MEMORANDUM OF UNDERSTANDING
(5/6/24)

Between

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

And

THE NEW YORK CITY DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT
FY 2024

THIS MEMORANDUM OF UNDERSTANDING (this "**MOU**"), made as of July 1, 2023 between New York City Health and Hospitals Corporation located at 50 Water Street, 17th Floor, New York, New York 10004 ("**H+H**") and The New York City Department of Youth and Community Development, with offices at 2 Lafayette Street, 21st floor, New York, New York 10007 ("**DYCD**"). H+H and DYCD may each be referred to as a "**Party**" and together as the "**Parties**").

WHEREAS, H+H operates the municipal hospital system of the City of New York (the "**City**") including NYC Health + Hospitals/Harlem, located at 506 Lenox Avenue, New York, New York 10037 ("**Harlem**"), NYC Health + Hospitals/Kings County located at 452 Clarkson Avenue, Suite A-7221, Brooklyn, NY 11203 (**"Kings County**") and NYC Health + Hospitals/Woodhull located at 760 Broadway, Brooklyn, NY 11206 ("**Woodhull**" and together with Harlem and Kings County may be referred to as the "**Hospitals**" and individually as a "**Hospital**"); and

WHEREAS, on behalf of the City, DYCD operates programs focused on youth and community development including overseeing the City's programs intended to reduce violence among City residents through violence interrupter programs and otherwise; and

WHEREAS, DYCD and H+H each recognize the need to reduce violence among high-risk youth in the City and to change social norms that reinforce violence;

WHEREAS, DYCD, through its Office of Neighborhood Safety ("**ONS**"), administers the Crisis Management System ("**CMS**"), which implements the evidence-based Cure Violence program model to address and reduce violence in certain neighborhoods throughout the City; and

WHEREAS, the Hospitals host and manage anti-violence programs that work to identify, mediate and prevent the spread of violence within their respective catchment areas as follows: Harlem administers the program called Harlem Crossroads (the "**Harlem Program**"), Kings County has an agreement with the Kings Against Violence Initiative, (the "**Kings County Program**") and Woodhull works closely with a program called Los Sures (the "**Woodhull Program**") which, together with the other two may be referred to collectively as the **"Programs"** and individually as a "**Program**"); and

WHEREAS, in FY24 DYCD has procured and contracted directly with the City of New York Health and Hospital Corporation who by this MOU engages the following three Hospitals – Harlem, Kings, and Woodhull to perform anti-violence programming work at Harlem, Kings County and Woodhull, and

WHEREAS, DYCD has agreed to fund the Programs for one year, the funding for which has been allocated in H+H's budget; and

WHEREAS, The Parties enter into this MOU by which DYCD will transfer funding to H + H via the Intra-City budget modification process; and

WHEREAS, the Parties now wish to enter into this MOU to transfer funding from DYCD to H+H for the Programs as outlined in the scopes of work (Appendix A: A-1 Kings County; A-2 Harlem Hospital, A-3 Woodhull Hospital) and Budgets (Appendix B: B-1 Kings County, B-2 Harlem Hospital, B-3 Woodhull Hospital) attached (the "**Scopes of Work**" and "Budgets"); and

NOW, THEREFORE, the Parties hereto agree as follows:

ARTICLE 1. TERM OF PERFORMANCE

Section 1.01 Term

The Term of this MOU is for the period of July 1, 2023, through June 30, 2024, unless sooner terminated as provided herein (the "**Term**").

ARTICLE 2. SCOPE of SERVICES

Section 2.01 Scope of Services

During the Term, each of the Hospitals shall provide hospital violence prevention/response programs consistent with the Scopes of Work attached hereto and made a part hereof as Appendix A (Appendix A-1: Kings County Program; A-2 Harlem Program; A-3: Woodhull program), as mutually agreed upon by the Parties in writing. Appendices A, B, and C are hereby attached hereto.

ARTICLE 3. COMPENSATION AND PAYMENT SCHEDULE

DYCD shall pay H + H, subject to and in accordance with the procedures and restrictions set forth in this MOU, an aggregate amount not to exceed One Million Eight Hundred Thousand dollars ($1,800,000.00) for all services to be performed during the Term, as reported to, verified and approved by the DYCD. All payments shall be made in accordance with Appendix B-1, B-2, and B-3, attached and as specified below. DYCD shall transfer funding to H + H via the Intra-City budget modification process for the not to exceed aggregate amount set forth herein.

Section 3.01 Allocation by Hospital Center

(a) DYCD shall provide funding totaling **$1,000,000.00 (One Million Dollars)** for the purpose of funding the Kings County Program set forth in the Kings County Program budget attached hereto as **Appendix B-1** and incorporated herein.

(b) DYCD shall provide funding totaling **$450,000.00 (Four Hundred Fifty Thousand Dollars)** for the purpose of funding the Harlem Program set forth in the Harlem budget attached hereto as **Appendix B-2** and incorporated herein.

(c) DYCD shall provide funding totaling **$350,000.00 (Three Hundred Fifty Thousand Dollars)** for the purpose of funding the Woodhull Program set forth in the budget attached hereto as **Appendix B-3** and incorporated herein.

DYCD shall complete the necessary IETC (internal exchange transaction intra-city) payment within thirty (30) days from the day of the execution of this MOU and upon the submission and satisfactory review of the certified intra-city invoice and supporting documentation for the full amount of the budget for fiscal year 2024. The certified intra-city invoice shall be submitted to DYCDAccountsPayable@dycd.nyc.gov.

ARTICLE 4. RECORDKEEPING, REPORTING and AUDIT REQUIREMENTS

Section 4.01 Books and Records

H+H shall maintain separate and accurate books, records, documents, and other evidence, and shall utilize appropriate accounting procedures and practices, which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance of this MOU.

Section 4.02 Maintenance of Records

H+H shall maintain all books, records, documentation, justifications, and other evidence relevant to this MOU, including those required pursuant to Article 4 for six (6) years after the final payment or expiration or termination of this MOU, or for a period otherwise prescribed by law, whichever is later. In addition, if any litigation, claim, or audit concerning this MOU has commenced before the expiration of the six (6) year period, the records must be retained until the completion of such litigation, claim, or audit.

Section 4.03 Inspection

At any time during the Term or during the record retention period set forth in Section 4.02, DYCD, as well as City, state and federal auditors and any other persons duly authorized by DYCD shall, upon reasonable notice, have full access to and the right to examine and copy all books, records, and other documents maintained or retained by or on behalf of H+H pursuant to this Article 4, except to the extent such records contain Protected Health Information (**PHI**"), as that term is defined in the Health Insurance Portability and Accountability Act ("**HIPAA**"), concerning H+H patients in which case control over such PHI shall be governed by HIPPA and the New York State Public Health Law (the "**PHL**").

Section 4.04 Audit

(a) This MOU and all books, records, documents, and other evidence required to be maintained or retained pursuant to this MOU, including all invoices presented for payment and the books, records, and other documents upon which such invoices are based (e.g., reports, cancelled checks, accounts, and all other similar materials), are subject to audit by (i)

DYCD, (ii) the State of New York, (iii) the federal government, and (iv) other persons duly authorized by the City.

(b) H+H shall submit any and all documentation and justification in support of expenditures or fees under this MOU as may be required by DYCD.

(c) H+H shall not be entitled to final payment until fully compliant with the requirements of this Section, 4.04; provided, however, if no request for audit has been made prior to the date any payments or transfers are to be made to H+H, there shall be no delay in the same.

(d) If (i) the State of New York, the federal government, and/or any other person duly authorized by the City conducts an audit of the payments, reimbursements, books, records, documents, and other evidence required to be maintained or retained pursuant to this MOU, and (ii) H+H fails to produce the supporting documentation requested by the auditors related to the payments, reimbursements and services provided in connection with this MOU, and (iii) H+H's failure to produce such supporting documentation results in the State of New York and/or federal government disallowing revenue to DYCD, then H+H shall reimburse DYCD in an amount equal to the amount of disallowed revenue.

