle used to continue to provide a funding process for community organizations that will provide COVID19 outreach, testing support, and wrap-around support for COVID19 positive people. Continued funding will also support the training of community based case investigation and contact tracing.</p> <p>The target population of the subcontractors for COVID funding will be those San Francisco residents who are most vulnerable and susceptible to being affected by COVID19, specifically where someone has tested positive and is in known to be living in congregate and/or multi-generational settings, those that have been unable to limit outings, being over the age of 60, and having certain pre-existing health conditions. The target population wi+B17I also focus on frontline and essential workers, which are often people of color, working in low-paying jobs who are at risk for unemployment. Current data continues to show COVID-19 has disproportionately impacted communities of color in San Francisco, including Latino/a/x, Black African Americans, and Asian and Pacific Islanders. It is known that immigration status and resulting discrimination also increases people's vulnerability to COVID-19.</p>										

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
Service Description:	<p>The goal of the existing services are to provide community capacity building services that enable community groups to work with the San Francisco Department of Public Health and other city agencies to prevent illness and premature death as well as promote the health of the San Francisco residents. Therefore, the San Francisco Public Health Foundation will provide program administrative services by funding and supporting subcontractor and consultants to implement initiatives, such as the Hep C Initiative, and work related to the goals of these efforts. The following are the existing services that are being provided through this contract:</p> <p>Subcontract Management Services: Program development and evolution of at least 11 selected community engagement subcontractors and various minor consultants that support the project work and services outlined. This includes issuance and processing RFPs and RFQs for solicitation of funds, and providing capacity building support to subcontractors and consultants, including the Hep C Initiative.</p> <p>Program Administration Services: Ensuring compliance and adherence from Community-based Organizations to City and County policy and procedures; program administration and management of awarded funds ensuring that agencies have Generally Accepted Accounting Principles (GAAP); capacity building and program support management to effectively provide quality service, fair employment management principles and practices, accurate reporting and invoicing, and ensuring that timeline and goals negotiated are met; and the preparation and submission of quarterly summary reports of program administrative support services provided, including the Hep C Initiative.</p> <p>Coordination and Program Management Services: Includes administration and general infrastructure support (indirect costs).</p> <p>The goal of the additional services is to decrease the transmission and severity of COVID-19 in vulnerable communities that experience structural barriers to health, aligning our work with the San Francisco Department of Public Health and the COVID-19 Task Force. The following are the services that will be provided through the additional funds of this contract:</p> <p>Subcontract Management Services: Program development and selection process of community subcontractors that support the project work and services outlined. This includes issuance and processing of the RFPs for solicitation of funds, and providing capacity building support to subcontractors. There are currently 12 selected sub-contractors that have been working in outlined communities of need.</p> <p>Program Administration Services: Ensuring compliance and adherence from Community-based Organizations to City and County policy and procedures; program administration and management of awarded funds ensuring that agencies have Generally Accepted Accounting Principles (GAAP); capacity building and program support management to effectively provide quality service, fair employment management principles and practices, accurate reporting and invoicing, and ensuring that timeline and goals negotiated are met; and the preparation and submission of quarterly summary reports of program administrative support services provided.</p> <p>Coordination and Program Management Services: Includes administration and general infrastructure support (indirect costs).</p>										
UOS (annual)	<p>Subcontract Management Services and Program Administration for Community Health Engagement (and payment to subcontractors): \$563,684/132 (11 subcontractors x 12 months = 132)=\$4,270.33 Coordination and Program Administration Services for Community Health Engagement: \$56,365/12 months=\$4,697.08</p> <p>Program Administration for Hep C Initiative Hours: \$150,000/2,831 hours=\$52.98 Coordination and Program Administration Services for Hep C Initiative Months: \$7,273/12 months=\$606.08</p> <p>Coordination and Program Administration Service for Hep C Initiative Months: \$15,000/12 months=\$1,250.00</p> <p>Subcontract Management and Program Administration Services for Hep C Initiative (and payment to subcontractors - TBD): \$72,727/12 months=\$6,060.58</p> <p>Subcontract Management and Program Administration Services for Hep C Navigation Program (and payment to subcontractors): \$90,909/42 (3 subcontractors x 12 months and 1 subcontractor x 6 Months=42)=\$2,164.50 Coordination and Program Administration Services for Hep C Navigation Program Months: \$9,091/12 months = \$757.58</p> <p>Subcontract Management and Program Administration Services for Community Resource Hub (and payment to subcontractor): \$159,100/12 months=\$13,258.33 Coordination and Program Administration for Community Resource Hub: \$15,900/12months=\$1,325</p> <p>Subcontract Management and Program Administration Services for COVID 19 Community Outreach (and payment to subcontractors): \$8,981,000/120 (10 subcontracts x 12 months)=\$74,841,67 Coordination and Program Administration Services for COVID 19 Community Outreach: \$449,050/12 months= \$37,420.83</p> <p>Subcontract Management and Program Administration Services for COVID 19 Community Outreach (and payment to subcontractor - TBD): \$742,632/12 months=\$61,886 Coordination and Program Administration Services for COVID 19 Community Outreach: \$37,131/12 months=\$3,094.25</p> <p>Subcontract Management and Program Administration Services for COVID 19 Community Outreach-Dream Keeper's Initiative (and payment to subcontractors): \$179,941/24 (2 subcontractorsx12=24)=\$7,497.54 Coordination and Program Administration Services for COVID 19 Community Outreach-Dream Keeper's Initiative: \$8,990/12 months=\$749.17</p>										

