

Amendment No. 7 to Contract No. G040088 for HIV Social Services

Between

City of Austin and AIDS Services of Austin

TERMS:

Contract Amendment

- 1.0 On March 20, 2008, the City Council approved an extention to the above-referenced contract for an additional 12 month period from March 1, 2008 to February 28, 2009 and hereby agrees to amend the current contract to reflect the additional funding of \$225,705 for a total contract amount of \$225,705. The contract term will be March 1, 2008 through February 29, 2009.
- **2.0** The total Contract amount is recapped below.

Term	Contract Change Amount	Total Contract Amount
Basic Term: 03/01/04 - 02/28/05	\$ 204,561	\$ 204,561
Amendment No. 1: 03/01/05 –	\$ 204,561	\$ 409,122
02/28/06 Renewal Option #1		·
Amendment No. 2: 3% Cost of	\$2,557	\$ 411,679
Living: 03/01/05 - 02/28/06		
Amendment No. 3: 03/01/06 -	\$210,698	\$622,377
02/28/07 Renewal Option # 2		,
Amendment No. 4: 3.5% Cost of	\$3,073	\$ 625,450
Living: 03/01/06 - 02/28/07		
Amendment No. 5: one 12-month	\$ 218,072	\$ 843,522
extension: 03/01/07 - 02/29/08		
Amendment No. 6:	\$ 3,180	\$ 846,702
3.5% FY '07 Pro-rated amount:		
03/01/07 – 02/29/08		
Amendment No.7: one 12-month	\$ 225,705	\$ 1,072,407
extension: 03/01/08 - 02/28/09		

	4.1 4.2	Attachment B-7 Attachment C-7	Performance Measur Budget – Cost Alloca	
4.0	Mino to thi	ority Business Enterprise is contract.	s/Women's Business	Enterprises (MBE/WBE) goals do not apply
5.0	not c	currently suspended or d	ebarred from doing bu Parties Excluded from	that the Contractor and its principals are usiness with the Federal Government, as Federal Procurement and Non-City of Austin.
6.0	All c	other terms and condition	ns remain the same.	
BY TH of the	E SIG above	GNATURES affixed below- e-referenced contract.	w, Amendment No. 7 i	s hereby incorporated into and made a part
CONT	RACT	<u>ror</u>		CITY
7215 C	tive D Servic Came Texa	irector es of Austin ron Road as, 78752		Lynn Mueller Contract Compliance Manager P.O. Box 1088 Austin, Texas 78767 (512) 972-4011
Signati	ure			Signature
Date				Date

The following terms and conditions have been amended and attached.

3 .0

ATTACHMENT B-7

PERFORMANCE MEASURES

OUTPUT PERFORMANCE MEASURES

AGENCY NAME: AIDS Services of Austin

SECTION I: OUTPUT PERFORMANCE MEASURES

A. SERVICE CATEGORY: Case Management

OUTPUT MEASURE # 1: 9,418 units will be provided to clients receiving this service
One (1) unit of service = one 15 minute case management service contact with a client or on behalf of a client

OUTPUT MEASURE # 2: a) 138 unduplicated clients will receive case management services

A. 23 new clients will be served

B. 115 continuing clients will be served

2:b) 128 unduplicated clients will receive eligibility screening services

OUTPUT MEASURE #3: 22 unduplicated individuals who do not meet ASA's eligibility criteria will be referred to area HIV community case management services.

SECTION II: OUTCOME PERFORMANCE MEASURES

Service Category: Case Management

OUTCOME MEASURE # 1:

80% of clients surveyed will report satisfaction with the service provided.

What data will be collected analyzed and reported in order to assess this outcome?

Data will be collected on general client satisfaction with case management services at the annual client satisfaction survey with a target return rate of 20%.

How will the data be collected and compiled for this outcome measure (include description of resources and tools used)? Surveys are mailed to all current clients on the agency mailing list with a metered return envelope and offered for a two-week period to all clients accessing food pantry and dental services. This period includes two weeks during which food pantry services are delivered. An administrative assistant compiles the data on overall satisfaction with case management services.

At what point(s) or time(s) in the service delivery sequence will the data be collected and evaluated?

The client satisfaction survey will be administered annually and data will be collected and evaluated within two months of the survey. This will reach clients at different points in their service delivery.