ARTICLE 5. CONFIDENTIALITY

Section 5.01 General

H+H and DYCD shall each hold confidential, both during and after the completion or termination of this MOU, all the reports, information, or data, furnished to, or prepared, assembled or used by, H+H under this MOU. H+H and DYCD shall each ensure that such reports, information, or data not be made available to any person or entity without the prior written approval of the other Party, which shall not be unreasonably withheld unless such disclosure is required by law, including, but not limited to HIPPA and the PHL. H+H and DYCD shall each maintain the confidentiality of such reports, information, or data by using a reasonable degree of care, and using at least the same degree of care that they use to preserve the confidentiality of their own confidential information. If the data contains social security numbers or other Personal Identifying Information, as such term is defined in Section 4.02 hereof, H+H and DYCD shall each utilize the best practice methods reasonably available in view of their resources (e.g., encryption of electronic records) to protect the confidentiality of such data. The obligation under this Article 5 to hold reports, information or data confidential shall not apply to situations where the City or H+H would be required to disclose such reports, information or data pursuant to the State Freedom of Information Law ("**FOIL**"), HIPPA or the PHL provided that such Party provides advance notice to the other Party, in writing or by e-mail, that it intends to disclose such reports, information or data. If there is a disagreement whether such information is required to be disclosed, the Parties shall confer with each other.

Section 5.02 Notice of Security Breach

Upon discovery of a breach of security, as defined in Admin. Code § 10-501(b), by its employees, subcontractors, or agents, H+H or DYCD, as the case may be, will notify the other Party immediately in writing. A breach of security includes but is not limited to an unauthorized disclosure of any data, or personal identifying information as defined in Admin. Code § 10-501 ("**Personal Identifying Information**") or the disclosure of PHI as defined in HIPAA. Upon the discovery of any such

security breach, the Party whose data was breached shall take reasonable steps to remediate the cause or causes of such breach and mitigate risks associated with such unauthorized disclosure(s)

Section 5.03 Restriction of Access

H+H and DCYD shall each restrict access to confidential information to persons who have a legitimate work-related purpose to access such information. The Parties shall each instruct their employees and agents to maintain the confidentiality of all information required to be kept confidential by this MOU.

Section 5.04 Statements to Press

The Parties shall consult with and cooperate with each other, at any time either during or after the Term, on the content of any intended statement to the press or on the content of any intended issuing of any material for publication in any media of communication (print, news, television, radio, Internet, etc.) regarding the services provided or the data collected pursuant to this MOU. Notwithstanding the foregoing, each Party may, without consulting the other Party promote the Programs in the ordinary course. Neither Party may issue any statement or submit any material for publication that includes confidential information as prohibited by this Article 5.

Section 5.05 Maintenance of Confidential Information

At the request of DYCD, H+H shall make available to DYCD copies of all confidential information in H+H's possession relating to the Programs except as prohibited by HIPAA, the PHL or otherwise by law. Each Party shall retain confidential information as required by Section 5.01 above or any longer period required by law. Throughout the period that the Parties retain any such confidential information, they shall hold such information as required by this Article 5 and consistent with Appendix C.

ARTICLE 6. MODIFICATION AND TERMINATION

Section 6.01 Modification

This MOU may be modified only through the mutual written consent of the Parties.

Section 6.02 Termination

Either Party may terminate this MOU without cause upon thirty (30) days written notice to the other or immediately by mutual written consent of the Parties. Either Party may terminate this MOU immediately if, in such Party's reasonable judgment, just cause exists. In the event of termination pursuant to this Article, H+H shall be compensated for its work under this MOU only to the effective date of termination and either H+H shall refund to DYCD or DYCD shall make payment to H+H such amounts as are necessary to effect such principle.

ARTICLE 7. NOTICES

Section 7.01 Notice

All notices and requests hereunder by either Party shall be in writing, and except as otherwise specified in this MOU, shall be delivered by hand, or sent via Registered or Certified Mail, Return Receipt Requested, or by overnight mail, Express Mail or other overnight delivery service that provides a receipt to the sender, and directed to the address of the Parties as follows:

To H+H:
NYC Health and Hospitals Corporation
50 Water Street, 17th Floor
New York, New York 10004
Attention: General Counsel

If to DYCD:
NYC Department of Youth and Community Development
2 Lafayette Street, 21st Floor
New York, New York 10007
Attention: General Counsel

ARTICLE 8. ENTIRE AGREEMENT

This MOU contains all the terms and conditions agreed upon by the Parties, and no other agreement, oral or otherwise, regarding the subject matter of this MOU shall be deemed to bind the Parties, or to vary any of the terms contained herein.

IN WITNESS WHEREOF, the Parties have executed this MOU as of the date first above written.

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION
BY _____
NAME Eric Wei, MD

TITLE Senior Vice President

THE NEW YORK CITY
DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT

BY _____

NAME Angelina Martinez-Rubio

TITLE Acting General Counsel

DATE 5.9.24

Appendix A-1

Kings County Scope of Work

Appendix A
Scope of Work

Founded in 2009 by Dr. Rob Gore, an emergency room physician at H+HC/Kings County Hospital Center, Kings Against Violence Initiative Inc. (KAVI) aims to reduce and eliminate community violence in neighborhoods most impacted. We use a trifocal approach to realize our mission, including direct services (hospital-based, school-based, and in communities), community-based research, and systems-based advocacy. Our unique programs center on young people as agents of change in their own lives, and we use a trauma-informed approach to uplift the lived experience of program participants as we work toward individual healing. Our community-based programs and advocacy work use racial and social justice lenses that seek to directly confront systemic racism. It trains young people to engage their peers, community leaders, and elected officials in community healing, revitalization, and in calls for legislative change.

KAVI's evidence-based, hospital-based violence intervention program (HVIP) is designed to interrupt community violence among youth and young adults using a multi-pronged approach. The goals are to reduce repeat injury and mitigate retaliation while providing program participants with the skills, support, and intangible tools to feel empowered as productive community members. We achieve this through intensive individualized case management. Other key programmatic features include peer mentoring and community building. Case workers and managers take advantage of the "teachable moment" when victims are in the hospital being treated for a violent injury and assist them with identifying their own risk factors for violence and ways to reduce them.

On average, KAVI program staff have contact with almost 400 patients a year, providing crucial follow-up services and referrals to ongoing support to address the underlying causes of violence, the trauma associated with injury, the coping support for patients, and the wrap-around services victims need to recover, build resiliency, and move beyond the trauma of their experience. Leveraging partnerships with community-based organizations, participants have access to resources related to mental health, housing displacement, food insecurity, employment, education, vocational training, financial literacy, substance abuse treatment, life skills, legal assistance, and physical health.

KAVI's HVIP operates in two ways: to address healing and recidivism and to responsiveness and healing. The program is constantly informed by the work of Drs. Robert Gore and Ramon Gist. Dr. Gore continues to practice within the Emergency Department of Kings County, and Dr. Gist is the Acting Director of Pediatrics Critical Care Medicine at SUNY Downstate. Their different but complementary views on medicine inform KAVI's approach to violence elimination.

The program's components include:

Bedside Response (aka Golden Hour)
A trauma assessment to individuals within the first hour of a patient's availability in the Emergency Department. The assessment engages patients using a Trauma-Informed Care approach designed them acknowledge their social trajectory in the hospital and how they can begin to take agency over their lives to never return to the hospital for similar causes.

Healing Centered Interaction, Counseling, and Holistic Responses
As a patient transfers from the Emergency Department into another hospital status, including behavioral health and discharge, HVIP staff provide coaching and counseling to individuals and people within their immediate environment, including their family, loved ones, and peer group. This engagement begins with helping the

patient by strengthening their environment. We provide navigational support for education, employment, housing, and legal needs and a deeper therapeutic approach. Members of the HVIP team all play different and supportive roles. Credible Messengers are present to provide encouragement and coaching, Social Workers provide encouragement and counseling, and component staff provide access to new opportunities and resources.

S.E.L.F. Program

Some participants opt into our S.E.L.F. (Safety Emotional Loss & Future) program to help heal and form new relationships. The S.E.L.F. program is a 10-week, peer-driven support group designed to help victims (and perpetrators) take agency over their lives by healing from past and current traumatic events. Masters and Doctoral Level Social Workers support the entirely confidential group sessions.

Case Management

Our case managers assist participants in identifying and pursuing resources and opportunities identified in our trauma and needs assessment surveys. They also serve as liaisons between the participants and service-providing organizations and institutions. This vital role helps ensure that former patients become participants who do not lapse into previously dangerous and untoward behaviors and environments.

