

**AMENDMENT NO. 1 TO
AGREEMENT 84289**

This Amendment No.1 ("Amendment") is made and effective as of **January 18, 2022** to the agreement made and effective as of **December 1, 2021** and assigned the number **84289** ("Agreement") between the Fund for Public Health in New York, Inc. ("FPHNY") a nonprofit corporation having its principal office located at 22 Cortlandt Street, Suite 802, New York, New York 10007 and **Boro Park Jewish Community Council** ("Contractor"), having its principal office located at 1310 46th Street, Brooklyn, NY 11219. Any capitalized terms used in this Amendment, which are not otherwise defined herein, shall have the same meanings ascribed to them in the Agreement.

WHEREAS, the Agreement provided for Sub-Recipient to increase access to Covid-19 prevention, treatment, and vaccination services, address Covid-19 risk factors, and build collective action to address racial disparities and resource needs throughout long term recovery (the "Project"), in furtherance of the purpose of the U.S. Department of Health and Human Services ("DHHS") Grant and, in particular, to support the work of FPHNY and DOHMH; and

WHEREAS, FPHNY, on behalf of DOHMH, and the Sub-Recipient, wish to modify certain terms of the Agreement.

NOW, THEREFORE, in consideration of the mutual promises and covenants herein set forth, FPHNY and Sub-Recipient hereby agree to amend the Agreement as follows:

- A. Appendix A to the Agreement (Scope of Work) is replaced with the modified Appendix A-1 attached hereto.
- B. Appendix B to the Agreement (Budget) is replaced with the modified Appendix B-1 attached hereto.
- C. Section II.A. Services/Deliverables of the Agreement is replaced in its entirety by the following underlined section:
 - A. Services/Deliverables: Contractor shall provide services and complete deliverables in the manner and at the levels set forth in the Scope of Services annexed hereto and incorporated herein as Appendix A. Any due dates listed in Appendix A are subject to change at the discretion of DOHMH. Contractor must request and receive written approval from FPHNY for increases to any line items contained in the budget provided for in Appendix B prior to any expenditure of funds above the amount budgeted for the line item in question. Failure to obtain such approval shall be grounds, in the sole discretion of FPHNY, for denial of any reimbursement over the budgeted amount.
- D. Section II.E. Closeout Procedures is replaced in its entirety by the following underlined article:

Close-out Procedures: Upon the Expiration Date, or the sooner termination of this Agreement, Contractor shall comply with FPHNY's disclosed close-out procedures, including, but not limited to:

- 1. submitting within thirty (30) days of the contract end date a final invoice for all services that have been completed under the contract terms and conditions;

2. accounting for and refunding to FPHNY, within fifteen (15) days, any excess payments that have been made to the Contractor pursuant to this Agreement;
3. furnishing to FPHNY, within fifteen (15) days, an inventory of all equipment, appurtenances and property purchased through this Agreement on behalf of FPHNY or DOHMH as provided for herein;
4. turning over to FPHNY, upon request, within fifteen (15) days, all books, records, documents and material specifically relating to this Agreement; and
5. confirming the completion of the processes set forth in 1 through 4 above.

- E. Section III. Consideration and Payment of the Agreement is replaced in its entirety by the following underlined article:

IV. BUDGET AND PAYMENT

- A. Total Compensation: The total maximum amount payable to Contractor under this Agreement shall not exceed \$927,770, with ten percent (10%) of the Award (the "Advance") to be paid to Contractor within 21 business days of the execution date, in accordance with Appendix B (the "Budget") Costs that are reimbursable under this Agreement shall be invoiced in accordance with paragraph D of this Section III.
- B. Budget: Contractor shall seek and obtain FPHNY's approval of a line item budget which meets FPHNY's requirements and reflects the Total Compensation pursuant to Section IV.A. above. The approved line item budget shall be attached hereto and incorporated herein by reference as Appendix B.
- C. Budgetary Changes: Contractor shall seek and obtain FPHNY's prior written approval before implementing: (i) any line item change in the approved budget of greater than \$5,000; (ii) any transfer of funds from the Personal Services (PS) category to the Other Than Personal Services (OTPS) category; (iii) any new line item added to the budget.
- D. Payments: Contractor shall submit, no later than thirty (30) days after the end of each month within the term of this Agreement, a detailed invoice (each, an "Invoice," and together, "Invoices") itemizing the specific costs and all expenses incurred in the prior month to perform the Scope of Work. The Invoices shall be in a form approved by FPHNY. The Invoices shall be accompanied by appropriate supporting documentation deemed necessary by FPHNY and a duly executed Form W-9. FPHNY shall review the Invoices and supporting documentation as required, and may disallow for payment any charges which were not rendered, documented and/or authorized in accord with the terms of this Agreement. Failure to submit Invoices in accordance with the provisions of this Agreement may result in the termination of this Agreement by FPHNY. The amounts due and payable from FPHNY to Contractor under any such Invoice, including for any Installment, shall be reduced by an amount equal to twenty-five (25%) of the Invoice until the cumulative amount of such reductions shall be equal to the amount of the Advance.
- E. Subject to the Availability of Funds. This Agreement is subject to the availability of funds and all approvals required by DOHMH, the CDC, and/or FEMA. FPHNY shall notify Contractor, in

writing, of any modification, payments, delays, or cancellations of said funds and shall modify the Agreement accordingly.