Total Undup. Clients Evaluated for Outcome Objective	Total Number of Undup. Clients Achieving Objective	% of Undup. Clients Achieving Outcome Objective	Specify Reporting Dates
28	22	80	3/09

Service Category: Case Management

OUTCOME MEASURE #2:

80% of clients will make progress on their service plan objectives.

What data will be collected analyzed and reported in order to assess this outcome?

Eligibility/intake staff will collect client information during the intake assessment and, based on this information, will evaluate client needs in order to establish goals and objectives, with client input, for the initial individualized service plan. Case managers will develop an updated assessment and individualized service plan to further document and evaluate client service plan goals. Progress notes and service plans will reflect progress in and achievement of service plan goals. Clients will achieve this outcome when they make improvement in or achieve one or more service plan goals.

How will the data be collected and compiled for this outcome measure (include description of resources and tools used)? Eligibility/Intake staff and case managers enter service plan goals into the Provide® service plan template (electronic form) and then print the plan. Clients sign a paper copy of the individualized service plan, which is included in the client paper file.

Case managers will document in progress notes in the electronic client file, client self-report, and medical and social service providers reports that address progress in and achievement of client service plan goals. Case managers will review service plans on acuity level 3 clients every three months; and on acuity level 1 and 2 clients every six months. During the review, staff will document in a progress note that the client has achieved one or more of the service plan goals. Using a feature in Provide®, case managers will report in the electronic file that the client has achieved this outcome when he/she has met one service plan goal. Using another Provide® reporting function®, a report will be generated on the number of clients achieving the outcome and the total number of unduplicated clients receiving case management services. Once the percentage is determined from these reports, it will then be reported to the Facilities and Systems Administrator, who completes monthly grant reports. The Provide® database contains the client file and includes the data fields necessary to enter into or export required information to the ARIES database for statistical analysis as required by DSHS and A/TCHHSD.

At what point(s) or time(s) in the service delivery sequence will the data be collected and evaluated?

Baseline information is collected on each client during intake by the intake staff and is documented in the initial assessment and individualized service plan. Case managers document each client contact including notes on activities related to service plan goals and follow-up on referrals. Client progress toward said goals will be reviewed with the client every three or six months as the service plan is updated. At that time or on a semiannually basis, case managers review client service plans and report all client achieving the outcome. Consequently, data will be collected at different points in the service delivery sequence. Supervisors will monitor and evaluate the data on a quarterly basis.

Total Undup. Clients Evaluated for Outcome Objective	Total Number of Undup. Clients Achieving Objective	% of Undup. Clients Achieving Outcome Objective	Specify Reporting Dates
128*	102	80	6/08, 9/08, 12/08, 3/09

^{*}Lower than unduplicated client count due to client closures from death, moves to other cities, no longer in need of case management or loss to follow-up.

Service Category: Case Management

OUTCOME MEASURE #3:

85% of clients will receive primary medical care based on criteria on the "In Care Verification" form, with exceptions noted.

What data will be collected analyzed and reported in order to assess this outcome?

Information collected during the intake assessment will evaluate client needs and will be used to establish goals and objectives for the initial individualized service plan that will address this outcome. Case Managers will develop an updated assessment and service plan to further evaluate this need. Progress notes and service plans will reflect progress made in achievement of this goal and exceptions including reasons for not attaining goal.

Case managers will collect information that is documented in the in care survey form and will report that clients achieved this outcome when the form indicates they have received viral load test results or CD4 count results or anti-retroviral therapy within the last 12 months.*

*Note- this information may be forthcoming through ARIES so that forms are only required on clients accessing primary medical care through providers other than the Ryan White funded David Powell Clinic.

How will the data be collected and compiled for this outcome measure (include description of resources and tools used)? Completed "In Care Verification" forms will be mailed monthly, before the 20th of each month for the previous month, to the HIV Resources Administration Unit.

Case managers and the nutritionist will document client self-report and medical provider reports that address the criteria in the verification form in the client file. Case managers will document this medical information on the verification form and include it in the client paper file. Case managers will document the reason client is not in care and efforts made to get client into care. Case managers will record all verifications for each month on a central, handwritten list. Using a reporting function in Provide®, supervisors will use this handwritten list to report achieved client outcomes in the clients' electronic files. Using another Provide® reporting function, a report will be generated on the number of unduplicated clients achieving the outcome. Once the percentage is determined from these reports, it will then be reported to supervisors and the Facilities and Systems Administrator.