Victims Services

Our Victims Services program provides pathways to healing. This resource addresses the material needs of victims and holistic wellness needs. Through these services, victims access support for housing needs, legal needs, deep therapeutic needs, and other ancillary resources that support healing.

Longitudinal Connection

As informed by Drs. Gore and Gist, our public health approach demands that we provide our participants with onramps for a long-term relationship with KAVI. We provide periodic check-ins with participants every three to six months after they have left our program. Equally, we provide paid internships and job opportunities within the organization for those interested.

Appendix A-2

Harlem Scope of Work

Harlem Crossroads Program Design

The vision of Harlem Crossroads is to build upon the life skill knowledge base of Black and Latino youth and by extension increase the percentage of young men who will be positively involved in the lives of their children, their families and their communities.

Harlem Crossroads has two major components. One component identifies mentors through its program staff and Harlem Hospital's numerous community connections. Staff partner with seasoned successful men, primarily from the Black and Latino communities, and translates their experiences into clear, tangible, teachable units through workshops, talks and trainings. The second component will provide alternative programs for school-aged youth. Harlem Crossroads will work with community partners who implement the Cease Fire/Cure Violence model to provide additional support to Black and Latino young men who engage in these programs.

I. Recruitment and Mentor Selection Criteria

A. Mentors are selected primarily from the local community. The program director and staff identify the initial group. A total of 7- 10 mentors will be recruited and possess the following characteristics:

- Strong male role models in their lives. This relationship increases the likelihood that mentors will understand and communicate the value of having a strong and influential male presence in life.
- Active involvement in their own children's well-being, and demonstrate that they know and can articulate some of the skills that are required to be a father;
- Manage the balance between the working world and the streets, e.g., mentors whose experiences enable them to understand the lives of new fathers, and also command the respect of the younger men through a position of accomplishment in the adult world.
- Draw from and impart wisdom and positive life lessons to mentees throughout the program.

- Possess broad life perspective through travel, sports, hobbies, community involvement, and other interests;
- Confident in their achievements and accomplishments;
- Comfortable working with young men and demonstrate a commitment to the well-being of youth;
- Enjoy productive and successful relationships with others;
- Have a high school degree and preferably a college or graduate degree;
- Are at least 30 years of age, key to establishing a dynamic of respect;
- Demonstrate consistency in their lives.

II. Mentor Training Process

Mentors will be seasoned men above the age of 30 identified through existing community relationships and via the personal connections. Program facilitators will train them using a combination of their experience with anti-violence programs and mentoring as well as a curriculum based on the Effective Practice for Mentoring provided by the City of New York. Following training, mentors will work directly with mentees helping the young men to implement lessons in their day-to-day interactions with employers, contemporaries, mothers, and infants. The program will also include lectures and small group discussions to augment the one-on-one interactions. The intended outcome of these sessions is two-fold:

1. Mentees will feel empowered by the exchange of ideas, values, skills, and information offered by the program and will use their newly learned knowledge and skills to take an active role in the lives of their children, family and community. This will be evaluated through pre and post surveys and questionnaires.
2. Mentors will experience the personal satisfaction that comes with teaching and guiding mentees. They will find it rewarding having given back and helped someone improve the quality of his life.

Skills are intended to be tangible and intangible. Lessons will include showing love, concern, protection, and guidance as well as budgeting, car seat instruction, preparing meals, and/or home safety product installation and use. One of the essential criteria for successful completion of the program is that mentees must participate in 75% of the planned program

activities. At the close of the school year and summer sessions, each mentee will graduate from the program and receive a certificate of completion.

Graduating mentees will be asked to participate in at least two sessions in the program units for the next "class" of young men (listed below) in order to validate the program for "new recruits," build and extend a "fraternity" of mentee members, and allow graduates to remain connected to the program. In addition, an annual event for graduates will also help to build the ongoing fraternity among graduates.

At the close of each quarter and at the conclusion of the year one pilot, a team of mentors, and staff will evaluate the effectiveness of the program, identify best practices, and make suggestions for improvements. In year two, we created a best practice" playbook" sharing our results for similar communities to replicate. Further, we will increase the number of young men participating in the project and provide services to a wider group of Black and Latino youth.

We expect the data to support our notion that young men who participate in Harlem Crossroads will become good citizens, participate in the lives of their children and or families, and stay absent from the world of traumatic violence. Moreover, mentees will show deftness as it relates to tangible skills, ultimately raising the "father-full" percentages of Black and Latino families overall. We will track the young men enrolled in this project over the course of three years using a variety of instruments such as surveys, phone calls, and tracking of continued mentor contact with program graduates. Over time, a database will be implemented for tracking and analysis. We believe that if mentees remain active with their mentors, and in the lives of their family and children over a three-year period, the relationship will last a lifetime.

Mentee Recruitment and Selection Criteria

There are specific selection criteria for mentees to participate in the school-based program and the survivors program. Mentees, Black and Latino youth ages 12-17, a selected from youth identified

through existing community relationships with multiple organizations. A total of 20-25 mentees will be selected based on the following characteristics.

- Individuals who self-select into the program
- Individuals who are currently high school students or have completed a GED
- Youth who come to the program through a recommendation from the following:
  1. Health assessment
  2. Academic evaluation
  3. Cure violence/Community Partner Referrals
  4. Democracy Prep - the principal and dean are strong partners and have provided 20-25 students in the past.

Mentees, aged 18-24 will be selected based on the following characteristics

- The general population, including some from single parent homes. Young men who are or will soon be first time fathers;
- Post-violence intervention, including young men associated with or victims of traumatic violence identified through Harlem Hospital.

Youth from the general population and those who are fatherhood-ready are identified through neighborhood community centers, high schools, and other after school programs.

Section 3. PROGRAM ACTIVITIES

Programmatic Outline for the Harlem Crossroads Program

The program is divided into 2 main areas of focus as follows:

I. <u>Harlem Crossroads Hospital-Based Program</u>

Providing interventions in the hospital/Emergency Department (ED) after violent events is important and can assist in preventing re-injury and retaliation (Cunningham et.al Ann of Emerg Med 2009). The need for hospital-based violence intervention programs is particularly acute because many patients considered at high risk for engaging in violent activities use the ED as their primary entry point into the health system.

Patients are referred from the ED (adult and pediatric) and trauma services. The patients are seen and evaluated by our violence intervention team members (hospital responders, Program Manager), who are skilled at working with at-risk youth. Our intervention team assists with helping decrease the possibility of retaliation following violent events; provide follow up for patients and families; assist in linking patients and families to hospital and community behavioral health resources. We work with our Social Work department and have three, six and 9 month follow-up calls for ALL patients that come through our ED . The calls helped reduce injuries and increased the health of the community by increasing the communication regarding doctor follow-ups, wraparound services, prescription need and other issues related to injuries.

a. Harlem Crossroads will augment the existing Cure Violence program by providing assistance to all patients from the ED or trauma inpatient services who are survivors of violent events, but do not meet the eligibility criteria of the Cure Violence program and/or those who live outside Cure Violence catchment areas.
b. Patients are seen and evaluated by a Hospital Responder (HR) or Violence Intervention Specialist (VIS) who is skilled at working with at-risk youth. The HR helps decrease the possibility of retaliation following violent events by providing mediation, follow up for patients and families, and assistance in linking patients and families to hospital and community behavioral health resources. Currently the contract for the agency that provides the Hospital Responders and Violence Interruption Specialist for our site is Sister Iesha Sekou's group "Speak Peace Forward."

II. Harlem Crossroads School-Based Program

A school-year program designed to run the entire length of the academic year.

The program will include modules outlined below. Mentors will be trained to conduct the one-on-one sessions with the help of Six Winners staff. The baseline of this group is to improve the grades of the young men so that they are promoted to the next grade and increase administrator, teacher and parent feedback. This program meets every week with larger events once a month. We will target 20-25 participants.