- F. Use of Payment(s); Certified Statement: Subject to Section IV.D. herein, FPHNY shall make payment to Contractor of any undisputed amounts by electronic funds transfer to Contractor's account at a federally insured financial institution within 30 days of receipt of a properly completed and documented Invoice. Contractor shall not seek nor be paid for services, deliverables or costs provided for under this Agreement if Contractor has received or is reasonably likely to receive payments for such services, deliverables or costs from another source. Contractor shall immediately return to FPHNY any payments made to Contractor to which it is not entitled.
- G. No Duplicative Reimbursement: Contractor shall not seek nor be paid for services, deliverables or costs provided for under this Agreement if Contractor has received or is reasonably likely to receive payments for such services, deliverables or costs from another source, including, but not limited to client fees, private insurance, public donations, grants, legislative funding from units of government, or any other source.
- H. Erroneous Payments: Contractor shall immediately return to FPHNY any payments made to Contractor to which it is not entitled.
- I. Maintenance of Books and Records:
 - a. Contractor shall maintain complete and accurate books and records supporting all payments made under this Agreement. Contractor shall keep such books and records in accordance with generally accepted accounting principles. Such records may include but are not limited to bank statements, canceled checks, bills, receipts, employee time cards, requests for payment and deposit slips relating to all financial accounts and transactions. The expenditures and receipts shall be segregated on the books of Contractor.
 - b. For six (6) years after the Expiration Date, or sooner termination of this Agreement, Contractor shall maintain copies of all financial and work reports, evaluation surveys and audits which reflect all Services rendered hereunder and fiscal accountability for all monies appropriated and spent thereby, all training and curricula materials (if any) prepared or compiled in connection with Services provided under this Agreement, and all attendance sheets and training rosters collected and prepared in connection with all trainings and activities (if any) held pursuant to this Agreement.
 - c. Contractor shall make such books, financial documentation, records, reports, surveys, audits, materials, and other documents available at all reasonable times during the performance period of this Agreement and for six (6) years after the Expiration Date or sooner termination of this Agreement or, in the case of an ongoing audit that encompasses the Services provided under this Agreement by federal, state or local authorities, for six (6) years after completion of the audit, for inspection and/or audit by FPHNY, DOHMH, the City of New York, the FEMA Administrator, the Comptroller General of the United States, or any of their authorized representatives. FPHNY, DOHMH, the City or their agents, and other federal, state or local governmental agencies will determine the scope and protocol of all inspections and audits, based on a review of any materials they consider reasonably necessary, and Contractor shall assist and cooperate in relation to such inspections and audits.

- F. Except as amended hereby, the Agreement shall remain in full force and effect. In the event there is any inconsistency or conflict between the provisions in this Amendment and those in the Agreement, the provisions in this Amendment shall supersede and control with respect to the subject matter of this Amendment.
- G. All disputes arising out of this Amendment shall be interpreted and decided in accordance with the laws of the State of New York.
- H. This Amendment will not be binding or effective until executed by an authorized representative of FPHNY and Sub-Recipient.
- I. This Amendment may be executed in any number of counterparts, each of which will be deemed an original, but all of which together will constitute but one and the same instrument.

IN WITNESS WHEREOF, the parties have executed this Amendment as of the day and date first written above.

FUND FOR PUBLIC HEALTH IN NEW YORK, INC.

By: DF for Sara Gardner
Name: Sara W. Gardner, M.P.H.
Title: Executive Director

BORO PARK JEWISH COMMUNITY COUNCIL

By: Avraham M. Greenstein
Name: Avraham Greenstein
Title: Executive Director

APPENDIX A
Scope of Services
December 1, 2021 – June 30, 2022

I. Introduction/Overview and Purpose

FPHNYC works in partnership with the Health Department to implement programs that protect and promote the health of New Yorkers. For the COVID-19 Disparities Grant, FPHNYC will provide fiscal oversight and administrative management, while the Health Department will be responsible for program planning, implementation, and evaluation.

The goal of the COVID-19 Disparities Grant (CDG) is to support community-based organizations (CBOs) with deep neighborhood knowledge to build up local Community Health Worker (CHW) teams in the NYC neighborhoods most impacted by COVID-19 and long-standing racial/ethnic inequities to increase access to COVID-19 services, improve overall health outcomes, and address the social needs of the neighborhood. A community health worker is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A community health worker also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy. Through the initiative, the New York City Department of Health and Mental Hygiene (DOHMH), in partnership with the Fund for Public Health in New York, Inc. (FPHNYC), will provide funding to CBOs to use their CHW staff to support local coordination of COVID-19 response and recovery, identify existing and needed resources in their neighborhood, help residents navigate towards these resources, refer residents to clinic-based care as appropriate, foster collaboration among key groups and services, and identify opportunities for advocacy to address racial inequities. CDG is one of the new initiatives under the Public Health Corps, a citywide effort led by DOHMH and the New York City Health and Hospitals Corporation.

