



San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Community Health Equity & Promotion
Performance Objectives FY 2025-2026

FY23-24 CHEP Performance Objectives

FY25-26		CHEP HIV Prevention, Sexual, Drug User Health & Community Wellness Services Program & Objectives		<p>BOCC Monitoring Notes: Please include Aurora Chavez & Nikole Trainor on all BOCC Monitoring emails, Scheduling & Final report submissions. Nikole Trainor is authorized singer on final monitoring reports.</p> <p>Aurora Chavez, will be CHEP Lead during all BOCC Monitoring visits. Listed Program Liaisons will also be in attendance to provide additional program support & insight.</p>
CID #	Agency	Appendix A: Program Name		
1000024737	Alliance Health Project (AHP)	UCSF AHP Health Access Point (HAP) for Asian and Pacific Islander API MSM and API Transgender Women Communities	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Tod Watkins	
Program/Monitoring Notes:				
Objective #1	By end of the fiscal year, agency will provide detailed executive summary report of completed HAP Activities, including success, challenges, barriers, and new strategies to reach community. Starting in Fy-25-26, the executive summary will be part of the End of Year Aggregate and Narrative Report.			
Objective #2	By end of the fiscal year, agency will have attended required Health Access Point (HAP) quarterly network meetings (occurs on 4th Thursday in July, October, January, and April), measured by CHEP SOC meeting enrollment log.			
Objective #3	By end of the fiscal year, agency will have uploaded required HAP quarterly client level data and bi-annual aggregate and narrative submissions by specified due date. Agency should have submitted a total of 6 data sets (4 quarterly and 2 bi-annual reports) for the current fiscal year (not including any data resubmissions due to error corrections).			
Objective #4	By end of the fiscal year, agency will provide documentation of onsite overdose response policy (policy language and guidance provided to agency by CHEP-SOC).			
Objective # 5	By end of the fiscal year, agency will provide completed client satisfaction survey results to CHEP System of Care, Budget, Contracts, & Communications Manager (Email to: Nikole.Trainor@sfdph.org)			
Objective # 6	By the end of the fiscal year, agency will identify and designate one staff member from the testing or navigation team to act as HCV Champion. HCV Champion is responsible for serving as the point person for all HCV-related issues and maintaining active collaboration with CHEP and End Hep C SF (EHCSF). CHEP HCV Coordinator will communicate with HCV Champion directly to share opportunities for collaboration.			
Objective # 7	By the end of the fiscal year, HAP HCV Champion will participate in at least three Prevention Testing and Linkage (PTL) workgroup meetings. If HAP has internal clinical services, a designated clinician may participate in one Treatment Access (TA) workgroup meeting in place of one of the PTL meetings. CHEP HCV Coordinator will provide HCV Champion with meeting information, measured by HCV meeting log.			
Objective # 8	By the end of the fiscal year, each HAP agency offering testing will ensure that at least one designated representative participates in monthly CHEP Testing Coordinator meetings to support coordination and alignment of testing efforts. Measured by CHEP meeting log.			
Objective # 9	By the end of the fiscal year, all HAP agencies funded to provide testing will successfully participate in and pass an annual testing audit conducted by CHEP staff or, for subcontractors, by CHEP staff or the lead agency's lab manager. The audit will ensure adherence to and implementation of HIV/HCV/STI Testing Policies and Procedures.			
Objective # 10	By the end of the fiscal year, Lead agency will have completed the Staffing Equity Cultural Competency Response Survey via link provided. Survey is only required to be completed by the LEAD agency. Link also listed on Certified Contract Declaration Page: Agency Staffing Cultural Equity Response Survey			

FY23-24 CHEP Performance Objectives

1000024737	Alliance Health Project (AHP)	AHP Access HOPE/HALT	
Objective # 1		Measure by UOS	
1000037246	Facente	Project Based Consulting (Evaluation and Community Needs Assessment)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Hanna Hjord
Program/Monitoring Notes: PDC Waivers: Grievance and HIPAA Notices Posted, Hours of Operation, Admission Criteria and Denial of Service Policy, CLIA Certificate or Waiver , Cultural Competency Staff Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities (ADA Form), Good Neighbor Guidance , Grievance Policy, Harm Reduction Policy (Updated), Infection Control, Health and Safety Policies, Memorandum(s) of Understanding, Policy and Procedure Manual, Staff Training Log- DPH Compliance & Privacy training (Required)			
Objective # 1		By the end of the fiscal year, assess the landscape of HIV/STI/HCV services and funding. Measured by final assessment report.	
Objective # 2		By the end of the fiscal year, recommend changes to improve clinical provider use of Epic for HCV treatment. Measured by final summary of recommendations.	
Objective # 3		By the end of the fiscal year, develop a strategic plan for PHD data. Measured by final strategic plan.	
1000037214	Facente	Harm Reduction Training Institute (HRTI)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Hanna Hjord, Rita Wade
Program/Monitoring Notes: PDC Waivers: Grievance and HIPAA Notices Posted, Hours of Operation, Admission Criteria and Denial of Service Policy, CLIA Certificate or Waiver , Cultural Competency Staff Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities (ADA Form), Good Neighbor Guidance, Harm Reduction Policy (Updated), Infection Control, Health and Safety Policies, Memorandum(s) of Understanding, Policy and Procedure Manual, Staff Training Log- DPH Compliance & Privacy training (Required)			
Objective # 1		By the end of the fiscal year, assess the training and technical assistance needs of SFDPH and SFDPH-funded community-based and clinical service providers. Provide final summary report to CHEP SOC Program Lead.	
Objective # 2		By the end of the fiscal year, provide at least 5 training and 5 technical assistance sessions SFDPH and SFDPH-funded community-based service and clinical providers who work with people who use drugs (e.g., clinical support for front line workers and managers, support/training around involving program participants in the design and delivery of services). Measured by completion of training and TA tracking log.	
Objective # 3		By the end of the fiscal year, execute subcontractor agreements with at least 1 partner agency with relevant expertise. Measured by review of executed sub-contractor agreement.	
Objective # 4		By the end of the fiscal year, develop and implement HRTI training curriculum that meet the CEU's from appropriate licensing board, measured by SOC review of developed training curriculum.	
Objective # 5		By the end of the fiscal year, conduct regular and ongoing evaluations of training and TA sessions, measured by the completion of participant evaluation reports, surveys, etc.	
1000037460	Facente	EHE CAP Grantees (Evaluation & Community Needs Assessments)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Hanna Hjord, Thomas Knoble
Program/Monitoring Notes: PDC Waivers: Grievance and HIPAA Notices Posted, Hours of Operation, Admission Criteria and Denial of Service Policy, CLIA Certificate or Waiver , Cultural Competency Staff Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities (ADA Form), Good Neighbor Guidance , Grievance Policy, Harm Reduction Policy (Updated), Infection Control, Health and Safety Policies, Memorandum(s) of Understanding, Policy and Procedure Manual, Staff Training Log- DPH Compliance & Privacy training (Required)			
Objective # 1		By the end of the fiscal year, gather information and feedback from stakeholders and community members to help CHEP understand the community needs around sexual health services, as measured by a written summary of the feedback from all CAP engagement activities as part of a comprehensive report.	
Objective # 2		By the end of the fiscal year, work with the subcontractor agencies to gather input for SF's Ending the Epidemics Plan update, measured by final list of proposed elements to be considered in the plan.	