Module # 1 Getting to Know Each Other: Building Trust

- Introductions
- My music/your music (lyrics) – establishing and validating each other's cultural norms
- Imparting principles of self-respect – taking your place in the world
- Respecting others
- What you owe your child

Module #2 What It Takes: Real Men

- Roles and responsibilities of men and fathers
- Household management – performing and appreciating the value of tasks
- Making choices – life decisions that impact the future
- Credit / money
- Interviewing – developing job-seeking skills
- Anatomy: men – women
- Being on time

Module #3 Making Better Men

- Creating a vision of your life
- Relationship guidelines
- Love and its value to your child
- What's a good partner?
- Developing decision-making skills
- How to access city and community services that can help
- Taking care of yourself and others
- Sex, family planning, and pregnancy from the male perspective

In addition to the module-based learning, Harlem Crossroads acknowledges that when working with young men there needs to be an element of physical activity. We use cycling to address the need for physical exertion. A bike is the perfect embodiment of the concept of 'sweat equity'. It also offers the opportunity to explore their environment in ways they may have never done. Many of the young men who live in Manhattan express that they've never been to Central Park and countless other beautiful sights around the city. Cycling allows us to teach the virtues of teamwork, it encourages healthy exercise and competition and it also exposes the young men to their city in new ways. The program will start with rides in Central Park, completing the park loop which is six miles and will expand to other bike paths around the city as their riding competency and endurance improves. During the winter months when weather and available daylight prevent us from riding outdoors we will use our relationships with community institutions like the YMCA and the Catholic Charities run Kennedy Center to keep our students actively engaged in physical activity year round.

- S.T.E.M. (Science, Technology, Engineering, & Math) is a hospital-based program. We are partnering with the U.S. Navy on the SeaPerch Program. The young men build a remote controlled submersible from scratch and compete with high school students from around the city. This is a great way to introduce some of our young men to hands on experience with electronics and science. I would say: "Our baseline for future measurement is one team that actively competed in the East Coast regional competition. We plan on having 2 teams compete this year and it is our hope that they will be successful enough to represent our program on the national stage. The baseline is that last year we had one team compete, this year hopefully we will have two teams.

- A summer program titled 'Health Ambassadors'. The baseline of this group is for the young men to complete the program with at least 75% attendance. This program meets three days a week for 6 weeks. We will target 15 participants. • Mondays we discuss Lifestyle skills including My Music Your Music, Representations of African American Men and Women in the Media, Teamwork and Financial Awareness.
- Tuesdays we discuss bike safety and have cycling adventures.
- Wednesdays we discuss public health issues with medical professionals such as Respiratory Health, Cardiovascular Health Sexual Safety, and Nutrition.

Harlem Crossroads Staffing Model

Program Director:

The program director is responsible for overall program management and oversight. He will provide strategic direction and be responsible for capacity building and financial solvency. The Program Director has strategic and operational responsibility for all programs. The Program Director is responsible for maintaining all aspects of programs growth, operations, program management, administration, fund development, in addition to strengthening existing partnerships. The Program Director serves as a liaison to program's partners and will be responsible for developing, implementing and managing the operational aspects of the annual budget. They will maintain pre-existing relationships with supporters and cultivate relationships with new funders from the public

and private sectors. Identify opportunities to leverage cross-program strengths, take advantage of new opportunities, and address organizational challenges. The Program Director will expand the financial viability of operational units through sound fiscal management. Publicly represent the program with the media and external constituency groups, including community, governmental, and private organizations. Identify, cultivate, and maintain relationships with major donors and key funders. Coordinate with other hospital programs, recruit participants, identify mentors and coordinate with local and community groups to extend the reach of the program. Oversee the development and implementation of supportive services (individual counseling, support groups etc.) for enrolled clients. Provide direct supervision to the staff.

Program Manager:

Work with victim's bedside, offering wrap around services. The Hospital Based Violence Intervention Program Manager (HB-VIPM) is responsible for working autonomously to coordinate day-to-day management of operational and evaluation activities related to the Harlem's Violence Intervention Program (VIP). This position also provides administrative support, as well as coordination between research and clinical needs of VIP. The employee will assist the team with program development and administrative functions, including assisting the grant writer reporting, and regulatory activities, data and budget management, and serving as an internal and external liaison to build partnerships and strategically plan for program sustainability while helping to establish trauma informed practices within the hospital setting. The Program Manager must demonstrate initiative, resourcefulness and problem-solving skills in applying a detailed knowledge of the responsibilities, functions and initiatives. The employee must be able to organize and independently prioritize work, establish procedures and systems and ensuring orderly and timely workflow. Will implement and oversee all aspects of Gun Violence Program Data measurements and insights alongside social work. Analyzing data to better understand the impact of hospital-based violence intervention program for stakeholders.
Manage Stop the Bleed Program.

Program Coordinator:

The program coordinator will play a central role in the recruitment, maintenance and retention strategies for member programs as it relates to Gun Violence and Injury Prevention. Will collaborate on events and programs that produce positive and professional development in the violence intervention community. Collaborate with Social Workers, to create/implement Behavior Intervention Plans, Peer Mentoring strategies, and Peer to Peer learning collaboratives.
Responsible for social and academic progress of member and develop communities of practice.

The employee will assist the team with program development and administrative functions, including assisting the grant writer reporting, and regulatory activities, data and budget management, and serving as an internal and external liaison to build partnerships and strategically plan for program sustainability while helping to establish trauma informed practices within the hospital setting. Manage Car Seat for Kids Program.

Part II. Measurable Outcomes

Harlem Crossroads will use a variety of measures to determine the program's effectiveness, and shape program improvements. These will include:

- Number of program hours offered
- Number of hours mentees participate in the program (attendance and engagement)
- Contact among mentors and mentees during and after the program
- School attendance
- During program
  - Six months after program
  - One year after program
- For youth who are not yet fathers, the number and percentage of them who become fathers in the three years after the program
- Track and measure results of pre- and post- program surveys and questionnaires

Measures will be tracked, analyzed and reported in order to indicate program effectiveness, and to inform program improvements.

Impact:

In the short term, every mentee who is involved with Harlem Crossroads will be connected with a support system that will immediately provide him with help and resources to navigate through the many challenges associated with being a Black and/or Latino youth. In the first year, we will serve 60 youth. Over the course of Year 1, through existing and newly forged relationship we will involve an additional 20 mentors over the course of the year to mentor the youths in their various professional capacities.

The cost to develop and replicate the Harlem Crossroads program at three NYC Health + Hospital's facilities is equivalent to the cost of housing five inmates in a New York City prison for one year. Assuming three mentees or three of their children stay out of the criminal justice system, we have more than paid for this program (*New York Times*, per information from New York City Department of Corrections).

The long-term benefits of this program manifest themselves in the life lessons passed from mentor to mentee and the healthy relationships mentees will develop within their families and communities.

Part III. Project Timing

- Year one: Pilot Harlem Crossroads at Harlem Hospital (10 participants / quarter, 10 mentors/quarter) - 40 youth affected, 120 participants indirectly affected: 40 mentors, 40 children, 40 mothers – Goals met.
- Year two: Expand Harlem Crossroads at Harlem Hospital (30 summer participants, 85 school year participants and 12 mentors/quarter), 40 families affected, 125 youth directly affected. - Goals met.
- Year three: Maintain relationship with Democracy Prep and **students from year 2** and increase focus on academics and on reducing Reset's (Resets are when students are asked to leave the class after exhibiting disruptive behavior). Our goal is to also increase promotion. Democracy Prep has three categories for evaluating students at the end of the year and they are promoted to the next grade, conditionally promoted (after finishing summer school) or retained and have to repeat the grade. Our goal is to have a 100% class promotion rate which would represent a significant improvement over the promotion rates typically associated with our student population.

Appendix A-3

Woodhull Scope of Work

The WICK Program (Cure Violence) at H+H Woodhull

Program Description and Scope of Services

Program Description:

NYC Health + Hospital/Woodhull, in partnership with the Northern Brooklyn Neighborhood Safety Coalition, has created ***The WICK Against Violence Program***, a hub that provides a community-based anti-violence model designed to assist groups in high violence neighborhoods to steer away from a culture of violence. The goal is to identify injured victims that are at risk for retaliatory violence, collaborate with said victims and their families to help prevent future violence and provide linkages to healthcare and social services within the Northern Brooklyn Community.

The program has a two-pronged approach: (1) **Prevention:** engaging youth early in developmental activities to divert the youth from involvement with violent peer groups and behaviors; (2) **Community Mobilization**: engaging with existing community-based organization to build community strategies to reduce neighborhood violence.