The Provide® database contains the client file and includes the data fields necessary to enter into or export required information to ARIES for statistical analysis as required by DSHS and A/TCHHSD.

At what point(s) or time(s) in the service delivery sequence will the data be collected and evaluated?

The "In Care Verification" form will be completed on new clients at intake and at six-month intervals thereafter; and on existing clients within six months of the last form completion, and at six-month intervals thereafter.

Consequently, data will be collected at different points in the service delivery sequence. Supervisors, on a semi-annual basis, will monitor and evaluate the data, to include the reasons clients are not in care.

Total Undup. Clients Evaluated for Outcome Objective	Total Number of Undup. Clients Achieving Objective	% of Undup. Clients Achieving Outcome Objective	Specify Reporting Dates
113*	96	85	9/08, 3/09

^{*}Lower than unduplicated client count due to client closures from death, moves to other cities, no longer in need of case management or loss to follow-up prior to due date at six months for ICV form completion

ATTACHMENT C-7 BUDGET- COST ALLOCATION

			٦	Projected Service Cat	Service	;	5	;				Jeerer	ב ב ב ב	er Jus	egory Cost Allocation Fight and Projected Budget Justilication FT 2000							
Program: Case Management Services - City HIV Services	nt Ser	vices -	City HIV	Servic	Ses																	
Please complete one worksheet per program using March 1, 2007 through February 29, 20	rogram	using Μ	arch 1, 200	' through	ı February	29, 200	8 awarde	1 or pro	08 awarded or projected figures.	es.												
Cost Calegory	=======================================	Annual Admin Cost	Annual Program Cost	%	Ryan White Title I Program Costs	%	Ryan White Title I Admin Costs	%	City HIV Social Services 9 Program Costs	Cit. Ser Admii	City HIV Social Services Admin Costs	Coun Ser Ser Pro	County HIV Social Services Program Costs	Cou Se Sei Admi	County HIV Social % Services Admin Costs	Other Program Funds	ram %	Other Admin Funds	. <u>E</u>	Total Program Costs	Total Admin Costs	TOTAL %
	1								OPERATING COSTS	TING C	OSTS											000000
Personnel:											-											
Deputy Director Access Serv (M.Flores)	0.30		16,995		5,500			32.4%	5,500	Î	16.	16.2%	2,750	-	19.1%		3,245			16,995		100%
Director of Access Ser. (J. Jonker)	0.40		36,290	28.35%	2,400	:	3 5	28.4%	5,400		4 0	4.2% 19.8%	2,700	ş	79.1%		2,545			36,290		100%
Intensive Case Manager (J. Newton)	8 8		32,500		6,810			39.5%	12,837		19.		6,438	-	19.7%		6,415			32,500		100%
Intensive Case Manager (K. Fowler)	1.00		32,500		6,810			39.5%	12,837		10		6,438		19.7%		6,415			32,500		100%
Intensive Case Manager (A. Paredes)	1.00		31,500		6,601		***	39.5%	12,442		<u>6</u>		6,240		19.7%		6,218			31,500	-	100%
Intensive Case Manager (I. Jones)	9 5		29,252	20.95%	6,129		• •	39.5%	11,554		<u>5</u>	19.8%	5,795		19.7%		5,774			20,252		100%
Access Unit Case Manager (A. Staples)	9.0		29,000		6,037		<i>,</i> 0	39.5%	11 454		n o		5 745		19.7%		5,724			29,000		100%