FY23-24 CHEP Performance Objectives

Objective # 3	By the end of the fiscal year, evaluate the Health Access Point model, measured by a written summary of the evaluation as part of a comprehensive final report.	
Objective # 4	By end of the fiscal year, Conduct a min of 50 surveys (in-person or online) with community members participants from all HAP and SFCC sites.	
Objective # 5	By end of the fiscal year, facilitate at least one 90-minute focus group with a minimum of ten participants from all HAP and SFCC sites.	
Objective # 6	By the end of the fiscal year, attend one monthly, one-hour meeting (virtual or in-person) with CHEP staff, as measured by meeting attendance records provided by CHEP Program Lead.	
100036504	Glide	HCV Linkage & Navigation (CAT 1) SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Rachel Grinstein
Program/Monitoring Notes:		
Objective # 1	By the end of the fiscal year, 25 clients living with HCV will have been enrolled in the HCV Wellness Services program, as measured by the completion of a client intake/assessment, and documented in client records and case notes. Progress toward this objective will be reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective # 2	By the end of the fiscal year, 19 clients/75% of clients enrolled in the HCV Wellness Services program will have attended an initial HCV medical care appointment, AKA HCV work-up appointment, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes, and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective # 3	By the end of the fiscal year, 10 clients/50% of clients that attended an initial HCV medical care appointment will have initiated treatment for HCV, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective # 4	By the end of the fiscal year, 8 clients/75% of clients who initiated HCV treatment will have completed the HCV treatment course, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes, and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective #5	By the end of the fiscal year, 4 clients/50% of clients who completed HCV treatment will have achieved an SVR4, as measured by completed HCV viral load testing results and submitted to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective #6	The HCV Navigation Report, containing all aggregate HCV navigation and treatment data will be submitted to SFDPH's CHEP program staff on a quarterly basis, due October 15, January 15, April 15, and July 15 respectively.	
Objective # 7	At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) of the monthly HCV Care Coordination meetings per year, as measured by the Team Meeting's attendance records.	
Objective # 8	At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) End Hep C SF (EHCSF) Prevention, Testing & Linkage (PTL) workgroup meetings per year, as measured by the meeting minutes and notes records.	
1000024733	IFR: Instituto Familiar de la Raza, Inc.	IFR Health Access Point for Latinx (Category 1) SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Jose Velazquez
Program/Monitoring Notes:		
Objective #1	By end of the fiscal year, agency will provide detailed executive summary report of completed HAP Activities, including success, challenges, barriers, and new strategies to reach community. Starting in Fy-25-26, the executive summary will be part of the End of Year Aggregate and Narrative Report.	

FY23-24 CHEP Performance Objectives

Objective #2	By end of the fiscal year, agency will have attended required Health Access Point (HAP) quarterly network meetings (occurs on 4th Thursday in July, October, January, and April), measured by CHEP SOC meeting enrollment log.
Objective #3	By end of the fiscal year, agency will have uploaded required HAP quarterly client level data and bi-annual aggregate and narrative submissions by specified due date. Agency should have submitted a total of 6 data sets (4 quarterly and 2 bi-annual reports) for the current fiscal year (not including any data resubmissions due to error corrections).
Objective #4	By end of the fiscal year, agency will provide documentation of onsite overdose response policy (policy language and guidance provided to agency by CHEP-SOC).
Objective # 5	By end of the fiscal year, agency will provide completed client satisfaction survey results to CHEP System of Care, Budget, Contracts, & Communications Manager (Email to: Nikole.Trainor@sfdph.org)
Objective # 6	By the end of the fiscal year, agency will identify and designate one staff member from the testing or navigation team to act as HCV Champion. HCV Champion is responsible for serving as the point person for all HCV-related issues and maintaining active collaboration with CHEP and End Hep C SF (EHCSF). CHEP HCV Coordinator will communicate with HCV Champion directly to share opportunities for collaboration.
Objective # 7	By the end of the fiscal year, HAP HCV Champion will participate in at least three Prevention Testing and Linkage (PTL) workgroup meetings. If HAP has internal clinical services, a designated clinician may participate in one Treatment Access (TA) workgroup meeting in place of one of the PTL meetings. CHEP HCV Coordinator will provide HCV Champion with meeting information, measured by HCV meeting log.
Objective # 8	By the end of the fiscal year, each HAP agency offering testing will ensure that at least one designated representative participates in monthly CHEP Testing Coordinator meetings to support coordination and alignment of testing efforts. Measured by CHEP meeting log.
Objective # 9	By the end of the fiscal year, all HAP agencies funded to provide testing will successfully participate in and pass an annual testing audit conducted by CHEP staff or, for subcontractors, by CHEP staff or the lead agency's lab manager. The audit will ensure adherence to and implementation of HIV/HCV/STI Testing Policies and Procedures.
Objective # 10	By the end of the fiscal year, Lead agency will have completed the Staffing Equity Cultural Competency Response Survey via link provided. Survey is only required to be completed by the LEAD agency. Link also listed on Certified Contract Declaration Page: Agency Staffing Cultural Equity Response Survey
1000024735 LYRIC	LYRIC Health Access Point (HAP) for Transitional Aged Youth (TAY)
	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Tod Watkins
Program/Monitoring Notes:	
Objective #1	By end of the fiscal year, agency will provide detailed executive summary report of completed HAP Activities, including success, challenges, barriers, and new strategies to reach community. Starting in Fy-25-26, the executive summary will be part of the End of Year Aggregate and Narrative Report.
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Objective # 7	By the end of the fiscal year, HAP HCV Champion will participate in at least three Prevention Testing and Linkage (PTL) workgroup meetings. If HAP has internal clinical services, a designated clinician may participate in one Treatment Access (TA) workgroup meeting in place of one of the PTL meetings. CHEP HCV Coordinator will provide HCV Champion with meeting information, measured by HCV meeting log.

FY23-24 CHEP Performance Objectives

Objective # 8	By the end of the fiscal year, each HAP agency offering testing will ensure that at least one designated representative participates in monthly CHEP Testing Coordinator meetings to support coordination and alignment of testing efforts. Measured by CHEP meeting log.	
Objective # 9	By the end of the fiscal year, all HAP agencies funded to provide testing will successfully participate in and pass an annual testing audit conducted by CHEP staff or, for subcontractors, by CHEP staff or the lead agency's lab manager. The audit will ensure adherence to and implementation of HIV/HCV/STI Testing Policies and Procedures.	
Objective # 10	by the LEAD agency. Link also listed on Certified Contract Declaration Page: Agency Staffing Cultural Equity Response Survey	
1000035520	Native American Health Center (NAHC)	Integrated HIV/STI/HCV Testing, Treatment & Linkage Services
		SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Aurora Chavez
Program/Monitoring Notes: Objective # 2, CHEP SOC may make exceptions on # of data sets, depending on start of implemented transfer process.		
Objective # 1	By the end of the fiscal year, agency will have implemented data transfer process to successfully upload testing data to CHEP SOC. Assigned CHEP team PL will provide agency with TA	
Objective # 2	By end of the fiscal year, agency will have uploaded required testing quarterly client level data and bi-annual aggregate and narrative submissions by specified due date. Agency should have submitted a total of 6 data sets (4 quarterly and 2 bi-annual reports) for the current fiscal year (not including any data resubmissions due to error corrections).	
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1000035520	Native American Health Center (NAHC)	Community Wellness (Health Education, Promotion, Peer Support/Training)
		SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Kim Wong
Program/Monitoring Notes:		
Objective # 1	By the end of the fiscal year, NAHC will provide a summary report documenting a minimum of four health education and wellness workshops on the topics of their choice, such as COVID-19, Monkeypox, HIV, HCV, other emerging infectious diseases, and chronic health conditions like diabetes, heart disease, and hypertension.	
Objective # 2	By the end of the fiscal year, NAHC will provide a summary report documenting monthly peer support and training sessions for at least 10 participants each that are in full compliance with the City & County of San Francisco Office of the Controller Accounting Policies & Procedures for youth and young adults.	
Objective # 3	By the end of the fiscal year, NAHC will submit a compiled list of local food, housing, cultural and health resources for San Francisco residents, including those from American Indian/Native American communities, for the purposes of successfully linking clients to wraparound services as needed.	
Objective # 4	By the end of the fiscal year, NAHC will provide a summary report of linkages to health care resources and vaccination services for the prevention of COVID-19, Monkeypox, other emerging infectious diseases, and chronic health conditions like diabetes, heart disease, and hypertension.	
Objective # 5	By the end of the fiscal year, NAHC will provide a review of the year's services, including recommendations and lessons learned.	
1000024732	Rafiki Coalition for Health and Wellness	Rafiki Health Access Point (HAP) - Umoja
		SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Korika Wright
Program/Monitoring Notes:		

