Emergency Department Syphilis/HIV/HCV Screening Program Implementation Leader

Scope of Work

SUMMARY
The California Department of Public Health (CDPH) partners with the Public Health Institute’s Bridge program to expand opt-out testing for syphilis, HIV, and hepatitis C virus (HCV) through the Emergency Department Syphilis/HIV/HCV Screening Program (EDSP). The 28 hospitals funded under EDSP are expected to establish or continue Emergency Department (ED) routine opt-out testing programs, begin treatment as appropriate, provide patient education, and link patients to follow-up care.

An EDSP Implementation Leader (IL) on the Bridge team provides ongoing training, coaching, and academic detailing to participating hospitals. Bridge EDSP ILs support sites to ensure their capacity to implement and sustain screening programs. ILs are clinicians with deep experience in evidence-based routine opt-out testing in the ED setting committed to expanding access and equity in care.

Bridge is committed to advancing social and racial justice through our work with healthcare systems. We value having a team that brings diverse perspectives to this work based on language, ethnicity, race, gender, socio-economic background, political beliefs, sexual orientation and disability. We believe our team’s lived experiences and unique ideas inspire innovative solutions. People under-represented in medicine, including people of color, LGBTQIA+ people, people with disabilities, and those with lived experience with substance use, are strongly encouraged to apply.

Please submit an online application here.

EXPECTATIONS
- The EDSP IL provides ongoing training, coaching, and academic detailing to 28 participating hospitals across California to ensure their capacity to implement or expand screening programs.
- The IL’s role includes close focus on the approximately 15 hospital ED sites participating in EDSP who are new to implementing routine opt-out screening programs.
- Total time commitment is approximately 24 hours per month. Activities will be both independently-led and designated by the EDSP Bridge Program Director or assignee.

The EDSP IL will:
- Base activities on evidence-based clinical experience with routine opt-out testing implementation, CDC recommended guidelines, California state law and health department recommendations, CDPH guidance, recent trends in syphilis/HIV/HCV, and common patient presentation to:
- **Train and coach** staff and providers at participating hospitals on the clinical aspects of ED-based routine opt-out testing.
- **Educate** these EDSP staff and providers about syphilis, HIV, and HCV screening, linkage to care, and treatment best practices.
- **Provide academic detailing and grand rounds** at participating EDs, hospital departments, and community partners.
- **Support** participating EDs in ensuring capacity for providing evidence-based treatment and prevention (e.g., HIV PrEP), as appropriate.
  - **Demonstrate** how to integrate a syndemic approach into EDSP planning and activities, based on values of human dignity, racial and social justice, and harm reduction in promotion of health equity.
  - **Troubleshoot** laboratory, electronic health record system (e.g., testing alerts and order sets), treatment, prescribing, regulatory, and pharmacy issues, as needed.
  - **Utilize** strong interpersonal skills and cultural humility to develop and maintain relationships with diverse healthcare professionals and program stakeholders.

**Recurring Meetings and Trainings**

**The following recurring meetings are required:**

- Attend EDSP webinars, including and not limited to those scheduled monthly from January through June 2024, and in July 2025 and March 2026. These webinars typically take place on the second Tuesday of the month from 9:00 AM to 10:00 AM on Zoom.
- Attend and participate in monthly ED Community of Practice peer-to-peer meetings led by CDPH partners on the third Wednesday of the month from 8:00 AM to 9:00 AM on Zoom. The EDSP IL is expected to make every effort to attend 75% of these 60-minute calls during their contract.
- Join the weekly EDSP Bridge team standing meeting on Zoom. If unable to attend, it is the responsibility of the IL to request to reschedule ahead of time (with 24-hours notice whenever possible).
- The IL may be called upon to assist with trainings for EDSP clinical champions and navigators, and to consult on and contribute to program materials, with their clinical expertise on an ad hoc basis.

**Contract time period:** January 1, 2024 - December 31, 2024 (12 months with option to renew)

**REQUIRED DELIVERABLES**

**On a quarterly basis:**

- Attend and actively participate in weekly EDSP Bridge team check-in meetings.
- Respond to technical assistance (TA) requests and clinical questions from EDSP sites, including requests facilitated by CDPH partners. Attend and co-lead scheduled site TA calls.
- Provide ~6 (virtual or in-person) kick-offs, site visits, and/or clinical presentations per quarter to participating hospitals.
- Attend any EDSP webinars that occur during the quarter.
- Attend at least 75% of the monthly ED Community of Practice peer-to-peer discussion groups that occur during the quarter.
- Provide ad hoc clinical support to the EDSP Bridge program and Program Director (presentations, consultations, materials development and review, etc.) ~6 times per year.
- Submit a report detailing the above activities. Format to be provided by Bridge.
## PAYMENT SCHEDULE

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<th>Deliverable</th>
<th>Amount</th>
<th>Anticipated Date</th>
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<td>April 1, 2024</td>
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<td>meeting (or alternative), approval of deliverables by EDSP Bridge program</td>
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