The objectives of the funding are to:

- Increase trust regarding the COVID-19 vaccine
- Increase access to and provide navigation support for obtaining the vaccine and vaccine booster and COVID-19 testing
- Provide education about vaccine facts, transmissibility, how to keep children safe, and general information on COVID-19 prevention.

II. Contractor Scope of Services

As part of the CDG Project, the Contractor shall be responsible for the following:

General Responsibilities:

1. Ensure all information disseminated in materials, messaging and outreach is consistent with DOHMH and CDC guidance. Updated guidance will be incorporated within two business days of distribution by DOHMH.

2. Participate in regular meetings and calls with CDG staff to ensure program deliverables are being met, invoices are being submitted in a timely manner, data is being submitted as required, and other programmatic needs are being addressed. This will include participation in weekly strategy calls with CDG program staff and other Contractors. Calls outside of the regular weekly calls may be needed. Contractor will also respond to any emails, questions, or requests from DOHMH and/or FPHNYC in a timely manner.
3. Coordinate, with facilitation by DOHMH, with other contractors operating in the same geographic areas or targeting the same or similar communities.
4. Contractor shall be paid upon completion of deliverables and activities in accordance with Appendix A, Scope of Work, and upon review and approval by DOHMH. Consistently missing deadlines may result in payments being reduced or withheld. If DOHMH determines that the Contractor is failing to fully perform under this Agreement, the Contractor will be required to follow a corrective action plan designed by DOHMH in accordance with the terms of this Agreement.
5. Contractor shall follow all protocols and DOHMH public health guidelines during the ongoing COVID-19 pandemic, including but not limited to social distancing and the use of face coverings. Further, contracted staff will be required to adhere to the DOHMH COVID Safe Requirements, this requirement stipulates that New York City Department of Health and Mental Hygiene (NYC DOHMH) personnel must either be vaccinated against COVID-19 or be required to undergo weekly COVID-19 testing.
6. Contractor shall provide a dedicated point of contact for all programmatic work and an administrative contact for financial and contractual matters, including invoicing. The contacts should be people in the organization with responsibility and oversight in each area. An alternate contact should be provided for programmatic issues in the event staff are out of the office or unreachable.
7. Contractor shall follow the Centers for Disease Control and Prevention (CDC)'s guidelines for incentives. Allowable incentives include generic gift cards, store vouchers, fare cards for transportation, and gas cards. Unallowable incentives include cash, lottery tickets, alcohol, drugs, entertainment expenses, food, commemorative or promotional items, and gift cards that endorse a vendor. Contractor will track distribution of all incentives using the Incentive Distribution Log provided by FPHNYC and submit logs for each invoice period.

Population to be Served:

Contractor's primary focus shall be the following awarded neighborhood(s) and zip codes: Borough Park (11204, 11218, 11219, 11230). Contractor shall develop resources and plan activities to ensure services are provided in all zip codes of the awarded neighborhood; however, Contractor must prioritize zip codes that show higher transmission rates and/or lower vaccination rates. DOHMH may also direct Contractor to expand work outside the zip codes of the awarded neighborhood to respond to emerging priorities and documented needs within those areas.

Priority populations within the focus area include, but are not limited to:

- People of color (BIPOC)

- People over 65
- Documented or Undocumented Immigrant Communities
- People with disabilities, living with chronic disease, and/or with mental or behavioral health needs
- People experiencing or who are unstably housed
- People who are justice-involved

No changes may be made to service areas and/or priority populations without prior written approval from FPHNYC and DOHMH.

Contractor Deliverables

The Contractor will be responsible for the following time-outlined deliverables as detailed below. In response to the ongoing COVID-19 pandemic, DOHMH reserves the right to modify deliverable activities to best meet public health needs. Contractors will be notified of any substantive changes to deliverables in a timely fashion.

- One-time Deliverables, Months 1-2: The deliverables below must be completed within the first 2 months of the contract period.
 - Deliverable 1: Start-up/Staffing
 - Deliverable 2: Confirmation of Community Health Needs and Equity Priorities
 - Deliverable 3: Partner Engagement Plan
- Recurring Deliverables, Starting 12/1/21: The following deliverables are expected to begin in the first month of the contract period, concurrent with the one-time deliverables above.
 - Deliverable 4: Reporting and Evaluation
 - Deliverable 5: Project Coordination and Training
- Recurring Deliverables, Starting 1/30/22: The following deliverables are expected to begin on January 30, 2022.
 - Deliverable 6: Community Engagement and Education
 - Deliverable 7: Resource Navigation
 - Deliverable 8: Partner Engagement