FY23-24 CHEP Performance Objectives

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1000024734	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">San Francisco AIDS Foundation (SFAF)</td> <td style="width: 30%;">SFAF Health Access Point Program: Gay/MSM</td> <td style="width: 40%; background-color: #FFDAB9;">SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Todd Watkins, Thomas Knoble</td> </tr> </table>	San Francisco AIDS Foundation (SFAF)	SFAF Health Access Point Program: Gay/MSM	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Todd Watkins, Thomas Knoble
San Francisco AIDS Foundation (SFAF)	SFAF Health Access Point Program: Gay/MSM	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Todd Watkins, Thomas Knoble		
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FY23-24 CHEP Performance Objectives

Objective # 5	By end of the fiscal year, agency will provide completed client satisfaction survey results to CHEP System of Care, Budget, Contracts, & Communications Manager (Email to: Nikole.Trainor@sfdph.org)	
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1000024734	San Francisco AIDS Foundation (SFAF)	SFAF The HAP Capacity Building Activities (HIV/STI/HCV Infrastructure) Program
SOC BOCC Representative: Aurora Chavez, Nikole Trainor		
Program Liaison: Thomas Knoble, Cynthia Madonna		
Program/Monitoring Notes:		
Objective # 1	By the end of the fiscal year, SFAF testing capacity building team will ensure that at least one designated representative participates in monthly CHEP Testing Coordinator meetings to support coordination and alignment of testing efforts. Measured by CHEP meeting log.	
Objective # 2	By the end of the fiscal year, SFAF testing capacity building staff will meet at minimum two times per month with CHEP capacity building team to coordinate technical assistance and quality assurance regarding testing protocols at the HAPS, as measured by meeting attendance.	
Objective # 3	By the end of the fiscal year, in partnership with CHEP CB team, SFAF testing capacity building staff will provide technical assistance to all HAP leads and subcontractors that are providing testing to implement integrated testing protocols and procedures. As measure by monthly activity log and executive summary report. SFAF must provide detailed activity log on all testing capacity building activities performed. Final document must be sent to Nikole.Trainor@sfdph.org and assigned CHEP program Liaison for confirmation.	
Objective # 4	By the end of the fiscal year, SFAF, in partnership with CHEP, will conduct a comprehensive SWOT analysis of integrated testing services for the following community-based testing programs: Umoja, LYRIC, Glide, AHP, SFCHC, IFR, MNHC, and the Native American Health Center. SFAF will use the findings to develop a Capacity Building Plan aimed at increasing testing volume, with completion and approval of the plan serving as the measure of success.	
1000024734	San Francisco AIDS Foundation (SFAF)	SFAF Rafiki Capacity Building Activities
SOC BOCC Representative: Aurora Chavez, Nikole Trainor		
Program Liaison: Thomas Knoble, Korika Wright, Cynthia Madonna		
Program/Monitoring Notes:		
Objective # 1	By the end of the fiscal year, agency will provide detailed executive summary report of completed Rafiki Black/AA HAP capacity building activities implemented inclusive to organization administrative support. Report should be inclusive of challenges, success, barriers, how agency has addressed challenges/barriers, and capacity building plans for the following fiscal year.	
Objective # 2	By the end of the fiscal year, in partnership with CHEP Program Liaison and Capacity Building team, SFAF assigned Program staff and consultant will provide technical assistance to Rafiki and subcontractors to support implementation of HAP programming, along with organizational administrative infrastructure support. As measure by monthly activity log and executive summary report.	

FY23-24 CHEP Performance Objectives

1000024734	San Francisco AIDS Foundation (SFAF)	Clinical Assistant Program	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Thomas Knoble, Cynthia Madonna
Program/Monitoring Notes:			
Objective # 1	By the end of the fiscal year, SFAF Clinical Assistant Program staff will meet at minimum monthly with CHEP capacity building team to coordinate programming with other CHEP capacity building efforts, as measured by meeting notes.		
Objective # 2	By the end of the fiscal year 20 individuals will be enrolled in the HIV test counselor certification process through 2 trainings, and report increased knowledge of sexual health and basic competencies around conducting test counseling sessions.		
Objective # 3	By the end of the fiscal year, three of the five clinical interns will enter paid community health opportunities within 6 months of completing the program.		
1000024734	San Francisco AIDS Foundation (SFAF)	Strut Clinical Sustainability	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Todd Watkins, Thomas Knoble
Program/Monitoring Notes:			
Objective # 1	Measure Program by Contracted UOS		
1000024731	San Francisco Community Health Center (SFCHC)	SFCHC HAP Services - STAHR (San Francisco Transgender Alliance for Health Resources) – Transwomen of Color	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Alyse Gray
Program/Monitoring Notes:			
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Objective # 7	By the end of the fiscal year, HAP HCV Champion will participate in at least three Prevention Testing and Linkage (PTL) workgroup meetings. If HAP has internal clinical services, a designated clinician may participate in one Treatment Access (TA) workgroup meeting in place of one of the PTL meetings. CHEP HCV Coordinator will provide HCV Champion with meeting information, measured by HCV meeting log.		

FY23-24 CHEP Performance Objectives

Objective # 8	By the end of the fiscal year, each HAP agency offering testing will ensure that at least one designated representative participates in monthly CHEP Testing Coordinator meetings to support coordination and alignment of testing efforts. Measured by CHEP meeting log.	
Objective # 9	By the end of the fiscal year, all HAP agencies funded to provide testing will successfully participate in and pass an annual testing audit conducted by CHEP staff or, for subcontractors, by CHEP staff or the lead agency's lab manager. The audit will ensure adherence to and implementation of HIV/HCV/STI Testing Policies and Procedures.	
Objective # 10	By the end of the fiscal year, Lead agency will have completed the Staffing Equity Cultural Competency Response Survey via link provided. Survey is only required to be completed by the LEAD agency. Link also listed on Certified Contract Declaration Page: Agency Staffing Cultural Equity Response Survey	
1000024731	San Francisco Community Health Center (SFCHC)	SFCHC HAP Services - Trans informed Capacity Building
Objective # 1	By the end of the fiscal year, agency will provide detailed executive summary report of completed trans informed capacity building activities that is inclusive of how many agencies/people served (each agency served should be listed), challenges, success, & lessons learned.	
1000036520	San Francisco Community Health Center (SFCHC)	HCV Treatment & Navigation (CAT 1 & 2)
		SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Rachel Grinstein
Program/Monitoring Notes:		
Objective # 1	By the end of the fiscal year, 96 clients living with HCV will have been enrolled in the HCV Wellness Services program, as measured by the completion of a client intake/assessment, and documented in client records and case notes. Progress toward this objective will be reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective # 2	By the end of the fiscal year, 60 clients enrolled in the HCV Wellness Services program will have attended an initial HCV medical care appointment, AKA HCV work-up appointment, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes, and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective # 3	By the end of the fiscal year, 48 clients that attended an initial HCV medical care appointment will have initiated treatment for HCV, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective # 4	By the end of the fiscal year, 40 clients who initiated HCV treatment will have completed the HCV treatment course, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes, and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective #5	By the end of the fiscal year, 32 clients who completed HCV treatment will have achieved an SVR4, as measured by completed HCV viral load testing results and submitted to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.	
Objective #6	The HCV Navigation Report, containing all aggregate HCV navigation and treatment data will be submitted to SFDPH's CHEP program staff on a quarterly basis, due October 15, January 15, April 15, and July 15 respectively.	
Objective # 7	At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) of the monthly HCV Care Coordination meetings per year, as measured by the Team Meeting's attendance records.	
Objective # 8	At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) End Hep C SF (EHCSF) Prevention, Testing & Linkage (PTL) workgroup meetings and at least three (3) End Hep C SF (EHCSF) Treatment Access (TA) workgroup meetings per year, as measured by the meeting minutes and notes records.	
100006123	Shanti Project	HCV Client Navigation Services
		SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Rachel Grinstein

