**Attachment 15: Agency Capacity Information**

**Eliminating Hepatitis C by Improving Access to Hepatitis C Care and Treatment– Central New York and Long Island Regions.**

**RFA # 20-0001**

1. **Identify and describe the staff responsible for the following activities and services.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Area of Responsibility** | **Name and Title of Person (s) Responsible** | **Indicate if position will be supported in-kind or through this funding** | **Qualifications, Credentials, Certifications** |  **Description of Duties Related to this Contract**  |
| **Program Oversight** |  | * **In-kind**
* **This funding**
 |  |  |
| **Fiscal/Administrative Oversight** |  | * **In-kind**
* **This funding**
 |  |  |
| **Outreach and recruitment** |  | * **In-kind**
* **This funding**
 |  |  |
| **Care Coordination** |  | * **In-kind**
* **This funding**
 |  |  |
| **Hepatitis C Medical Care and Treatment** |  | * **In-kind**
* **This funding**
 |  |  |
| **HCV Peer Services** |  | * **In-kind**
* **This funding**
 |  |  |
| **Medication Assisted Treatment** |  | * **In-kind**
* **This funding**
 |  |  |
| **Information Systems** **(AIRS Data Entry and IT Support Staff)** |  | * **In-kind**
* **This funding**
 |  |  |
| **Quality Improvement/Program Evaluation** |  | * **In-kind**
* **This funding**
 |  |  |

1. **On an average, how long does it take for your organization to recruit and hire for vacant positions (provide information as it pertains to program, administrative and information systems positions)?**