One-time Deliverables, Months 1-2

(1) Start-up/Staffing Contractor shall:		
Required Activities/Tasks	Timeline	Required Documentation/Reporting

<p>1. Identify, recruit, and hire all full-time and part-time staff to be assigned to or support the COVID-19 Disparities Project. Staffing plan should include the following:</p> <ul style="list-style-type: none"> • Project lead for operational planning and project management and to serve as main point of contact for FPHNYC/DOHMH; • 12 full-time equivalent (FTE) CHWs and 2 FTE CHW Supervisors that reflect the linguistic/racial/ethnic/religious diversity of the catchment, and who are local to the catchment area. Contractor is expected to make a good faith effort to hire Vax4All staff in at least 4 CHW positions, provided that the applicants have received CHW training and reside in Contractor’s assigned neighborhood. • Staff person to oversee the contract management, including invoicing, and serve as fiscal/administrative contact • Leadership positions focused on health equity. <p>2. Develop and implement a plan for onboarding, training, and professional development of CHW hires, including advanced training for CHW supervisors.</p> <p>DOHMH will provide support for rapid hiring of existing CHW workforce through DOHMH-supported projects such as Vax4All Core.</p>	<p>All activities and deliverables are due by January 31, 2022.</p>	<p>The following must be submitted and approved in order to receive payment:</p> <ol style="list-style-type: none"> 1. Completed organizational charts outlining staff, including CHW staff, directly assigned to or supporting CDG and outlining how the CDG program fits within the overall CBO staff structure 2. Job descriptions (JDs) of all roles in the organization with a health equity focus 3. Training plan for CHW and CHW supervisors 4. Training log with training title, participant names, completion date and supervisor verification
<p>(2) Confirmation of Community Health Needs and Equity Priorities Contractor shall:</p>		
<p>Required Activities/Tasks</p>	<p>Timeline</p>	<p>Required Documentation/Reporting</p>
<p>1. Perform a review/analysis of community-level data on health disparities, living conditions, and social needs that increase COVID-19 risk and identify community health priorities using knowledge and intelligence gathering interactions.</p>	<p>All activities and deliverables are due by January 31, 2022.</p>	<p>The following must be submitted in order to receive payment:</p> <ol style="list-style-type: none"> 1. Written report, using template provided by DOHMH, describing

<p>2. Conduct seven (7) community listening sessions and/or other mechanisms of community engagement, as approved by DOHMH, to inform development of priorities for reducing COVID-19 risk and disparities in the neighborhood. There should be at least one listening session conducted per unique zip code with a minimum of 20 residents per session.</p> <p>3. Develop written report between 3-5 pages in length describing community-led health and social priorities to reduce COVID-19 risk and disparities in the neighborhood based on findings from review/analysis of community data and feedback from listening sessions. A template for completing the report will be provided by DOHMH.</p> <p>4. Develop a community health equity plan to provide a framework for capturing equity priorities in the catchment area. Using the plan, develop a COVID-19 scorecard to track progress against equity milestone. Templates for completing the health equity plan and COVID-19 scorecard will be provided by DOHMH.</p>		<p>community-led health and social priorities to reduce COVID-19 risk and disparities in the neighborhood</p> <p>2. Weekly reporting of listening sessions completed. Data reported will include but not limited to:</p> <ul style="list-style-type: none"> o Date of event/meeting o Number of attendees o Duration of event (hours) o Languages of events o Priority populations o Community feedback, challenges, successes, major findings, etc. <p>3. Health equity plan with COVID-19 scorecard developed using templates provided by DOHMH.</p>
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>(3) Partner Engagement Plan Contractor shall:</p>		
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>1. Develop an engagement plan for the neighborhood that outlines the neighborhood coalition-building activities and direct community resident services to be staffed by CHWs in support of the creation/strengthening of a health improvement network in the neighborhood.</p> <p>The plan will identify priority populations reached by the program, incorporate linguistic and cultural considerations and accommodations for communicating effectively with priority populations, and describe strategies for addressing attitudes and barriers. The plan will also reflect existing coalition/network membership and plans to expand and</p>	<p>All activities and deliverables are due by January 31, 2022.</p>	<p>The following must be submitted in order to receive payment:</p> <ol style="list-style-type: none"> 1. Partner engagement plan for entire UHF neighborhood catchment developed using template provided by DOHMH. 2. Initial Neighborhood contact list including main contacts for coalitions, networks, community and faith-based organizations for entire UHF neighborhood catchment

<p>build this network with additional key neighborhood stakeholders.</p> <p>2. Identify and establish a contact list for all coalitions, networks, community and faith-based organizations and groups in the neighborhood organized with the purpose of improving health of the residents, with a particular focus on the on COVID-19 response or related activities. Including all city-funded COVID-19 contractors with presence in the area.</p>		
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Recurring Deliverables, Starting 12/1/21: To be completed each invoice period (4 weeks) as specified below.

Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>(4) Reporting and Evaluation Contractor shall:</p>		
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>1. Provide daily and weekly reporting of outreach and other project activities and deliverables in the Public Health Partners Connect (PHPC) portal as specified by DOHMH.</p> <p>2. Track distribution of all incentives, in accordance with CDC guidelines, using the Incentive Distribution Log provided by FPHNYC and submit logs for each invoice period.</p> <p>3. Participate in quarterly performance and program evaluation in line with CDC guidelines, including key stakeholder interviews, focus groups, surveys, story collection forms, progress reports, etc. as required.</p> <p>DOHMH will provide 1-2 weeks' advance notice of all activities and deadlines, as well as detailed instructions and guidance, including all evaluation templates, surveys, report formats etc.</p>	<p>Reporting due daily and weekly, 12/01/2021-06/30/2022</p>	<p>The following must be submitted in order to receive payment:</p> <ul style="list-style-type: none"> • Weekly reporting submitted to DOHMH, including but not limited to: <ul style="list-style-type: none"> ○ Number of meetings/events ○ Number of participants ○ Number of hours ○ Languages of events ○ Priority populations ○ Community feedback, challenges, successes, major findings, etc. ○ Scheduled activities five (5) business days in advance including all relevant

		<p>information such as location or link to event, scheduled speakers, and expected number of attendees</p> <ul style="list-style-type: none"> • Incentive Distribution Log submitted for each invoice period • Project evaluation activities/reporting
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>(5) Project Coordination and Training Contractor shall:</p>		
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>Participate in DOHMH-led meetings and trainings, including but not limited to:</p> <ol style="list-style-type: none"> 1. CDG partner training sessions focused on preparing partners for COVID-19 outreach and engagement, sensitizing staff to health equity principles, and programmatic data entry platforms. 2. Weekly strategic planning meetings with DOHMH program team. 3. Meetings with DOHMH technical assistance team as needed, including representatives of organization's program and executive team. 4. Biweekly DOHMH-led partners forum. 5. Borough wide coordination meetings with other city funded CBOs working in COVID-19 Response. 6. Mayor's Taskforce on Racial Inclusion & Equity (TRIE) neighborhood coordination meetings where relevant. 7. Neighborhood steering committee or other neighborhood governance meetings. 8. Participate in quarterly peer-to-peer learning sessions facilitated by DOHMH to foster collective impact and collaborative learning 	<p>Reporting due weekly, 12/01/2021-6/30/2022</p>	<p>The following must be completed and submitted in order to receive payment:</p> <ol style="list-style-type: none"> 1. 90% attendance at meetings and trainings each month 2. Meeting notes/minutes to demonstrate participation in or leadership of coordination, governance or coalition activities as outlined.

9. Individual and group check-ins and activities as needed to facilitate cross education and develop plans for operational activities informed by existing data and community feedback.		
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Project Implementation Deliverables, Starting 1/30/22: To be completed after the one-time deliverables described above have been met.

Required Activities/Tasks	Timeline	Required Documentation/Reporting
(2) Community Engagement and Education Contractor shall:		
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>1. Community Outreach: Market and promote COVID-19 prevention, testing and vaccination services to community members through advertisement in local media outlets, digital channels, canvassing, flyering, postering, or other outreach efforts to reach the priority population. Contractor will be responsible for twelve (12) 3-hour flyering and canvassing sessions per invoice period (4 weeks); placing at least 150 posters in high-traffic locations per invoice period.</p> <ul style="list-style-type: none"> • Examples of activity sites include playgrounds, places of worship, food distribution sites, NYCHA and other building entrances, bodegas, bars, restaurants, grocery stores, busy intersections and subway stops, tabling at businesses, program intakes and orientations, social worker check-ins, legal services or other social service appointments. • To count towards completion of the weekly target, outreach activities must include an organized effort involving at least half the staff budgeted for this project (i.e.an activity or shift must involve multiple staff). <p>2. Provide one (1) in-person or remote educational session per week to increase community knowledge of services,</p>	Services provided weekly, 1/30/2021-6/30/2022	<p>The following must be submitted in order to receive payment:</p> <p>Daily and weekly activity reporting submitted to DOHMH, including but not limited to:</p> <ul style="list-style-type: none"> ○ Date of outreach event ○ Type of event ○ Number of attendees (in-person) ○ Number of attendees (virtual) (as applicable) ○ Number of hours ○ # of CHWs facilitating session ○ Languages of events ○ Number of social media posts and impressions (if applicable) ○ Number of local media ads (if applicable) ○ Community feedback, challenges, successes, major findings, etc. ○ Scheduled activities five (5) business days in advance