Scope of Work:

The WICK Against Violence Program model targets the youth and young adults (14 to 25-year-old) and provides violence interruption and mediation services to youth development activities that are offered by the hospital. NYC Health + Hospital/Woodhull identifies victims of violence and connects community violence intervention specialists (**Hospital Responders)** with patients injured by gunshot, stabbing, slashing, blunt force trauma and other violent incidents. The **Hospital Responders**' aim is to stop retaliation and ongoing violence, while promoting healthy lifestyles in order to reduce violent injuries to young people.

In order to facilitate the program, NYC Health + Hospital/Woodhull carries out the following activities:

1. **Partnership Building:** NYC Health + Hospital/Woodhull creates a community-wide partnership with existing community-based organizations. These agreements enhance the hospital's existing violence prevention services by inviting the Cure Violence (CV) interruption and mediation services into the hospital to support victims of violence.

2. **Staffing:** NYC Health + Hospital/Woodhull dedicates a team of staff to build a relationship with creates a community-wide partnership with existing community- based organizations who will be implementing hospital response work.

3. **Securing Access:** The partnership will create, review, maintain a protocol for giving **Hospital Responders**, access to the hospital.

4. **Identification, Interruption/Mediation, and Referral Plan:** The partnership will develop, review, and maintain a protocol for patient/victim identification and timely notification to Cure Violence.

a. Develop eligibility criteria for Cure Violence program response and other key protocol elements in collaboration with community partners.
b. Understand eligibility criteria (e.g., victims of gun violence, stabbing, blunt force trauma; geographic location of incident) for program response and contact the appropriate CV organization when an eligible victim of violence enters the emergency department.
c. Identify staff to notify the program when an eligible case presents at the hospital. Notification to the CV Hospital Responder should be timely and should include information on the patient's status.
d. Record the number of cases/victims for which CV Hospital Responders are called into the hospital.
e. Record the number of initial visits of CV Hospital Responders, and any follow-up visits conducted with victims/patients.
f. Develop a plan for service referral for victims/patients during their stay in the hospital upon discharge.

Appendix B-1

Kings County Hospital Budget

KINGS AGAINST VIOLENCE INITIATIVE INC.

Hospital-Based Violence Intervention Program at Kings County Hospital Center Budget
(7/1/2023 - 6/30/2024)

PERSONNEL					
Salary & Wage					
Full-time Role	*Name*	*Salary*	*FTE Applied*	*Time*	*Total*
Co-Executive Director	Buissereth, Anthony	$ 156,000	0.23	1.00	$ 35,100
Co-Executive Director	Williams, Ramik	$ 156,000	0.23	1.00	$ 35,100
Hospital & Clinics Program Manager	Johnson, Yahsef	$ 93,780	0.55	1.00	$ 51,899
Hospital Program Coordinator	TBH	$ 80,000	0.75	0.33	$ 20,000
Data & Evaluation Manager	Louison, Jerome	$ 94,500	0.30	1.00	$ 28,350
Case Manager	Nelson, Natasha	$ 72,800	0.60	1.00	$ 43,680
Violence Intervention Specialist II	Brown, Ikim	$ 57,200	0.65	1.00	$ 37,290
Violence Intervention Specialist II	Hansen, Arkeda	$ 57,200	0.65	1.00	$ 37,290
Violence Intervention Specialist II	Johnson, Bennie	$ 57,200	0.65	1.00	$ 37,290
Violence Intervention Specialist II	TBH	$ 55,000	0.70	0.33	$ 12,833
Senior Violence Intervention Specialist	Smith, Taisha	$ 67,600	0.50	1.00	$ 33,800
Director of Finance	Kanellopoulos, Nadira	$ 124,800	0.20	1.00	$ 24,960
Project Administrator	Douglas, Chanell	$ 91,520	0.15	1.00	$ 13,728
Part-time Role	*Name*	*Hourly Wage*	*Hours Applied*		*Total*
Social Worker	Iarussi, Deborah	$ 39	840		$ 32,760
Case Worker	Hill, George	$ 35	776		$ 27,149
Office Manager	Reed, Madison / Barbuto,Taylor	$ 28	110		$ 3,080
Office Assiistant	TBH	$ 25	420		$ 10,500
Violence Intervention Specialist I	Carter, Anthony	$ 28	784		$ 21,944
Violence Intervention Specialist I	Johnson, Shavarn	$ 28	982		$ 27,502
Education & Employment Specialist	Augustin, Lourdia	$ 40	208		$ 8,320
Community Health Program Coordinator	Howard, Marcus	$ 50	300		$ 15,000
			Total Salary & Wage		**$ 557,575**
FRINGE					
Payroll taxes, health insurances, commuter, retirement benefits, etc.					$ 152,647
TOTAL PERSONNEL w/ FRINGE					**$ 710,221**
OTHER THAN PERSONNEL SERVICES (OTPS)					
Consultants & Contracted Services					
Service		*Vendor*			*Total*
Clinical Advisement		REG Medical			$ 46,200
IT & Database Support		Multiple			$ 19,500
Mental Health & Counseling Support		Multiple			$ 22,600
Training & Technical Assistance		Multiple			$ 9,500
			Total Consultant & Contracted Services		**$ 97,800**
Non-Consultants/Contracted Services					
Category					*Total*
Computer/technology equipment & software					$ 10,000
Emergency assistance fund					$ 25,000
Participant incentives					$ 25,000
Program materials & supplies					$ 20,000
Program events & activities					$ 8,020
Staff development & training					$ 4,550
Telephone & telecommunications					$ 4,500
Travel					$ 4,000
			Total Non-Consultant/Contracted Services		**$ 101,070**
TOTAL OTHER THAN PERSONNEL SERVICES (OTPS)					**$ 198,870**
INDIRECT COSTS (~10%)					**$ 90,909**
GRAND TOTAL					**$ 1,000,000**

KINGS AGAINST VIOLENCE INITIATIVE INC.
Hospital-Based Violence Intervention
Program at Kings County Hospital Center
Budget Narrative (7/1/2023 - 6/30/2024)

PERSONNEL			
Fulll-time Role	*Name*	*FTE Applied*	*Description*
Co-Executive Director	Buissereth, Anthony	0.23	The Co-Executive Director provides organization-wide oversight of programs, policies and practices, finances, and overall management. Engages with C-level hospital leadership regarding program objectives.
Co-Executive Director	Williams, Ramik	0.23	The Co-Executive Director provides organization-wide oversight of programs, policies and practices, finances, and overall management. Engages with C-level hospital leadership regarding program objectives.
Hospital & Clinics Program Manager	Johnson, Yahsef	0.55	The Hospital Program Manager is the on-site leader of the program providing supervision to the team, interfacing with program consultants and hospital department leaders, and regularly update organizational leadership on program activities.
Hospital Program Coordinator	TBH	0.75	The Hospital Program Coordinator will monitor day-to-day program activities, facilitate communication amongst staff and hospital stakeholders, and support data collection and execution of discharge plans. Anticipated start in February 2023.
Data & Evaluation Manager	Louison, Jerome	0.30	The Data & Evaluation Manager coordinates and maintains relevant patient and program information that support and inform objectives. The work includes uniform collection and entry policies, reporting and visualization, and analyses.
Case Manager	Nelson, Natasha	0.60	The Case Manager provides trauma-informed assessments for patients (participants of care), clinical documentation, and care navigation that support their healing and stability. The role includes creating plans for post-discharge milestones and advocacy for services.
Violence Intervention Specialist II	Brown, Ikim	0.65	The Violence Intervention Specialist II (VIS-2) provides ER and in-patient support to patients with intentional injuries that prevent reinjury. The VIS-2 regularly checks-in with patients, advocates for them, helps develop discharge plans, and collaborates with team on case management.
Violence Intervention Specialist II	Hansen, Arkeda	0.65	The Violence Intervention Specialist II (VIS-2) provides ER and in-patient support to patients with intentional injuries that prevent reinjury. The VIS-2 regularly checks-in with patients, advocates for them, helps develop discharge plans, and collaborates with team on case management.
Violence Intervention Specialist II	Johnson, Bennie	0.65	The Violence Intervention Specialist II (VIS-2) provides ER and in-patient support to patients with intentional injuries that prevent reinjury. The VIS-2 regularly checks-in with patients, advocates for them, helps develop discharge plans, and collaborates with team on case management.
Violence Intervention Specialist II	TBH	0.70	The Violence Intervention Specialist II (VIS-2) will provide ER and in-patient support to patients with intentional injuries that prevent reinjury. The VIS-2 will regularly check-in with patients, advocates for them, helps develop discharge plans, and collaborates with team on case management. Anticipated start in March 2023.
Senior Violence Intervention Specialist	Smith, Taisha	0.50	The Senior Violence Intervention Specialist (Sr. VIS) provides ER and in-patient support to patients with intentional injuries that prevent reinjury. The Sr. VIS regularly checks-in with patients, advises on patient experience, advocates for them, helps develop discharge plans, and collaborates with team on case management.
Director of Finance	Kanellopoulos, Nadira	0.20	The Director of Finance will manage all program-related fiscal matters and ensure compliance with regulations and fiscal policies. Engages with hospital CFO and other hospital leaders to review and share regular budget updates.
Project Administrator	Douglas, Chanell	0.15	The Project Administrator will support program operations including on-boarding of staff, volunteers, and interns, aiding project management workflows, and identifying, communicating and documenting compliance related issues.
Part-time Role	*Name*	*Hours Applied*	*Description*
Social Worker	Iarussi, Deborah	840	The Social Worker, a licensed practitioner, provides clinical case management supports to patients and works with social work interns to extend clinical services offerings to patient population.