Case Manager/HH (M. Chrestman)	0.75		21,825		4,573			39.5%	8,620		19		4,324		19.7%		4,308			21,825		100%
EI/OOC Supervisor (J. Garcia)	09.0		24,720		5,180		c-J	39.5%	9,764		19.		4,897		19.7%		4,879			24,720		100%
El Specialist (C. Williams)	1.00		25,750		5,396		×9.	39.5%	10,171		19.		5,101		19.7%		5,083			25,750		100%
El Specialist (M. Gantt)	1.00		28,000		5,867			39.5%	11,059		<u>5</u> 0		5,547		19.7%		5,527			28,000		100%
Contract Personnel	0.36		12,000	%00.0	0 0	3		%0.0	o c		o c	%0.0	0 0		100.0%		9.013			12,000		100%
Neceptionist (ivi. Fuerites)	55.5		5		>)))		э 	2)		3		2			2,5		3
Total Program Personnel	11.76		378,889	20.68%	78,338		e)	36.4%	138,017		18.	18.3% 6	69,208		24.6%		93,327	Bi-darkitania an		378,889		100%
Administrative Personnel:									<u></u>						-						*************	- 00-00-
Facilities & Systems (L. White)	0.15	6,271		4		25.0%	1,567		42	%9	2,672		35	32.4%	2,033		%0.0		0 9		6,271	100%
Director of Finance (P. Jordan)	0.20	7,044				19.0%	1,341		32.5	2%	1,287		. t	15.1%	27.6		33.4%	2,353	2 4		7,044	800L
Systems Coordinator (L. Koube)	0.20	7,098		;		19.0%	1,351		32	32.5%	2,304		15.	15.1%	1,071		33.4%		· .		7,098	100%
Total Administrative Personnel	92.0	25,574		- Carrier Marie		20.5%	5,241	40	35.	%0	8,938		19	19.3%	4,946		25.29		80		25,574	
Total Administrative Benefits		6,616				19.0%	1,259		32.	2%	2,148			15.1%	666		33.4%	2,210	0		6,616	100%
Benefits Total Descond	Ţ	32 190	119,350	119,350 20.68%	103 014	- 1-	8 501 S	36.4%	181 493		11 086 18.	18.3%	91,800	:	5 945	:	29,398	8 658	α	119,350	32 190	%00L
Occupancy: Utilites, Repairs,		,	200		2				2		}		3		2	! 	}	5		201	Î	
Maintenance, Interest expense, Rent,														***********								
and Depreciation.	~	15,007	14,347	34.85%	5,000 19.0%	19.0%	2,857 3	34.9%	5,000 32.5%		4,872 17.4%		2,500 15.1%	1%	2,265 12.9%		1,847 33.4%	5,013	က	14,347	15,007	100%
Copiers and other leased equipment,		7 635	3 741	20 95%	784	49 0%	1 454 3	39.5%	1 478 32 5%		2 479 19 8%	%8	741 15 1%	7	1 153 19 7%	%	738 33 4%	2 551		3 741	7.635	100%
Postage	******	0	1.781		373	%0.0		39.5%			0 19.8%	%8		%0.0	0 19.7%	%	352 0.0%	} i	0	1.781	0	100%
Telephone		0	6,347			%0.0	0	33.1%	2,100 0.0	%0.0	0 16.5%	2%		%0.0	0 17.3%				_	6,347	0	100%
Staff Travel, Conferences & Training		0	10,465		1,918	%0.0	0	0 18.4%		%0.0				%0.0	0 54.5%				0	10,465	0	100%
Office Supplies		0	6,425	7.7	1,346	%0.0		0 39.5%		%0.0				%0.0	• • •					6,425	0	100%
Audit and Accounting		3,062		%00.0	0	19.0%		%0.0	0 32.5%			%0.0		15.1%		%			m	0	3,062	100%
Insurance/Bonding		7,319			0	0 19.0%		%0.0	.,			%0.0	•	%		% :	.,	2,44	· 02	0	7,319	100%
Computer Service	+	0	2,612	20.95%	547	%0.0		39.5%		%0.0	0 19.8%			%0.0	0 19.7%		516 0.0%		0,	2,612	0	100%
TOO ONITAGEOUS	\dagger	33,024	45,718	24 4607	12,069	707 0			14,772		70,727		4.	\perp	4,985	15	1		- 0	45,718	33,024	\$600.474
TOTAL OPERATING COST	F	\$00,214 Total	600 171	41.10%	200,01	6.4%	917,70	% -0 -0 -0	\$190,200 55.4%		\$21,00/10.1%		396,367	2.0%		476 \$134,242	247	200 S	<u></u>	106,340	PIZ.COC	\$009,171
Units of Service Delivered	-	5			5,522				9,418				4,720			Ф	6,648				Total Units	26,308
Operating Unit Cost	-															SOM REPORTS				#		