<p>needs and priorities, in accordance to identified community priorities. Sessions should cover COVID-19 topics as well as health education and social service navigation and should be tailored for the community.</p> <p>3. Publish at least four (4) unique social media posts each week and at least fifteen (15) posts per month. Post should educate and share updates on services such as testing, vaccination, social services, and healthcare access.</p> <p>Eligible distribution methods include listservs, local media, social media, messaging apps, webinars, phone trees, or other methods for messaging pre-approved by DOHMH.</p> <p>DOHMH may provide video or audio messages. If Contractor produces their own content, messages must be approved by DOHMH prior to production and dissemination.</p> <p>All materials and messaging must be updated when public health guidance changes. DOHMH will provide notification of changes.</p>		<p>including all relevant information such as location or link to event, scheduled speakers, and expected number of attendees</p> <p>If less than 100% completion is achieved for the invoice period, a written justification must be submitted and accepted by DOHMH for payment to be made.</p>
<p align="center">Required Activities/Tasks</p>	<p align="center">Timeline</p>	<p align="center">Required Documentation/Reporting</p>
<p>(3) Resource Navigation Contractor shall:</p>		
<p align="center">Required Activities/Tasks</p>	<p align="center">Timeline</p>	<p align="center">Required Documentation/Reporting</p>
<p>1. Identify residents with health or social service needs and provide services and referrals to services for at least 300 residents per week to support COVID-19 vaccination access/appointments. Services will include, but are not limited to:</p> <ul style="list-style-type: none"> • Booking appointments, supporting individuals in finding a walk-up site, determining eligibility, or discussing fears, concerns, and barriers to getting the vaccine. • Providing information for or setting up appropriate transportation for eligible New 	<p>Services provided weekly, 1/30/2021-6/30/2022</p>	<p>The following must be submitted in order to receive payment:</p> <p>Daily and weekly activity reporting submitted to DOHMH, including but not limited to:</p> <ul style="list-style-type: none"> ○ Demographics of clients served ○ Number of people referred for vaccines ○ Number of people provided resource navigation services in past week

<p>Yorkers to and from vaccination site.</p> <ul style="list-style-type: none"> Facilitating referrals/recommendations to other providers and community partners for individuals in need of other health or social services. <p>There is potential for the performance measure for this deliverable to be raised or lowered based on changes to demand for navigation services during the project period.</p>		<ul style="list-style-type: none"> Type of navigation services provided
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<p>(4) Partner Engagement Contractor shall:</p>		
Required Activities/Tasks	Timeline	Required Documentation/Reporting
<ol style="list-style-type: none"> Once per invoice period (4 weeks), host or participate in a Day of Action (DOA) to promote COVID-19 related health equity in collaboration with other DOHMH partners, including Federally Qualified Health Centers (FQHCs), to enhance the impact of each Day of Action. Establish new and/or participate in existing coalition meetings each month to share updates on COVID-19 data including progress towards equity milestones and COVID-19 scorecard data, and contribute to neighborhood emergency preparedness, community recovery and anti-racist praxis. Each invoice period (4 weeks), update partner contact lists to ensure Contractor has up-to-date and accurate information. Work with DOHMH to inventory communication assets and materials on the COVID-19 pandemic (e.g. on testing, tracing, quarantine, vaccination, prevention, long-term recovery) and disseminate to partner networks to ensure wide coverage of the neighborhoods. 	<p>Services provided weekly, 1/30/2021-6/30/2022</p>	<p>The following must be submitted in order to receive payment:</p> <ol style="list-style-type: none"> Weekly event reporting submitted to DOHMH, including but not limited to: <ul style="list-style-type: none"> Number of meetings Type of meeting Number of attendees (in-person) Number of attendees (virtual) (as applicable) Number of hours Community feedback, challenges, successes, major findings, etc. Meeting minutes (as applicable) Updated partner contact lists Other required documentation as needed

Schedule of Deliverables

DELIVERABLE	REQUIRED DOCUMENTATION	DATE(S) TO BE COMPLETED
1) Start-up/Staffing	<p>The following must be completed and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1. Organizational chart 2. Training plan for CHWs and CHW supervisors 3. Training log including with name, training completion date and supervisor verification 	All activities and deliverables are due by January 31, 2022
2) Confirmation of Community Health Needs and Equity Priorities	<p>The following must be completed and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1. Written report between 3-5 pages in length describing community-led health and social priorities to reduce COVID-19 risk and disparities in the neighborhood 2. Weekly reporting of required deliverable data, as specified in Appendix A 3. Health equity plan and COVID-19 scorecard 	All activities and deliverables are due by January 31, 2022