Case Worker	Hill, George	776	The Case Worker provides trauma-informed assessments for patients (participants of care), clinical documentation, and care navigation that support their healing and stability. The role includes creating plans for post-discharge milestones.
Office Manager	Reed, Madison	110	The Office Manager performs office management duties in the hospital-based spaces designated for KAVI including maintaining supplies and materials, answering phone calls, data entry, and related tasks. Departs in September 2023.
Office Assistant	TBH	420	The Office Assistant will perform general office administration duties in the hospital-based spaces designated for KAVI including maintaining supplies and materials, answering phone calls, data entry, and related tasks. Antifcipated start in December 2023.
Violence Intervention Specialist I	Carter, Anthony	784	The Violence Intervention Specialist I (VIS-1) provides ER and in-patient support to patients with intentional injuries that prevent reinjury. The VIS-1 regularly checks-in with patients, advocates for them, helps develop discharge plans, and collaborates with team on case management.
Violence Intervention Specialist I	Johnson, Shavarn	982	The Violence Intervention Specialist I (VIS-1) provides ER and in-patient support to patients with intentional injuries that prevent reinjury. The VIS-1 regularly checks-in with patients, advocates for them, helps develop discharge plans, and collaborates with team on case management.
Education & Employment Specialist	Augustin, Lourdia	208	The Education & Employment Specialist (VIS) works with participants as they discharge and move into aftercare to identify and connect with educational and employment opportunities that support their independence and self-sufficiency.
Community Health Program Coordinator	Howard, Marcus	300	The Community Health Program Coordinator engages with post-discharge participants in activiities that exposes them to public health principles and community wellness opportunities. The Coordinator collaborates with HVIP team and hospital stakeholders to raise awareness of emergent issues facing patient populations.
Fringe			Costs associated with required withholdings (i.e. payroll taxes) and benefits (medical, vision, dental and other insurance, commuter, etc.). Appox. 27%.
OTHER THAN PERSONNEL SERVICES (OTPS)			
Consultants & Contracted Services			
Service	*Vendor*		*Description*
Clinical Advisement	REG Medical		REG Medical, a consultancy led by Dr. Ramon Gist, will provide clinical advisement for the program and support in the areas of program quality, care planning, patient experience, and program assessment.
IT & Database Support	Multiple		Consultant(s) to provide informational technology and database services to secure program data, improve information flows, and produce reports.
Mental Health & Counseling Support	Multiple		Consultant(s) to provide mental health and counseling services to patients (participants of care), their loved ones, and program staff experiencing trauma, anxiety, stress, and grief.
Training & Technical Assistance	Multiple		Consultant(s) to provide specialized training, coaching, and assessment that strengthen the competencies of program staff and improve program quality.
Non-Consultants/Contracted Services			
Category			*Description*
Computer/technology equipment & software			Costs related to computer/technology equipment and software that support program activities.
Emergency assistance fund			Fund to respond to emergent needs for patients (participants of care) that risk their safety, well-being, and stability.
Participant incentives			Costs related to providing patients (participants of care) incentives for adhering to discharge plan and meeting other program objectives.
Program materials & supplies			Costs related to general office supplies, staff attire, and other materials that promote participant wellness (such as in-patient care packages, games).
Program events & activities			Costs related to activities and events designed to engage hospital staff, patients and other stakeholders to promote welness and reduce stress.
Staff development			Costs related to on-going staff training and activities that promote team cohesion and stress reduction.

Telephone & telecommunications	Costs related to telephone, Mi-Fi, and other telecommunications services.
Travel	Costs related to local travel provided to patients (participants of care) for follow-up treatment and on-going services post-discharge.

Appendix B-2

Harlem Hospital Budget

Appendix B: Budget and Budget Narrative
Harlem Hospital – Crossroads Program (FY2024)

	PERSONNEL	ANNUAL SALARY	FTE	BUDGETED	JUSTIFICATION
PS	AFF- Program Director, J. Powell	100,000.00	1.00	100,000.00	The program director is responsible for overall program management and oversight. He will provide strategic direction and be responsible for capacity building and financial solvency. The Program Director has strategic and operational responsibility for all programs. The Program Director is responsible for maintaining all aspects of programs growth, operations, program management, administration, fund development, in addition to strengthening existing partnerships. The Program Director serves as a liaison to program's partners and will be responsible for developing, implementing and managing the operational aspects of the annual budget. They will maintain pre-existing relationships with supporters and cultivate relationships with new funders from the public and private sectors. Identify opportunities to leverage cross-program strengths, take advantage of new opportunities, and address organizational challenges. The Program Director will expand the financial viability of operational units through sound fiscal management. Publicly represent the program with the media and external constituency groups, including community, governmental, and private organizations. Identify, cultivate, and maintain relationships with major donors and key funders. Coordinate with other hospital programs, recruit participants, identify mentors and coordinate with local and community groups to extend the reach of the program. Oversee the development and implementation of supportive services (individual counseling, support groups etc.) for enrolled clients. Provide direct supervision to the staff.
PS	AFF- Program Coordinator, R. Young	80,000.00	1.00	80,000.00	Will play a central role in the recruitment, maintenance and retention strategies for member programs as it relates to Gun Violence and Injury Prevention. Will collaborate on events and programs that produce positive and professional development in the violence intervention community. Collaborate with Social Workers, to create/implement Behavior Intervention Plans, Peer Mentoring strategies, and Peer to Peer learning collaborative. Responsible for social and academic progress of member and develop communities of practice. The employee will assist the team with program development and administrative functions, facilitating contracts for structural socialization for clients, overseeing purchasing of supplies and equipment for program, maintain inventory of supplies and assist with budget management. Will serve as an internal and external liaison to build partnerships and strategically plan for program sustainability. Will assist with establishment

					of trauma informed practices within the hospital setting.
	SUBTOTAL - AFFILIATION(AFF)	180,000.00	2.00	180,000.00	
	AFF-FRINGE - 24.11%	43,398.00		43,398.00	
	TOTAL - AFF	223,398.00	2.00	223,398.00	
PS	HHC-Program Data Manager, Osakwe Beale	80,000.00	1.00	80,000.00	The Hospital Based Violence Intervention Program Data Manager (HB-VIPM) is responsible for working autonomously to coordinate day-to-day management of operational and evaluation activities related to the Harlem's Violence Intervention Program (VIP). Will implement and oversee all aspects of Gun Violence Program Data measurements and insights alongside Social work. Analyzing data to better understand the impact of hospital based violence intervention program for stakeholder. This position also provides administrative support, as well as coordination between research and clinical needs of VIP. The employee will also assist the team with program development, including regulatory activities, data management, and serving as an internal and external liaison to build partnerships and strategically plan for program sustainability while helping to establish trauma informed practices within the hospital setting. The Program Manager must demonstrate initiative, resourcefulness and problem solving skills in applying a detailed knowledge of the responsibilities, functions and initiatives. The employee must be able to organize and independently prioritize work, establish procedures and systems and ensuring orderly and timely work flow. Will also work with victims' bedside, offering wrap around services. Will also manage Stop the Bleed Program.
	SUBTOTAL - HHC	80,000.00	1.00	80,000.00	
	HHC: Fringe @_54.79%	43,832.00		43,832.00	
	TOTAL - HHC	123,832.00	1.00	123,832.00	