FY23-24 CHEP Performance Objectives

Program/Monitoring Notes: Contract Managed by HHS			
Objective # 1	By the end of the fiscal year, agency will have submit quarterly HCV client reports. Measured by receipt of data from CHEP HCV Program Liaison		
1000036538	UCSF DSAAM	HCV Treatment & Navigation Services (CAT 1)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Rachel Grinstein
Program/Monitoring Notes:			
Objective # 1	By the end of the fiscal year, 15 clients living with HCV will have been enrolled in the HCV Wellness Services program, as measured by the completion of a client intake/assessment, and documented in client records and case notes. Progress toward this objective will be reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.		
Objective # 2	By the end of the fiscal year, 12 clients/80% of clients enrolled in the HCV Wellness Services program will have attended an initial HCV medical care appointment, AKA HCV work-up appointment, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes, and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.		
Objective # 3	By the end of the fiscal year, 10 clients/83% of clients that attended an initial HCV medical care appointment will have initiated treatment for HCV, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.		
Objective # 4	By the end of the fiscal year, 7 clients/70% of clients who initiated HCV treatment will have completed the HCV treatment course, as measured by client or provider reporting or through Epic medical record review, recorded in client records or case notes, and reported to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report		
Objective #5	By the end of the fiscal year, 3 clients/43% of clients who completed HCV treatment will have achieved an SVR, as measured by completed HCV viral load testing results and submitted to SFDPH's CHEP staff on a quarterly basis through the HCV Navigation Report.		
Objective #6	The HCV Navigation Report, containing all aggregate HCV navigation and treatment data will be submitted to SFDPH's CHEP program staff on a quarterly basis, due October 15, January 15, April 15, and July 15 respectively.		
Objective # 7	At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) of the monthly HCV Care Coordination meetings per year, as measured by the Team Meeting's attendance records.		
Objective # 8	<p>Comp A (CAT 1) Only: At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) End Hep C SF (EHCSF) Prevention, Testing & Linkage (PTL) workgroup meetings per year, as measured by the meeting minutes and notes records.</p> <p>Comp B (CAT 2) Only: At least one (1) staff member from the HCV Wellness Services program will attend at least three (3) End Hep C SF (EHCSF) Treatment Access (TA) workgroup meetings per year, as measured by the meeting minutes and notes records.</p>		
1000024736	UCSF Ward 86	Health Access Point for People Who Use Drugs (PRO-TEST)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Rachel Grinstein
Program/Monitoring Notes:			
Objective #1	By end of the fiscal year, agency will provide detailed executive summary report of completed HAP Activities, including success, challenges, barriers, and new strategies to reach community. Starting in Fy-25-26, the executive summary will be part of the End of Year Aggregate and Narrative Report.		
Objective #2	By end of the fiscal year, agency will have attended required Health Access Point (HAP) quarterly network meetings (occurs on 4th Thursday in July, October, January, and April), measured by CHEP SOC meeting enrollment log.		
Objective #3	By end of the fiscal year, agency will have uploaded required HAP quarterly client level data and bi-annual aggregate and narrative submissions by specified due date. Agency should have submitted a total of 6 data sets (4 quarterly and 2 bi-annual reports) for the current fiscal year (not including any data resubmissions due to error corrections).		

FY23-24 CHEP Performance Objectives

Objective #4	By end of the fiscal year, agency will provide documentation of onsite overdose response policy (policy language and guidance provided to agency by CHEP-SOC).	
Objective # 5	By end of the fiscal year, agency will provide completed client satisfaction survey results to CHEP System of Care, Budget, Contracts, & Communications Manager (Email to: Nikole.Trainor@sfdph.org)	
Objective # 6	By the end of the fiscal year, agency will identify and designate one staff member from the testing or navigation team to act as HCV Champion. HCV Champion is responsible for serving as the point person for all HCV-related issues and maintaining active collaboration with CHEP and End Hep C SF (EHCSF). CHEP HCV Coordinator will communicate with HCV Champion directly to share opportunities for collaboration.	
Objective # 7	By the end of the fiscal year, HAP HCV Champion will participate in at least three Prevention Testing and Linkage (PTL) workgroup meetings. If HAP has internal clinical services, a designated clinician may participate in one Treatment Access (TA) workgroup meeting in place of one of the PTL meetings. CHEP HCV Coordinator will provide HCV Champion with meeting information, measured by HCV meeting log.	
Objective # 8	By the end of the fiscal year, each HAP agency offering testing will ensure that at least one designated representative participates in monthly CHEP Testing Coordinator meetings to support coordination and alignment of testing efforts. Measured by CHEP meeting log.	
Objective # 9	By the end of the fiscal year, all HAP agencies funded to provide testing will successfully participate in and pass an annual testing audit conducted by CHEP staff or, for subcontractors, by CHEP staff or the lead agency's lab manager. The audit will ensure adherence to and implementation of HIV/HCV/STI Testing Policies and Procedures.	
Objective # 10	By the end of the fiscal year, Lead agency will have completed the Staffing Equity Cultural Competency Response Survey via link provided. Survey is only required to be completed by the LEAD agency. Link also listed on Certified Contract Declaration Page: Agency Staffing Cultural Equity Response Survey	
1000032157 UCSF Ward 86	UCSF HIV Prevention Program - DeLIVER Care	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Rachel Grinstein
Program/Monitoring Notes:		
Objective # 1	By the end of the fiscal year, DeLIVER Care program will conduct 300 hepatitis C (HCV) screening tests (Antibody and/or RNA, as needed) to determine patient's HCV status, as measured by SFDPH HCV Testing data collection forms submitted to SFDPH each quarter	
Objective # 2	By the end of the fiscal year, DeLIVER Care program will conduct 50 point-of-care HCV RNA tests, as measured by HCV Testing data submitted to SFDPH each quarter.	
Objective # 3	By the end of the fiscal year, 20 clients will have attended the first HCV medical appointment with DeLIVER Care provider, as measured by DeLIVER outreach summary sheets and quarterly HCV Linkage Reports submitted to SFDPH.	
Objective # 4	By the end of the fiscal year, 20 clients will have initiated HCV treatment, as measured by DeLIVER outreach summary sheets and quarterly HCV Linkage Reports submitted to SFDPH.	
Objective # 5	By the end of the fiscal year, 20 clients will have completed their HCV treatment course or achieved SVR following treatment completion, as measured by the DeLIVER outreach summary sheets and quarterly HCV Linkage Reports submitted to SFDPH.	
Objective # 6	By the end of the fiscal year, aggregate quarterly data totals will have been shared with SFDPH's CHEP program staff using the HCV Linkage Report.	
Objective # 7	By the end of the fiscal year, DeLIVER Care staff will have held 12 educational events on HCV and harm reduction topics, as measured by group sign-in sheets and quarterly HCV Linkage Reports submitted to SFDPH.	
1000032157 UCSF Ward 86	Integrated EtHE & GTZ Program (implementation/services at Ward 86)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Emily Valadao
Program/Monitoring Notes:		