3) Partner Engagement Plan	<p>The following must be completed and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1) Completed partner engagement plan detailing activities for entire UHF neighborhood catchment 2) Completed partner contact list of all coalitions, networks, community and faith-based organizations and groups 	All deliverables are due by January 31, 2022.
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DELIVERABLE	REQUIRED DOCUMENTATION	DATE(S) TO BE COMPLETED
4) Reporting and Evaluation	<p>The following must be completed and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1. Daily and weekly reporting of required deliverable data, as specified in Appendix A. <u>For weekly reporting, on-time submission is within 7 days of the close of the previous week.</u> 2. Incentive Distribution Log submitted for each invoice period 3. Evaluation activities, including but not limited to key stakeholder interviews, focus groups, surveys, story collection forms, progress reports, etc. as required. 	Reporting and evaluation completed daily and weekly, 12/1/2021-6/30/2022
5) Project Coordination and Training	<p>The following must be completed/submitted and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1. 90% attendance rate per invoice period (4 weeks) at the following: strategy planning meetings, DOHMH technical assistance team meetings, biweekly partners forum, borough coordination meetings, TRIE coalition meetings, steering committee meetings, peer-to-peer learning sessions, and other meetings as required 2. Meeting notes/minutes to demonstrate participation in or leadership of coordination, governance or coalition activities as outlined. <p>DOHMH will not require submission of notes/minutes meetings where DOHMH provides after meeting materials, including but not limited to the</p>	Regular meeting and training attendance, 12/1/2021-6/30/2022

	Partner's Forum, biweekly borough coordination call, and weekly strategic planning meetings.	
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DELIVERABLE	REQUIRED DOCUMENTATION	DATE(S) TO BE COMPLETED
6) Community Engagement and Education	<p>The following must be submitted and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1. Weekly reporting of required deliverable data, as specified in Appendix A 2. If less than 100% completion is achieved for the invoice period, a <u>written justification must be submitted and accepted by DOHMH for payment to be made.</u> 	Services provided weekly, 1/30/2021-6/30/2022
7) Resource Navigation	The following must be submitted and approved by DOHMH prior to payment:	Services provided weekly, 1/30/2021-6/30/2022

	<ol style="list-style-type: none"> 1. Weekly reporting of required deliverable data, as specified in Appendix A 2. If less than 100% completion is achieved for the invoice period, <u>a written justification must be submitted and accepted by DOHMH for payment to be made.</u> 	
8) Partner Engagement	<p>The following must be submitted and approved by DOHMH prior to payment:</p> <ol style="list-style-type: none"> 1. Weekly reporting of required deliverable data, as specified in Appendix A 2. Meeting notes/minutes to demonstrate participation in or leadership of coordination, governance or coalition activities as outlined. 3. Updated partner contact lists 4. Other required documentation as needed 	Services provided weekly, 1/30/2021-6/30/2022

APPENDIX B-1

Budget Detail, Payment Provisions, and Reporting Schedule

- A. The Sub-Recipient will be paid for services rendered under this Agreement and reimbursed for actual, eligible expenses incurred and paid in accordance with all terms and conditions of this Agreement, up to a maximum of **\$927,770**.
- B. Allowable and Unallowable Costs
- (1) FPHNY reserves the right to disallow costs for any expenditure, as determined by FPHNY to be: out of compliance with this Agreement, unrelated or inappropriate to contract activities, incurred outside of contract terms, when adequate supporting documentation is not presented, or where prior approval was required but was either not requested or not granted. FPHNY shall make the final determination of whether a cost is allowable or unallowable under this Agreement. To be allowable under this Agreement, a cost must meet all of the following general criteria:
- Be necessary and reasonable for the performance of the project under this Agreement
 - Be reasonable
 - Conform to any limitations or exclusions set forth in this Agreement
 - Be consistent with policies and procedures that apply uniformly to both government-financed and other activities of the organization
 - Be determined and accounted in accordance with generally accepted accounting principles (GAAP)
 - Be adequately documented, as specified by FPHNY.
- (2) The following types of expenses are specifically not allowable under this Agreement. FPHNY shall have the authority to make the final determination as to whether an expense is an allowable cost.
- Alcoholic beverages;
 - Bad debts;
 - Compensation of trustees, directors, officers, or advisory board members, other than those acting in an executive capacity;
 - Contingency provisions (funds) (Self-insurance reserves and pension funds are allowable);
 - Defense and prosecution of criminal and civil proceedings, claims, appeals, and patent infringement;
 - Deferred costs;
 - Depreciation;
 - Donations and contributions, including donated goods or space;
 - Entertainment costs, other than expenses related to client incentives;
 - Fines and penalties (including late fees);
 - Fundraising and development costs;
 - Goods or services for officers' or employees' personal use;
 - Housing and personal living expenses for organization's officers or employees;
 - Idle facilities and idle capacity;
 - Litigation-related expenses (including personnel costs) in action(s) naming the City as a Defendant;
 - Lobbying or other expenses related to political activity;

- Losses on other agreements or casualty losses;
- Public relations costs, except reasonable, pre-approved advertising costs related directly to services provided under this Agreement;
- Taxes, other than payroll and other personnel-related levies; or
- Travel outside of New York City.

C. Payment Advance

PAYMENT	REQUIRED DOCUMENTATION	DATE TO BE COMPLETED	PAYMENT AMOUNT
10% Contract Advance	Payment will be made upon submission of the following: <ol style="list-style-type: none"> 1. Signed contract 2. Payment Advance Request Form 3. Certificate of Insurance 4. EFT Enrollment Form 5. PIP #, <i>if applicable</i> 6. Fiscal Sponsorship Agreement, <i>if applicable</i> 	Payment will be made within 21 business days of submission of all required documentation.	Up to \$92,777

FPHNYC shall recoup the amount of the Advance by crediting twenty-five (25%) of all subsequent invoice payments until the Advance is repaid in full.