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
NOC (annual):	N/A										
Funding Source(s):	General Fund, State, Work Order and Federal Grant CDC Funds, including COVID Funding										
Selection Type	RFQ 36-2017 Department of Public Health As Needed Project Based Support Services										
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)										

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
PHD-CHEP	Regents University of California Alliance Health Project	N/A	\$646,896	\$646,896	N/A	7/01/2021-6/30/2022	\$553,210	\$577,586	\$ 24,376	4.22%	Original (ongoing services)
<p>Purpose: The requested action is the approval of a new contract agreement with the Regents of the University of California, Alliance Health Project for a Total Contract Amount with Contingency of \$646,896. The term of this contract will be from 7/1/2021 through 6/30/2022, for a total of 1 year. While this is a new contract, it is for continued services pending completion of a Request for Proposal (RFP) that has been delayed due to COVID 19. This contract provides services for HIV Testing in the City and County of San Francisco for men who have sex with men (MSM), men who have sex with men and are intravenous drug users (MSM-IDU), and transgender females who have sex with men (TFSM), as well as African-American MSM and MSM-IDU. The new agreement exercises the Administrative Code Chapter 21.42 authority. Funding will continue to provide support under the HIV Testing modality.</p> <p>Reason for Funding Change: The Department is requesting the approval of a Total Contract Amount with Contingency of \$646,896, which include the following: (1) \$572,586 of General Fund or FY 21-22; (2) \$5,000 of one-time Federal Center for Disease Control and Prevention (CDC) funds for FY 21-22; (3) \$69,310 for the 12% Contingency value amount.</p> <p>Please Note: Included above is the previous annual funding amount of \$553,210 for FY20/21. The increase amount of \$24,376 is due to the annual Cost of Doing (CODB) in the amount of \$19,376 and the one time addition of the Federal CDC funds in the amount of \$5,000.</p>											
Target Population:	<p>The University of California San Francisco (UCSF) Alliance Health Project (AHP) serves all. This program's focus is on providing testing services to men who have sex with men (MSM citywide, particularly gay males); injection drug users (IDUs) citywide, particularly MSM-IDUs; and transgender females who have sex with Men (TFSM) citywide. The program chose to focus its prevention efforts on these populations because they represent the majority of new and existing cases of HIV in San Francisco. In addition, the program pays particular attention to African-American MSM and IDUs, as they are disparately impacted by HIV in San Francisco.</p> <p>Based on several decades experience of the current testing program and San Francisco epidemiology, the majority of the populations of focus will be MSM. Across populations, at least half to be white, with a percentage being Latino, African American, or Asian/Pacific Islander (with the exception of IDUs). The majority of all clients are aged 20-49, with fairly equal distribution in each decade, although, IDU and TFSM clients are slightly younger, on average, than our MSM clients. All clients live within San Francisco County, with most residing in the Castro, Tenderloin, and SoMa neighborhoods. The socioeconomic status (SES) of our clients reflect the distribution of income and education within these neighborhoods: many are of middle-to-upper SES, but a large number of clients are on public assistance, and marginally-housed or homeless.</p>										
Service Description:	<p>The goal of all Community Health Equity and Promotion (CHEP) funded HIV prevention programs aligns with San Francisco's Getting to Zero initiative and is to eliminate new HIV acquisitions, HIV-related deaths, and HIV-related stigma. The University of California San Francisco (UCSF) Alliance Health Project (AHP) will provide HIV/STD/HepC Counseling and Testing services, and Social Marketing.</p>										
UOS (annual)	<p>HIV Testing: \$202,509/1,364 tests = \$148.47 HIV + STD/Hep C Testing Packs: \$297,907/1,324 test packs = \$225.00 STD/HepC Only - Testing Packs: \$57,563/296 test packs = \$194.47 Social Marketing Months: \$19,607/12 months = \$1,633.92</p>										
UDC (annual)	N/A										
NOC (annual)	2,984										
Funding Source(s):	General Fund and Federal Center for Disease Control and Prevention (CDC)										
Selection Type	Administrative Sole Source 21.42										
Monitoring	Annual DPH Business Office monitoring through Business Office of Contract Compliance (BOCC)										