FY23-24 CHEP Performance Objectives

Objective # 1	HIV STI and HCV Testing/Screening: By the end of the fiscal year, Ensure that 80% of patients who tested positive for gonorrhea and/or chlamydia will have been re-screened/tested for gonorrhea and chlamydia within 12 months of treatment.
Objective # 2	HIV STI and HCV Testing/Screening: By the end of the fiscal year, Ensure that 80% of people experiencing homelessness who had at least one clinic visit with the drop-in service for unhoused patients (POP-UP) will be tested for syphilis with an RPR at least once every 12 months.
Objective # 3	HIV STI and HCV Testing/Screening: By the end of the fiscal year, Create quality assurance workflow for all STI specimens sent from Ward 86 to the lab to reduce the number of monthly "no tests" and other miscellaneous specimen related errors.
Objective # 4	HIV STI and HCV Testing/Screening: By the end of the fiscal year, Ensure that every new, unduplicated patient who completes a medical visit in The Lobby/HAP is tested for HIV Ab at least once per calendar year.
Objective #5	HIV STI and HCV Testing/Screening: By the end of the fiscal year, Ensure that every new, unduplicated patient who completes a medical visit in The Lobby/HAP is tested for HCV at least once per calendar year.
Objective #6	HIV STI and HCV Testing/Screening: By the end of the fiscal year, Complete at least two in-services with on-campus clinics (emergency department, adult urgent care, inpatient services) to support increased HIV, HCV, and STI testing and supportive follow up activities
Objective # 7	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of the fiscal year, 90% of Ward 86 eligible patients who were disclosed a new HIV diagnosis on the ZSFG campus were successfully connected to care within 3 months, as defined by an initial medical visit and baseline CD4/HIV viral load testing
Objective # 8	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of fiscal year, outreach and support re-engagement to care of at least 72 rapid restart patients, via targeted nurse and Provider support around restarting medication and adherence to medication, either through The Lobby or Ward 86 primary care clinical entry points
Objective # 9	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of fiscal year, at least 15 newly diagnosed people living with HIV will be offered rapid medication treatment and linkage to primary care, either through The Lobby or Ward 86 primary care clinical entry points.
Objective # 10	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of the fiscal year, Establish baseline number of patients with untreated HCV who are not also PLWH; Provide treatment and support cure of at least 15 HCV mono-infected patients accessing low barrier services at Ward 86 or The Lobby.
Objective # 11	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of fiscal year, The Ward 86 PHAST team will conduct at least one training or technical assistance/program planning session on expanded HIV testing and linkage to care in each of the following departments on the ZSFG campus: Psychiatry, Family Health Center
Objective # 12	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of fiscal year, the Ward 86 PHAST team will participate in the multidisciplinary team responsible for facilitation of HIV testing and disclosure algorithms and staff education on HIV test interpretation on the ZSFG campus.
Objective # 13	Rapid linkage to Care, Treatment Assurance for HIV/STI and HCV, and Retention in Care: By the end of fiscal year, PHAST team staff will attend weekly case conferences to coordinate patient care with the SFDPH LINCS team.
Objective # 14	HIV pre- and post-exposure prophylaxis, doxy-PEP, and Improve PrEP uptake, Care and Retention Within the SFHN: By the end of the fiscal year, Increase the number of patients on injectable PrEP at Ward 86/The Lobby by 20% .
Objective # 15	HIV pre- and post-exposure prophylaxis, doxy-PEP, and Improve PrEP uptake, Care and Retention Within the SFHN: By the end of fiscal year, Attend weekly case conference with community based partners to coordinate care of new PrEP referrals .
Objective # 16	HIV pre- and post-exposure prophylaxis, doxy-PEP, and Improve PrEP uptake, Care and Retention Within the SFHN: By the end of fiscal year, ensure that 100% of patients treated for an STI at Ward 86 and/or The Lobby receive educational materials on Doxy-PEP.

FY23-24 CHEP Performance Objectives

Objective # 17		HIV pre- and post-exposure prophylaxis, doxy-PEP, and Improve PrEP uptake, Care and Retention Within the SFHN: By the end of the fiscal year, Provide at least two trainings to campus based or community-based clinics related to PrEP, referral pathways, and capacity building in the provision of low barrier PrEP to patients.	
1000032157	UCSF Ward 86	UCSF HIV Prevention Program - Getting to Zero (GTZ) Coordination	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: N/A
Program/Monitoring Notes:			
Objective # 1		Measure by UOS	
1000008790	UCSF OTOP (HHS SOC Contract)	UCSF Hepatitis C Treatment in an Opiate Treatment Outpatient Program (OTOP)	SOC BOCC Representative: John Aynsley Program Liaison: Rachel Grinstein
Program/Monitoring Notes: Contract Managed by HHS SOC			
Objective # 1		During fiscal year, the OTOP HCV RN will have 500 patient encounters for HCV Care Coordination Services.	
Objective # 2		During fiscal year, 40 patients will successfully complete HCV treatment via DOT at OTOP as measured by completion of the prescribed treatment regimen based on medication dosing records in the Methasoft electronic database at OTOP.	
100008917	Public Health Enterprises, Heluna Health	PHFE Continuum of HIV Prevention, Care, and Treatment (Part A) (Contract Ends 12/31/2025)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Nikole Trainor
Program/Monitoring Notes: PDC Waivers Approved by CHEP Grievance and HIPAA Notices Posted , Hours of Operation (posted), Admission Criteria and Denial of Service Policy, CLIA Certificate, Policy and Procedure Manual, Compliance, Privacy, and Data Security Attestations, Computer Antivirus Software/Use of Electronic Resources Policy, Cultural Competency Staffing Equity Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities, Fire Clearance/Life Safety, Grievance Policy , Harm Reduction Policy, Good Neighbor Guidance, Infection Control, Materials Review Policy, Memorandum(s) of Understanding (positive test), Health and Safety Policies, Staff trainings: Aerosol Transmittable Disease, Emergency Response, Exposure to Blood Borne Pathogens, SOGI, Staff trainings: Harm Reduction, Opioid Overdose R&R, 12N Ordinance (Contract staff Only, required to complete trainings, managed by CHEP onsite supervisor as applicable)			
Administrative Objectives	Objective #1	By the end of the fiscal year, Heluna Health program staff will have executed all subcontractor agreements within in timely manner and paid sub-contractor final invoices.	
	Objective #2	By the end of the fiscal year, Heluna Health will provide monthly reports on itemized budget expenditures to the CHEP SOC Budget, Contracts & Program Operations Manager for approval. Heluna will attach monthly-itemized expenses and submits a monthly invoice for payment. (No fees shall be due for invoiced items that lack an appropriate level of detail or are otherwise not in line with DPH expectations. Heluna shall work with DPH to provide any needed information to substantiate invoices before approval for payment).	
	Objective #3	By the end of the fiscal year, Heluna Health will submit an annual reconciliation comparing revenues received to actual costs incurred. (This reconciliation is due with the final invoice, 45 calendar days after the end of the services reported must be returned to the Department of Public Health. Reconciliation detail is by Service Mode, not by contract appendix total. If the contractor must return funds to the Department, a check must be made payable to the Department of Public Health, along with FFS reconciliation and final invoice).	
Program Specific Objectives	Objective #4	By the end of the fiscal year, and at the end of each contract term, <i>as applicable</i> , Heluna Health & Program Liaison will provide sub-contractor end of year data summary reports, and confirmation that deliverables have been satisfied. All data reports and program summary reports should be filed on CHEP k Drive: K:\CHE&P\CHEP Prog. Description Data info, and data uploaded to Results Accountability Score Card (as applicable). Current Sub-contractors:	
1000009845	Public Health Enterprises, Heluna Health	PHFE Jail Health Services HIVIS - Testing HIV & Integrated Services (HIV-IS)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Allyse Gray, Nikole Trainor HIV-IS Representative: David Leiva