D. Expenditure Reporting

- (a) Sub-Recipient will be reimbursed for actual, eligible expenses incurred and paid as reflected in the approved Monthly Expenditure Reports.
- (b) Sub-Recipient must submit a monthly Expenditure Report as detailed below no later than 30 days following the end of after the end of each month within the term of this Agreement. The final report is due no later than 30 days after the contract end date.
- (c) Expenditure reports submitted to FPHNY must contain all information and supporting documentation as required, including:
 - Report Cover Page signed by an Authorized Official
 - Expenditure Report Form in PDF format
 - Expenditure Report Form in Excel format
 - All required supporting documentation as detailed by FPHNY
- (d) Completed expenditure reports, with supporting documentation, shall be submitted to:
 - Alexis McLauchlan
Fund for Public Health in New York, Inc.
amclauchlan@fphnyc.org

INVOICE NO.	PERIOD COVERED	INVOICE DUE DATE
Advance Payment Request Form	Payment Advance	Upon submission of signed contract and all required documentation
1	12/1/21 – 12/31/21	1/30/22
2	1/1/22 – 1/31/22	2/28/22
3	2/1/22 – 2/28/22	3/30/22
4	3/1/22 – 3/31/22	4/30/22
5	4/1/22 – 4/30/22	5/30/22
6	5/1/22 – 5/31/22	6/30/22
7	6/1/22 – 6/30/22	7/30/22
8	7/1/22 – 7/31/22	8/30/22
9	8/1/22 – 8/31/22	9/30/22
10	9/1/22 – 9/30/22	10/30/22
11	10/1/22 – 10/31/22	11/30/22
12	11/1/22 – 11/30/22	12/30/22
13	12/1/22 – 12/31/22	1/30/23
14	1/1/23 – 1/31/23	2/28/23
15	2/1/23 – 2/28/23	3/30/23
16	3/1/23 – 3/30/23	4/30/23
17	4/1/23 – 4/30/23	5/31/23
18	5/1/23 – 5/31/23	6/30/23

(e) Expenditure reports will be submitted according to the schedule below:

E. Budget and Budget Modifications

(a) The provisionally approved budget is shown in the table below. The Sub-Recipient will submit a detailed line-item budget for the full award amount within sixty (60) days of the project start for review and approval of FPHNY and DOHMH prior to the release of funds.

(b) Any budget revisions must be made in accordance with Section IV.C of the Agreement. All budget modifications requiring prior approval must be approved before changes can be implemented or expenses can be incurred under the changed lines. The Sub-Recipient submit all requests using the budget modification request form provided by FPHNY to

- o Alexis McLauchlan
Fund for Public Health in New York, Inc.
amclauchlan@fphnyc.org

(c) The provisionally approved budget is shown below:

	Annual Salary	%	Months	Rate	Hrs/Week	Weeks	S/Unit	Units	Total
PERSONAL EXPENSES (PS)									
Community Health Worker Supervisor	\$ 70,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 40,833.33
Community Health Worker Supervisor	\$ 70,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 40,833.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Community Health Worker	\$ 49,000.00	100%	7.00	-	0.00	0.00	0.00	0.00	\$ 28,583.33
Project Director	\$ 75,000.00	30%	7.00	-	0.00	0.00	0.00	0.00	\$ 13,125.00
Program Assistant	\$ -	0%	0.00	30.00	14.00	31.00	0.00	0.00	\$ 13,020.00
Program Assistant	\$ -	0%	0.00	23.00	14.00	31.00	0.00	0.00	\$ 9,982.00
Program Assistant	\$ -	0%	0.00	23.00	16.00	31.00	0.00	0.00	\$ 11,408.00
Subtotal Salaries									\$ 329,285.00
Fringe		11%							\$ 36,221.35
OTHER THAN PERSONAL EXPENSES (OTPS)									
Travel	-	0%	0.00	-	0.00	0.00	100.00	100.00	\$ 6,666.67
Office Supplies	-	0%	0.00	-	0.00	0.00	200.00	30.00	\$ 5,600.00
Printing	-	0%	0.00	-	0.00	0.00	150.00	10.00	\$ 1,000.00
Meetings	-	0%	0.00	-	0.00	0.00	4,600.00	30.00	\$ 92,000.00
Subcontract, L/Refuah	-	0%	0.00	-	0.00	0.00	0.00	0.00	\$ 140,334.00
Subcontract, YMYW	-	0%	0.00	-	0.00	0.00	0.00	0.00	\$ 232,320.00
Subtotal OTPS									\$ 477,920.67
Subtotal Direct Costs									\$ 843,427.02
Indirect		10%							\$ 84,342.70
							Total Budget		\$ 927,770