	TOTAL PERSONNEL - (AFF + HHC)	347,230.00		347,230.00	
	OTPS				
	Nutritional Supplements/Award Events			5,000.00	Nutritional Supplements for support groups - $125 per session x 40 sessions/year = $5000 TOTAL=$5000
	Program/Office supplies			4,800.00	Office supplies: paper, binders/folders, pens, pencils. Staplers, staples, tapes, paper clips, markers, calculators, post-its = $920 + Program supplies: IPads for clients' use - 6 x $500 each = $3,000; Water - 80 ctns (8 oz. bottles) @$13.90 per ctn = $1080 . Total = 5,000
	Structured Socialization			25,000.00	Clients will be offered the opportunity to engage in structured socialization activities off-site such as attending movies with clients enrolled in our program. This will be monitored & organized by program staff in terms of selection of film to view and venue - we estimate the cost of tickets including refreshments for 2 = $35.00 x 50 (estimated sessions) = $1750. Also the program will seek to continue to engage clients enrolled in the program in physical fitness activities by partnering with the YMCA; Cost: $8,296 , and other organizations in the development of training programs used to promote physical fitness (Sandbox - "Gloves Not Gun Boxing Program) for our clients - Cost = $6,250. Program will introduce a new program for clients a Computer Youth Coding class. This coding program will expose the clients to essential programming concepts through a series of activities and building games on Scratch." It is estimated that cost will be: 12 client enrollments x 6 sessions per client (72 sessions) x $30 per session = $2160; Funds will be used to provide bicycles for new enrollees - 11 clients x $594.90 each bike = $6544. Total cost for activities will be $25,000.
	Social Work Bereavement Support			15,000.00	Funding for support of gun violence victims The Center for victim Support Program at New York Health and Hospitals Harlem provides clinical interventions to all victims of violent crimes. Most victims are referred through the emergency department, inpatient units or from community agencies. Victims may require a wide range of services to ensure safe discharges from both the emergency department and inpatient units. Along with clinical interventions, victims may require concrete services. Such services may include: a). Clothing items, such as pants, shoes and shirts for both men and women, whose clothing were damaged, soiled or taken by law enforcement for evidence, or damaged either through the course of the assault or during critical care interventions.b). Underwear for both men and women, particularly for victims of rape and sexual assault.c) Car service vouchers and/or Metro cards to ensure safe transport home or to a safe location for victims unable to arrange their own transportation.

	Staff Education			1,200.00	To support staff education / training about partnership and work with neighborhood CV programs, funds will be used to pay for staff attendance (program director, coordinator and manager) to attend at least 3 conferences both locally and nationally pertaining to Injury Prevention, Gun Violence, and other traumas throughout the year. Car Seat Training: $550 each x1 = $550; Dues for Membership with HAVI, a valuable resource for our CROSSROADS Program = $650 TOTAL =$1200
	Metro Cards			1,100.00	Metro cards will be purchased to assist clients who struggle with transportation cost. = $275 per pack x 4 = $1100
	Storage			2,700.00	Cost of storage space to house bicycles for program ($225 per month x 12 mths = $2,700)
	Promotional Materials			22,872.00	Funds will be used to purchase T-shirts and Sweatshirts, hoodies, towels with program logo that will be distributed to clients enrolled in our programs. Shirts will also be used as a promotional tool for the program and will be distributed to community organization/agencies the program has linkage with and for outreach events. Funds will also be used to purchase a small tent which will be used at outreach events to promote program. Estimated cost: $20,000. Funds will also be used to create brochures, flyers, and business cards for staff ($2,872). Total = $22872
	TOTAL - OTPS			77,672.00	
	TOTAL DIRECT COSTS			424,902	
	Indirect Cost			25,098	
	GRAND TOTAL			450,000	

Appendix B-3

Woodhull Hospital Budget

The WICK Against Violence Program at NYC H+H/Woodhull
Budget

Budget Item

Personnel Services	Employee ID	Salary	FTE	Months	FY2024
Community Liaison Worker II	#100127097	$50,000	1.00	12	50,000.00
Coordinating (Data) Manager	#000041538	$98,751	0.15	12	14,813.00
Coordinating Manager	#000077184	$67,611	0.15	12	10,142.00
Grants Manager	#000052150	$112,456	0.10	12	11,246.00
Hospital Police Coordinator	#000015891	$127,268	0.10	12	12,727.00
Program Coordinator	#100098958	$154,000	0.10	12	15,400.00
Social Worker II	TBH	$78,000	1.00	12	78,000.00
Subtotal Salaries					**192,328.00**
Fringe Benefits @			59.58%		114,589.00
Subtotal PS Expense					**306,917.00**

Other Than Personal Services (OTPS)

Outreach Activities	10,000.00
Program Equipment/PC - Laptop(s)	-
Program Supplies/Educational Materials	10,000.00
Program Supplies/Office Supplies	3,083.00
Program Supplies/Printing Materials	10,000.00
Program Supplies/Promotional Materials	10,000.00
Staff Development & Training	-
Telecommunications - Mobile Phones	-
Travel	-
Total	**O.T.P.S.**
43,083.00	

Total PS + O.T.P.S.		**350,000.00**
Indirect Costs @	0.00%	-
Grand		**Total**
350,000.00		

Appendix C – PII Rider

Identifying Information Rider

1. Purpose.

Contractor agrees to comply with this Identifying Information Rider ("Rider") and the Identifying Information Law, as applicable, in the performance of this Agreement.

2. Definitions.

A. "Access" to Identifying Information means gaining the ability to read, use, copy, modify, process, or delete any information whether or not by automated means.

B. "Agency" means a City agency or office through which the City has entered into this Agreement.

C. "Authorized Users" means employees, officials, subcontractors, or agents of Contractor whose collection, use, disclosure of, or access to Identifying Information is necessary to carry out the Permitted Purpose.

D. "Chief Privacy Officer" means the City's Chief Privacy Officer.

E. "Collection" means an action to receive, retrieve, extract, or access identifying information. Collection does not include receiving information that Contractor did not ask for.

F. "Contractor" means an entity entering into this Agreement with the City.

G. "Disclosure" means releasing, transferring, disseminating, giving access to, or otherwise providing identifying information in any manner outside Contractor. Disclosure includes accidentally releasing information and access to identifying information obtained through a potential unauthorized access to Contractor's systems or records.

H. "Exigent circumstances" means cases where following this Rider would cause undue delays.

I. "Identifying Information" means any information provided by the City to Contractor or obtained by Contractor in connection with this Agreement that may be used on its own or with other information to identify or locate an individual.

J. "Identifying Information Law" means §§ 23-1201 – 1205 of the Administrative Code of the City of New York.

K. "Permitted Purpose" means a use of Identifying Information that is necessary to carry out Contractor's obligations under this Agreement.

L. "Use" of Identifying Information means any operation performed on identifying information, whether or not via automated means, such as collection, storage, transmission, consultation, retrieval, disclosure, or destruction.

3. General Requirements.

A. Contractor will use appropriate physical, technological, and procedural safeguards to protect Identifying Information.

B. Contractor will restrict collection, use, disclosure of, or access to Identifying Information to Authorized Users for a Permitted Purpose.

C. Contractor will comply with the Citywide Cybersecurity Requirements for Vendors and Contractors set forth by the New York City Office of Technology and Innovation and its Office of Cyber Command as they appear at https://nyc.gov/infosec. Contractor will ensure that Authorized Users understand and comply with the provisions of this Agreement applicable to Identifying Information.

D. Contractor and Authorized Users will not use Identifying Information for personal benefit or the benefit of another, nor publish, sell, license, distribute, or otherwise reveal Identifying Information outside the terms of this Agreement.

4. Collection.

A. Absent Exigent Circumstances (Section 7), Contractor may collect Identifying Information if the collection:

i. has been approved by the Agency Privacy Officer;

ii. is required by law or treaty;

iii. is required by the New York City Police Department in connection with a criminal investigation; or

iv. is required by a City agency in connection with an open investigation concerning the welfare of a minor or an individual who is not legally competent.