FY23-24 CHEP Performance Objectives

Program/Monitoring Notes: David Leiva will provide report of completion of Program Specific Objectives PDC Waivers Approved by CHEP Grievance and HIPAA Notices Posted , Hours or Operation (posted), Admission Criteria and Denial of Service Policy, CLIA Certificate, Policy and Procedure Manual, Compliance, Privacy, and Data Security Attestations, Computer Antivirus Software/Use of Electronic Resources Policy, Cultural Competency Staffing Equity Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities, Fire Clearance/Life Safety, Grievance Policy , Harm Reduction Policy, Good Neighbor Guidance, Infection Control, Materials Review Policy, Memorandum(s) of Understanding (positive test), Health and Safety Policies, Staff trainings: Aerosol Transmittable Disease, Emergency Response, Exposure to Blood Borne Pathogens, SOGI, Staff trainings: Harm Reduction, Opioid Overdose R&R, 12N Ordinance (Contract staff Only, required to complete trainings, managed by CHEP onsite supervisor as applicable)			
Administrative Objectives	Objective #1	By the end of the fiscal year, Heluna Health will provide monthly reports on itemized budget expenditures to the to the CHEP SOC Budget, Contracts & Program Operations Manage for approval. Heluna will attach monthly-itemized expenses and submits a monthly invoice for payment. (No fees shall be due for invoiced items that lack an appropriate level of detail or are otherwise not in line with DPH expectations. Heluna shall work with DPH to provide any needed information to substantiate invoices before approval for payment).	
	Objective #2	By the end of the fiscal year, Heluna Health will submit an annual reconciliation comparing revenues received to actual costs incurred. (This reconciliation is due with the final invoice, 45 calendar days after the end of the services reported must be returned to the Department of Public Health. Reconciliation detail is by Service Mode, not by contract appendix total. If the contractor must return funds to the Department, a check must be made payable to the Department of Public Health, along with FFS reconciliation and final invoice).	
Program Specific Objectives	Objective # 1	By the end of the fiscal year, 85% of patients testing HIV-positive will receive their preliminary and confirmed HIV test results.	
	Objective # 2	By the end of each fiscal year, 85% of patients testing HIV-positive will be linked to the HIV-IS CoE for primary care while in custody.	
	Objective #3	By the end of each fiscal year, 85% of patients testing HIV-positive will be provided with options for notifying their sexual and/or needle-sharing partners as part of disclosure services.	
	Objective #4	By the end of each fiscal year, 85% of patients testing HIV-positive will have follow up HIV+ labs drawn by the Prevention Team.	
	Objective# 5	By the end of each fiscal year, 75% of all HIV tests offered to incarcerated patients will be HIV rapid tests.	
	Objective # 6	By the end of each fiscal year, JHS will have collected and submitted required quarterly data for HIV case reporting and state surveillance requirements	
1000035975	Public Health Enterprises, Heluna Health	CAT 1: Community Wellness, Health Promotion and Community Engagement	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Nikole Trainor, Cristy Dieterich
Program/Monitoring Notes: PDC Waivers Approved by CHEP Grievance and HIPAA Notices Posted , Hours or Operation (posted), Admission Criteria and Denial of Service Policy, CLIA Certificate, Policy and Procedure Manual, Compliance, Privacy, and Data Security Attestations, Computer Antivirus Software/Use of Electronic Resources Policy, Cultural Competency Staffing Equity Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities, Fire Clearance/Life Safety, Grievance Policy , Harm Reduction Policy, Good Neighbor Guidance, Infection Control, Materials Review Policy, Memorandum(s) of Understanding (positive test), Health and Safety Policies, Staff trainings: Aerosol Transmittable Disease, Emergency Response, Exposure to Blood Borne Pathogens, SOGI, Staff trainings: Harm Reduction, Opioid Overdose R&R, 12N Ordinance (Contract staff Only, required to complete trainings, managed by CHEP onsite supervisor as applicable)			
Administrative Objectives	Objective # 1	By the end of the fiscal year, Heluna Health program staff will have executed all subcontractor agreements within in timely manner and paid sub-contractor final invoices.	
	Objective # 2	By the end of the fiscal year, Heluna Health will provide monthly reports on itemized budget expenditures to the CHEP SOC Budget, Contracts & Program Operations Manager for approval. Heluna will attach monthly-itemized expenses and submits a monthly invoice for payment. (No fees shall be due for invoiced items that lack an appropriate level of detail or are otherwise not in line with DPH expectations. Heluna shall work with DPH to provide any needed information to substantiate invoices before approval for payment).	

FY23-24 CHEP Performance Objectives

	Objective # 3	By the end of the fiscal year, Heluna Health will submit an annual reconciliation comparing revenues received to actual costs incurred. (This reconciliation is due with the final invoice, 45 calendar days after the end of the services reported must be returned to the Department of Public Health. Reconciliation detail is by Service Mode, not by contract appendix total. If the contractor must return funds to the Department, a check must be made payable to the Department of Public Health, along with FFS reconciliation and final invoice).	
Program Specific Objectives	Objective # 4	By the end of the fiscal year, and at the end of each contract term, <i>as applicable</i> , Heluna Health & Program Liaison will provide sub-contractor end of year data summary reports, and confirmation that deliverables have been satisfied. All data reports and program summary reports should be filed on CHEP k Drive: K:\CHE&P\CHEP Prog. Description Data_info, and data uploaded to Results Accountability Score Card (as applicable). Current Sub-contractors:	
1000008932	Public Health Enterprises, Heluna Health	Newcomers Health Program/Refugee Health	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Sammi Truong, Nikole Trainor
Program/Monitoring Notes: PDC Waivers Approved by CHEP Grievance and HIPAA Notices Posted , Hours of Operation (posted), Admission Criteria and Denial of Service Policy, CLIA Certificate, Policy and Procedure Manual, Compliance, Privacy, and Data Security Attestations, Computer Antivirus Software/Use of Electronic Resources Policy, Cultural Competency Staffing Equity Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities, Fire Clearance/Life Safety, Grievance Policy , Harm Reduction Policy, Good Neighbor Guidance, Infection Control, Materials Review Policy, Memorandum(s) of Understanding (positive test), Health and Safety Policies, Staff trainings: Aerosol Transmittable Disease, Emergency Response, Exposure to Blood Borne Pathogens, SOGI, Staff trainings: Harm Reduction, Opioid Overdose R&R, 12N Ordinance (Contract staff Only, required to complete trainings, managed by CHEP onsite supervisor as applicable)			
	Objective #1	By the end of the fiscal year, Heluna Health will provide monthly reports on itemized budget expenditures to the CHEP SOC Budget, Contracts & Program Operations Manager for approval. Heluna will attach monthly-itemized expenses and submits a monthly invoice for payment. (No fees shall be due for invoiced items that lack an appropriate level of detail or are otherwise not in line with DPH expectations. Heluna shall work with DPH to provide any needed information to substantiate invoices before approval for payment).	
	Objective #2	By the end of the fiscal year, Heluna Health will submit an annual reconciliation comparing revenues received to actual costs incurred. (This reconciliation is due with the final invoice, 45 calendar days after the end of the services reported must be returned to the Department of Public Health. Reconciliation detail is by Service Mode, not by contract appendix total. If the contractor must return funds to the Department, a check must be made payable to the Department of Public Health, along with FFS reconciliation and final invoice).	
1000036026	San Francisco Public Health Foundation	Program Administration, Sexual, PWUID & Community Wellness Programs	Contract Representative: Aurora Chavez Program Liaison: Nikole Trainor
1000035999	San Francisco Public Health Foundation	Program Administration, Sugary Drinks Distributor Tax Project	Contract Representative: Aurora Chavez Program Liaison: Nikole Trainor, Marianne Szeto
1000036060	San Francisco Public Health Foundation	Program Administration, SF Tobacco Free Project	Contract Representative: Aurora Chavez Program Liaison: Nikole Trainor, Jonathan Ocampo, Jessica Estrada
1000021500	San Francisco Public Health Foundation	Food Security	Contract Representative: Aurora Chavez Program Liaison: Nikole Trainor, Eric Chan
Program/Monitoring Notes: PDC Waivers Approved by CHEP Grievance and HIPAA Notices Posted , Hours of Operation (posted), Admission Criteria and Denial of Service Policy, CLIA Certificate, Policy and Procedure Manual, Compliance, Privacy, and Data Security Attestations, Computer Antivirus Software/Use of Electronic Resources Policy, Cultural Competency Staffing Equity Report, Emergency Response Plan, Ensure Access to Services for Persons with Disabilities, Fire Clearance/Life Safety, Grievance Policy , Harm Reduction Policy, Good Neighbor Guidance, Infection Control, Materials Review Policy, Memorandum(s) of Understanding (positive test), Health and Safety Policies, Staff trainings: Aerosol Transmittable Disease, Emergency Response, Exposure to Blood Borne Pathogens, SOGI, Staff trainings: Harm Reduction, Opioid Overdose R&R, 12N Ordinance (Contract staff Only, required to complete trainings, managed by CHEP onsite supervisor as applicable)-No contracted staff in above contracts.			
	Objective # 1	By the end of the fiscal year, SFPHF program staff will have executed all subcontractor agreements within in timely manner and paid sub-contractor final invoices.	