Div.	Contractor	Current Total Contract Not to Exceed (NTE) Amount with Contingency	Proposed Total Contract NTE Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
Div.	Contractor	Current Total Contract Amount with Contingency	Proposed Total Contract Amount with Contingency	Change in Total Contract Amount	Current Contract Term	Proposed Contract Term	Prior Annual Amount without Contingency	Proposed Annual Amount without Contingency	Annual Difference	Annual Difference (%)	Requested Action
DPH IT	Dataway US	\$ 1,122,603	\$ 3,618,000	\$ 2,495,397	10/1/20 - 9/30/21 (one year)	10/1/21 - 09/30/24 (3 years)	\$ 1,122,603	\$ 1,206,000	\$ 83,397	7.43%	Original (Ongoing services)

Purpose: The requested action is the approval of a new contract with Dataway US (an authorized Checkpoint reseller) for the continuation of existing services in administration of Check Point software licenses and associated services. The previous contract was approved by the Health Commission in October, 2020. Check Point's software is critical to the data security of DPH. A new Sourcing Event for these services was recently conducted, resulting in the incumbent vendor (Dataway US) submitting the winning bid and earning a new contract for the continuation of ongoing services. A low-bid Sourcing Event is a public bidding opportunity whereby the contract award is based entirely on the lowest submitted bid. No additional Proposals or Qualifications are submitted, as they are in an RFP or RFQ because the requested items are predetermined and not subject to variations beyond what is provided for in the specifications. Contracts resulting from Low-bid Sourcing Events have no Contingency as the contract must match the winning bid.

Reason for Funding Change: The 7.43% increase in the annual amount is due to slightly changing product and service needs.

Target Population:	The Department of Public Health to ensure secure DPH data
Service Description:	Dataway will act as a reseller to administer our Check Point licensing and services contract. Check Point provides the SFDPH Security Operations team with advanced threat prevention that safeguards SFDPH networks, cloud and mobile operations against all known and new, zero-day attacks combined with a control management system. SFDPH utilizes Check Points professional service for enhanced monitoring, alerting and incident response as well as Check Point's endpoint security, data security and security management product
UOS (annual):	Check Point Infinity Total Protection Package includes: Year 1 Cloud Security Subscription; Year 1 Annual Services and Training; Year 1 Product Subscription; Harmony Endpoint Complete; Harmony Mobile; Threat Cloud Incident Response Service; Managed Detection and Response for Sandblast; Network and Endpoint Software support; IOT protect for Healthcare; Gateway software management; Check Point software Subscription and support.
UDC (annual)	N/A
Funding Source(s):	General Fund
Selection Type	Sourcing Event 5640
Monitoring	The contract will be monitored in accordance with all applicable Departmental procedures through the Information Technology Department of the Department