5. Disclosure.

A. Absent Exigent Circumstances (Section 7), Contractor may disclose Identifying Information if the disclosure:

i. has been approved by the Agency Privacy Officer;

ii. is required by law or treaty;

iii. is required by the New York City Police Department in connection with a criminal investigation; or

iv. is required by a City agency in connection with an open investigation concerning the welfare of a minor or an individual who is not legally competent; or

v. has been authorized in writing by the individual to whom such information pertains or, if the individual is a minor or is otherwise not legally competent, by the individual's parent, legal guardian, or other person with legal authority to consent on behalf of the individual.

6. Disclosures of Identifying Information to Third Parties.

Unless prohibited by law, Contractor will promptly notify the Agency Privacy Officer of any third-party requests for Identifying Information, cooperate with the Agency Privacy Officer to handle such requests, and comply with the Chief Privacy Officer's policies and protocols concerning requirements for a written agreement governing the disclosure of Identifying Information to a third party.

7. Exigent Circumstances.

A. Notwithstanding Section 4 (Collection) and 5 (Disclosure), if Contractor collects or discloses Identifying Information due to Exigent Circumstances, then as soon as practicable after the collection or disclosure but not to exceed 24 hours, Contractor will send to the Agency Privacy Officer in writing:

i. The name, e-mail address, phone number, and title of a Contractor point of contact with sufficient knowledge and authority who will respond promptly to and collaborate with the Agency Privacy Officer;

ii. A description of the Exigent Circumstances, including a detailed timeline, all involved parties, the types of Identifying Information disclosed or collected, and Contractor's estimate of the likelihood of the Exigent Circumstances reoccurring.

B. If the Agency Privacy Officer determines the collection or disclosure was not made under Exigent Circumstances, the collection or disclosure will be deemed in violation of this Rider and subject to the provisions of Section 8(A)-8(D).

8. Unauthorized Collection, Use, Disclosure of, or Access to Identifying Information.

A. If Contractor collects, discloses, uses, or accesses Identifying Information in violation of this Rider, Contractor will:

i. notify the Agency Privacy Officer in writing as soon as practicable but no later than 24 hours after discovery, including a description of the collection, disclosure, use, or access, the types of Identifying Information that may have been involved or compromised, the names and affiliations of the parties (if known) who gained access to Identifying Information without authorization, and a description of the steps taken, if any, to mitigate the effects of the collection, disclosure, use, or access incident;

ii. cooperate with the Agency Privacy Officer and relevant City officials, including the City's Chief Privacy Officer, Office of Cyber Command, and the City's Law Department, to investigate the occurrence and scope of the collection, disclosure, use, or access, and make any required or voluntary notices; and,

iii. take all necessary steps, as determined by the Agency Privacy Officer, to prevent or mitigate the effects of the collection, disclosure, use, or access.

B. If there is an alleged collection, use, disclosure, or access violation, the Agency may investigate the alleged violation. Contractor will cooperate with the investigation, which may include prompt:

i. provision to the City of information related to security controls and processes, such as third-party certifications, policies and procedures, self-assessments, independent evaluations and audits, view-only samples of security controls, logs, files, incident reports or evaluations;

ii. verbal interviews of individuals with knowledge of Contractor's security controls and processes or the unauthorized collection, use, disclosure, or access;

iii. an evaluation or audit by the City of Contractor's security controls and processes, and the unauthorized collection, use, disclosure, or access;

iv. an evaluation or audit by Contractor of its security controls and processes and the unauthorized collection, use, disclosure, or access, and provision of any attendant results to the City; or,

v. an independent evaluation or audit to be provided to the City of Contractor's security controls and processes, and the unauthorized collection, use, disclosure, or access.

C. If the Agency Privacy Officer or Chief Privacy Officer determines that notification to affected individuals is required pursuant to the policies and protocols promulgated by the Chief Privacy Officer under subdivision 6 of Section 23-1203, then the Agency Privacy Officer will inform Contractor whether the Agency or the Contractor will issue the notification. If the Agency Privacy Officer directs Contractor to issue the notification, the notification will be issued in writing as soon as practicable and will conform to the Agency Privacy Officer's instructions as to form, content, scope, and recipients.

D. Monies and Set-Off.

i. Contractor will pay for services deemed necessary by the Agency Privacy Officer to address Contractor's collection, disclosure, use, or access of Identifying Information in violation of this Rider, subject to limitations of liability contained elsewhere in this Agreement. These services may include: (a) credit monitoring services; (b) notifications; (c) payment of any fines or disallowances imposed by the State or federal government related to a collection, use, disclosure, or access in violation of this Rider; (d) other actions mandated by any law, administrative or judicial order, Agency Privacy Officer, or the Chief Privacy Officer.

ii. At the Agency Privacy Officer's discretion, the Agency may pay for services deemed necessary to address Contractor's collection, disclosure, use, or access of Identifying Information in violation of this Rider. If the Agency pays for any of these services, it may submit invoices to Contractor and Contractor will promptly reimburse the Agency.

iii. If Contractor refuses to pay for services deemed necessary by the Agency Privacy Officer, the City may, for the purpose of set-off in sufficient sums without waiver of any other rights and remedies:

a. withhold further payments under this Agreement to cover the costs of notifications and other actions mandated by any law, administrative or judicial order, Agency Privacy Officer, or the Chief Privacy Officer, including any related fines or disallowances imposed by the State or federal government;

b. withhold further payments to cover the costs of credit monitoring services, and any other commercially reasonable preventive measures;

c. instruct Contractor to pay directly for the services detailed in this subsection 8©(iii)(a) and 8(C)(iii)(b) using monies remaining to be earned under this Agreement.

E. Contractor is not required to make any notification that would compromise public safety, violate any law, or interfere with a law enforcement investigation or other investigative activity by the Agency.

9. Retention.

Contractor will retain Identifying Information as required by law or as otherwise necessary in furtherance of this Agreement, or as otherwise approved by the Agency Privacy Officer.

10. Reporting.

Contractor will provide the Agency with reports as requested by the Agency Privacy Officer or Chief Privacy Officer regarding Contractor's collection, retention, disclosure of, and access to Identifying Information. Each report will include information concerning Identifying Information collected, retained, disclosed, and accessed including: (a) the types of Identifying Information collected, retained, disclosed, or accessed; (b) the types of collections and disclosures classified as "routine" and any collections or disclosures approved by the Agency Privacy Officer or Chief Privacy Officer; and (c) any other related information that may be reasonably required by the Agency Privacy Officer or Chief Privacy Officer.

11. Coordination with Agency Privacy Officer.

The Agency may assign powers and duties of the Agency Privacy Officer to Contractor for purposes of this Agreement. In such event, Contractor will exercise those powers and duties in accordance with applicable law in relation to this Agreement and will comply with directions of the Agency Privacy Officer and Chief Privacy Officer concerning coordination and reporting.

12. Destruction of Identifying Information.

If the Agency instructs Contractor to destroy Identifying Information, Contractor will destroy it within 30 days after receiving the instruction in a way that it cannot be reconstructed, subject to any litigation holds. Contractor will provide written confirmation to the Agency Privacy Officer that it has destroyed the Identifying Information within 30 days after receiving the instruction. If it is impossible for Contractor to destroy the Identifying Information, Contractor will promptly explain in writing why it is impossible, and will, upon receiving the destruction request, immediately stop accessing or using the Identifying Information, and will maintain such Identifying Information in accordance with this Rider.

13. Subcontracts.

A. Contractor will include this Rider in all subcontracts to provide human services or other services designated in the policies and protocols of the Chief Privacy Officer.

B. Contractor will be responsible to the Agency for compliance with this Rider by its subcontractors that provide human services or other services designated by the Chief Privacy Officer.

14. Conflicts with Provisions Governing Records and Reports.

To the extent allowed by law, the provisions of this Rider will control if there is a conflict between any of its provisions and, as applicable, either (a) Article 5 of Appendix A (General Provisions Governing Contracts for Consultants, Professional, Technical, Human, and Client Services); (b) if the value of this Agreement is $100,000 or less and is funded by City Council Discretionary Funds, Article (E) and Rider 1, Article 1 of this Agreement; or (c) if neither (a) nor (b) apply, the other provisions concerning records retention and reports designated elsewhere in this Agreement. The provisions of this Rider do not replace or supersede any other obligations or requirements of this Agreement.