FY23-24 CHEP Performance Objectives

Objective # 2		By the end of the fiscal year, SFPHF will provide monthly reports on itemized budget expenditures to the CHEP SOC Budget, Contracts & Program Operations Manager. SFPHF will attach monthly-itemized expenses and submits a monthly invoice for payment.	
Objective # 3		By the end of the fiscal year, SFPHF will submit an annual reconciliation comparing revenues received to actual costs incurred. (This reconciliation is due with the final invoice, 45 calendar days after the end of the services reported must be returned to CHEP SOC, Budget, Contracts & Program Operations Manager. Reconciliation detail is by Service Mode, not by contract appendix total. If the contractor must return funds to the Department, a check must be made payable to the Department of Public Health, along with FFS reconciliation and final invoice).	
Objective # 4		By the end of the fiscal year, and at the end of each contract term, <i>as applicable</i> , SFPHF & Program Liaison will provide sub-contractor end of year data summary reports, and confirmation that deliverables have been satisfied. All data reports and program summary reports should be filed on CHEP k Drive: K:\CHE&P\CHEP Prog. Description Data_info, and data uploaded to Results Accountability Score Card (as applicable). Current Sub-contractors:	
100002656	Livable City	Sunday Streets Program	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Marianne Szeto, Christina Goetta
<p>Program/Monitoring Notes: Agency does not provide direct client services PDC Waivers Approved by CHEP Grievance and HIPAA Notices Posted , Hours or Operation (posted), Admission Criteria and Denial of Service Policy, CLIA Certificate, Ensure Access to Services for Persons with Disabilities, Fire Clearance/Life Safety, Harm Reduction Policy, Good Neighbor Guidance, Infection Control, Materials Review Policy, Memorandum(s) of Understanding (positive test)</p>			
Objective #1		By the end of the fiscal year, Livable City will plan and implement Sunday Streets events in the Bayview, Excelsior, Mission, Tenderloin, SoMa, and Western Addition neighborhoods.	
Objective #2		By the end of the fiscal year, Livable City will provide ongoing community convening and planning efforts in at least 3 of the neighborhoods in which Sunday Streets will occur.	
Objective #3		By the end of the fiscal year, Livable City will provide a cumulative report on Sunday Streets data from the contract term of 2021-2026, including participant counts, demographics, and survey results.	
BAACWHI Contracts	BHS System of CARE for Below Contracts		
1000025064	Rafiki	BAACWHI- Rafiki Coalition for Health & Wellness (BHS)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Christina Goette, Vincent Fuqua
Program/Monitoring Notes:			
Objective #1		By the end of the fiscal year, Rafiki will conduct outreach to at least 1,200 community members through flyers, school presentations, tabling events, and social media, as evidenced by distribution logs, attendance sheets, and digital engagement metrics stored in HIPAA-compliant systems.	
Objective #2		By the end of the fiscal year, 100 unduplicated individuals will be screened by non-clinical staff for basic needs such as health insurance, housing, or food, as evidenced by screening forms stored in HIPAA-compliant systems.	
Objective #3		By the end of the fiscal year, 200 unduplicated community members will participate in Rafiki Wellness Programs (e.g., classes, pop-ups), as evidenced by sign-in sheets and registration forms stored digitally.	
Objective #4		By the end of the fiscal year, 100 participants who attend 3 or more Rafiki Wellness sessions will report maintaining or strengthening social ties, as evidenced by end-of-series surveys and group evaluation forms.	
Objective #5		By August 15, 2026, agency will submit the BAACWHI Year End Report analyzing agreed upon health outcome data and detailing completed wellness activities, locations, partnerships, accomplishments, challenges, and barriers.	

FY23-24 CHEP Performance Objectives

Objective #6		By the 15th of each month, agency will complete and submit a monthly deliverables report using the template provided by the program liaison.	
1000025063	Booker T	BAACWHI Booker T Washington Community Service Center (BHS)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Christina Goette, Vincent Fuqua
Program/Monitoring Notes:			
Objective #1	By the end of the fiscal year, the Black African American Community Wellness & Health Initiative will reach out to 250 individuals to inform them about wellness services from BTWCSC.		
Objective #2	Screening & Assessment: Process Objective. By the end of the fiscal year, the Black African American Community Wellness & Health Initiative will conduct non-clinical screenings with 40 individuals. This will be documented by intake forms done with each community member.		
Objective #3	By the end of the fiscal year, 30 unduplicated community members will participate in physical fitness activities (e.g., line dancing), as evidenced by sign-in sheets and intake forms stored digitally.		
Objective #4	By the end of the fiscal year, 350 households will receive fresh produce and/or groceries through weekly food programs as evidenced by sign-in sheets and/or digital data intakes.		
Objective #5	By August 15, 2026, agency will submit the BAACWHI Year End Report analyzing agreed upon health outcome data and detailing completed wellness activities, locations, partnerships, accomplishments, challenges, and barriers.		
Objective #6	By the 15th of each month, agency will complete and submit a monthly deliverables report using the template provided by the program liaison.		
1000025062	YMCA	BAACWHI- YMCA of San Francisco (BHS)	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liaison: Christina Goette, Vincent Fuqua
Program/Monitoring Notes:			
Objective #1	By the end of the fiscal year, the Bayview Y African American Holistic Wellness will distribute the program monthly newsletter for a total of 3,600 mailings throughout all targeted sites, as evidenced by the program contact list database		
Objective #2	By the end of the fiscal year, 40 unduplicated individuals who participate in program offerings or referred by outside community agencies will be screened for health and wellness needs as evidenced by program questionnaire.		
Objective #3	By the end of the fiscal year, 60% of participants who attended at least 5 sessions of Physical Wellness Promotions will report a physical health change as reported on the overall Health Questionnaire		
Objective #4	By the end of the fiscal year, 40 unduplicated participants screened for health and wellness needs will be referred to internal and/or external services/programs (nature walks/hikes, physical activity sessions, or Y membership and tracked by the internal database.		
Objective #5	By August 15, 2026, agency will submit the BAACWHI Year End Report analyzing agreed upon health outcome data and detailing completed wellness activities, locations, partnerships, accomplishments, challenges, and barriers.		
Objective #6	By the 15th of each month, agency will complete and submit a monthly deliverables report using the template provided by the program liaison.		

FY23-24 CHEP Performance Objectives

FY25-26

CID #	Agency	Program & Objectives	CHEP Representative
MOU # 13	SFDPH Jail Health	Jail Health Services HIVIS Testing	SOC BOCC Representative: Aurora Chavez, Nikole Trainor
Program/Monitoring Notes: Intradepartmental MOU, PDC Waived, only item required: Backup Documentation for Units of Service, Performance Objectives, Client Count, compliance of staff training			
Objective # 1		Monitor via UOS: Funding supports FTE	
MOU # 35	WPIC	Low-Threshold HCV Treatment	SOC BOCC Representative: Aurora Chavez, Nikole Trainor Program Liasion: Rachel Grinstein
Program/Monitoring Notes: Intradepartmental MOU, PDC Waived, only item required: Backup Documentation for Units of Service, Performance Objectives, Client Count, compliance of staff training			
Objective # 1		By the end of the fiscal year, 30 clients will have been enrolled in hepatitis C (HCV) treatment services	
Objective # 2		By the end of the fiscal year, 10 clients with a positive HCV RNA test result will have initiated HCV treatment	
Objective # 3		By the end of the fiscal year, 5 clients who initiated HCV treatment will have completed the HCV treatment course	
Objective # 4		By the end of the fiscal year, 1 client who completed HCV treatment will have achieved SVR12	

CID #	Agency	CHEP HIV Prevention, Sexual, Drug User Health & Community Wellness Services Program & Objectives
1000024737	Alliance Health Project (AHP)	Health Access point for API & API Transgender Women
1000025063	Booker T	BAACWHI Booker T Washington Community Service Center (BHS)
100008933	Facente	Consulting Programs (Contract Ended 06/30/2025)
1000037246	Facente	Project Based Consulting (New Contract)
1000037214	Facente	Harm Reduction Training (New Contract)
1000037460	Facente	EHE CAP Grantees (Evaluation & Community Needs Assessments) (New Contract)
MOU # 37	Gender Health (HHS MOU)	Gender Health SF (CHEP funds, charge directly to grant)
100002608	Glide (Contract Ended 06/30/2025)	HIV/HCV Linkage to Care & Harm Reduction Programs Performance Objectives (Both Programs should be measured together based on objectives below)
1000036504	Glide (contract start 10/01/2025)	HCV Linkage and Navigation Services CAT 1 (New Contract)
1000002612	HR360 (Contract Ended 06/30/2025)	HCV Linkage to care
1000024733	IFR: Instituto Familiar de la Raza, Inc.	Health Access Point for Latinx
1000002656	Livable City (contract End 06/30/2026)	Sunday Streets Program
1000024735	LYRIC	Youth Health Access Point
10000017931	Native American Health Center (NAHC) (Contract Ended 06/30/2025)	Hozhoni Project
1000035520	Native American Health Center (NAHC)	Integratated HIV/STI/HCV Testing, Tretment & Linkage Services (New Contract)
1000035520	Native American Health Center (NAHC)	Community Wellness (Health Education, Promotion, Peer Support/Training) (New Contract)
1000008932	Public Health Enterprises, Heluna Health (Contract Ends 06/30/2026)	Newcomers Health Program/Refugee Health
1000009844	Public Health Enterprises, Heluna Health (Contract Ended 06/30/2025)	Program Administration: Community Engagement, Social Marketing Program Services
100008917	Public Health Enterprises, Heluna Health (contract Ended 12/31/2025)	Program Administration: COMP A -HIV Prevention Services
1000009845	Public Health Enterprises, Heluna Health (contract Ends 06/30/2026)	Program Administration: Jail Health Services
1000035975	Public Health Enterprises, Heluna Health	Program Administration, Community Health Engagement (New contract Start 09/01/2025)
1000025064	Rafiki (Manged by BHS)	BAACWHI- Rafiki Coalition for Health & Wellness (BHS)
1000024732	Rafiki Coalition for Health and Wellness	Capacity Building Health Access Point for Black African American Community
1000024734	San Francisco AIDS Foundation (SFAF)	Health Access Point for Gay MSM Community
1000002611	San Francisco AIDS Foundation (SFAF) (Contract Ended 06/30/2025)	HIV HCV Linkage to Care Services - Mobile Low Threshold HCV Services
1000024731	San Francisco Community Health Center (SFCHC)	Health Access Point for Transwomen: STAHR (San Francisco Transgender Alliance for Health Resources)
1000024731	San Francisco Community Health Center (SFCHC)	SFCHC HAP Services - Transinformed Capacity Building
1000036520	San Francisco Community Health Center (SFCHC)	HCV Navigation and Treatment Services CAT 1 & 2, New Contract (New Contract)
10000016941	San Francisco Public Health Foundation (Contract Ends 12/31/2025)	Program Administration, Community Health Engagement
10000013727	San Francisco Public Health Foundation (Contract Ended 06/30/2025)	Program Administration, SF Tobacco Free Project
10000013401	San Francisco Public Health Foundation (Contract Ended 06/30/2025)	Program Administration, Sugary Drink Distributor Tax Project
1000036060	San Francisco Public Health Foundation (Contract start 09/01/2025)	Program Administration, SF Tobacco Free Project
1000035999	San Francisco Public Health Foundation (Contract Ended 06/30/2025)	Program Administration, Sugary Drink Distributor Tax Project
1000036026	San Francisco Public Health Foundation (Contract Ended 06/30/2025)	Program Administration: COMP A -HIV Prevention Services
1000017769	SDDT - 18 Reasons (Contract Ended 06/30/2025)	Towards Health Equity & Liberation
1000017771	SDDT - Central American Resource Center CARECEN of Northern California (Contract Ended 06/30/2025)	Health Promotion Program - Cuerpo Sano
1000018430	SDDT - Tenderloin Neighborhood Development Corporation (TNDC) (Contract Ended 06/30/2025)	Promoting Health Equity Program
1000024734	SFAF	SFAF Health Access Point Program: Gay/MSM
1000024734	SFAF	SFAF The HAP Capacity Building Activities (HIV/STI/HCV Infrastructure) Program

CID #	Agency	CHEP HIV Prevention, Sexual, Drug User Health & Community Wellness Services Program & Objectives
1000024734	SFAF	Clinical Assistant Program (Training Academy ending as of 06/30/2024)
1000024734	SFAF	SFAF Rafiki Capacity Building Activities
1000024734	SFAF	Strut Clinical Sustainability
MOU # 13	SFDPH Jail Health	Jail Health Services HIVIS Testing
MOU # 33	SFDPH Microbiology Lab	Laboratory Testing Services (MOU Ended 06/30/2024)-Charging directly to grant
MOU # 21	SFDPH STD Prevention & Control	HIV Testing, Partner Services, and Linkages to Care-STD Program (MOU Ended 06/30/2024)-Charging directly to Grant
1000006123	Shanti Project (Managed by HHS)	HCV Client Navigation Services
MOU # 9	South East Health Center	Prevention with Positives (MOU ended 06/30/2025)
1000008790	UCSF OTOP (HHS SOC Contract)	Hepatitis C Treatment in OTOP
1000036538	UCSF DSAAM (Contract start 11/01/2025)	HCV Treatment and Navigation Services (New Contract)
1000032157	UCSF Ward 86	SFGH/W86/GTZCoordination
1000032157	UCSF Ward 86	AHP Access HOPE/HALT (Program Transferred to AHP 07/01/2025)
1000032157	UCSF Ward 86	ETE Clinical Champion @W86 (funds ended 06/30/2025)
1000032157	UCSF Ward 86	HCV DeLIVER Van @ Parnusses
1000032157	UCSF Ward 86	Integrated EtHE & GTZ Program (impletation/services at Ward 86)
1000024736	UCSF Ward86	Health Access Point for People Who Use Drugs (PRO-TEST)
MOU # 35	WPIC	Low-Threshold HCV Treatment
1000025062	YMCA (Manged bu BHS)	BAACWHI- YMCA of San Francisco (BHS)